work-related stress
Introduction

The Health and Safety Executive (HSE) estimates that 12.8 million days were lost to work-related stress, depression or anxiety in 2018/19. Stress is not an illness in itself, but if severe stress continues for a long time it may lead to depression, anxiety or other serious mental health problems.

The COVID-19 pandemic has further increased levels of work-related stress. The most recent figures from the Chartered Institute of Personnel Development’s (CIPD) Health and Wellbeing at Work survey show that the rate of self-reported work-related stress, depression or anxiety was higher in 2020/21 than the pre-pandemic levels in 2018-19. Stress, depression or anxiety accounted for 50% of all work-related ill health cases.

Work-related stress is defined by the Health and Safety Executive (HSE) as the adverse reaction people have to excessive pressures or other types of demand placed on them at work. The HSE Publication Work-related stress, anxiety or depression statistics in Great Britain, 2020 (www.hse.gov.uk/statistics/causdis/stress.pdf) identified that figures for stress, depression or anxiety in 2019/20 was statistically significantly higher than the previous period.

For those who work in maternity units, this is a familiar feeling. The Society of Occupational Medicine (SOM) reported that midwives and nurses are at considerable risk of work-related stress, burnout and mental health problems as a result of heavy workloads, lack of support, low job satisfaction (particularly in relation to terms and conditions of employment), low satisfaction with work-life balance, and the demands of providing compassionate care.

The NHS is under more pressure than ever before, and there is a staffing crisis in maternity services. There is currently a shortage of just over 2000 midwives in England alone - a figure accepted by the Westminster Government. It is a shortage that, without urgent action, is set to get worse. The Royal College of Midwives’ (RCM’s) analysis of official NHS figures shows that the number of midwives working in England is now lower than at the time of the last general election, with June 2022 figures showing a 12-month drop of 677 midwives. The RCM had previously warned that midwives, who due to a desire not to abandon colleagues at the height of the pandemic, may leave the NHS in the coming years; these figures indicate that this prediction is becoming a reality. Over half (57%) of respondents to the RCM’s 2021 member survey said that they are thinking about leaving the NHS, and the same percentage said they would do so in the next year.

The 2021 NHS Staff Survey reported that a staggering 66.3% of midwife respondents

In this guide, we cover:

- information for RCM members about stress, including ways to identify your own triggers for stress and how you can tackle workplace stress
- information for Heads of Midwifery (HOMs) about how you can investigate whether there is a problem with stress in your unit and the management behaviours that can have positive and negative effects on health and wellbeing in the workplace
- information for RCM workplace representatives about ways to work in partnership to improve an organisation’s health, safety and wellbeing policy
have felt unwell as a result of work-related stress in the last 12 months – representing two out of three midwives. This is a huge jump from the 54.9% figure of 2020, and almost 20% more than the national average of 46.8% for NHS workers. Similarly, 68.8% of midwives reported having come to work despite not feeling well enough to perform their duties – nearly 15% more than the 55.3% figure in 2020.

In tough times, particularly during the pandemic, people might be more reluctant to raise workplace issues or reveal mental health issues.

The RCM has refreshed its Caring for You resources to help improve RCM members’ health, safety and wellbeing at work, so they are able to provide high-quality maternity care for women and their families.

According to a guide from the mental health charity Mind, How to Promote Wellbeing and Tackle the Causes of Work-Related Mental Health Problems, 60% of employees say they would feel more motivated and more likely to recommend their organisation as a place to work if their employer took action to support mental wellbeing.

The Mind guide suggests that a workplace can promote wellbeing by getting senior leaders on board, raising awareness of mental health and wellbeing in the workplace, involving staff in dialogue and decision-making, while creating a culture of openness, two-way communication, a good work-life balance, learning and development, peer support, buddy systems and mentoring, positive working relationships and social activities.

Information for you

While it’s important for you to be able to recognise your triggers for stress and develop techniques to deal with stress, your organisation has a responsibility too. Under the Health and Safety at Work Act 1974 and the Management of Health and Safety at Work Regulations 1999, all organisations must reduce the possibility or likelihood of events that may, over a period of time or as a one-off, cause the body to be damaged.

As with all health and safety legislation, if the risk cannot be removed, it must be reduced, or some protection must be placed between the user and the risk. We will discuss how organisations, managers and RCM workplace representatives can work together to improve health, safety and wellbeing policy in the next two sections in this guide.

what are the signs of stress?

According to the Chartered Institute of Personnel and Development (CIPD) signs of stress can include the following:

1. Impacted performance – inconsistent performance, uncharacteristic errors, lack of motivation, working longer hours, skipping breaks
2. Emotional signs – overreactions, crying, undue sensitivity
3. Aggressive behaviour – malicious gossip, temper outbursts, bullying
4. Withdrawal – absenteeism, limited social contact, leaving early
5. Physical signs – nervous speech, sweating, reporting/increase of headaches
6. Signs can also include higher alcohol intake, smoking, lack of interest in appearance, and accidents at home or work.

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In the wake of the pandemic, the NHS is concentrating on supporting staff health and wellbeing:

‘We know many people are mentally and physically exhausted from the demands of responding to the pandemic and they will need time, space and support to recover... We aim to embed more preventative health and wellbeing approaches, tackle inequalities and boost efforts to attract and retain more people.

‘The workplace can have a positive and negative affect on employees’ mental health. Promoting mental health in the workplace requires an approach that considers the causes of mental distress at work, not solely the symptoms. It is about good management and the development of initiatives to address the underlying issues.’

In Scotland, Talking Toolkits have been created, which are designed to help managers and others to hold initial conversations with employees as part of the organisation’s overall approach for preventing and managing work-related stress.

In Northern Ireland: Belfast Trust and other HSC Organisations participate in a regional, wellbeing at work group chaired by Public Health Agency, NI and have shared collective resources to develop a Regional wellbeing resource (protect.eu.mimecast.com/s/GLbCN0OwT0x8QkHmgicA?domain=view.pagetiger.com" BHSCT - Staff Wellbeing & Recovery Toolkit - 1 (pagetiger.com)

NHS Wales has created its own toolkit, the NHS Wales Staff Psychological Health and Wellbeing Resource. Its Corporate Health standard has mental health as one of the components of the programme:

There are other online resources available: the NHS Support for Healthcare Staff page has contacts for the free NHS Support Line, where trained professionals can give advice on coaching, bereavement care, mental health and financial help; NHS Staff Support, NHS Practitioner Health Programme and NHS Health Education England Learner Health and Wellbeing, which all have resources available including health and wellbeing. It also has contact details for professional associations and colleges, including the RCM, medical support organisations and charities, and national charities for addiction and mental health.

It’s important to ensure that staff recognise signs of stress in themselves and others. Types of stress can include:

1. Home life related stress
2. Organisational change
3. Workload change
4. Significant life events
5. Financial wellbeing/changes
6. Illness and the recent global pandemic.
What causes stress at work?

According to the TUC education workbook mental health and the workplace:

- Stress is not a mental health diagnosis and is not a recognised mental health condition. Most people with work-related stress will have anxiety, depression, or what is termed ‘generalised anxiety disorder’.
- Work-related stress is the second-biggest occupational health problem in the UK and costs the UK £3.6bn every year.
- Research has suggested that 30-40% of sickness absence is linked to work-related stress.
- The law states that employers have to try to remove or reduce stress ‘as far as is reasonably practical’. Under Section 2 of the Health and Safety at Work Act 1974, employers have a general duty of care to ensure the health, safety and welfare of all their employees and this includes employees’ mental health.

The Health and Safety Executive has developed six standards, known as the ‘management standards’, to help organisations manage stress. If not properly managed, these factors can lead to ill-health, absence and reduced productivity.

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The TUC’s Mental Health and the Workplace outlines the most typical signs and symptoms of stress as follows, using these standards:

1. Demands
   The workplace should provide employees with achievable demands in relation to the agreed hours of work, people’s skills and abilities should be matched to their job demands, jobs should be designed to be within the capabilities of employees, and their concerns about work should be addressed.

2. Control
   Employees should have control over their pace of work, be encouraged to use their skills and initiative, develop new skills, have a say when breaks are taken, and be consulted about their work patterns.

3. Support
   The organisation should adequately support employees, managers should support staff, employees should support colleagues, employees should know how to access required resources to do their job and receive regular and constructive feedback.

4. Relationships
   The organisation should promote positive behaviours to avoid conflict and ensure fairness. Employees should share information relevant to their work. The organisation should prevent or resolve unacceptable behaviour, encourage managers to deal with unacceptable behaviour, and enable and encourage employees to report unacceptable behaviour.

5. Role
   The organisation should ensure different requirements of employees are compatible, enable employees to understand their role and responsibilities, ensure requirements are clear, and ensure that systems are in place to enable employees to raise concerns about any uncertainties or conflicts in their role and responsibilities.

6. Change
   The organisation should provide employees with timely information about proposed changes, ensure employee consultation and provide opportunities for employees to influence proposals, make them aware of any probable impact on their jobs, give them training to support changes, give them information about timetables for changes, and give them access to relevant support.

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How can I deal with stress at work?

If you feel that some of the above standards are not being met in your own working life, speak to your line manager or your RCM workplace representative. Organisational change can often be difficult, and even more so when you feel you have little or no information. Similarly, if you have a high workload, with no time for water or loo breaks, that will have an impact on your stress levels. You have a right to all of these - make sure you speak up.

“Employers should make sure line managers and teams actively encourage wellbeing to decrease work-related stress and burnout. To do this, they must make sure staff understand that they are expected to take breaks, manage their work demands together and take regular time away from the workplace. Leaders should role model this behaviour.”

NHS People Plan 2020–2021

The Workplace (Health, Safety and Welfare) Regulations 1992 and the Workplace (Health, Safety and Welfare) Regulations (Northern Ireland) 1993 place a number of legal requirements on organisations in terms of welfare facilities for staff. Regulation 22 to 25 are the key regulations that apply. The health, safety and wellbeing partnership group (HSWPG) has produced a welfare facilities guidance document for healthcare staff (www.nhsemployers.org/publications/welfare-facilities-healthcare-staff).

Taking action, however small, may improve your life at work or prevent stress developing in the first place.

Speak to your RCM workplace representative

You can talk to your RCM workplace representative about how to approach your line manager to discuss your workload and physical environment. You could also ask about flexible working (www.rcm.org.uk/media/5412/flexible-working-guidance3.pdf).

Raising concerns

Everyone has a responsibility to create the environment where issues and concerns can be raised without fear. The RCM will provide guidance for members who want to raise concerns and support you to use the existing mechanisms at work to raise issues confidently rather than anonymously. We will promote good working relationships and lines of communication between managers and RCM workplace representatives so that issues are raised in a climate of honesty and transparency.

You can find out more in the RCM’s guidance Standing up for Higher Standards on how we will support our members if they have concerns at work.

Student health and wellbeing

Standing up for higher standards (www.rcm.org.uk/promoting/professional-practice/safety-in-services/standing-up-for-higher-standards/) also has specific advice for student members to raise concerns while on clinical placement. It is important to know that you can raise concerns about your own health and wellbeing, by speaking to your tutors, placement educational leads, midwifery mentors, colleagues and student union guidance support counsellors.

The NHS UK website has information and advice about the support colleges and universities can offer, including free and confidential in-house counselling services with professionally qualified counsellors and psychotherapists. Your university will usually provide information about the support offered and how to access it on its website. This free service in universities is available to both undergraduate and postgraduate students. Many universities also have a mental health adviser (www.umhan.com/) who can help you access the support you need. As well as counselling or therapy, you may also be entitled to
Work-related stress

Many student unions also offer student-led services. Although the students involved are not qualified counsellors, you might prefer to talk with another student.

Information for HOMs

Work-related stress is becoming more common, so it is essential that HOMs and NHS organisations work in partnership with RCM workplace representatives and staff to reduce the causes and risks associated with workplace stress.

It is not just an issue of preventing sickness absence or retaining staff. Presenteeism, when workers come to work even though they are not well enough, is an important issue.

The 2021 Health and Wellbeing Report from the CIPD and Simply Health found that 77% of the 668 HR professionals polled saw presenteeism in staff working from home, and 75% saw it in staff in the workplace.

Leavism, where staff work outside their contracted hours or during annual leave, was seen by 70% of those polled.

All this damages productivity and can affect outcomes for women. The research paper Midwives Overboard! Inside their hearts are breaking, their makeup may be flaking but their smile still stays on states: ‘Midwifery care aims to support optimal outcomes in childbirth. If, when caring for women, the potential consequences for midwives are ignored, we risk their capability to provide midwifery care to the high levels they aspire to. This threatens the very eminence of midwifery as a profession. ‘Ethically, midwives are entitled to a psychologically safe professional journey... when maternity services invest in the mental health and wellbeing of midwives they may reap the rewards of improved patient care, improved staff experience and safer maternity services.’

It is important that HOMs see that providing excellent care for women depends upon creating a mentally healthy workplace. Strong leadership and a culture that values staff is vital to both these goals. Employers – especially line managers – need to take the first step by sending a signal that they value staff’s mental health, and that people can feel confident that telling their employer or line manager about a problem will lead to support, not discrimination.

National drivers/plans to improve workforce challenges and alleviate stress in the workplace examples:

NHS England: NHS People Plan

Wellbeing Conversations: “From September 2020, every member of the NHS should have a health and wellbeing conversation and develop a personalised plan. These conversations may fit within an appraisal, job plan or one-to-one line management discussion, and should be reviewed at least annually. As part of this conversation, line managers will be expected to discuss the individual’s health and wellbeing, and any flexible working requirements, as well as equality, diversity and inclusion.”

Wales: Health Education and Improvement Wales, ‘A Healthier Wales’- Workforce strategy

The Ambition, 2030 – “To have a motivated, engaged and valued health and social care workforce...”

Northern Ireland: ‘Health and Social Care Workforce Strategy 2026: Delivering for Our People’

On 15 June 2022 the Health Minister released the next three-year ambitions to help address workforce challenges - newly published action plan (www.health-ni.gov.uk/publications/health-and-social-care-workforce-strategy-2026). This second action plan which will run to 2024/25 will seek to build a health and social care system that has the right numbers of appropriately trained staff, with the right skills mix, while also ensuring that conditions are in place to help health and social care become an employer, and a trainer, of choice.”
Case study

Jen experienced undermining behaviours at work leading to stress and anxiety. Though she tried to raise this with her line manager she was told that everyone was stressed because of the workload and that she shouldn’t take things personally. Despite being helped by her RCM workplace representative to raise this informally no changes were made, so the RCM supported Jen to lodge her concerns using the Dignity at Work policy. As part of this process mediation sessions helped to resolve some of the issues.

The investigating officer made a series of recommendation to address the wider negative cultures in the maternity unit, these included:

- A workforce review which led to the recruitment of two midwives and a number of maternity support workers.
- A monthly Band 6 midwives forum to exchange ideas and share experiences.
- Allocated time for newly qualified midwives to speak to the matron and the Head of Midwifery (HOM).
- Three daily huddles for all staff to exchange information, at the start, middle and end of shifts.
- Investment in training including multi-disciplinary training, civility at work and training for line managers and matrons in leadership and difficult conversations.
- Drop in and listening sessions with the HOM, the organisation’s designated Health & Wellbeing Ambassador and HR advisor for maternity.
- Away days to support team building.
- Professional Midwifery Advisor (PMA) training and recruitment events leading to an increase in the number of PMAs in the organisation.
- Development of Midwifery Ambassador roles.

RCM Organisers also supported the branch to hold workshops on invisible behaviours, civility at work and changing cultures. The branch promoted the RCM Caring for You work and resources and RCM workplace representatives met regularly with the HOM to discuss progress towards the Caring for You charter commitments. As part of the Joint Consultative Committee (JCC) the RCM workplace representative (with the full-time officer) attended workshops to improve awareness and use of policies when staff across the organisation are affected by stress in the workplace.
Assessing the rates of stress in your unit

It could be that your whole unit is feeling stressed and under pressure. The signs of stress in a group are:

- poor performance
- more workplace disputes within the unit
- more grievances and complaints
- more sickness absence
- higher staff turnover.

The HSE has developed a stress indicator that organisations can use to measure how well they are meeting the stress standards (the stress standards were outlined in the section Information for you). You should collect information about your unit to assess whether there is a problem with workplace stress in your unit. This is something that you should work on with the RCM workplace representatives. Here are some sources of information that you could collect to investigate whether your unit has a problem with workplace stress:

- Critical incidents or errors – this could give you information about workload and demand.
- Workforce information – such as vacancy rates, statistics on staff turnover, and disciplinary action and grievances.
- Incidences of violence at work – information about verbal or physical abuse from service users.
- NHS Staff Survey data – there is a lot of information available on the staff survey, particularly about stress, violence, presenteeism, management support and appraisal.
- You may find you have an issue with stress in your workplace. You should work with the RCM workplace representatives to make sure your organisation has an effective stress management policy.

Management behaviours

As well as an organisational policy on effective stress management, you should also consider the management style and behaviour of staff who are responsible for managing others. Managers can have both a positive and negative effect on health and wellbeing.

We have many resources for developing the skills of leaders, including their competence and confidence. There is a link to the resources at the end of the document.

Information for RCM workplace representatives

Working in partnership

Working in partnership, both staff side representatives and managers, increases trust and reassures staff that the organisation takes the issue of stress management in the workplace seriously and is committed to having a positive approach to it. RCM health and safety representatives should work in partnership with Heads of Midwifery and your employer to support improvements in staff health, safety and wellbeing. You are in a unique position to be able to offer valuable insight into working in maternity and the types of improvements that are needed for midwives and maternity support workers.

A key requirement of managing stress is to consult with safety representatives and use resources which already exist, both within and outside of NHS organisations. Trade union safety representatives, who are also recognised for collective bargaining purposes, can work in partnership with employers to support improvements in staff health, safety, and wellbeing. Partnership in health and safety (H&S) can and should go further than this. For example, H&S policy should, wherever possible, be agreed with safety representatives as part of formal arrangements at an H&S committee. Safety representatives offer access to valuable insight and research from their own trade unions and through contact and networking with colleagues from other trusts and staff side organisations. They can support organisations in delivering best practice in the provision of stress management in the workplace and carry out workplace assessments and audits to identify potential risks of stress.

Occupational health

The occupational health team has knowledge and experience of supporting members of staff with health and wellbeing issues caused by stress in the workplace. They can support employers with workplace assessments to ensure underlying health conditions are not exacerbated and can ensure reasonable adjustments are put in place which support the employee to sustain an effective level of attendance at work. Occupational health can also assist in leading initiatives which can support employees' health and wellbeing. By organising events such as stress management workshops, massage and relaxation therapy sessions or ‘money matters’ advice in liaison with local Citizens Advice Bureaux, the team can offer employees advice, guidance, and therapy to help support manage the demands of their working and personal lives.
Occupational health may also support with organising and supporting with self-help and support groups for employees who have experienced workplace stress and how they have managed to cope with that situation. Knowing other employees have experienced but successfully managed to deal with issues in the workplace which caused stress, supports other employees by recognising they are not alone and that it can be overcome.

RCM asks that all NHS employers provides facility for staff to self-refer to the occupational health team.

Negotiating a stress management policy

Employers have a legal duty to carry out a risk assessment of stress in the workplace, but it goes beyond that. Investment in staff is an investment in care. Looking after staff health and wellbeing improves clinical outcomes, performance and productivity.

RCM health and safety representatives can support organisations in delivering best practice when managing stress and carry out workplace assessments and audits to identify possible risks of stress. You should work with workplace representatives from other trade unions and managers in designing and introducing an effective stress management policy.

The policy should contain the following details.

- A statement of commitment to tackle the causes of stress and the importance of reducing stress.
- The context and definitions of stress – reflecting the most up-to-date information
- How to identify stress – see the Health and Safety Executive (HSE) definition of stress as ‘the adverse reaction a person has to excessive pressure or other types of demand placed upon them’. Refer to the HSE stress indicator (as described in the section ‘Information for HOMs’).
- Identifying priorities to tackle the greatest risk areas.
- How staff will be involved in the process.
- The resources that will be available.
- The responsibilities of the different people involved.
- How the policy interacts with other policies (for example, bullying and harassment policies or flexible working policies).

The RCM’s guidance, Standing up for high standards, provides information about how workplace representatives can support members raising concerns at work.

Representing a member

As an RCM workplace representative, a member may approach you to help with a stressful work situation. They may need you to help them approach their manager about getting some adjustments or working flexibly. If you represent a member who is suffering with stress, the priority is to develop positive steps to deal with the main issues they’re struggling with. Clear policies on workplace adjustments are crucial to support staff to cope and recover and reduce the length of sickness absence related to their mental health.

These steps may be quite small, simple adjustments to someone’s job role or extra support from their manager. Often the change that is needed is one of attitude, expectations or communication, rather than a major change or significant cost. However, what is effective varies from person to person, so it is vital you have a meaningful conversation with the person about their needs and really listen to them, so you know what to ask for from your organisation.

While voluntary and agreed adjustments are supportive, it’s important that people are not treated differently or asked to do things that others are not required to (for example, keeping extra-detailed timesheets). Being made to account for all of their time can damage people’s self-esteem and can be counterproductive. It may also be discriminatory.

In some cases, people may be unable to identify appropriate adjustments themselves, so they may need to try different options. You may want to encourage them to read the information for you section in this guide so they can think about their stress triggers and ways to manage their stress. The best approach here is to decide on positive action and regularly monitor and review this to check it’s working, tweaking the approach if necessary.

If you have negotiated a stress management policy with your organisation, here is where your expertise will be invaluable.
Case study

Sue had worked for 15 years in the community but was transferred to an acute setting following a service reconfiguration. With various caring responsibilities Sue had requested she stay working in the community as the hours fitted her needs as a carer and she was confident in her practice there. This request was rejected, and she was moved to work on the post-natal ward where she felt sick and anxious during each shift.

Sue’s colleagues complained that she was difficult to talk to and bad tempered. When this was raised with her by her line manager, she shared some of the difficulties she was having at home. Though sympathetic her manager said her behaviour was unacceptable and impacting negatively on others. This was followed up with a letter stating that further unacceptable behaviour could result in disciplinary action. Feeling overwhelmed and more anxious, Sue was signed off work by her GP and prescribed medication. When Sue was invited to a formal meeting about her sickness absence, she contacted her RCM workplace representative to support her. Her RCM workplace representative advised her to refer herself to occupational health to discuss her situation and medication. The RCM rep also checked that all the relevant policies and process were followed fairly and liaised with the HR. With Sue’s permission the RCM workplace representative wrote to HR and the manager to raise concerns about the impact the sickness absence management process was having on Sue’s mental health.

Accompanied at the sickness review by her RCM workplace representative, Sue said she was keen to return to work on changed hours. Using the occupational health report, a letter from her GP and listening to Sue talk about her concerns at work and at home, an action plan was developed and implemented.

She was referred to a counselling service, a stress risk assessment was done, and flexible working agreed before Sue returned to work. She came back to work on a phased return, and she had weekly meetings with her Professional Midwifery Advisor and a workplace buddy. Later the wider issues that arose from Sue’s case were addressed by ensuring stress risk assessments were carried out as part of the normal risk assessment process. A training needs analysis was carried out with RCM learning representatives. The results of equality assessments when policies were introduced or changed were shared with RCM workplace representatives and monitored and reviewed in partnership and the format of manager’s letters to staff were reviewed and updated.
There are a lot of further resources and information available about stress at work. Below is a list of some of the most useful.

**Mindful Employer**
Mindful Employer (www.mindfulemployer.dpt.nhs.uk/) is a charter mark which organisations can apply for to demonstrate that they are working towards standards and pledges which recognise the willingness to be better employers to employees with mental health problems.

The mark ensures that organisations have positive statements in employment literature, that managers are trained in employment practice around recruiting and employing people with mental health issues and that there is support for staff who experience stress, anxiety depression or other mental health conditions.

**RCM**
- Caring for you hub - home - RCM (www.rcm.org.uk/caring-for-you-hub-home/)
- Standing up for Higher Standards (https://www.rcm.org.uk/promoting/professional-practice/safety-in-services/standing-up-for-higher-standards/)
- Safety in services (www.rcm.org.uk/promoting/professional-practice/safety-in-services/)

**Mind**
MIND (www.mind.org.uk/) is the mental health charity which supports individuals with mental health issues with support and guidance. It also provides organisations with advice and guidance on how to support employees in the workplace.

**NHS**
The NHS website provides 10 ‘Stressbuster’ tips (www.nhs.uk/mental-health/self-help/guides-tools-and-activities/tips-to-reduce-stress/) about how to deal with stress from Professor Cary Cooper, an occupational health expert at the University of Lancaster.

**The Samaritans**
The Samaritans (www.samaritans.org/about-samaritans/our-organisation/what-we-do/) provides a 24/7 service via telephone, text or email.

**Student Minds**
Student Minds (www.studentminds.org.uk/) is the UK’s student mental health charity.

Individual universities also usually have student night line services.

This guide has been prepared for members of the Royal College of Midwives (RCM). For information on becoming a member, please visit www.rcm.org.uk.

This publication is part of the RCM’s equality publications series. If you have any questions about this publication or any other publications in the equality series, please contact equalities@rcm.org.uk.
Online self-help

There are also online self-help services you can explore, such as:
- Students Against Depression (www.studentsagainstdepression.org/)

England

- Mental health – NHS (www.nhs.uk)
- Stress at work - HSE (www.hse.gov.uk/stress/index.htm)

Scotland

- NHS Scotland (www.staffgovernance.scot.nhs.uk/improving-employee-experience)

Wales


Northern Ireland

- Advice for employers on protecting home workers (www.hseni.gov.uk/articles/advice-employers-protecting-home-workers-advice-hse-qb#toc-3)

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