RESOURCE PACK FOR CSP REPS



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**INTRODUCTION** ***to the Survey Resource Pack***

The survey and templates provided in this pack have been developed to be an easy to use workplace resource for our CSP safety reps and stewards. It is not intended to be used for any national data collection.

The survey is designed to give an indicative sample of potential hazards to members’ health, safety and wellbeing in the workplace. These survey findings also provide sufficient evidence to an employer that they should complete a risk assessment in proper consultation with their staff.

**GENERAL INSTRUCTIONS *for an indicative workplace survey***

Conducting a survey will help members identify the extent of stress and overwork within their workplace and to provide evidence to your employer that there could be a problem**.**

The survey and response form are templates that you can adapt depending on your needs. For example, you might wish to add a department, work area or grade if members work in a large hospital and you want to find out if stress levels differ across services or grades.

***How to do it:***

1. **Fill in the name** of the part of the workplace being surveyed at the top of the first page**,** and your name and a return date at the bottom. Record the number of forms you have distributed on your **results form** (see section 4 for the template).
2. **Write** **a cover letter** (see section 2) explaining the purpose, stressing that it is confidential and no personal details will be released without consent
3. **Distribute to all CSP members,** including agency and temporary staff, and provide details of how to return it – you may wish to arrange a post-box to preserve anonymity.
4. Send out a **reminder notice a couple of days before the deadline** that you want members to complete your survey and the date that the survey should be returned to you.
5. When answers are returned, **check the percentage**. A return rate of over 50% is good, but a lower rate can still be useful for identifying pressures. Complete the **results form** provided in your resource pack (see section 4).
6. You may wish to make a **workplace stress map**, sketching your workplace and writing in each area the percentage of workers answering ‘yes’ to question 1 Put the **stress map** on notice boards
7. **Pinpoint the pressures**: identify the main stressors by counting the number of yes’s for each stressor. If more than a quarter have marked one, there is a major problem. If members have identified pressures in writing, make a note of these on your results form.
8. Do **notify members** in writing (see template titled ‘*Update to Members*, section 5) on the survey’s main findings. You should also consider **holding a meeting with members** to discuss and get direction on how to resolve identified problems.
9. **Report your results** to your fellow CSP reps, and also share your findings at your next regional training day or discuss on your local iCSP network.
10. You may like to set up a **suggestion box** for people to suggest how stress could be reduced or which stressors to target – this can help identify issues for taking to management or campaigning
11. **Notify your manager/employer** about the results, preferably in writing (See section 6 for our template letter). You should include what the number of returns were and the percentage of staff confirming they are stressed. You could also advise what the main causes of stress are. If you or the members, consider that the number affected by stress is significant then do request a risk assessment to be undertaken. Let your manager know you wish to be involved and consulted in this process.
12. **Repeat the survey** again with the same group of members after a suitable amount of time has passed - for example in 6 or 12 months to determine what if anything has changed. You will need your original results form to compare your findings.

**COVER *Letter***

Insert the required details in the brackets of this template and then send out with the survey to each member

Dear CSP member,

As your **[CSP health and safety representative/steward]** I will be conducting a survey of CSP members at **[name of workplace/site/Trust]** on **[insert date/s here]** to identify whether stress and overwork are a problem we need to address. The survey will be circulated to you **[insert here the details on how you are going to circulate your survey i.e. will you hand it out at a meeting or send it out via email?]**

CSP members nationwide are reporting an increase in pressure to undertake excessive workloads, and to regularly work beyond their hours.

By taking a few minutes to fill out this simple survey, you will help identify whether workplace stress and workload pressure is an issue here.

The CSP knows that increased workloads left unchecked can be harmful for us and patients. The important first stage for us to get back control of workloads is to pinpoint the central pressure you are experiencing.

The survey is completely confidential. All information is anonymous but can be used to assist us in developing a plan with our managers to resolve any problems identified.

Please do not hesitate to contact me for further information.

**[your Name]**

# CSP Safety Rep/Steward

**[your Contact details]**

**STRESS SURVEY *for CSP Members***

**YOUR WORKPLACE/SERVICE:**

|  |
| --- |
|  |

### Mark ‘x’ in the box next to either yes or no for your answer to the following questions

**Q1.** Do you feel you are stressed by your work?

|  |  |
| --- | --- |
| Yes |  |
| No |  |

(If you select ‘No’ do not complete the rest of this questionnaire but please do return it as instructed at the end of this form)

**Q2.** Which of the following causes do you feel contribute to your stress?

1. **Learning opportunities?** *e.g. insufficient time or resources for CPD and courses*

|  |  |
| --- | --- |
| Yes |  |
| No |  |

**B. Lack of control?**  *e.g. unrealistic deadlines, limited or denial of choice to determine the extent of your clinical function/scope, too much/little supervision*

|  |  |
| --- | --- |
| Yes |  |
| No |  |

**C. Relationships at work?** *e.g. bullying, harassment, lack of communication*

|  |  |
| --- | --- |
| Yes |  |
| No |  |

**D. Change?** *e.g. uncertainty about your future, lack of consultation over changes*

|  |  |
| --- | --- |
| Yes |  |
| No |  |

**E. Working environment?** *e.g. temperature in the work place, lone working, overcrowding or cramped work areas, poor eating and rest facilities, badly designed, unsuitable or uncomfortable equipment – such as computer workstations*

|  |  |
| --- | --- |
| Yes |  |
| No |  |

**F. Demands of your job?** *e.g. too much work, insufficient time, long working hours, not enough rest breaks*

|  |  |
| --- | --- |
| Yes |  |
| No |  |

**G**. Is there other significant causes of stress?

|  |
| --- |
|  |

**.**

## OVERWORK QUESTIONS

Definition of overwork is too many duties and responsibilities for one person, with too few hours in the day to complete all that is required. It also can mean fewer staff doing the same amount of work previously done by more staff.

**Q1** What is causing you to overwork?

**Please mark ‘x’ in the column to any of the statements that you think applies to you**

|  |  |  |
| --- | --- | --- |
| **a)** |  | Faster rate of work, for e.g. expected to treat more patients during a shift than previously required |
| **b)** |  | Insufficient or no administrative time provided in work time to complete your patient notes |
| **c)** |  | You regularly work beyond your contracted hours to complete required clinical tasks |
| **d)** |  | You regularly work beyond your contracted hours to complete required non-clinical related tasks |
| **e)** |  | Not enough therapy staff to cover the clinical work-load of the service |
| **f)** |  | Not enough specialised or senior (i.e. band 6 and above) physiotherapists available |
| **g)** |  | Higher demands/expectation from employer/public/colleagues/other services etc. |
| **h)** |  | Inadequate training provided for new duties/new technology (software and hardware) |
| **i)** |  | Are there any other issues that causes you to overwork (please specify) |

# For the rest of the questions below please mark ‘x’ in one box only

**Q2** When staff are away from work because of long term leave such as for maternity, unfilled vacancies, sickness are replacement staff provided?

|  |  |
| --- | --- |
| Yes always |  |
| Sometimes |  |
| Rarely |  |
| No, never |  |
| Don’t know |  |

**Q3** Are you able to take time off for your rest break and lunch/dinner breaks?

|  |  |
| --- | --- |
| Yes always |  |
| Sometimes |  |
| Rarely |  |
| No, never |  |

**Q4** Do you ever stay late or come in early to complete work (i.e. work unpaid outside your regular hours of work)?

|  |  |
| --- | --- |
| Yes |  |
| No skip Q5, next Q6 |  |
| Sometimes |  |

**Q5** On average, approximately how long each day do you spend doing unpaid work to keep up with your workload?

|  |  |
| --- | --- |
| Less than 10 minutes |  |
| 10-20 minutes |  |
| 20-30 minutes |  |
| 30-45minutes |  |
| 45-60 minutes |  |
| More than 60 minutes |  |

**Q6** Are you provided with sufficient equipment/resources/supplies to do your job?

|  |  |
| --- | --- |
| Yes |  |
| No |  |
| Sometimes |  |

**Q7** Do you feel that the stress you are currently experiencing is unreasonable? YES / NO

|  |  |
| --- | --- |
| Yes |  |
| No |  |

PLEASE RETURN THIS COMPLETED SURVEY

BY: ../……/

|  |  |
| --- | --- |
| TO: | *Insert contact details here* |
|  |  |

# SURVEY RESULTS FORM for CSP Reps

This form is to assist you in recording and summarising your results

|  |  |  |
| --- | --- | --- |
| For ALL workplaces | the total number of surveys **sent** out is: |  |
| the total number of surveys **returned** is: |  |

|  |  |  |
| --- | --- | --- |
| Workplace 1: | Number of surveys **sent** out is: |  |
| Number of surveys **returned** is: |  |

|  |  |  |
| --- | --- | --- |
| Workplace 2: | Number of surveys **sent** out is: |  |
| Number of surveys **returned** is: |  |

|  |  |  |
| --- | --- | --- |
| Workplace 3: | Number of surveys **sent** out is: |  |
| Number of surveys **returned** is: |  |

|  |  |  |
| --- | --- | --- |
| Workplace 4: | Number of surveys **sent** out is: |  |
| Number of surveys **returned** is: |  |

1. Percentage of the total result of those who responded is:

(For example 150 surveys sent out and 95 surveys returned – result is 63% (95/150 x 100 = 63%)

1. Out of the total of all surveys returned how many selected yes to the Q1 that they are stressed? Total is:[**insert result here**]

And that the stress is unreasonable:[**include the number selecting Yes to Q7 result here**]

1. How many members selected each of the causes for Q2? **Record the total from all the workplaces**

|  |  |  |
| --- | --- | --- |
|  |  | ***TOTAL*** |
| a | Learning opportunities |  |
| b | Control |  |
| c | Relationships |  |
| d | Change |  |
| e | Working Environment |  |
| f | Demands |  |
| g | Other significant cause: | |

***Top 3 causes of stress***

Members selected the following top three causes of stress in order of priority ***(from Q3 A to G)*** as their main causes of stress:

|  |  |
| --- | --- |
| 1 |  |
| 2 |  |
| 3. |  |

**OVERWORK**

|  |  |  |
| --- | --- | --- |
| 1. What is causing overwork? | | Total number is: |
| a | Faster rate of work – |  |
| b | Insufficient admin time |  |
| c | Work beyond contracted hours on clinical tasks |  |
| d | Work beyond contracted hours on non-clinical tasks |  |
| e | Not enough staff to cover clinical workload- |  |
| f | Not enough specialised/senior physios available |  |
| g | Higher demands/expectations |  |
| h | Inadequate training |  |
|  | | |
| i | Other causes identified: | |

***Top 3 factors causing overwork:***

Factor 1 (highest number of ticks) is:

Factor 2 (second highest number of ticks) is:

Factor 3 (third highest number of ticks) is:

Independently (from question i) identified causes of overwork:

2. When staff are away from work – replacement staff are provided

Yes – total number is:

Sometimes - Total number is:

Rarely -Total number is:

No, never - Total number is:

Don’t know – Total number is**:**

3. Are staff able to take time off for their rest break and lunch/dinner break

Yes – Total number is:

Sometimes - Total number is:

Rarely -Total number is:

No, never - Total number is:

1. Staff stay late or come in early to complete their work (i.e. this is unpaid work outside regular hours of work)

Yes – Total number is:

No, never - Total number is:

Sometimes - Total number is:

1. The total number of members’ time spend doing unpaid work is

Less than 10 minutes Total number is:

10-20 minutes Total number is:

20-30 minutes Total number is

30-45 minutes Total number is

45-60 minutes Total number is:

More than 60 minutes Total number is:

1. Staff are provided with sufficient equipment/resources/supplies to do their work

Yes Total number is:

No Total number is:

Sometimes Total number is:

1. Do you feel that the stress you are currently experiencing is unreasonable?

Yes:

No:

**UPDATE *to Members***

Template Update to members

To report back on the outcome of your survey

To: CSP Members

FROM: [***insert your name/title***]

Re: CSP Stress Survey

Dear CSP member

Thank you for participating in our recent Stress Survey. Out of [***insert the number of surveys***] I gave out I received back [***insert number of surveys returned***]. Attached, for your information is my completed results form.

The returned forms showed that [***insert number***] of us are feeling stressed.

The main causes of stress [***insert below the relevant cause, e.g. change, or lack of control, or relationships from page 1 of the survey***] are, in order of their priority (with 1 being the most significant):

Your responses to questions about over-work indicated the top three factors that causes this were in order of their priority with 1 being the most significant:

I will: [***delete the actions below that is not relevant***]

* Shortly arrange a CSP meeting for us to discuss these results, and to determine what course of action we want to take to improve the situation.
* Notify [***insert name/title of the manager/lead concerned***] of these results and ask [***him/her***] to undertake a risk assessment regarding our concerns with [***insert the causes of stress***] and to actively consult with us throughout this process.
* Feedback our experiences to the trust’s Health and Safety Committee

Attached is a CSP stress advice sheet\* on [***insert the relevant cause of stress***]for your information. Please don’t hesitate to contact me if you have any further comments or queries.

Yours in unity

**CSP Safety Rep/Steward *–*** [***delete the role you don’t do***]

\* For CSP stress advice sheets visit www.csp.org.uk/pressure

**SAMPLE *Letter to Employer***

[Insert date] 2016

[Insert name of manager]

[Insert job title of the manager here]

[Insert the directorate/workplace details here]

[Insert the postal address here]

Dear [name of the relevant manager]

RESULTS FROM CSP MEMBER STRESS SURVEY IN [name of the service/workplace]

I am the CSP Rep for [Insert name of the workplace/services you cover here]. As part of the CSP’s national campaign on workplace stress titled *Pinpoint the Pressure,* I recently undertook a survey of members. Attached is a blank copy of the CSP survey for your information.

I surveyed [insert the number of members surveyed by you here] members and received [insertthe number of member responses you got back here] responses. This is a response rate of [insert the% here] %. With regard to question 1 – *Do you feel stressed by your work?* [Insert the number of responses that said yes to question 1 here] members responded in the affirmative. The main cause of stress is [insert here the top cause of stress, for example - *work demands*]

This response indicates that there may be a problem, requiring further investigation. I therefore request that a suitable and sufficient risk assessment be undertaken as soon as possible. For your information under the Safety Representatives and Safety Committee Regulations1977 and the Management of health and safety at work regulations 1999, union reps and staff should be consulted within this process.

I would like to discuss this matter further with you and will contact your office within the next two days to arrange a meeting.

Yours sincerely

[Insert you name here]

CSP [insert your CSP job title here i.e. safety rep or steward]

[Insert your service/workplace here]

**SURVEY MONKEY *Guide***

# A basic guide to using Survey Monkey

To create an online version of the stress survey for your members we suggest you use Survey Monkey. Their website is [www.surveymonkey.com](http://www.surveymonkey.com)

When you visit this site click on ‘Sign up Free’ then choose a username and password and enter your email address.

(*Note our template of 10 questions is the maximum allowed for the free use of Survey Monkey).*

Click on **+Create Survey** in the upper right corner of your account and choose **Build a New Survey from Scratch**.

Once you create your survey, start by adding questions (which we provide the text – see below).

Always [preview and test your survey](http://help.surveymonkey.com/articles/en_US/kb/Can-I-test-my-survey-before-it-goes-live) before sending it to respondents so you can catch any mistakes.

Below is a simplified version of our Pinpoint the Pressure survey (Index 3 in the pack) which can be used to quickly create your survey online. The comments in the boxes below gives additional tips to assist you.

Survey monkey gives you options under its ‘Builder menu. For this survey please select **‘multi-choice’.**

1. Do you feel you are stressed by your work?

* Yes
* No

1. Which of the following causes do you feel contribute to your stress?

* Insufficient learning opportunities
* Lack of control
* Relationships at work
* Change
* Work environment
* Demands of your job

**Q2** above allows the participant to select more than one answer. Survey monkey gives you an option to tick which states *“****allow more than one answer to this question***” Please tick this option.

1. Is there any particular aspect of your work that create stress for you or other colleagues?

**Q3** allows for the participant to add their own comments. To enable this function - you need to select the comment box from the drop down menu provided at the top of the question it will be set as **‘multiple choice,** so change it to **comment box** instead.

**Q4** see below also allows for more than one response – so remember to tick the **“allow more than one answer to this question”**

1. What is causing you to overwork?

* Faster rate of work
* Insufficient or no administrative time
* to complete required clinical tasks
* to complete required non-clinical related tasks
* Not enough therapy staff cover
* Not enough specialised or senior physiotherapists available
* Higher demands/expectation from others
* Inadequate training

Please note you don’t have to include this text *‘Other (please specify)’* as Survey Monkey provides you with this option - you just tick the box titled **‘Other’** and the text with a comment box is automatically included.

* Other (please specify)

**Q5** to **Q10** - only one answer is required for these questions below so the *‘***allow for more than one answer’** option should remain blank.

1. When staff are away from work because of long term leave such as for maternity, unfilled vacancies, sickness are replacement staff provided**?**

* Yes always
* Sometimes
* Rarely
* No, never
* Don’t know

1. Are you able to take time off for your rest break and lunch/dinner breaks?

* Yes always
* Sometimes
* Rarely
* No, never

1. Do you ever stay late or come in early to complete work (i.e. work unpaid outside your regular hours of work)?

* Yes
* No (if so please skip the next question)
* Sometimes

1. On average, approximately how long each day do you spend doing unpaid work to keep up with your workload?

* Less than 10 minutes
* 10-20 minutes
* 20-30 minutes
* 30-45minutes
* 45-60 minutes
* More than 60 minutes

1. Are you provided with sufficient equipment/resources/supplies to do your job?

* Yes
* No
* Sometimes

1. Do you feel that the stress you are currently experiencing is unreasonable?

* Yes
* No

Don’t forget to preview your Survey Monkey as it allows you to see whether the options to give multi responses or not, or to include own comments has been correctly set up.

Survey Monkey does allow you to anonymize your responses and we would encourage you to select this option and notify your members that you have done this. Once you have completed your survey design click on ‘**Collect Responses’** and then under ‘**How would you like to collect responses to your survey?**’ select the ‘**web link’** option. This will provide you with a web link address which you can then copy and paste into your email to your members. Refer to Index 2 of the resource pack which is our cover letter to members for suggested wording for this email.

Finally, at any time you are exiting this site, don’t forget to save your work. To sign out there is a drop down menu provided under your user name located in the top right corner of your screen.