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University Health Board

Employee Stress & Emotional Well-being Policy

This document can be made available in alternative formats or other languages, as requested, where it is reasonably practicable to do so.

This policy has been screened for relevance to equality. No potential negative impact has been identified so a full equality impact assessment is not required.

Policy Owner: Director of Workforce and Organisational Development

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1. Introduction

ABMU Health Board has a legal obligation for the general health, safety and emotional well-being of its employees and is therefore committed to promoting a healthy and supportive working environment because it believes its staff are its most important asset and that their well-being is essential to effective work performance and the provision of high quality services.

This policy deals with work-related stress and is intended to give guidance to managers about the actions they need to take to diminish staff exposure to excessive workplace stress and how to support staff who may be experiencing difficulties. This policy will also be of use to individual staff members by informing them of the supports that are available within ABMU.

The Stress Management Standards approach was developed by the Health & Safety Executive (HSE) to reduce the levels of work-related stress. The Management Standards represent a set of conditions that, if present, reflect a high level of health well-being and organisational performance. The Standards provide guidance on good practice through risk assessment, measurement of the current situation using surveys and other techniques, and promote active discussions with employees to help decide upon practical improvements. The Management Standards approach to work-related stress is encapsulated within this policy.

2. Policy Statement

It is the policy of ABMU to promote the importance of employee well-being for a healthy working environment. The Health Board's aim is to minimise sickness absence and improve productivity through the process of risk management, and by the identification of stressors for staff and the introduction of control measures to reduce these stressors.

The promotion of an effective employee well-being culture will be communicated to staff via the intranet and the Well-being notice boards, through awareness raising activities such as National Stress Awareness Day and the preventative Lighten Up programme, as well as educative activities such as Staff Induction and Manager Development programmes. The Health Board's Employee Stress & Emotional Well-being Policy will be continually monitored and updated, particularly when changes in the scale and nature of our operations occur.

2.1 Scope of Policy

This policy applies to all staff employed within the ABMU Health Board.

2.2. Policy Aims

The aims of this policy are:

- to raise awareness of stress and the overlap with common mental health problems
- to promote emotional well-being
- to take steps to reasonably control stress associated with work
- to assist managers to support staff
- to support individuals suffering from stress
- to communicate that all staff have a role in ensuring that work does not adversely affect well-being.

3. Workplace Stress

With regard to workplace stress this means:

- ABMU Health Board will ensure that the potential for work related stress is assessed and that suitable and practical control measures are introduced.

- The Health Board will take seriously any concerns from any employee regarding work related stress and investigate accordingly.
- Employees who suffer from work related stress will be treated sympathetically and confidentially.
- The Health Board will acknowledge that any employee could suffer work related stress and as such will provide the resources necessary, where reasonably practicable, to manage workplace stress.

3.1. Definition of Stress

Stress is the adverse reaction people have to excessive pressure or other types of demand placed on them. It is important to distinguish between pressure which can be a positive state if managed correctly and stress which if excessive and prolonged can be detrimental to health.

What triggers stress and the capacity to deal with stress varies from person to person and even within the same person at a different time. Stress is modulated by a variety of factors including support systems at home and work, personality and coping mechanisms. Stress at work is a reaction to events or experiences at work. It can occur when people perceive they cannot cope with what is being asked of them at work, or alternatively when too few demands are made of them. People can feel stressed when they are bored, under-valued or under-stimulated. No one is immune from work related stress.

Stress is not an illness but, if experienced for a prolonged period can result in psychological illness such as anxiety, depression or physical symptoms such as headaches, and if particularly high, is thought to be able to contribute to physical illnesses such as high blood pressure or heart disease and susceptibility to frequent minor illness. Signs of stress may include; emotional symptoms like mood swings and loss of confidence, mental symptoms like poor concentration, changes from normal behaviour like nervousness and changes in group behaviour like increased sickness absence. **For further indicators of possible stress in an individual or within a group, please refer to Appendix 1.**

At an organisational level stress can result in deterioration of morale, performance and increased staff turnover. Sickness absence due to stress can cause a domino effect where increased workload due to sickness absence of a colleague can in turn lead to increased workload pressures and stress in other members of the team.

3.2. Common Mental Health Problems

Work related stress and mental health often go together. The symptoms of stress and common mental health problems are similar, for example, loss of appetite, fatigue and tearfulness can be symptoms of both. Work related stress may trigger an existing mental health problem that the person may otherwise have successfully managed without letting it affect their work. For people with existing mental health issues, work related stress may worsen their problem. If work related stress reaches a point where it has triggered an existing mental health problem, it becomes hard to separate one from the other.

Whilst the Health Board has no control over external or personal factors, it is committed wherever possible to manage risks which are within its control. The Health Board recognises that there can be an overlap between external and work related stressors which can affect a staff member's ability to function in work. In such cases, the Health Board remains committed to trying to manage the work related issues and to being as supportive of the employee as is possible whilst they access support from one of the organisational well-being interventions or other appropriate external agency they may have been directed onto. Additionally, wherever possible, staff who live within the ABMU geographical area and who present with recognisable and significant mental health issues will be moved through the treatment pathway as quickly as possible in order to access appropriate support from secondary services. The Health Board also recognises the potential for increased incidence of mental health problems in staff with musculoskeletal disorders and the increased incidence of stress in females as compared to males (often due to female staff having dual work and caring responsibilities).

4. RESPONSIBILITIES

Responsibility for the effective management of stress rests at all levels of the organisation:

4.1. Staff

All staff are responsible for taking care of themselves and have a duty of care to their colleagues. If staff believe they are suffering from stress or are struggling with work-based duties, then they should contact their line manager to discuss the situation. In cases where a staff member feels that their line manager is part of the difficulty, they should endeavour to go the next level of management and explain the situation. Whilst the Health Board will make every effort to help employees, often the first step must come from the individual. Similarly, where identified to be appropriate, employees also have a responsibility to accept opportunities for well-being interventions.

4.2. Managers & Senior Managers

Operational line managers are responsible for monitoring and acting in relation to staff in the services they are responsible for. Managers have a responsibility to be aware of their legal duty as an employer and also to be aware of how to recognise early signs of stress in staff. It is important for the success of this policy that managers play an active role in its implementation. Senior Managers are responsible for taking action to reduce workplace stressors identified by operational managers wherever possible.

4.3. Health and Safety Department

The Health and Safety Department have a responsibility to offer support and advice to line and senior managers to assist them in the management of health and safety risks that may impact on the health and well-being of staff. Within the department are a number of advisers with particular skills including Case Managers who can advise on violence and aggression matters.

4.4. Occupational Health

Occupational Health are responsible for conducting health checks at recruitment and this includes the identification of previous or ongoing mental health problems to enable appropriate advice about fitness for employment to be provided both to the recruit and their appointing Officer. Within employment, Occupational Health has a responsibility to both support referred individuals who are experiencing work related stress or who have been off sick with stress and also advise them and their Managers/Workforce Advisor about general fitness for work including, where appropriate, measures to enable a return to work such as temporary or longer term adjustments. Occupational Health will promote self-referral to well-being interventions or can refer onto the Clinical Psychologist those individuals with distinct trauma based issues. The Clinical Psychologist has responsibility for conducting or providing consultation on how to conduct psychologically informed organisational health interventions to identify and address the causes of work related stress.

4.5. Workforce and Organisational Development

Workforce and OD are responsible for promoting positive cultural change within the organisation, ensuring the organisational policies, procedures and codes of conduct are accessible and facilitating discussions within areas of conflict, including allegations of bullying. They also have a responsibility to work with managers to identify adjustments within the workplace to support individuals with mental ill health and to support managers in monitoring the sickness/absence of individuals.

4.6. Health at Work Team

The Health at Work Team is responsible for delivering the preventative Lighten Up programme and the Well-being Through Work project (WbtW). Lighten Up consists of facilitated sessions to promote health and well-being and incorporates issues such as healthy lifestyle, making changes and identifying stress. The WbtW programme offers confidential advice and guidance over a range of issues including anxiety, depression, difficult relationships, employment advice and debt. Please refer to Appendix 5 for further information.

4.7. Staff Counselling & Clinical Psychology

The staff counsellors are responsible for providing timely evidenced based brief therapeutic counselling interventions to staff with presenting problems which may include stress, anxiety and low mood. The Clinical Psychologist is responsible for delivering clinical intervention to staff with complex and/or distinct trauma issues. The Clinical Psychologist is also responsible for conducting or advising others

how to conduct psychologically informed organisational health interventions to identify and address the causes of work related stress.

4.8. Executive

The Director of Workforce and Organisational Development is the nominated Executive Lead and shall be responsible for monitoring the implementation and compliance with this policy. The Executive Lead will also be instrumental in securing appropriate resources for the effective implementation of this policy and for bringing to the attention of the Health Board any progress or shortfalls.

4.9. The Board

Under the terms of The Health & Safety at Work Act 1974 the Health Board has a general duty of care to ensure the health and safety of its employees as far as is reasonably practicable. As such, the Health Board is responsible for monitoring problems identified and actions taken.

5. OUTLINE OF KEY MANAGER ACTIONS

There are a number of actions that managers need to consider with regards to their legal duty as an employer:

5.1. Be preventative

Managers need to be aware of the following key aspects of the work environment, to reduce workplace stressors where possible and ensure that appropriate supports are in place. Specifically, managers should examine the following factors

- The quality of workplace relationships
- The implementation of organisational policies known to support well-being
- The way in which jobs are designed
- The quality of team working
- The availability of social support
- The availability of information about workplace stress
- Access to specialist supports (e.g. The Lighten Up Programme, WbtW programme, Occupational Health, Staff Counselling, Trade Unions).
- Support to undertake physical activity.

Refer to Appendix 2 for further information on preventative approaches.

5.2. Monitor staff well-being

Managers need to collect information about employee well-being on a regular basis to ensure that staff are not exposed to unnecessary risk of workplace stress. This may involve:

- Encouraging staff to raise concerns at the earliest opportunity e.g. In PDRs, Return to Work Interviews and team meetings. This may also include staff raising concerns about behaviour they may have witnessed which they perceive to be unacceptable or offensive as this can cause stress and anxiety to both the recipient and the witness. Managers need to record these concerns in order to consider whether there is a need to conduct a full risk assessment and/or decide upon a course of action at the individual or team/service level. The specific course of action will depend upon the issues identified (see under risk assessment). Any information collected from individuals should be regarded and treated as confidential.
- Collating information on performance indicators such as sickness absence, accidents, incidents, complaints and grievances. Managers should review collated data at regular intervals (e.g. monthly, quarterly, annually) in order to identify trends or emerging issues.

5.3. Conduct a risk assessment

If a manager suspects that there is a well-being issue (e.g. this could be on the basis of high sickness absence, lots of dignity at work cases or through staff self-report), they are advised to conduct a risk assessment using the following steps

i) Identify the Hazards: Refer to the primary sources of workplace stress in the following six categories:

- **Demands** – this includes issues such as workload, work patterns and the work environment.
- **Control** – how much say the person has in the way they do their work.
- **Support** – this includes the encouragement, sponsorship and resources provided by the organisation, line management and colleagues.
- **Relationships** – this 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 they do not have conflicting roles.
- **Change** – how organisational change (large or small) is managed and communicated in the organisation.

ii) Decide who may be harmed and how: Identify staff members at risk of harm through existing data (e.g. Sickness absence data, exit-questionnaires, analysis of referrals to Occupational Health). Managers are guided to the Health and Safety Executive Stress Management Standards Indicator tool (www.hse.gov.uk/stress/standards/downloads.htm) (please refer to Appendix 3 for the questionnaire) to examine worker well-being, workplace stressors and to identify suitable control measures. Managers are also directed to the Stress Management Competency Indicator tool (www.hse.gov.uk/stress/mcit.pdf) to examine how effective their own behaviours are in preventing and reducing stress in their staff (please refer to Appendix 4 for the questionnaire). Both tools are also accessible from the Well-being section of the ABMU intranet.

iii) Evaluate the risk: Communicate the results, provide feedback to staff and deal with individual concerns. Managers should aim to link problems to solutions. Focus groups are suggested as a way of generating ideas for solutions. In addition, please refer to Appendix.6 for HSE prompts on finding solutions.

iv) Implement control measures: Use proposed solutions to develop an action plan (e.g. where possible make adjustments to the work environment to reduce unreasonable stressors). It may not be possible to completely eliminate stress from the work environment but a reasonable balance needs to be found, so for example, where workloads are high then support will need to increase, or where relationships are poor, efforts need to be made to resolve the situation. Managers may need to seek advice / input from individuals with specific responsibility for staff well-being within the Health Board depending on the issue/s identified (e.g. Occupational Health, Health & Safety, Clinical Psychology, Workforce).

Managers should ensure that best practice is followed in relation to the management and support of staff with mental health and stress related problems. Managers are directed to the Line Manager's Resource: A practical guide to managing and supporting people with mental health problems in the workplace – which can be downloaded from the Well-being section on the Intranet.

v) Consider specialist supports:

If the member of staff appears unwell then suggest that they seek specialist help:

- Encourage them to go and see their GP
- Consider a referral to the Occupational Health Department
- Make them aware of the supports available to them within the **Stepped Care Model** (see Appendix 5 for more details) in both Primary Care and ABMU itself.

vi) Monitor and review: Monitor your action plan and evaluate its effectiveness.

6. Organisational Health Check

Various sources of data such as risk assessments, identification of hotspots, activity figures (e.g. from Occupational Health, Staff Counselling and WbtW), as well as directorate sickness absence rates will be used to provide an overview of the general health of the organisation and be provided on an annual basis to the Health Board. Should multiple hotspots be identified within ABMU, these will need to be prioritised accordingly, with guidance for priority of intervention being at the discretion of the Executive Team.

7. Exploration of cases of work related stress absence

There is a legal requirement to examine all incidences of injury or illness caused or exacerbated by work. Within the sickness review process, it is necessary to establish the following:

- Was the absence genuinely related to stress generated in the workplace?
- What is the nature of the stressors involved?
- Have existing procedures (e.g. Grievance procedures, Dignity at Work Policy) been utilised where appropriate?
- Are other people affected or likely to be affected by the absence or the situation causing the absence?
- Are the stressors still at a level where they are likely to cause further injury?
- Have steps been put in place to eliminate, or reduce the stressors to an acceptable level? Where this is not practicable has the individual's task been redesigned to remove them from the stressors? Alternatively, has the individual received training to enable them to deal with the stressors?

8. Training

The Health Board will ensure that information to assist all staff in managing personal stress is integrated within existing learning and development programmes including Corporate Induction and Management Development Programmes. Particular emphasis will be placed on:

- Raising staff and managers' awareness of the effects of unhealthy stress.
- Learning how to recognise stress in yourself and others and the strategies needed for managing stress.
- Recognising the impact of management style and individual behaviour upon stress in others.

9. Monitoring Compliance and Effectiveness

The Health Board has responsibility for monitoring data and taking an overview of compliance with the policy. A number of methods will be applied to ensure consistent compliance and effectiveness of this Policy including:

- Monitoring completion of risk assessments.
- Monitoring completion and outcomes of Return to Work interviews.
- Sickness absence data.
- Staff turnover rates.
- Exit interviews
- Complaints and grievances.
- Number of stress-related referrals to Occupational Health.
- Information from existing staff forums
- Feedback from any stress surveys/audits

Workforce will be responsible for collating this information to provide an overview to the Health Board. The Director of Workforce and Organisational Development is the nominated Executive Lead and shall be responsible for monitoring the implementation and compliance with this policy.

10. Policy Review Period

This policy will be subject to review as necessary, but no later than three years after implementation. Review of the policy will be taken to the Health and Safety Committee and the Workforce Policy Development Group for approval and will be submitted to the Risk Management Committee for ratification in line with the Health Board's procedures.

11. Associated Policies / Documents

This policy should be read in conjunction with the following ABMU policies which are available on the intranet:

- Managing Sickness Absence Policy
- Dignity at Work Policy
- Grievance Policy
- Rehabilitation Policy
- Redeployment Policy
- Health & Safety Policy

and information relating to

- Flexible Working Provisions.

The main areas of legislation that relate to mental well-being in the workplace are:

- The Health & Safety at Work Act 1974
- Equality Act 2010
- Human Rights Act 1998
- Management of Health & Safety at Work Regulations 1999.

APPENDICES

Appendix. 1: Signs of stress

There are some clear signs that people are experiencing stress at work. If they are detected early, action can be taken before the pressure becomes a problem, and it will be easier to reduce and eliminate the causes. It is important that everyone looks out for changes in a person's or a group's behaviour. Stress can show itself in many different ways – see below. Some of the items in this list may not be signs of stress if people always behave this way. Managers may need to manage them differently. Managers are particularly looking for changes in the way people behave that could be linked with excessive pressures.

Signs of stress in individuals

Individuals suffering from some of the following symptoms may be feeling the effects of stress. If a member of staff finds that work or aspects of their work bring on or make these symptoms worse, they need to speak to their line manager, trade union representative or HR department. It may be that some action taken at an early stage will ease the stress and reduce or stop the symptoms.

Emotional Symptoms

- Negative or depressive feeling
- Disappointment with yourself
- Increased emotional reactions – more tearful or sensitive or aggressive
- Loneliness, withdrawn
- Loss of motivation, commitment and confidence
- Mood swings (not behavioural)

Mental symptoms

- Confusion, indecision
- Unable to concentrate
- Poor memory

Changes from normal behaviour

- Changes in eating habits
- Increased smoking, drinking or drug taking to cope
- Mood swings effecting behaviour
- Changes in sleep patterns
- Twitchy, nervous behaviour
- Changes in attendance such as arriving later or taking more time off.

Please note these are indicators of those experiencing stress. They may also be indicative of other conditions. If you are concerned about yourself please seek advice from your GP. If you are concerned about a colleague or member of staff encourage them to see their GP.

Signs of stress in a group

- Disputes and disaffection within the group
- Increase in staff turnover
- Increase in complaints and grievances
- Increased sickness absence
- Increased reports of stress
- Difficulty in attracting new staff
- Poor performance
- Customer dissatisfaction or complaints

It is not up to staff members or managers to diagnose stress. If there are worries about a person, recommend they see their GP. It is up to staff members and managers to recognise that behaviours have changed, to be aware that something is wrong and to take prompt action. Take care not to over-react to small changes in behaviour. Staff members need to act when these behavioural changes continue. Use these symptoms (both individual and group) as clues.

Appendix.2: Preventative Approaches

<i>Quality of Relationships</i>	<i>Policy Implementation</i>
• Promote a culture of participation, equality and fairness • Ensure consistency and fairness in decision making • Increase understanding of the impact of management style • Promote participation, delegation, constructive feedback, mentoring and coaching. • Act to reduce the stigma associated with mental health problems	• Promote well-being in all policies and practices • Offer flexible working where practical • Ensure annual leave is taken • Sickness absence policy implemented well • Good practice relating to accident and incident reporting • Monitor work-life balance • Monitor working of unpaid extra hours • Ensure appraisals are well-structured • Promote equality of opportunity for well-being interventions (e.g. shift workers and part time staff)
<i>Job design</i>	<i>Team Working</i>
• Skill variety • Task identity • Task significance • Autonomy • Feedback • Work overload/under load • Shift patterns	• Clarity and commitment to team objectives • Decision making and communication • Focus on quality • Support for innovation
<i>Information Giving</i>	<i>Social Support</i>
• Stress management training • Managers able to identify symptoms of mental health problems • Mechanisms in place for providing advice • Access to information and support regarding workplace bullying	• Promote opportunities for relationship building • Early stage conflict resolution • Interventions for workplace bullying
<i>Personal Support</i>	<i>Physical Activity</i>
• Access to WBTW team • Access to Lighten Up programme • Access to staff counselling • Access to Occupational Health • Mechanisms in place for providing support	Consult with staff • Disseminate information • Identify dedicated resources • Offer advice and support • Offer independent health checks

Appendix.3: Copy of HSE Stress Management Standards Indicator tool

Use this to examine worker well-being, workplace stressors and to identify suitable control measures. Go to www.hse.gov.uk/stress/standards/downloads.htm or available on the intranet under the well-being tab.

Appendix.4: Copy of HSE Stress Management Competency Indicator tool

For managers to examine how effective their own behaviours are in preventing and reducing stress in their staff. Go to www.hse.gov.uk/stress/mcit.pdf or available on the intranet under the well-being tab.

Appendix.5: STEPPED CARE MODEL

The idea behind stepped care is that individuals access the form of support which is most appropriate for their need. For example, not every member of staff will want or indeed need to see a staff counsellor. As such, supports which are available within Primary Care include:

Bibliotherapy

Self help books are a popular and effective way to learn about and find ways to manage a wide range of emotional / mental health problems. As part of the Book Prescription Wales Scheme, an individual receives an extended library loan for a range of titles for problems including Anxiety, Depression and Low Self Esteem. Book prescriptions can be obtained from your GP.

Computerized Cognitive Behavioural Therapy (CCBT)

CCBT is a computerised, self-help version of Cognitive Behavioural Therapy. The programme helps an individual to identify the links between unhelpful thoughts, feelings and behaviours. The course aims to teach the skills that are required to manage problems effectively. CCBT can be accessed through a free, easy to access website, www.livinglifetothefull.com. To register, click the orange button which says 'Click here to register for public sign up'. An email address is required to do this. An individual can then sign up and complete the modules they are interested in.

Stress Control

Stress Control is a six week course that teaches strategies and techniques to manage stress, anxiety and depression. These include relaxation, problem solving and challenging unhelpful thoughts. Each session lasts up to 90 minutes and each week a different aspect of stress is covered, these include:

- Week 1: What is Stress?
- Week 2: Managing bodily stress
- Week 3: Managing stressful thoughts
- Week 4: Managing what we do when we feel stressed (our actions)
- Week 5: Panic Attacks
- Week 6: Improving Sleep and Improving the future

Stress Control is self referral so there is no need to book on or register a place, individuals can just turn up for sessions. Courses are held in Bridgend, Neath and Swansea throughout the year on various days and times. For further details, email stresspac.ccbt2@wales.nhs.uk or text/call 07967 612246

Supports which are available within ABMU include:

Please note these contact numbers may change before the policy is updated so staff are advised to double check these on the intranet (via the Well-being tab).

Occupational Health Department.

There are currently departments in four of our main hospitals:

Princess of Wales Hospital	01656 752158
Neath Port Talbot Hospital	01639 683197
Morriston Hospital	01792 703610
Singleton Hospital	01792 285223

Health at Work team

This team offers confidential advice and guidance over a variety of issues including:

- Dealing with a health condition or work issue
- Pain, anxiety and stress
- Building confidence
- Talking to managers
- Accessing other advice – e.g. debt and housing
- Putting together a return to work plan

They can be contacted on 0845 601 7556 and operate on a self-referral basis. They offer consultations over the telephone, face to face and on a group basis depending on need.

Staff Counsellors

There are three Counsellors employed within ABMU who offer a confidential counselling service to staff. Any staff member who is experiencing symptoms of stress, anxiety, depression, relationship difficulties, bereavement or loss within the workplace or their personal life may refer themselves. Most clients are offered a maximum of 6 sessions. Contact the main Occupational Health departments (POWH and Morriston) for the current contact number.

Clinical Psychology

There is a dedicated Clinical Psychologist within Occupational Health and Employee Well-being who provides direct clinical intervention to staff with distinct trauma issues and / or complex presenting problems that cannot be treated by the other interventions on offer. The Clinical Psychologist also conducts and/or provides consultation on how to conduct psychologically informed organisational health interventions to identify and address the causes of work related stress. Access to the Clinical Psychologist is via onward referral from within the Occupational Health Department, the Staff Counsellors or the Health at Work team.

Other useful contacts:

Health and Safety Department	Glanrhyd Hospital 01656 752752 (# 3782) Cefn Coed Hospital 01792 285398 (#7407)
Workforce and OD (previously known as Human Resources)	Cefn Coed Hospital 01792 516502 (# 6502) Singleton Hospital 01792 285279 (# 6885) NPT Hospital 01639 683162 (# 3162) Glanrhyd Hospital 01656 753400 (# 3400)
UNISON	01656 752727
RCN	01656 752241
UNITE	Gary John (Senior Rep) 01656 753484 Or 07979 253838

Appendix.6: HSE Prompts to finding solutions

When talking about work-related stress it may help to remember the following:

- Make sure enough time is spent clarifying what the problem is. It is important to be as specific as possible as this will help you develop effective solutions.
- Ask how this area of work activity became a problem. What happened? Has it always been a problem? If not, what has changed?
- What would be the mechanisms for introducing suggested improvements? Who will take the work forward? Who needs to be involved? What are the first steps? How will you monitor progress?
- Is the problem a one-off? Is any action really required? If it is, how will suggested solutions solve identified problems?
- Finally, it is important not to take on too many actions. You may need to prioritise.

(Downloaded from HSE Website April 2012)