

HEALTH, WELLBEING AND FATIGUE POLICY

POLICY — COMPANY FILE

Occupational health, mental health, fatigue and hours, support, return to work and adjustments

KD-PQ-MH-019 Rev A0

The policy on health at work beyond injury: occupational health, mental health and wellbeing, fatigue and working hours, the support available, return to work and reasonable adjustments. The arrangements and records are elsewhere and are not repeated here: health surveillance and the occupational health provider KD-HSA-OH-016, with the register KD-OH-HS-001 and referrals KD-OH-RF-008; drugs and alcohol KD-OH-DA-006; hours, rest and opt-outs KD-HR-WT-003; the fit-to-work declaration KD-SITE-FW-005; the toolbox talks KD-TBT-MW-019 (mental health) and KD-TBT-SF-058 (stress and fatigue). The law behind it: MHSWR 1999 reg 3 requires a suitable and sufficient assessment of the risks to employees — HSE says that includes the risk of work-related stress — and reg 6 health surveillance where the assessment shows it is appropriate. HSE's guidance on fatigue says keeping to the Working Time Regulations 1998 is not enough on its own to manage fatigue. Those Regulations set an average of 48 hours a week over the reference period unless the worker has agreed in writing to more (reg 4); 11 consecutive hours' rest in each 24 hours, 12 for a young worker (reg 10); and a rest break when the working day is over six hours — 20 minutes unless an agreement provides otherwise — or, for a young worker, 30 minutes when it is over four and a half hours (reg 12). Equality Act 2010: a person has a disability if a physical or mental impairment has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities (s.6). An employer has a duty to make reasonable adjustments (s.39(5)): where a provision, criterion or practice, a physical feature, or the lack of an auxiliary aid puts a disabled person at a substantial disadvantage compared with people who are not disabled, it takes the steps it is reasonable to take (s.20(3) to (5)), and may not charge the person for them (s.20(7)). The duty does not arise where the employer does not know, and could not reasonably be expected to know, that the person has a disability and is likely to be put at that disadvantage (Schedule 8 paragraph 20). These provisions extend to England, Wales and Scotland; check the law for work in Northern Ireland.

Evidence for: CAS v5 Q76 — occupational health (advisory). The question is not asked where an SSIP or ISO 45001:2018 certificate is held — and Constructionline Gold requires an SSIP certificate, so on Gold it is normally not asked; the policy still records the arrangements SSIP looks for.

What this policy cannot supply: evidence that support is used and hours are controlled — referrals, hours records against the limits in section 3, and signed briefings, dated. Keep health information apart from the site file. A micro-business may use the written statement in section 6.

The question numbers are Build UK's; the topic tags are ours. This document records what the business does; the assessment body decides what it accepts. Version 6 of the question set is due on 1 November 2026 and is not yet published — check the numbers against the version you are assessed on.

1 THE BUSINESS

 add it in your PDF editor, or print and paste it here	BUSINESS NAME	COMPANY NO.	PEOPLE EMPLOYED	VERSION
	REGISTERED / TRADING ADDRESS		HEALTH AND WELLBEING LEAD (DAY TO DAY)	
	POLICY DATE	APPROVING DIRECTOR	POSITION	NEXT REVIEW DUE

2 POLICY

This business treats health as seriously as safety. Work should not make anyone ill — through dust, noise, vibration or substances, through stress, or through hours that leave people too tired to work safely or drive home — and anyone who becomes ill or disabled, for whatever reason, is supported to stay in work or come back to it. We commit to:

- 1 Assess the health risks of the work, work-related stress and fatigue included, alongside the other risks — and act on what the assessment finds.
- 2 Provide health surveillance where the assessment shows it is needed, through a competent occupational health provider (KD-HSA-OH-016).
- 3 Plan work so hours, shifts and travel leave people fit to work, within the limits in section 3.
- 4 Make it normal to talk about mental health: briefings, a named person to talk to, and nobody treated less favourably for raising it.
- 5 Tell everyone what support is available and how to reach it in confidence.
- 6 Keep in touch during sickness absence in the way agreed with the person, and plan the return to work with them.
- 7 Make reasonable adjustments for disabled people, whether the impairment is physical or mental, and consider adjustments for anyone returning to work.
- 8 Keep health information confidential, seen only by the people who need it, under KD-PQ-DP-006.

COMMITMENTS NOT ADOPTED — NUMBER AND REASON

3 FATIGUE AND WORKING HOURS

Long shifts, consecutive long days, night work and long travel before or after a shift all add to fatigue. The limits below are this business's own and sit alongside the working time records on KD-HR-WT-003 — an opt-out from the 48-hour average does not remove them.

LONGEST SHIFT, OVERTIME INCLUDED	MOST CONSECUTIVE WORKING DAYS	DRIVING AFTER A LONG SHIFT
NIGHT AND EARLY WORK	WHO CHECKS HOURS AGAINST THESE LIMITS, AND HOW	
WHEN SOMEONE IS TOO TIRED TO WORK SAFELY		

4 MENTAL HEALTH, WELLBEING AND SUPPORT

Tick only the support this business actually provides — do not tick an option it does not have.

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continued

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- ☐ Employee assistance programme — confidential phone or online counselling
- ☐ Trained mental health first aiders — names on the site board
- ☐ Occupational health — referral by the business or self-referral (KD-OH-RF-008)
- ☐ A named person to talk to in confidence, outside the line manager
- ☐ Toolbox talks each year on mental health and on stress and fatigue
- ☐ Occupational health and wellbeing training or briefings for the whole workforce
- ☐ Wellbeing or mental health training for managers and supervisors
- ☐ Helpline and charity details displayed in the office and on site
- ☐ A mental health at work commitment or initiative the business has joined — named below

PROVIDERS, CONTACTS AND INITIATIVE NAMED

NAMED PERSON TO TALK TO

HOW WORK-RELATED STRESS IS ASSESSED AND ACTED ON

5 RETURN TO WORK AND REASONABLE ADJUSTMENTS

Keep in touch during absence in the way agreed with the person. Before they come back, talk through what they can do, any advice from their doctor or occupational health, and any adjustment — phased hours, different duties, no work at height or driving for a period. For a disabled person, including someone whose mental health condition meets the s.6 test, consider the adjustments set out in the note above as soon as the business knows, or could reasonably be expected to know, of the disability and the disadvantage. The site is told only what the person can and cannot do, never the reason.

MANAGES RETURN TO WORK

REFER TO OCCUPATIONAL HEALTH WHEN

ADJUSTMENTS RECORDED ON

6 SMALL-FIRM ROUTE — A WRITTEN STATEMENT INSTEAD

CAS v5 lets a micro-business give a written statement instead of a policy for Q76. If this business uses that route, write the statement here and strike out sections 3 to 5; the commitments in section 2 still apply.

- ☐ This business uses the statement below instead of the sections named above, and a director signs it in the last section

WRITTEN STATEMENT

7 RESPONSIBILITY, COMMUNICATION AND MONITORING

ROLE	NAME	WHAT THEY DO UNDER THIS DOCUMENT

- ☐ Business and site induction
- ☐ Briefing or toolbox talk, signed for
- ☐ On the notice board in the office and site cabins
- ☐ Issued with subcontract and supply orders
- ☐ On the website
- ☐ In the staff handbook or contract pack

HOW IT IS COMMUNICATED — THE DETAIL

Evidence that the document reached people: record each induction, briefing and issue on KD-CAS-PB-005 Policy Briefing and Acknowledgement Record — names, dates and signatures. Assessors ask for that record, dated within the last twelve months; only briefing people creates it.

LATEST BRIEFING RECORD — SHEET REF AND DATE

NEXT BRIEFING DUE

NEW STARTERS BRIEFED WITHIN

HOW IT IS MONITORED, AND WHAT TRIGGERS AN EARLY REVISION

8 SIGNED FOR THE BUSINESS

I adopt this health, wellbeing and fatigue policy for the business named in section 1, and I will make sure it is resourced, briefed and revised when it needs to be.

SIGNED — PRINTED NAME

POSITION

SIGNATURE

DATE

NEXT REVIEW DUE

R REVISION HISTORY

Every revision of this document, and every review that found nothing to change. The revision on the front of this sheet is the one you are holding — check kubitdocs.com for the current one before use.

Rev	Date	Class	What changed	Authorised by
D0	2026-09-13	first-issue	First issue.	— not yet approved —
A0	2026-09-13	review	Approved for issue by the author. Content unchanged from the reviewed draft; the draft status strip is removed. No independent third-party review has been carried out.	Author — director, UK principal contractor, SMSTS. Not an independent review.

Class: first-issue · material (the law, a control, a field or the scope changed — past buyers are notified) · editorial (wording or layout only) · review (checked, nothing changed) · withdrawal. Revision prefix D = draft, not approved and not for sale; A = approved for issue by the person named, on the date shown.