Health & Wellbeing Strategy 2010-2012

Executive Summary

Health & Wellbeing Strategy
June 2010
This document sets out the Trust’s Health and Wellbeing Strategy for the next two years. The strategy is designed to provide a clear overview of the current provision of services in place in relation to staff health and wellbeing, as well as exploring the improvements which can be made. The Trust recognises that it has a duty of care for staff that extends to mental health as well as physical health at work.

Our vision is to deliver excellent care, and to become the employer of choice. Our ability to deliver this vision is dependent on the wellness of our workforce. In order to achieve our vision, it is important that employees feel they work in a safe environment, and can access the help and support they need when required. Health education plays a vital role in health promotion because it works with the individual to promote behaviour change by giving them the knowledge to make informed choices and supporting them when a choice is made.

This strategy has been driven by the Boorman Review (http://www.nhshealthandwellbeing.org) which details the importance of improving the health and wellbeing of employees, specifically improving early and ongoing intervention in order to tackle major health and lifestyle issues that affect the staff and the population as a whole. The Boorman Review makes it explicit that the health service as a whole can not afford to not invest in the health and well-being of its staff.

The Trust is looking at the Health and Wellbeing of staff as a priority, links into the Trust Values and Behaviours and features heavily in the action plan for the Trust strategic vision of being “an employer of choice”. In line with the Trust becoming a “World Health Organisation Health Promoting Hospital”, the Health and Wellbeing Strategy will support in achieving the standards required.

Key messages include –

- The NHS must be an exemplar employer in ensuring the health and well-being of its staff.
- The quality of service provided to the patient is improved when staff health and well-being is improved.
- Improving the health and well-being of staff, will drastically reduce the sickness absence, creating a significant saving.

These areas link directly to the Quality, Innovation, Productivity and Prevention (QIPP) agenda.

2. Introduction
There is clear guidance from the Boorman Review and Secretary of State for Health, gives clear expectations that NHS organisations will implement Health and Well-being models and create structures, processes and guidance in order to maximise the potential of the workforce.

There is a clear message regarding developing a healthy workplace and that “managing health, work and wellbeing is the responsibility of both the employer and the employee” (ACAS- Advisory, Conciliation and Arbitration Service - http://www.acas.org.uk/index.aspx?articleid=693).

Through implementation of this strategy, the Trust seeks to achieve real and measurable improvements in the health and wellbeing of employees. The Trust currently complies with workplace standards in relation to health and safety, and has measures in place to provide a safe environment for staff to work.

3. Strategy Objectives

The strategy is based on the following objectives –

- To create and maintain a culture and environment to promote health and wellbeing (healthy workplace).
- Optimise the resources available within the Trust; promote equality of access to those resources for all sites.
- Develop health education events/sessions
- Promote health education through events
- Support staff to take responsibility for their own health and enable healthy choices to be made.

4. Characteristics of a Healthy Workforce

Substantial research has shown that there are several outcomes/factors that indicate a healthy workforce:

- An increased understanding of the relationship between a healthy workforce and reduced sickness absence
- Improved motivation, morale and productivity, leading to increased organisational performance
- Improved staff retention
- Greater employee commitment to organisational goals

This can be further broken down into two levels –

Organisation:

- Staff will be more engaged which results in a reduction in sickness absence levels, especially in key areas such as mental health issues. Staff will be more productive, there will be an improvement in staff
retention, turnover and agency spend, there will be greater patient satisfaction and improved staff advocacy.

Employee Level:
- Staff will feel healthier and supported by the organisation. They will feel valued, thus improving the overall culture of the organisation.

5. Current Health and Wellbeing Provision

5.1 Occupational Health

The Occupational Health service offers a range of different services, including counselling, advice and guidance, of issues such as smoking cessation, health issues, and health surveillance. It offers support for those off work due to sickness, and assists with return to work health assessments, with the implementation of adjustments if applicable.

As of July 2010 the Mindful Employer Group will be combined within the Model Employer Group to ensure Mental Health of employees is reflected in this work stream.

In addition to this, Back Care specialists employed to give back care advice.

5.2 Health and Wellbeing Group

There is currently a Health and Wellbeing Group that is incorporated into the Model Employer Group, in order to share good practice and look at practical ways to improve the health and wellbeing of staff. The membership of the group includes health champions, staff representatives, an associate director, human resources, a representative from the nursing directorate and the equality and diversity lead. The group has been established to discuss, agree and progress with action to further improve the Trust’s provision in relation to health and wellbeing.

5.3 Other services

The Trust has several other provisions available for staff, these include:

- Physiotherapy (direct referral only at DMH)
- Staff/Union Representatives
- Health Champions
- Staff restaurants and eating areas (no dedicated areas for staff to eat their own food at UHND)
- Discounted local gyms
- Learning and Development Opportunities
- Meditation (run adhoc by staff volunteers)
- Cycle to work scheme- bike pods, salary sacrifice
- Flexible Working
- Staff Support Officers
- Portfolio of staff benefits managed by L&D
- Staff training and education (stress, assertiveness, management)

5.4. Linking into other practice within the Trust

The measurement of risk to associate with the health and wellbeing of staff is complex. However, the Trust is committed to monitoring, reviewing and implementing organisational health through a number of channels which include:

- Sickness absence data
- Staff turnover statistics and information from exit interviews
- Referral rates to Occupational Health/Physiotherapy Dept/Counselling
- Annual staff survey and action plan
- Annual review of departmental and individual risk assessments
- Health and safety inspection reports/assessments
- CQC/HQS assessments etc
- Implementation and adherence to Employment Policies such as the dignity at Work, Special Leave, Time off for Training and Education No Smoking Policy.
- Fit for work notes
- Equal opportunities.

6. Key Areas for Action/Recommendations

Although there are provisions in place, the Trust recognises that there are always improvements which can be made.

The diagram below explores the contributing factors that need to be taken into account in order to provide employees with the best health and wellbeing provision.
Key actions and recommendations are detailed in the attached action plan and timeline

It is recommended that consideration be given to the cost of implementing the action plan however many actions identified can be progressed within existing resources at this stage.

7. Action plan

Outlined in Appendix 1 of this strategy is a detailed action plan containing information concerning implementation of actions required, responsibilities and benefits of the action specified. It is envisaged the identified lead would monitor the overall progress of this action plan.

Outlined in Appendix 2 is guidance regarding the timescales for certain projects which need to be explored.
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<tr>
<th>No</th>
<th>Objective</th>
<th>Action Required</th>
<th>Expected Improvement</th>
<th>Action Owner</th>
<th>Target Date</th>
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| 1  | Provide health and wellbeing services that focus on prevention for both work related and lifestyle related areas. | 1.1 Explore the provision of all canteens/staff eating areas for own food on all sites and identify improvements which could be made to increase the amount of healthier options available. Look at current promotions.  
1.2 Explore the current structure of the Occupational Health Service; assess the preventative measures currently in place. Explore the current provision of physiotherapy.  
1.3 Re-branding of the Occupational Health Department as a Wellness Service. | 1.1 A healthier workforce with a reduction in illness related to a poor diet.  
1.2 Improving the early intervention would decrease days lost through sickness absence and in cases prevent employees from being absent.  
1.3 Would remove the stigma attached to the department as being a management tool. | Health and Wellbeing Group/Health and Wellbeing Lead  
Head of Occupational Health Services  
Head of Occupational Health Services, supported by the Communications Team |
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| 2  | Develop the skills of managers to support staff and have a better understanding of how health and wellbeing links into the overall Trust business agenda. | 2.1 Incorporate training on health and wellbeing into the management training offered to managers. Specifically looking at Mental Health Issues and advising managers of the support and tools available to support staff.  
  
  2.2 Improve links with Occupational Health – provide support and training for managers concerning the basic procedures/processes involved with referrals, etc.  
  
  2.3 Board Level ownership - which needs to lead and push the agenda in relation to the link to the overarching business strategy. | 2.1 Better understanding of mental health issues within the whole organisation will improve culture and result in a reduction of days lost. Major cause of absence in the Trust is related to Mental Health; therefore any improvement in this area will have an impact.  
  
  2.2 Improved awareness concerning the process and paperwork should speed up the process and reduce the need to have to send paperwork back to managers.  
  
  2.3 Health and Wellbeing can become interlinked into every aspect of the organisation and fed into the Business Strategy. | Learning and Development, Occupational Health, Personnel | 2.4 L&D |

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<tr>
<td>2.4 Further promote training and education available re stress, assertiveness and managing change, lone working</td>
<td>2.4 Broader awareness and understanding by staff and managers will lead to reduced absence and greater productivity</td>
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<tr>
<td>No</td>
<td>Objective</td>
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<td>3</td>
<td>Early Interventions</td>
<td>3.1 Physiotherapy &amp; Diagnostics - Need to look at having a consistent and accessible approach across the Trust, including rapid access</td>
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<td>4</td>
<td>Staff Engagement/Activities/Events</td>
<td>4.1 To continue to work with communications to ensure effective communication with all staff. 4.2 Explore the focus placed on health and wellbeing at the induction. 4.3 Explore: - Health MOT’s - Physical Activity taster sessions - Weight management - Health &amp; Lifestyle Advice - Smoking Cessation Advice - To continue to work with the local PCT to host events linked to Health and wellbeing for staff</td>
<td>4.1 Accessibility would be greatly improved to services across the sites. 4.2 Improved awareness concerning Health and Wellbeing at induction would give staff signpost for future. 4.3 Several benefits can be realised through the different interventions. Generate healthier workforce in all aspects, mental &amp; physical health. Continuing to work with the PCT, we get free resources and build and maintain awareness in the workplace concerning health and wellbeing.</td>
<td>Health and Wellbeing group/lead, supported by Communications Team. Learning and Development</td>
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<td>4</td>
<td>Staff Engagement/Activities/Events</td>
<td>4.4 Arranging discounts with local gyms</td>
<td>4.4 Would give staff the opportunity to fit physical activity around other work and home commitments. The desire for a gym on site was the most frequent result in the area of the Trust making improvement within the Health Needs Assessment.</td>
<td>Learning and Development Health and Wellbeing group, Health champions</td>
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## Chart 1: Twelve month chart for implementation of Health and Wellbeing improvements

<table>
<thead>
<tr>
<th>Gym membership review</th>
<th>Physiotherapy provision</th>
<th>Health related competitions / Sports Teams</th>
<th>Natural environment</th>
<th>Health Events</th>
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</thead>
<tbody>
<tr>
<td>Review current provisions</td>
<td>Explore current provision and explore possibility of merging current provision to have one consistent approach</td>
<td>Explore how and which competitions/teams could be implemented</td>
<td>Review Woodland Walk and other facilities available at other sites</td>
<td>Planning - need to consider what would be presented and involved</td>
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<tr>
<td>Contact gyms, leisure centres and swimming pools in the area to explore possible discounts</td>
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<td>Organise and arrange competitions/teams</td>
<td></td>
<td>Preparation</td>
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<td>Publicise new deals available to staff</td>
<td></td>
<td>Evaluate and consider future competitions / teams</td>
<td></td>
<td>Implementation, evaluation and future planning</td>
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### Timescale

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<thead>
<tr>
<th>Month 1</th>
<th>Month 2</th>
<th>Month 3</th>
<th>Month 4</th>
<th>Month 5</th>
<th>Month 6</th>
<th>Month 7</th>
<th>Month 8</th>
<th>Month 9</th>
<th>Month 10</th>
<th>Month 11</th>
<th>Month 12</th>
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