



IES: HR Network

Annual HR Directors' Retreat

Brighton, 24 May 2019

**Health and Wellbeing :
Employers and Delivery**

Dame Carol Black

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My Examination Questions

What is the role of employers and how well are they delivering on it ?

- Where is Health and Wellbeing in the UK ?
- What could/should organisations be doing ?
- Where is organisational health and wellbeing heading ?
- What is the role of HR in all this ?

Total Worker Health: Building on Safety

- Safety records are now improving around the world.
- Environmental and work-related diseases are better understood, prevented and treated.
- **So we must build upon Health and Safety legislation and enforcement (HSE)...**

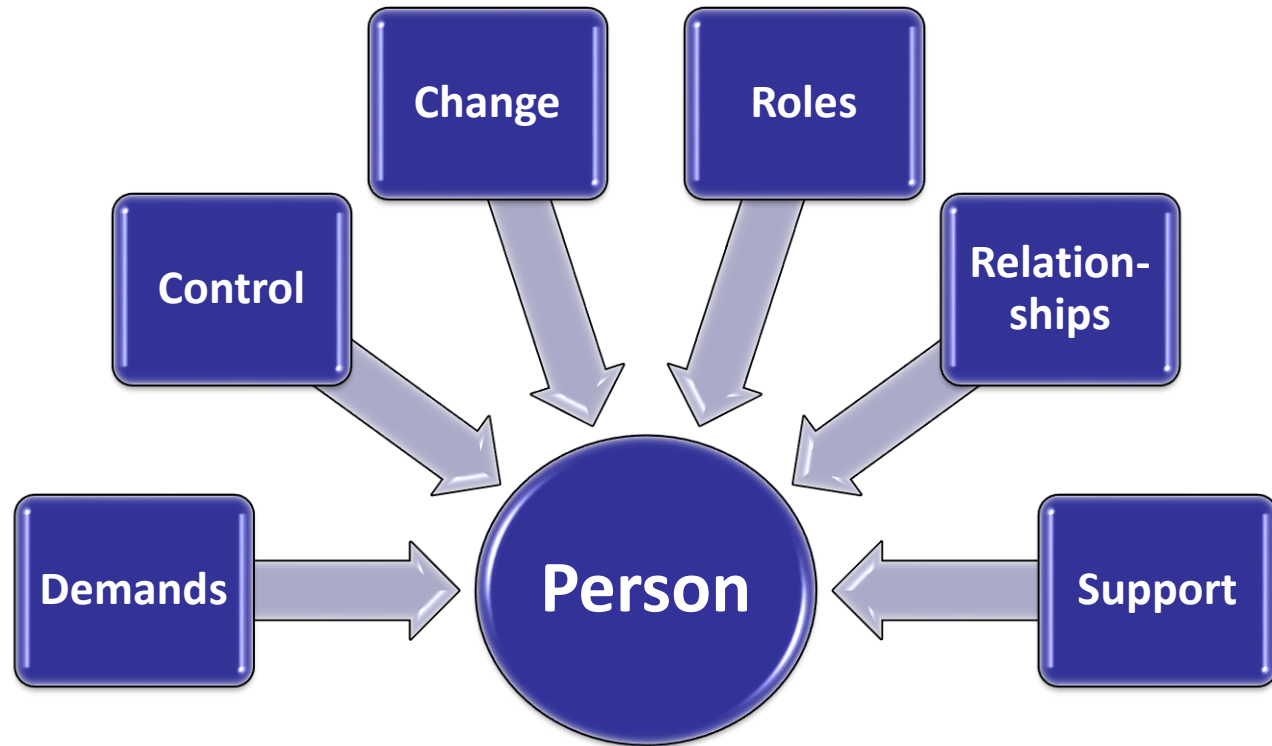


*Monument to Injured Workers,
Ontario, Canada*

... and go beyond that, to embrace general physical and mental health, well-being, resilience and engagement, all as factors essential to a **healthy productive workforce**

HSE Management Standards

Key areas of work design which if not properly managed lead to poor health, low productivity, sickness absence and accidents.



Source: UK Health & Safety Executive

See HSE Workbook for Implementation

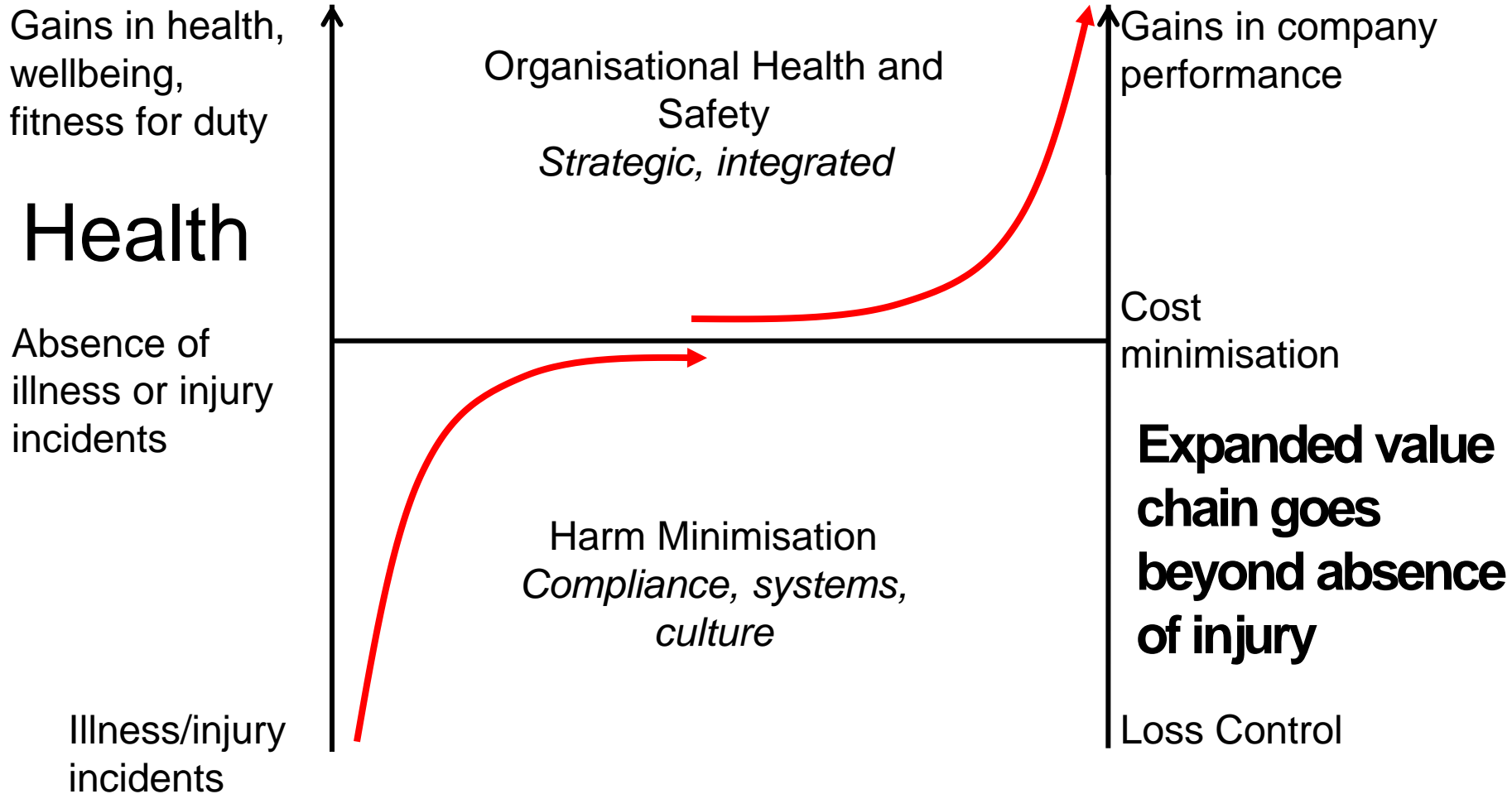
In the Workplace: Embedment NOT add-on

- Ensure a firm base for Health and Wellbeing, grounded in the fabric of the organisation.



- **It cannot be an 'add-on'.**
- **'Total Worker Health'**

Integration



Wellbeing

- My simple definition: a sense of contentment with life
- What Works Centre for Wellbeing, more complex :



- The top driver for employee engagement is how much employees believe senior management has a sincere interest in their wellbeing (Robertson and Cooper).

Good Work supports Wellbeing

Good Work

- **Stable and safe work** - that is not precarious
- **Individual control** – being part of decision making
- **Work demands** – quality and quantity
- **Fair employment** – earnings and security
- **Reintegrates** sick or disabled wherever possible.
- **Flexible arrangements** – where possible
- **Opportunities** – training, promotion, “growth”
- **Promotes Health and Well-Being** – mental and physical
- **Prevents** social isolation, discrimination & violence
- **Shares information** - participation in decision making, collective bargaining, justice in conflicts



(mixture of Marmot and
The Work Foundation)

Essential Enablers of Health and Wellbeing



Leadership



Board engagement



Manager capability



- **These are essential to Good Work and Health and Wellbeing of employees.**
- **They support organisational health.**

After them, think of:

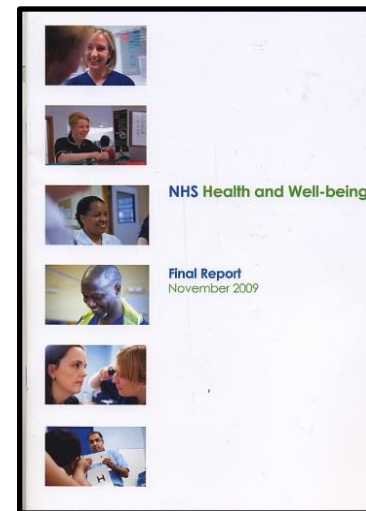


2009: A significant report - Boorman

Compelling evidence linking workforce Health and Well Being with patient outcomes, organisational performance, and success against regulatory targets.

Recommendations:

- 🍏 Lead from the top – get this into operating framework, and commissioning and regulatory frameworks
- 🍏 Enable management capability and development
- 🍏 Address the key health priorities – mental health and physical fitness
- 🍏 Develop strategic HWB framework with staff – prevention-focussed
- 🍏 Provide prompt effective treatment services
- 🍏 Improve Occupational Health



The NHS should be a leading exemplar in this area

NICE Guideline June 2015

Workplace policy and management practices to improve health and wellbeing of employees.

Recommendations focussed on organisational culture and line managers.

Aims :

- 🍏 promote leadership supportive of H&WB
- 🍏 help line managers achieve this
- 🍏 explore positive/negative effects of organisational culture
- 🍏 provide a business case and economic modelling for strengthening role of line managers.

What are the everyday challenges on the ground?



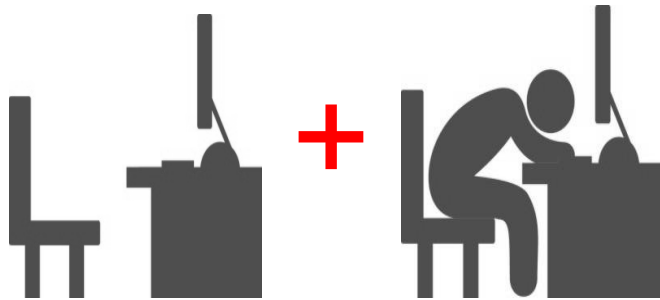
What are the biggest problems ?



Lost productivity

*‘In all developed countries, we need to compete on the quality of what we do – and that makes staff performance and productivity vital, AND **workplace health and wellbeing** are essential to both of those key factors.’*

(N.Carberry, CBI)



Sickness absence **plus**
effect of presenteeism =
annual productivity loss

- **Presenteeism** is the most significant component of productivity loss.

Data from Workplaces



Britain's Healthiest Workplace Annual Survey



5 years of data



Many NHS Trusts participated

Partners



Independent Advisory Board

Professor Dame Carol Black

*Principal of Newnham College, University of Cambridge
Expert Advisor to Department of Health*

Professor Gina Radford

Deputy Chief Medical Officer

Dr. Steve Boorman

Chair, Council for Work and Health

Professor Steven Bevan

Director of Employer Research and Consultancy, IES

Professor Sir Cary Cooper

Professor of Organizational Psychology and Health, Manchester

Professor Martin Roland

Emeritus Professor of Health Services Research, University of Cambridge

Professor Theresa Marteau

Director of Behaviour and Health Research Unit, University of Cambridge

Shaun Subel

Director of Corporate Wellness Strategy, VitalityHealth



Department
of Health



Public Health
England



Sample Participants



430 organisations and 150,000 employee respondents since inception

How are data collected and fed back ?



Inputs

Organisational Health Assessment

Employee Health Assessment

A **40-minute** online assessment completed by a **company representative**

A **20-minute** online assessment completed on a voluntary basis by **employees**

Outputs

Organisational Health Report

A comprehensive report outlining the health of the organisation, providing benchmarking information, and offering practical suggestions to support health and productivity improvement

Employee Health Report

An immediate personal report identifying lifestyle and health risks with suggestions for improvements

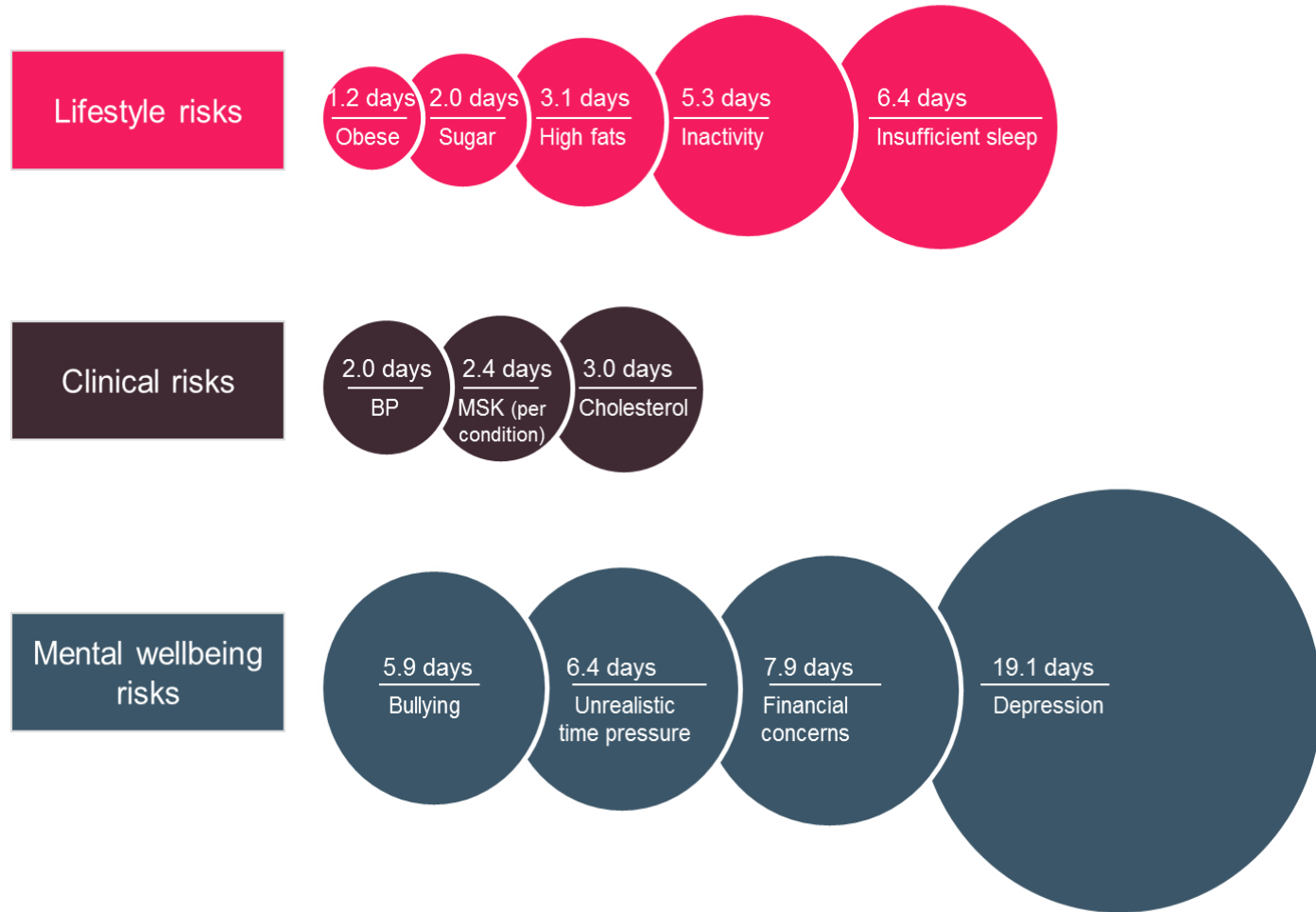
Expert consultation

Where available, a workplace wellness expert will discuss your results and identify future strategies in a face-to-face consultation

Risk factors that impact on productivity loss

Cross-sectional analysis

Independent effect of modifiable drivers of work impairment, as determined across 98,000 distinct employees over 3 years



BHW Results 2017: Mental Wellbeing

Workplace Stress:

- 🍏 54% of employees have at least one dimension of workplace stress, with 27% having two or more.
- 🍏 Key drivers are lack of consultation about change (28% incidence rate), lack of control over work done (25%), and strained relationships with colleagues (19%).
- 🍏 Employees under unrealistic time pressure and demands lose equivalent of 6.4 days productive time each year.
- 🍏 Bullied employees lose 5.9 days of productive time pa

Mental health concerns by job type

Results adjusted for age, gender and income

Red = worse than average; Yellow = average; Green = better than average

* = not much difference in results

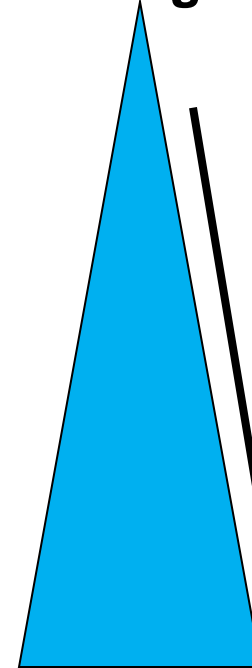
Job category	* Scale of "self-reported mental health" (1 good; 5 bad)	% of employees who suffer from depression	% of employees with a lot of financial concerns	* Scale of "Job satisfaction" (1 Agree - 7 Disagree)	% of employees with two or more dimensions of work-related stress (per HSE scale)	* % of employees who are subject to bullying
Manager	2.0	5.3	7.5	2.7	23.1	0.9
Professional	2.0	4.7	6.9	2.8	27.0	1.1
Technician or junior professional	2.1	5.5	7.1	2.9	28.1	1.0
Clerical support worker	2.1	6.5	7.1	2.9	26.8	1.3
Service worker	2.0	6.5	7.2	2.8	33.5	1.7
Sales worker	2.1	11.1	10.7	3.1	30.9	2.0
Craft and related trades worker	2.0	8.6	9.4	2.7	34.1	2.7
Plant and machine operator or assembler	2.0	5.6	6.4	3.3	46.4	2.7
Elementary occupations	2.1	7.2	9.3	3.3	41.3	1.4
Other	2.0	6.5	7.4	2.7	25.0	1.9

- Depression and financial concerns among Sales, Craft and Elementary
- Work-related stress and bullying highest among Craft workers, Plant and machine operators, and Elementary occupations

All workers must be included

- Overall organisational productivity depends critically on **workers' aggregate performance** - it is essential to success.
- There is linkage, in typical pyramid-shaped organisations, between poorer health and wellbeing (mental and physical) and lower motivation and engagement at work.
- Recognition of this should inform management thinking about health and wellbeing to enhance productivity.

Top management



Usually declining income and health

Workforce, many more at the foot, is not uniform in health, wellbeing or motivation

Financial concerns and MH are related

Employees with several financial concerns have significantly worse physical and mental health and productivity, lower work engagement and poor job satisfaction.




- 🍏 41% of employees have some, 7.3% lots, of financial concerns
- 🍏 **Depression** incidence is 7.7 times higher for those with lots of financial concerns compared to those without concerns
- 🍏 Incidence of **work-related stress** is twice as high in those with a lot of financial concerns.
- 🍏 The 7.3% with lots of financial concerns are responsible for 39% of the total lost productive time by BHW survey.

BHW Survey 2018 : Back pain

Focus on back pain only; results adjusted for age, gender, income.

45% suffer lower back pain; of these 1 in 7 'severe' (leads to taking leave).

Strong correlation of back pain with lifestyle choices and work performance.

-  Productivity loss (70 days per year) for those with severe back pain is 2.5 times the level for those with no back pain.
-  Physical activity, nutrition, obesity and smoking profiles are worst in those with severe back pain, best for those without back pain, no correlation of back pain with alcohol consumption.
-  Mental health – sleep, depression, work stress outcomes – worst for those with severe back pain, best for those with none.

Board Engagement: It's effect

2018 BHW data; residual effect after adjusting for age, income, gender

Board meeting frequency :

Less than annual
Annual
Twice per year
More frequent

Business outcomes		Mental health		Culture	
Average amount of productive time lost per employee per year due to absence and presenteeism (days)	% of employees showing low work engagement	% of employees who suffer from depression	% of employees with at least one dimension of work-related stress (per HSE scale)	% who feel senior leaders view the level of employee health and wellbeing as an important indicator of the organisation's success	% who feel that their line manager cares about their health and wellbeing
38.3	25.0	10.3	67.3	36.2	70.5
35.5	19.8	8.0	54.4	56.3	78.5
33.2	16.7	7.0	53.3	60.9	80.2
36.0	22.3	8.0	58.6	56.9	79.3

Green = better than average, **yellow middling**, **red worse**

BHW: Messages from 2018 UK cohort





- 🍏 Analysis of 26,432 employees in 129 organisations
- 🍏 Average days lost due to absence and presenteeism, per employee per year, **35.6** days
- 🍏 Best-performing company in survey, Nomura **18** days
- 🍏 55 mins of every lost productive hour is due to presenteeism
- 🍏 **Over one third of productivity loss is related to work stress and lifestyle choices**
- 🍏 Average productivity loss per employee translates to **£81bn annual cost** to UK economy

Mental Ill-Health – its relationships



A strain-reducing company culture

Considers:

-  Mental health problems, and critical life events, as normal aspects of a mentally healthy life.
-  Good mental health to be reflected by mature (open, active and self-critical) handling of such problems.
-  Companies should not 'punish' mental health problems – but instead reward good problem-solving behaviour...
-  ...and reward problem-addressing behaviour in managers.

Leaders set this tone

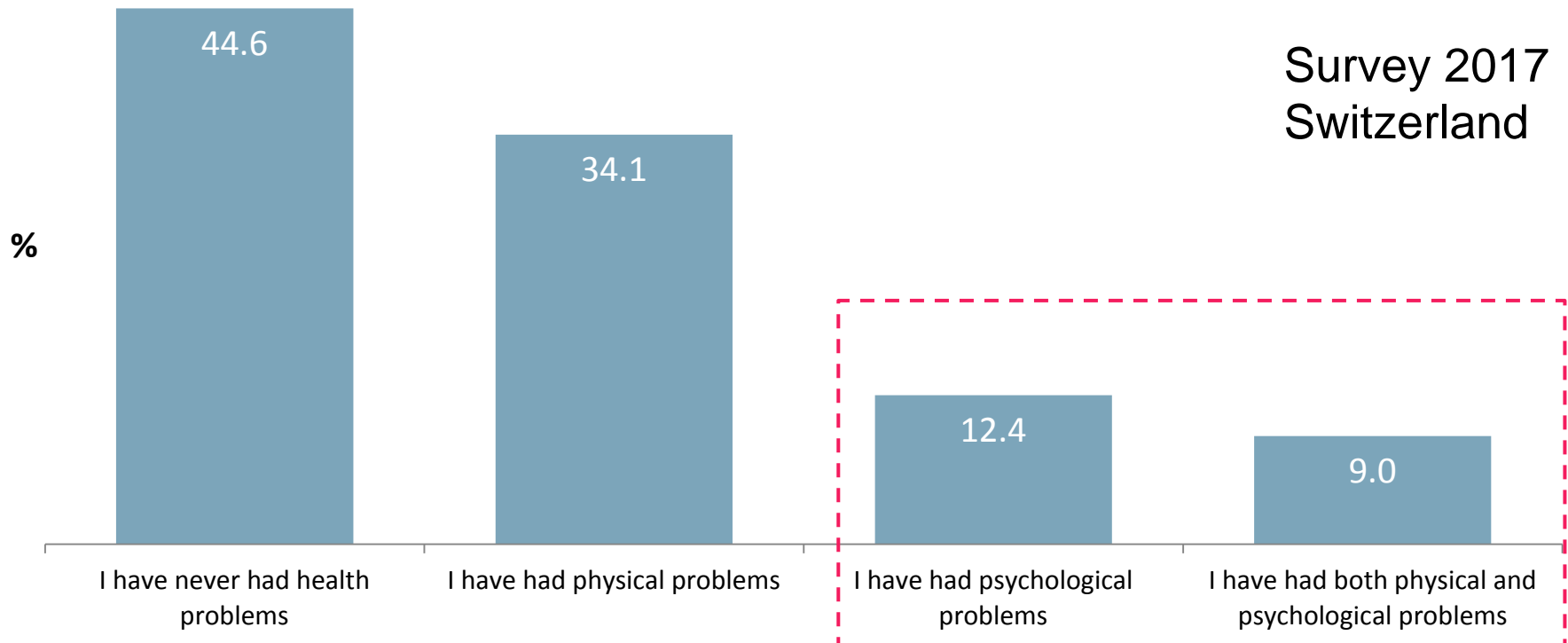
Line Managers are crucial

- Recruit/promote those with strong interpersonal skills
- Induct them on organisation's approach and facilities
- Incentivise them to act as role models for wellbeing...
... and encourage open culture around mental health.
- Include interpersonal skills as key training component.
- Include wellbeing of their people in appraisals.
- Equip them to look after own health & wellbeing.
- Develop simple pathways to further support



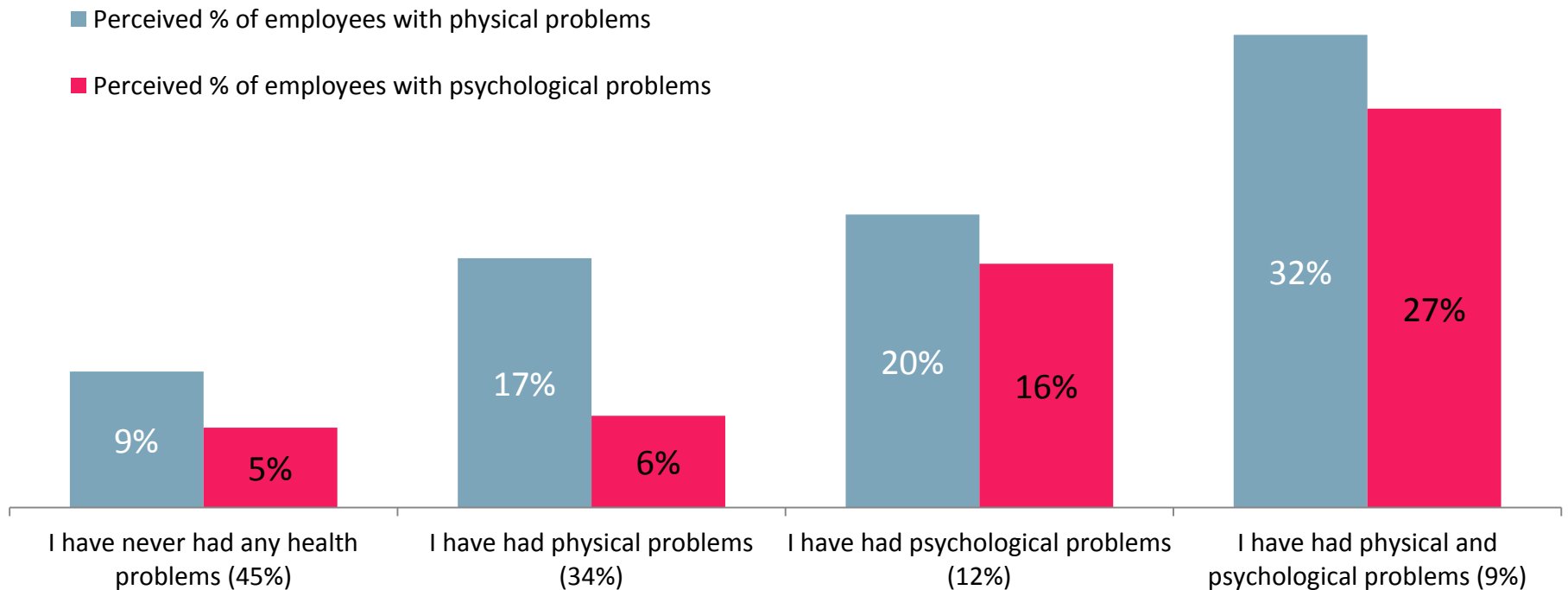
Line Managers' Health and Wellbeing

Have you ever had health problems yourself that affected your working capacity?



- Selected slides from a presentation by Niklas Baer at the OECD Wellbeing Week, October 2018
- Data from a 2017 survey of 1,540 managers of Small or Medium Enterprises in the German-speaking part of Switzerland.

Healthy managers' employees



- Selected slides from a presentation by Niklas Baer at the OECD Wellbeing Week, October 2018
- Data from a 2017 survey of 1,540 managers of Small or Medium Enterprises in the German-speaking part of Switzerland.

Conclusion: healthy managers do not have ill employees

A Good Workplace

Key features common to organisations that have good **Mental Health, Wellbeing, resilience and engagement**:

- Visible senior leadership
- Board-level or equivalent engagement
- Accountable managers throughout organisation
- Enabling engagement
- Attention to mental and physical health
- Empower employees to care for their own health
- Evaluation and improvement

Otherwise, the fresh fruit and bicycle schemes are ‘sticking plasters’.



Leadership in the National Health Service England



Simon Stevens, CEO, inaugural address **2014**:
‘NHSE employees will need to be:
healthy, both mentally and physically, have good well-being, and be fully engaged in their work towards improved patient outcomes.’

Boorman Review (2009):

‘A healthier workforce means fewer avoidable days off sick, reduced levels of presenteeism and a more efficient workforce. Healthier, happier staff means better patient care, the main NHS priority.’

The Review recommended 20 actions to achieve this.



NHS Five Year Forward View

October 2014

Proposals, develop an 'offer' for the NHS :

- **measure staff health and wellbeing, know the data**
- implement NICE guidance on workplaces, especially for mental health
- promote interventions that seem to work e.g. the Workplace Wellbeing Charter and Global Corporate Challenge,
- strengthen OH with the Faculty of Occupational Medicine
- cut unhealthy food, and provide healthy options at night.

Summit 10 December 2014







Creation of a Group

- with public, private, academic and third-sector membership, to devise a way forward.

This became the **Advisory Board**



Initial scoping with 15 Trusts

-  What does your Trust offer on promoting staff health and wellbeing ?
-  What is the cost and scale of investment ?
-  How much participation is there in your programme ?
-  Do you promote or incentivise the programme ?
-  How do you evaluate it ?
-  What is the outcome ?

Responses – working with 15 Trusts

- 🍏 Most Trusts consulted Staff
- 🍏 Many initiatives – but evaluation scanty, so hard to prioritise
- 🍏 **CEO involvement rarely mentioned (some exceptions)**
- 🍏 **Little discussion of Board-level involvement**
- 🍏 **Little direct focus on line-manager training**

- 🍏 Most offer healthy food choices, fitness classes etc.
- 🍏 Participation patchy
- 🍏 Most Trusts target Mental Health and MSKs


- 🍏 Incentives: little evidence of use
- 🍏 **Evaluation mostly of secondary effects, inadequate baseline data**

Announcement 2 September 2015

 CEO Simon Stevens announced a **major drive to improve the health and wellbeing** of NHS Staff, aiming to benefit staff and taxpayers.

‘... frankly, the NHS needs to put its own house in order.’





 NHS organisations to be **supported to help staff stay well.**

 **The £5m initiative has three pillars**

- **the drive for improved NHS staff health**
- new national OH service for GPs under stress
- action by NHS and PHE to raise catering standards.

Development of a Framework for Improvement

A practical tool to support Health and Wellbeing of NHS Staff

-  developed by the Healthy Workforce team in NHS England with an expert Advisory Board.
-  NHS demonstrator sites co-designed and tested content.
-  **Toolkit** sets out **14 elements** covering enablers and health interventions (inc. MH) – describing good practice, giving case studies and guidance on implementation.
-  A **diagnostic tool** to benchmark quickly on each element, with 3 basic questions on each, to identify gaps.

(To be found on NHS Employers and NHSI websites)

NHS Workforce Health and Wellbeing Framework

Organisational Enablers



Health Interventions

Mental Health



Musculoskeletal



Healthy Lifestyles



Improvement

NHSE Staff H&WB Programme

73 Trusts including:

- 🍏 All 10 Ambulance Trusts
- 🍏 12 Improvement Sites
- 🍏 15 Trusts facing attendance challenges in past year
- 🍏 36 Fast-track engagement via existing Retention Improvement Programme



Intention:

Develop and share thematic interventions

Board Engagement and development

Line Manager development

Data collection and quality standards

All Trusts: Health and Wellbeing Framework, access to thematic interventions, case studies, and resources developed during the programme.

Some tentative answers!

- Where is Health and Wellbeing in the UK ?
Patchy. On a journey
- What could/should organisations be doing ?
 - understanding their data
 - addressing the essentials
 - not trying 'sticking plasters'
- Where is organisational health and wellbeing heading ?
I hope towards Total Worker Health and Wellbeing
- What is the role of HR in all this ?
To play an integral part.