



Wellbeing and Workforce Development

**Embracing the
Sustainability Challenge**

Zoom, 9 June 2021

**Creating Health and
Wellbeing at Work**

Dame Carol Black

**Expert Adviser on Health and Work
NHSE and Public Health England**

Chair, Centre for Ageing Better

Content

- Looking after the Health and Wellbeing of Staff
 - the generic essentials
- The needs of front-line workers
 - during and after COVID

The essential ingredient



“ People not assets make organisations thrive. ”



Ane Ugglå

Swedish-Danish business woman

Chair, A.P.Moller Foundation

A healthy worker

An individual's ability to be a safe, effective, productive worker depends on their:

- physical health
- mental health, and
- **wellbeing.**



Many factors influence these parameters, but the employer is vital.

Creating 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”**

Total Worker Health

SafeWell



- “ Integrating health protection and promotion will create synergy and enhanced overall health and wellbeing of the workforce, while decreasing the likelihood of workplace injury and illnesses.”
- “ Having a psychologically-healthy workplace and having a profitable and sustainable business are linked.”

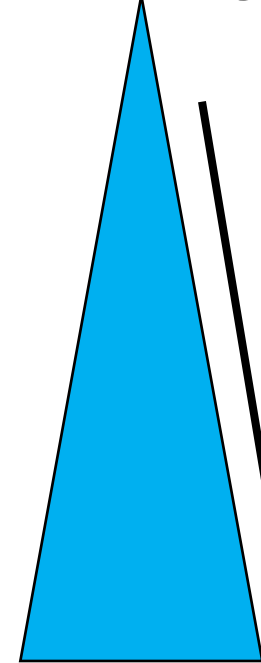
NIOSH, USA

See also Sorensen, G. et al. *Integration of Health Protection and Health Promotion*, J Occup Environ Med. 2013; 55(12).

All workers must be included

- **All workers contribute to an organisation's performance**
 - and success.
- There is linkage, in typical pyramid-shaped organisations, between poorer health and wellbeing (mental and physical) and lower motivation and engagement at work.

Top management



Usually declining income and health

With many more workers at the foot of the pyramid, health and wellbeing are not uniform across the workforce – Covid has exposed this forcefully.

Many different sectors

NHS



Railways



Construction

**Each sector defining
its own needs.**



Police Service



The City
(Mental Health Alliance)

But similar things prevent individuals from working or working well



Social determinants of health

Common Mental Health problems

Common MSK problems

Chronic medical conditions (multiple?)

Major functional incapacity



Stress, anxiety depression

Back pain, neck pain, soft-tissue rheumatism

Diabetes, lung, heart (obesity-related), cancer, inflammatory arthritis

Major trauma, addictions, neurological disabilities.



Poor workplaces, poor work, poor managers

Workplace Health and Wellbeing

The Essentials :

There is **no positive** health and wellbeing at work without :

- **Leadership** from the top of the house.
- **Line Manager** capability and support.
- **Board-level Engagement** with Staff Health and Wellbeing.

Organisational culture is crucial.

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

Recommendations by
Business in the Community (BitC) 2016



Culture is key - manager support is crucial

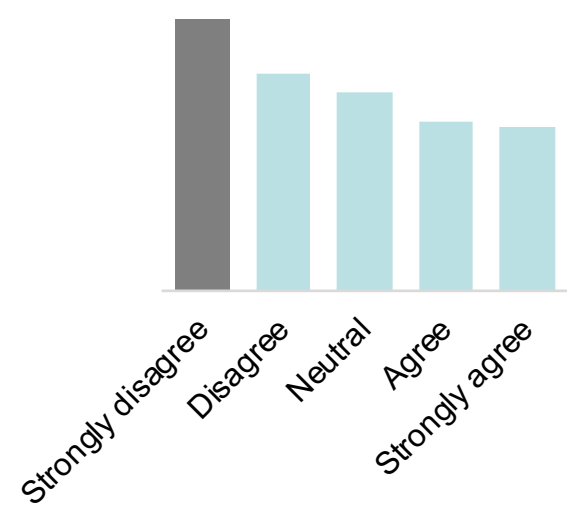
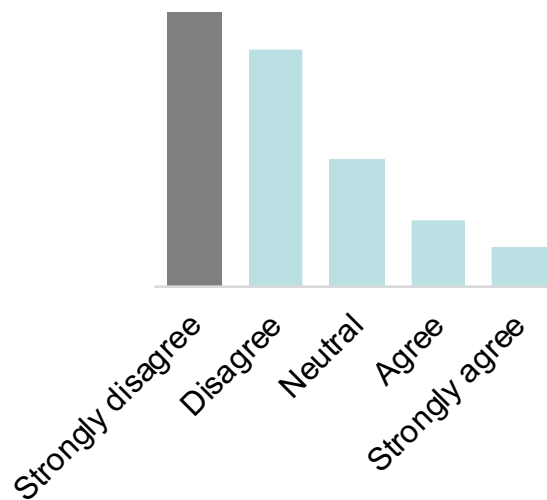
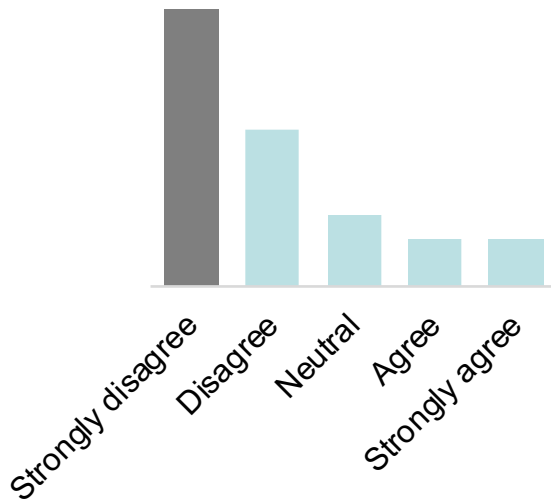
BHW survey 2019

“My line manager cares about my health and wellbeing....”

Symptoms of depression

2 or more stress factors

Sleep <7 hours per night



[Relative strength of disagreement or agreement with the proposition is indicated, for each group of employees with risk factors, by the pattern of blocks.]

2019 RSSB (rail safety)

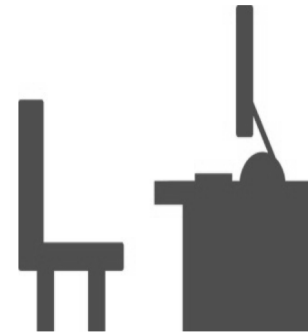
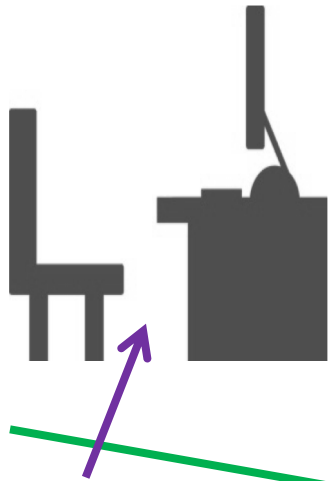
Randomised Controlled Trial



Understanding the conditions for successful Mental Health training for managers

- Face-to-face training, or e-learning, compared with no training
 - 215 participants, many had managed MH issues at work
 - Learning outcomes (knowledge, confidence talking about MH, preparedness to take action) compared, then and 6 weeks later.
-
- Little difference between face-to-face and e-learning.
 - **Significant immediate improvement** on all three outcomes, sustained for knowledge and preparedness.

Absence and 'presenteeism'



+



= loss

2005 Sickness
Absence considered
the measure of
workplace health,
and an important
driver of productivity.

2010 Presenteeism
enters the picture. A
strange beast – what
did it mean ?

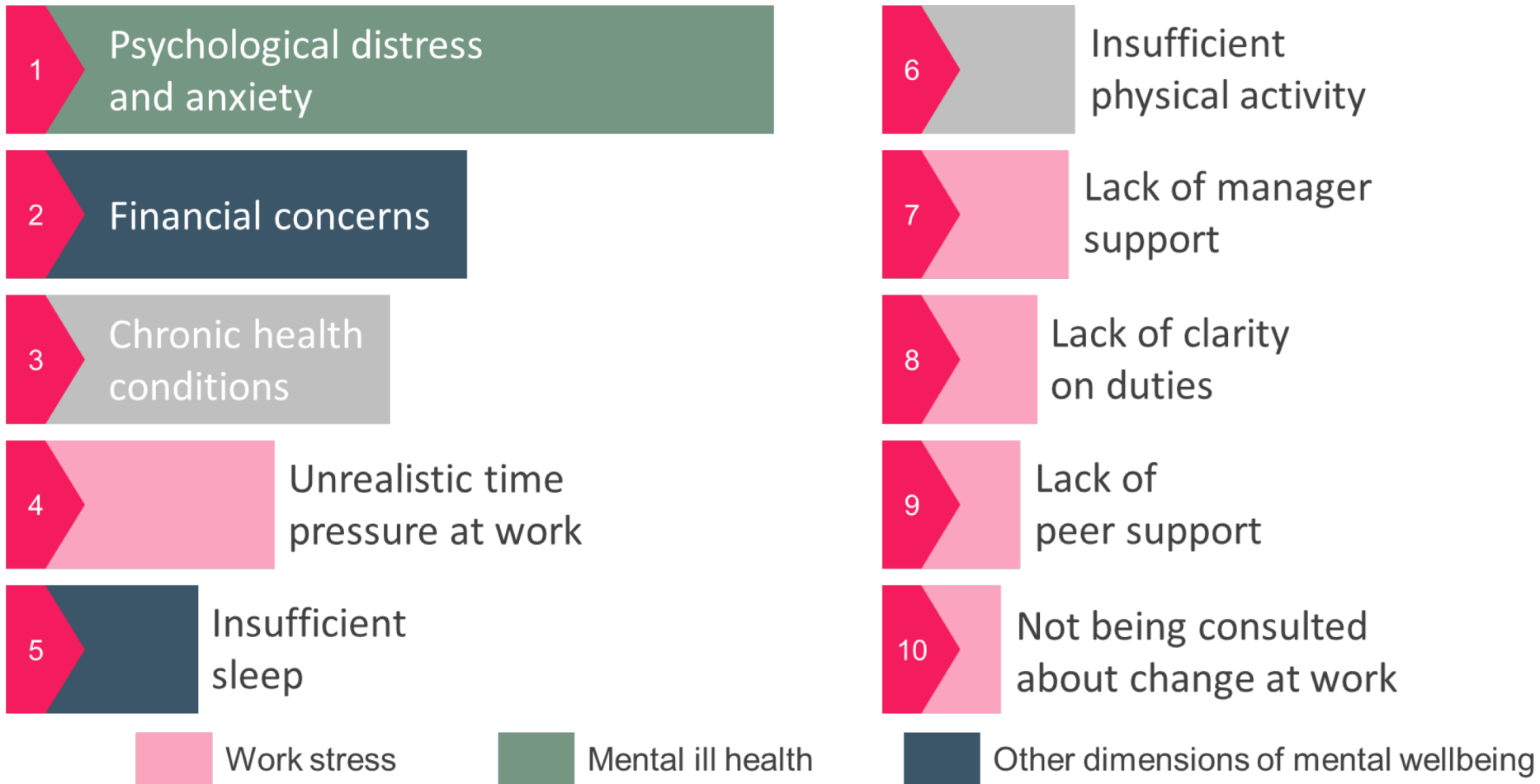
2014 SA + P is
annual loss of
productivity on
health grounds,
P most important

**2019 Presenteeism
and mental ill-
health strongly
correlated.**

Declining relative importance
of absence.

Top 10 drivers of presenteeism

Size of bar represents relative significance for presenteeism



Therefore ...

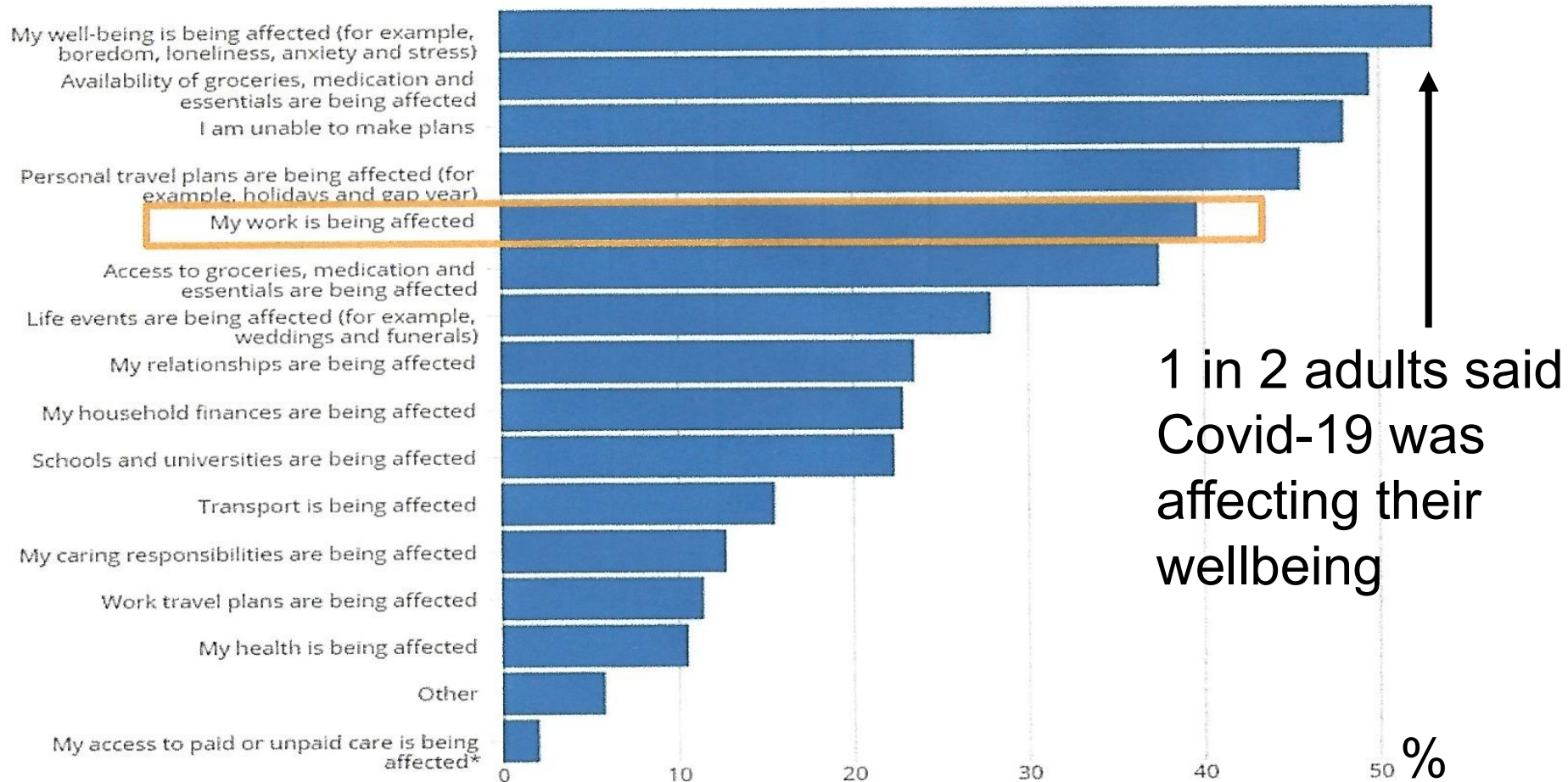
- **Know** your own staff, data and demographics – organisations vary.
- Create the right organisational **enablers**.
- Know the **dimension/extent** of your challenges, and the **most exposed** groups.
- **Ask staff** what they think will work best.
- Use **evidence-based** or **best practice** interventions
- Work hard on **participation**.
- Collect data and **evaluate**.

And then came Covid-19

- **Front-line workers** Increased health risk
Physical and mental burnout
- Home workers The good and the bad
- Furloughed workers Deconditioned to work
Anxious about the future
- Loss of jobs A large mental health deficit is
associated with unemployment

Return to work : complex, challenging, frightening

Deterioration of Wellbeing – the most-cited impact of coronavirus



Source: ONS (April, 2020). Coronavirus and the social impacts on Great Britain.

Gender gap in UK mental wellbeing in the Covid-19 outbreak

Ben Etheridge and Lisa Spantig, COVID Economics, June 2020

- Document decline in UK mental wellbeing after onset of the pandemic, twice as large for women as for men.
- They seek to explain this gap by exploring gender differences in various aspects of life, work, finances and responsibilities.
- Differences in family and caring responsibilities can explain part of the gap, but the bulk is explained by social factors such as loneliness.

Sector-specific: Front-line Workers

e.g. Health and Care Workers Long-term effects of crisis

Evidence strongly suggests that **how staff are supported** as the crisis recedes is crucial to psychological H&WB.

Essential elements : (Professor Neil Greenberg March 2020)

- thanks, appreciation, informal colleague gatherings
- proactive follow-up of absence from work
- Mental Health and welfare information
- structured interview on return to post-Covid work
- 12-month follow-up
- consider vulnerable groups
- secondary stressors
- time for reflection.



REACT_{MH} training – supervisor confidence

NHS Our NHS People

Search



Home

Pathways

Guides and bitesize learning

Blog and notes

Events

Support now

Sign in

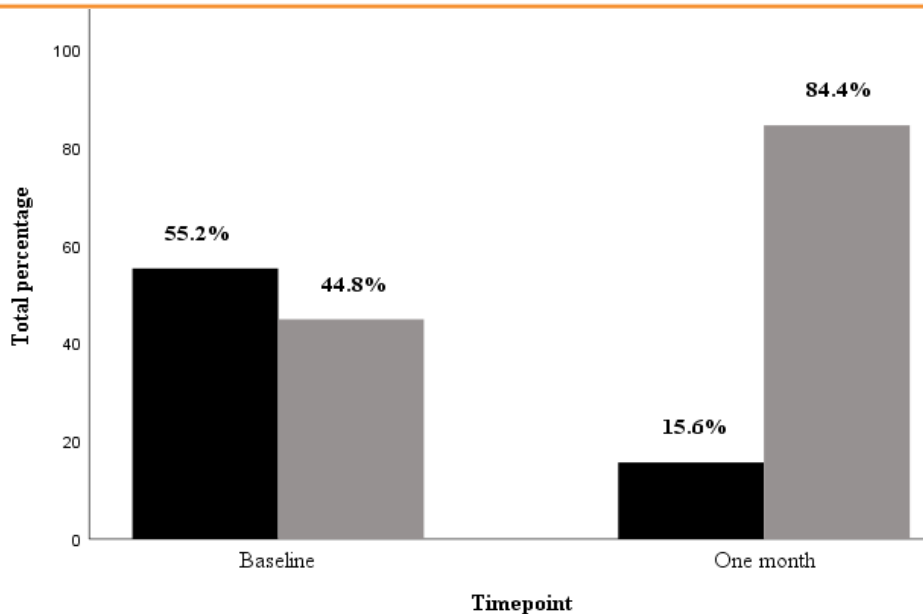
REACT Mental Health[®] conversation training



Courtesy Neil Greenberg

One hour's remote active listening skills training led to a substantial improvement in supervisors' confidence to recognise, speak with and support distressed colleagues, which was still evident one month after the training

REACT_{MH} evaluation



Black = Under-confident supporters

Grey = Confident supporters

Occupational Medicine
Doi:10.1093/occmed/kqab023

An evaluation of REACT_{MH} mental health training for UK healthcare supervisors

R. Akhanemhe^{1,3}, S. Wallbank² and N. Greenberg^{1,3}

¹King's Centre for Military Health Research, Department of Psychological Medicine, Institute for Psychiatry, Psychology & Neuroscience, King's College London, London, UK, ²Department of Health and Social Care, Skipton House, London, UK, ³Health Protection Research Unit, Weston Education Centre, King's College London, London SE5 9RJ, UK.

Correspondence to: N. Greenberg, Health Protection Research Unit, Weston Education Centre, King's College London, London SE5 9RJ, UK. Tel: +44 (0)20 7848 5351; fax: +0207 848 5428; e-mail: neil.greenberg@kcl.ac.uk

Summary: Expert advice on recovery



Recovery needs for NHS planning

inc. for those with traumatic experiences

- Line managers to imbue sense of being valued and belonging
- Avoiding a 'one size fits all' approach
- Plan to be deliverable, fair, consistent and sustainable
- Staff to have sense of 'permission', for leave and support
- Staged return to duty including a period of leave
- With right support, staff may 'grow', and the exhausted return

Basic pattern for recovery, when some require more specialist support and recovery time

- **Acknowledge what all staff have been through**, thanking and backing them
- **Maintain and embed existing wellbeing offerings**
- **Skilled support of reflective practice** (Peer Support, Schwartz)
- **Proper time off to recover**, flexing/extending contractual leave
- **Return to work interview** to identify recovery needs, and career and training requirements
- **Provide specialist psychological support when needed**

What to do for key workers

- Do not over-medicalise
- Adopt 'nip it in the bud' approach
- Build team support as a priority,
inc. psychologically-savvy supervisors
- Provide mental health supervision and support
(Proximity, Immediacy, Expectancy, Simplicity (PIES))
- Recovery and evolution:
 - Thanks
 - Graded return to work
 - Time for reflection
 - Supervisory rtw interviews
 - Active monitoring (inc. self-check)
 - Evidence-based care

The Future World of Work is Uncertain ..

... **BUT Do** ...

- Ensure that Mental Health is a top priority
- Demonstrate compassionate leadership
- Develop managerial capability and flexibility
- Ensure clear communication
- Listen and respond
- Use evidence-based interventions (PHE list), monitor outcomes, and report.
- Realise that presenteeism may be a great problem
- Ensure risk-assessments in a prevention-based approach

The Future of Work after COVID-19

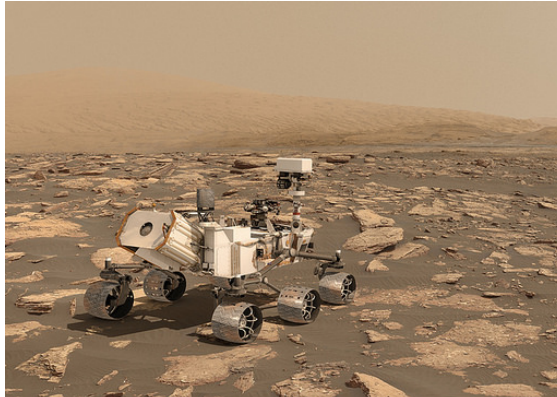
McKinsey and Company, March 2021.

COVID-19 has accelerated three broad trends that may reshape work after the pandemic recedes.

- Remote and virtual meetings are likely to continue, albeit at less intensity than at the pandemic's peak.
- COVID-19 may propel faster adoption of automation and AI, especially in work arenas with high physical proximity.
- The mix of occupations may shift, with little growth in low-wage occupations.

Final thoughts

The unknown :



“ In times of change learners inherit the Earth, while the learned find themselves beautifully equipped to deal with a world that no longer exists.”

Eric Hoffer (1902-1983)