

Manchester Health and Wellbeing Board Workplace Health Baseline Assessment

Su Fowler-Johnson
Dr Claire Harris
(Liz Kundi/Dr Penny Cortvriend)

5 July 2017



Overview

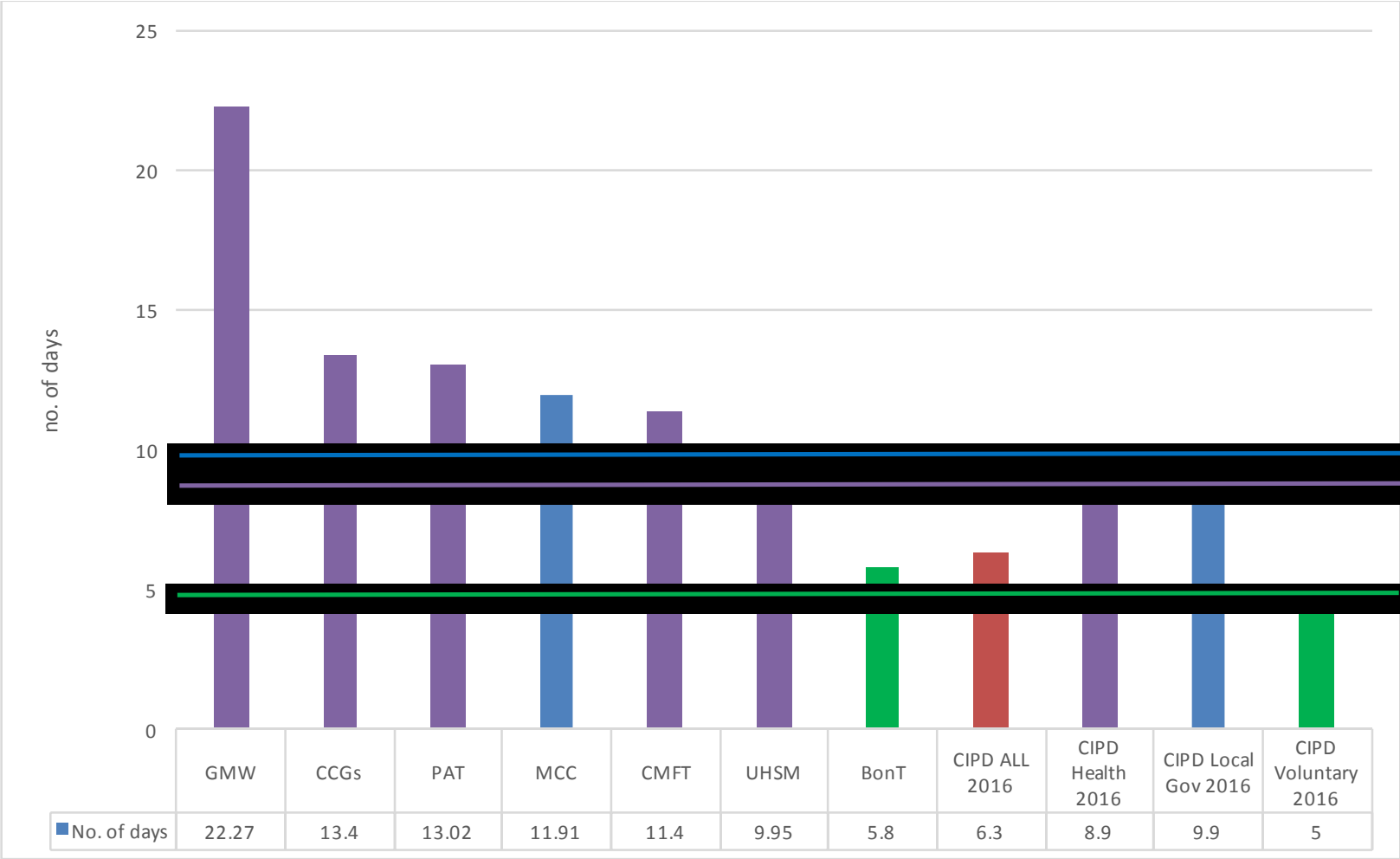
- Aims of project
- Key findings
- Recommendations
- Conclusions
- Q&A



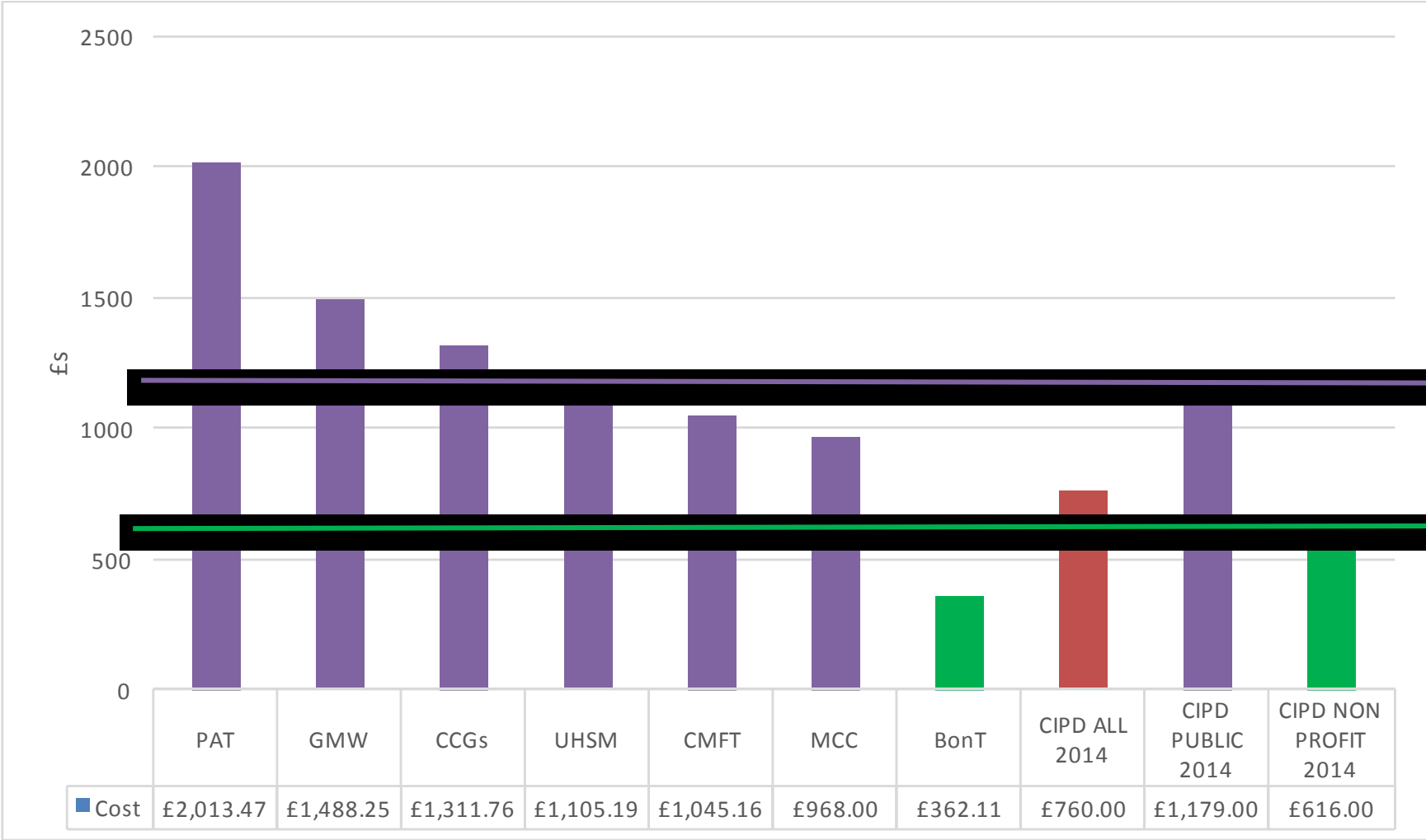
Aims of the project

- Health and wellbeing self assessment framework which includes focus on disability and mental health
- Report and action plan for each organisation - compliance, gaps and actions – *7 individual site reports*
- Report and recommendations for the Manchester HWB Board and its Executives
- Series of case studies and examples of good practice drawn from Manchester

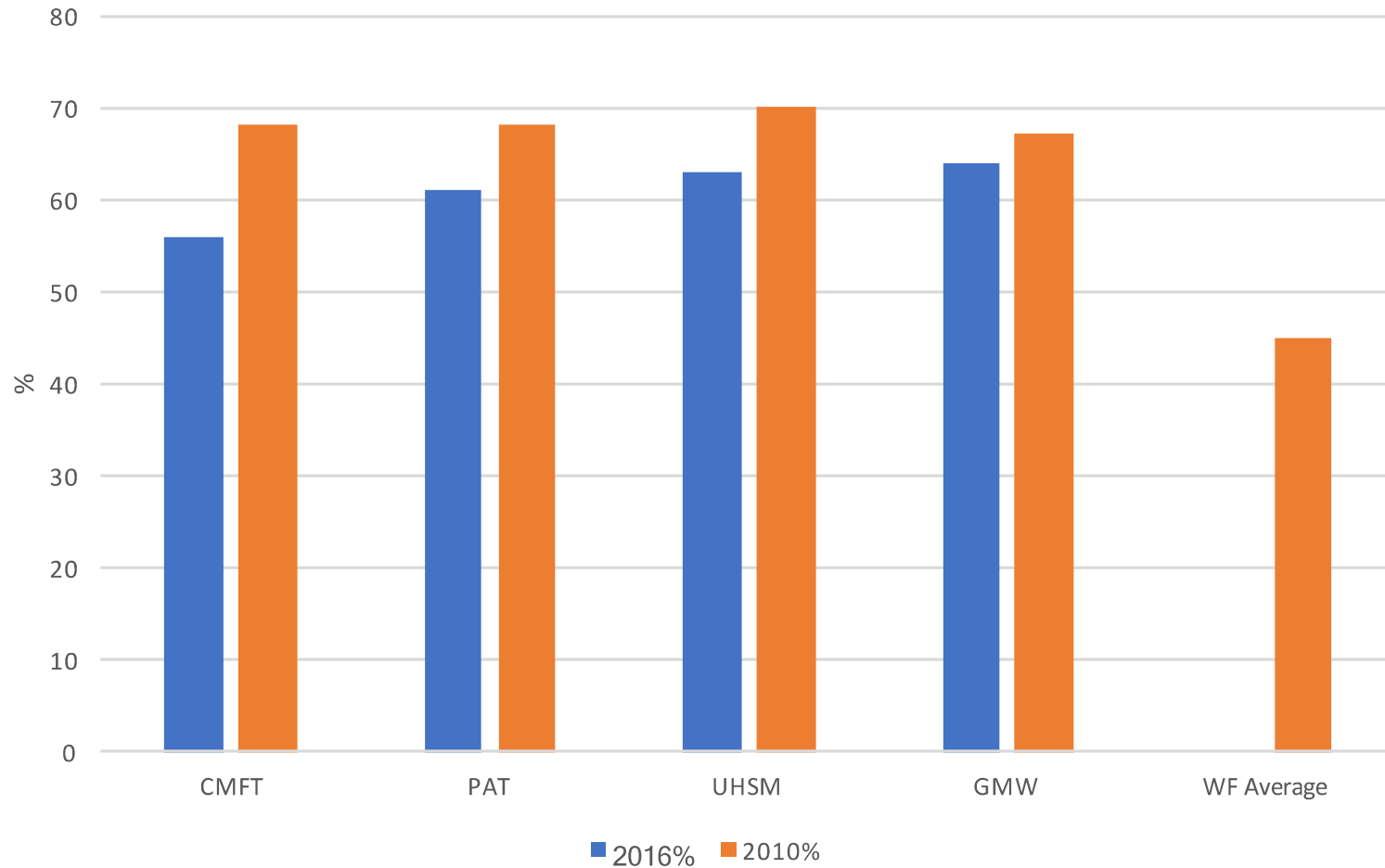
Key Findings – average number of days lost due to sickness absence per employee per year



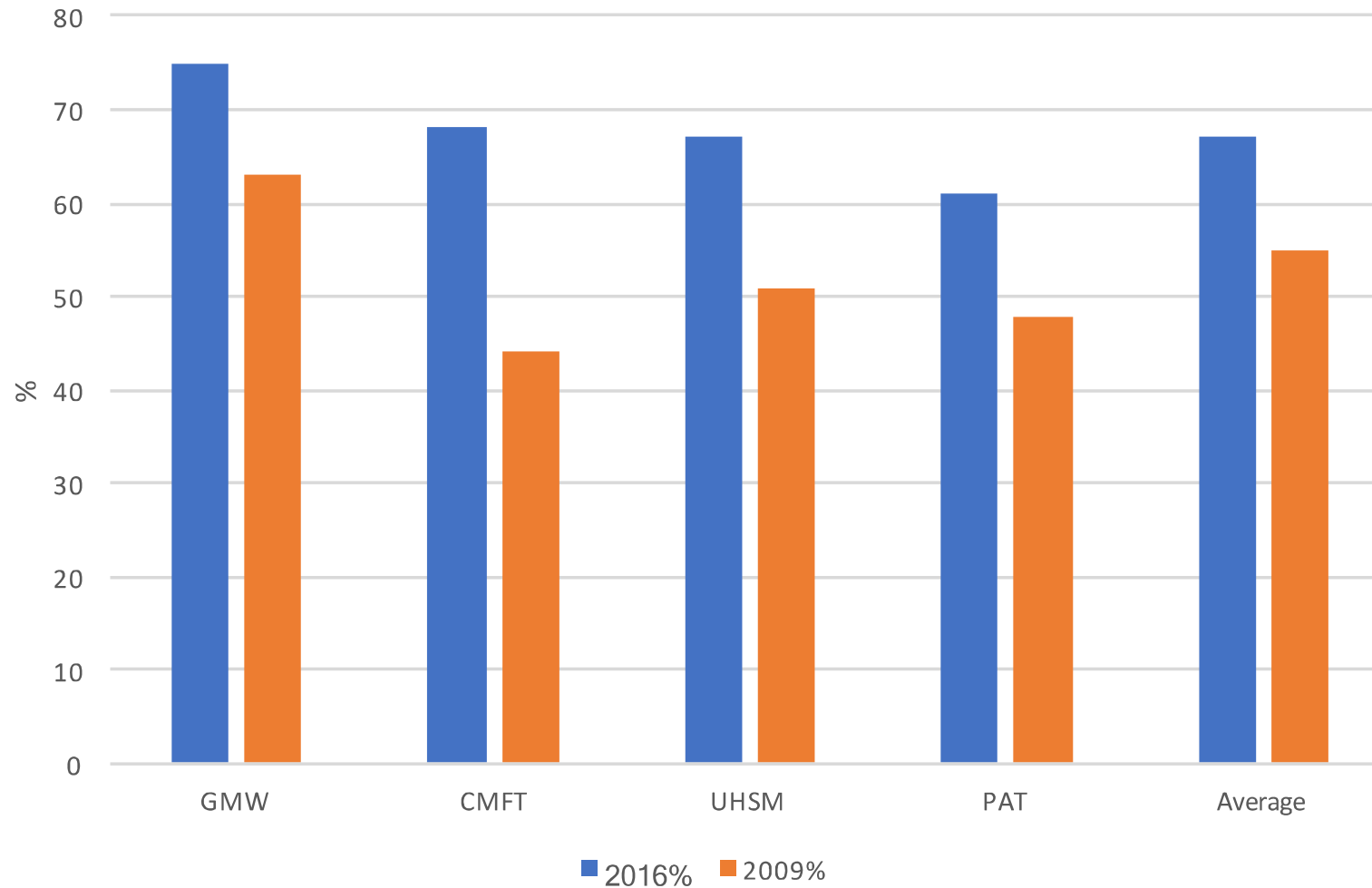
Key Findings – average cost of sickness absence per employee per year



Key Findings – sickness presence



Management interest in staff HWB



Key messages from HWB outcome data

- All participating organisations have higher average number of days lost due to sickness absence per employee per year compared to national data
- Some participating organisations have higher than average costs of sickness absence per employee per year compared to national data
- Mental ill health, musculoskeletal and disability related illness (top 3 reasons)
- Higher levels of sickness presence compared to national data
- Perceived management interest in health and wellbeing has risen (in participating NHS Trusts) since the Boorman review in 2009
- There are differences in how disabled and non-disabled employees in participating NHS Trusts experience work
- Smaller organisations (CCG's, BonT) have higher engagement scores and score higher on recommended as a place to work, yet also have highest turnover rates

Indicator 2 – HWB leadership behaviours

Organisational change managed and lead

Senior leads for change, with policy and protocol
Service change consultation meetings

HWB discussed at team and individual level

Each directorate has HWB action plan which is discussed at team meetings
Supervision policy and practice includes discussion around the 5 ways to WB

Senior leaders hold listening groups

Exec team lead listing groups with HWB as focus

Leaders involved in HWB action planning

Executive lead for HWB

Full range of HWB policies can be applied

Training is available for all HWB related policies

Senior leaders role model HWB behaviours

Leadership behaviours are espoused by the organisation are supportive of wellbeing (e.g. "Encourage the Heart" is the leadership behaviour relating to HWB)
Not organising meetings or sending email OOH

Case studies

[Team based assessment \(Glaxo\)](#)

[Health and Wellbeing Champions \(PAT\)](#)

Call to Action

Health and Wellbeing Board

- Adopt HWB CQUIN standards 2016 or equivalent across Manchester organisations
- Hold HWB Executives to account for developing plans to achieve improved health and wellbeing outcomes within their organisations

Health and Wellbeing Chief Executives

- HWB Executives in a commissioning role ensure that providers deliver on the HWB outcomes e.g. CQUIN or equivalent
- Ensure that their organisations review and evaluate the impact of HWB interventions
- Executive leaders identify specific personal HWB objective and role model positive HWB

Org change managed and lead	CCG	GMW	UHSM	CMFT	BonT	MCC	PAT
Leaders involved in HWB action plan	GMW	UHSM	MCC	PAT	CMFT	BonT	CCG
HWB discussed in team meetings	GMW	UHSM	MCC	PAT	CMFT	BonT	CCG
HWB discussed in 1:1's	GMW	UHSM	MCC	PAT	CMFT	BonT	CCG
Full range of HWB policies applied	GMW	UHSM	MCC	PAT	CMFT	BonT	CCG
Senior leaders hold action groups	CCG	GMW	UHSM	MCC	PAT	BonT	CMFT
Senior leaders model HWB behaviours	CCG	GMW	UHSM	CMFT	BonT	MCC	PAT

Indicator 4 – Mental Health and Disability

Call to Action

Health and Wellbeing Board

- Endorse the call to action in indicator 4: mental health and disability (Get In, Get On, Get Further)
- Endorse the Manchester All Age Disability Strategy and ensure system and organisational support for its delivery
- Work in partnership to set out new standards of care for people with mental health conditions in work
- Ensure that all Manchester organisations undertake the preparatory year for the implementation of the Workforce Disability Equality Standards (2018)

Health and Wellbeing Chief Executives

- Implement call to action in indicator 4: mental health and disability (Get In, Get On, Get Further)
- Appoint an organisational lead for the Manchester All Age Disability Strategy

Recommendations – 6 high impact changes

	Action
R 1	Setting common HWB improvement objectives that bring about positive engagement and action with staff for across Manchester organisations
R 2	Promoting HWB for all care organisations (including 3 rd sector) by pooling resources and learning from each other across Manchester to support the delivery of common evidenced based HWB interventions and maximising simple and cost effective behaviour change interventions.
R 3	Encouraging all organisations across the Manchester to use the HWB baseline assessment and agree common data sets for measuring outcomes
R 4	Developing a culture that encourages a healthy work-life balance through senior leadership role modelling, supportive policies, processes and structures
R5	Emphasising the focus on mental health and disability of part of a wider health and wellbeing approach by monitoring the implementation of the Workforce Disability Equality Standards and supporting the delivery of Manchester's All Age Disability Strategy
R6	Creating a common HWB branding and logos on everything related to HWB across Manchester

Conclusion

- The economic case for focussing on HWB across Manchester is clear
- HWB starts at work and that responsibility lies both with staff member and employer
- The City of Manchester has an opportunity to be a leader and a positive force for change in relation to establishing a strategic approach to employee health and wellbeing across the City.
- There is a real opportunity to share best practice and enable organisations to learn from each other.
- Some of the actions required will be simple and quick to implement (e.g. simply asking managers to ask about health and wellbeing costs nothing), others may take longer and many could be provided by pooling resources across the system
- Working together will be fundamental to improving the health and wellbeing of staff in organisations across Manchester City and a coordinated approach will ensure that staff feel more valued, healthy and engaged at work.

Q&A