

<b>Title</b>	"WELL-BEING WORKS" – PILOT PROGRAMME			
<b>Meeting</b>	Board of Directors			
<b>Date</b>	29 March 2016			
<b>Executive Summary</b>				
<p>The attached paper provides a brief summary of the work to date and the initial feedback from the Well-being Project. The paper suggests a strong link between psychological well-being, staff motivation and staff attendance, and concludes that the level of psychological well-being in the pilot areas is not as high as it should be.</p> <p>A proposal is made that <u>in addition to tackling the Trust's absence problem</u>, we embark upon the next stage of the well-being project in order to improve the attendance culture.</p>				
<b>Recommendation</b>				
<ol style="list-style-type: none"> <li>1. Board members are recommended to support the progression of this project</li> <li>2. Board members agree to a 90 minute on-site workshop to fully understand this data and give full commitment to the project.</li> </ol>				
<b>Report Author</b>	Mr I H Frame			
<b>Executive Director/ Sponsor</b>	Mr I H Frame			
<b>Purpose of paper</b>	<b>Information</b>	X	<b>Discussion</b>	X
	<b>Decision</b>	X	<b>Assurance</b>	X
	<b>Specific action</b>			
<b>Recommended following approval at:</b>				
<b>Implications</b>	<b>Staffing</b>	X		
	<b>Finance</b>	X		
	<b>Legal</b>			
	<b>Public engagement</b>			
	<b>Partnership</b>	X		
	<b>Communication</b>	X		
	<b>Equality &amp; Diversity</b>	X		
	<b>Clinical</b>	X		
	<b>Patient Safety</b>	X		

<b>Risk assessment and mitigation (include risk register reference if appropriate)</b>	
<b>Link to STFT Business Plan</b>	
<b>Link to CQC outcome</b>	12, 13, 14
<b>Link to Board Assurance Framework</b>	8.2
<b>Link to Strategic Risk Register</b>	

**REPORT TO THE BOARD OF DIRECTORS**  
**WELL-BEING WORKS – PILOT PROGRAMME**

**1. INTRODUCTION**

- 1.1 In November 2015 we embarked upon a pilot programme in conjunction with Drummond HR to assess the current and potential psychological well-being of four areas in the Trust, covering 300 staff.
- 1.2 Individuals in these areas were asked to complete an online well-being questionnaire, developed by Newcastle University and Drummond, which has been proven to be able to predict to a high level of accuracy the likelihood of psychological illness.
- 1.3 The four pilot areas are:-

Catering  
Theatres/Ward 9  
Community Nursing – Sunderland North  
Community Nursing – Sunderland West

These areas were chosen so that there was a mix of clinical/non-clinical; hospital/community; high sickness absence/low sickness but high dissatisfaction.

- 1.4 The response rate was poor – which may be an indicator in itself – but sufficient for Drummond HR to be assured that the data is representative.

**2. FEEDBACK**

- 2.1 There is a significant amount of detailed analysis available, which we would like to share with the Board but, for the purposes of this brief report, we would highlight the following:-
- 2.1.1 42% of respondents are thriving  
37% of respondents are living  
21% of respondents are surviving

**THRIVING**

Feeling happy and satisfied at work, contributing fully, and coping with all of the pressures.

HIVING

Still attending for work but not working at full capacity, getting by, possibly cutting corners, anxious.

SURVIVING

Possibly absent already, but certainly with the potential to go off sick, disengaged, just about getting through the day.

Typically, in an organisation where psychological well-being is good, and therefore attendance is good, an organisation would have 80% of staff “thriving”.

2.1.2	“Survivors” feel that they do not have sufficient job independence	(83%)
	“Survivors” and “Hivers” suffer from job stress	(75%)
	“Survivors” experience low moods often	(92%)
	“Thrivers” have a good work/life balance	(56%)
	“Thrivers” adopt a positive and healthy lifestyle	(64%)

**3. UNDERLYING THINKING**

- Staff well-being directly affects patient care (M West 2011)
- Staff well-being is closely allied to job satisfaction, decision making, working relationships, staff turnover and costs
- Job satisfaction and mental health are closely linked
- Leaders and managers create the psychological environment in which staff carry out their work.
- There are significant and increasing demands on staff
- Staff well-being is now a priority for the NHS (Stevens/Carter)

**If the Trust can improve the well-being of staff, then there are direct benefits, not only to staff, but to patients and the Trust.**

**4. ATTENDANCE –v- ABSENTEEISM**

4.1 It is well known by Board members that we have a sickness absence problem, with rates currently running at 6.2%, and a likely year average of 5.8%. These rates are higher than other acute Trusts in the North

East. The Well-being Project is about attendance, and were this next stage of the scheme to be supported, we would envisage seeing an increase in attendance rates within 6 – 12 months. Clearly, we cannot wait 6 – 12 months to see progress in this area. As a separate piece of work, a joint management/staff side Sickness Absence Panel is working together to deal with the actual absence problem and new ideas have already been agreed which we anticipate resulting in more immediate results.

4.2 It is vital that we tackle both absenteeism and attendance. The results through the Well-being work may take longer to achieve but will have a longer lasting effect.

## 5. **OBJECTIVE OF NEXT PHASE OF THE PROJECT**

Continuing to work with our four pilot project areas, Drummond HR together with our internal resources will undertake a programme of activity whereby the 20 – 30 managers/team leaders in these areas will understand psychological well-being, will understand the link between their behaviour/style and psychological well-being ..... and its link to attendance. There will be a demonstrable improvement in these areas in relation to attendance and job satisfaction and morale. The Board should then choose to roll out the programme incrementally.

## 6. **THE NEXT PHASES OF “WELL-BEING WORKS”**

6.1 Raise understanding of the data, its significance and impact with the Board, senior managers, team leaders and trade unions.

- Initial feedback from senior managers and trade unions has been very supportive.
- This next stage would require 1.5 hours with the Board and half a day with the managers/supervisors in the four areas.

6.2 Learn how to look at the problem in a different way.

- A two day programme for pilot areas, on “Adopting Psychological Safety”

6.3 What will take place?

- Monthly Board level report
- Visible Board presence in pilot areas
- Managers implement planned changes to the way they operate
- Managers implement top 5 items that “make a difference” for their teams
- Managers adopt a proactive approach to those at risk of absence or presenteeism, creating a climate of attendance.

#### 6.4 Implementation and Co-ordination

- Board identifies opportunities across the Trust for replication
- Staff well-being should be integrated into the strategic priorities of the Trust
- Board monitors the project outcomes.

#### 7. **COSTS**

7.1 The implementation of this next stage of the programme is estimated at £50K or £60K if we use psychometric tests

7.2 Drummond HR are working with two Trusts in London, Barts and Kingston. We are their Northern showcase Trust. Soundings have been taken with Public Health England at a very senior level and there is a high confidence that a joint bid between the three Trusts would secure sufficient central funding to finance this initiative.

#### 8. **RECOMMENDATION**

8.1 Board members are recommended to support the progression of this project.

8.2 Board members agree to a 90 minute on site workshop to understand the data and give full commitment to the project.

**I H Frame**  
**Executive Director of Personnel & Development**