

## APPENDIX:

# Employee Health and Wellbeing Action Plan 2012-13

### OVERALL AIM:

To improve employee health and reduce sickness absence rates to reflect average levels for County Councils by promoting working relationships and environments that encourage wellbeing and build resilience, with a particular focus on preventing and managing stress and reducing long term absence.

### OBJECTIVE 1 - PROACTIVE PREVENTION OF ABSENCE:

Protecting employees from harm, reducing and managing physical and mental illness at source to avoid absence:

#### a) Building Competency:

Action	Expected outcome / target:	Progress	Risks	Timescale	Status
Ensure <b>linkages into organisational development and transformation agenda</b> to enable NCC managers to be properly and measurably accountable for effective and proactive sickness absence management to support ongoing improvement.	All managers take responsibility for proactively promoting a healthy and safe working environment	Linked into Risk Management, Safeguarding and Health and Safety competency for use in EPDR processes	Lack of management engagement  Subject to monitoring and evaluation	Reinforce through management and leadership development programme in Autumn 2012.	Yellow

#### b) Building Resilience:

Action	Expected outcome / target:	Progress	Risks	Timescale	Status
Reposition reactive approach to Stress Management through a <b>proactive re-focus on organisational “Resilience Building”</b> to ensure that employees have learnt resilient skills and have an increased change of coping with uncertainty and maintaining good health and attendance at work.	<p>Employees engaged in managing their own, individual; reaction to the pressures of change and to changing demands at work</p> <p>Managers engaged in effectively planning and prioritising workloads to reduce stress at source.</p>	<p>Intranet/Frontline magazine launch of principles of resilience</p> <p>Revised stress management policy, guidance and learning materials focussing on resilience.</p> <p>Linked into wider work on cultural change as a vehicle to plan for and mitigate the impact of reductions on remaining staff.</p> <p>Linked directly to management competency framework.</p>	Lack of management and employee engagement	Under development for launch September 2012	Yellow

**C) Promoting Healthier Lifestyles and Proactive Health Surveillance:**

Action	Expected outcome / target:	Progress	Risks	Timescale	Status
<b>Planned programme of activity</b> delivered in or planned for 2012/13 to coincide with national campaigns and awareness weeks: <b>for examples see Addendum.</b>	Employees are given regular and proactive information and support on how to prevent, identify and respond to	Regular well-being events, information and advice on NCC intranet and Frontline Magazine which directly engage	Lack of budget - reliance on cost neutral external / voluntary resources	Ongoing programme, continually updated	Green

Continued use of external resources inc links to web-based sources of expert wellbeing advice and support e.g. NHS	common health conditions and guided towards external professional sources of help and support.	employees in taking personal responsibility for their own physical and mental wellbeing by making life style changes.  Positive feedback and good attendance levels at events to date.	Low level of employee engagement		Green
Appoint and train 6 additional <b>Workplace Health Champions</b> from a wide range of job types countywide, to build on and develop the existing cohort of Workplace Health Champions, Accredited to Royal Society for Public Health Level 2 qualification in Understanding Health Improvement.	Employees are directly informed by peers about healthy lifestyle choices and encouraged to make positive changes.	13 pilot Champions already appointed (Jan 12) and actively engaging  Positive feedback and evaluation outcomes from initial tranche.	Failure to recruit sufficient Champions with required aptitudes  Low level of employee engagement	By end October 2012	Yellow
Programme of activity accredited through NHS Change for Life <b>Wellbeing at Work Workplace Health Scheme award</b> through NHS Bassetlaw. Including baseline Employee health and lifestyle questionnaire to inform future targeting of well-being initiatives	Positive benchmarking of the Council's performance against requirements of a national standard	Collation of evidence for wellbeing at work award commenced June12.	Required criteria not assessed as met	Bronze award by Sept 12 Silver award by Feb 13 (Further work towards Gold award by Sept 13 as part of 13/14 action plan).	Yellow

d) Preventative intervention					
Action	Expected outcome / target:	Progress	Risks	Timescale	Status
Seasonal Flu vaccination campaign for all NCC employees, Winter 2012/13	Improved Duty of Care: Higher numbers of NCC employees are protected from contracting flu (no numerical target set).	Work with public health colleagues to develop recommendations. Agreed at CLT 3 <sup>rd</sup> July 12.	Lack of employee engagement	Campaign launched and promoted August 2012 for commencement in October.	Green
	Reduced impact of risk of infection to members of the public with whom NCC staff come into contact, including vulnerable service users.	Joint planning in progress to deliver flu vaccinations through NHS Occupational Health service providers.	No comprehensive or accurate data on uptake.		Green
	Fewer incidences of sickness absence attributable to flu.	Consideration to be given to further joint interventions.	Insufficient budget to meet demand.		
<b><u>OBJECTIVE 2 – MANAGEMENT AND REDUCTION OF ABSENCE :</u></b>					
Managing the workplace environment and developing coping mechanism in employee groups and teams:					
<b>a) Managing Attendance Effectively :</b>					
Action:	Expected outcome/ target :	Progress	Risks:	Timescale	Status

Further review <b>training for managers</b> to include a focus on building resilience. Provide additional training dates and remind managers of the requirement to attend on a mandatory basis. Develop complimentary e.learning materials  Corporate Directors to ensure that all managers are required to attend linked to Competency Framework and EPDR process.	100% of all NCC managers are trained by March 2013	Courses run regularly and are promoted to managers on NCC intranet provided	Lack of organisational commitment to enforcing / monitoring mandatory nature of training	By April 2013.	Yellow
	All managers take a consistent approach to the management of sickness absence in accordance with the established policies	9 extra courses provided for 2012/13  As at end June 55 Managers already trained in 2012/13			
	A reduction in the number of 'Did Not Attends' for mandatory Attendance Management training events for managers by 80%.  Employees are supported to remain productively in work wherever possible  Continuing trend of falling absence rates.	A further 63 managers booked onto course programme for rest of 2012/13.  "Did not attend" rate reduced from 30% in 2011/12 to 9% as at end June 2012/13.			Yellow
b) Proactive management of risk from workplace stress and stressors:					
Action:	Expected outcome/ target :	Progress	Risks:	Timescale	Status

<p>Relaunch the on line <b>Stress Audit Tool</b>, currently “Well worker”, which focuses on the six wellbeing indicators set out in the HSE standards to managers and Head teachers (positioned with revised policy, guidance and learning materials focussing on resilience),</p> <p>Guide and encourage all managers to complete stress survey questionnaire to identify the key stressors in their workplace and to develop and implement an action plan to prevent reduce and manage the stressors identified in their workplace accordingly.</p>	<p>Number of surveys completed increases by 20% during 2012/13</p> <p>Number of action plans produced following completion of survey increases to 100% by end March 2013.</p> <p>The proportion of absence attributable to stress is reduced by 6.1% from 20.65% to at least 19.40% (the local authority average), by 1<sup>st</sup> April 2013</p> <p>Reduction in number of claims against the authority related to stress in the work place.</p>	<p>Number of surveys completed 2011/12 = 29 schools and 44 non schools</p> <p>Number of action plans produced 2011/12 = 3 in schools and 2 non schools recorded as completed.</p> <p>So far in 2012/13 no action plans are recorded as having been completed</p>	<p>Lack of management / Head teacher engagement</p> <p>Action plans not delivered</p> <p>Liabilities arising from failure to with Health and Safety Executive (HSE) standards</p>	<p>Re-launch Autumn 2012</p>	<p>Orange</p>
<p>Re-launch and promote Skillport <b>e.learning package on the Management of Stress</b>, produced for managers and Head teachers (as part of the Services for Schools offer), in a more accessible format, to help them understand stress, their responsibility for dealing with it, and how to prevent it.</p>	<p>Level of uptake increases by 50% over whole year</p> <p>The proportion of absence attributable to stress is reduced by 6.1% from 20.65% to at least 19.40% (the local</p>	<p>Number of managers completion the e.learning module in 2011/12 = 218 including schools</p> <p>Number completed so far in 2011/12 = 9</p>	<p>Lack of management / Head teacher engagement</p>	<p>By end March 2013</p>	<p>Orange</p> <p>Orange</p>

	<p>authority average), by 1<sup>st</sup> April 2013</p> <p>Compliance with Health and Safety Executive (HSE) Stress Management Standards across the authority</p> <p>Reduction in number of claims against the authority related to stress in the work place</p>				
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### **OBJECTIVE 3- SUPPORT AND REHABILITATION BACK TO WORK:**

Enabling employees experiencing ill health to remain in work and where absent return to work productively at the earliest opportunity:

#### **a) Further improve and benchmark Occupational Health standards:**

<b>Action:</b>	<b>Expected outcome/ target :</b>	<b>Progress</b>	<b>Risks:</b>	<b>Timescale</b>	<b>Status</b>
Accredit the Council's Occupational Health service against the national <b>Safe Effective Quality Occupational Health Service Standards</b> (SEQOHS), through the Clinical Standards Department of the Royal College of Physicians.	Quality of specialist OH advice and support ensured to better enable managers to support early return and sustainable rehabilitation back into work where absence occurs.	Registered for accreditation. Multi disciplinary project team, including Property, Finance and HR, convened and actively working towards accreditation	Lack of accreditation / failure to maintain accreditation	Fully accredited by end March 2013	Yellow
<b>Review of Occupational Health service delivery options</b> to schools and more widely, including	Delivery model ensures sustainable, customer focussed, value for	On going evaluation of current service model implemented following	As per wider service review project	By end 2012/13 for further review during 2013/14.	Yellow

opportunities to link into Public Health provision during 2013/14.	money service provision within the remodelled NCC framework.	2011/12 service review.	Customer expectation management.  Staff engagement		
<b>b) Targeted HR support</b>					
Action:	Expected outcome/ target :	Progress	Risks:	Timescale	Status
<p>Further work with managers and Head teachers to <b>action plan support for employees on long term sickness absence</b> to return to and be rehabilitated back into work taking into account recommendations from GP Fit Notes</p> <p>Structured use of holistic data and information to support actions and decisions, taken from the following sources:-</p> <ul style="list-style-type: none"> <li>• Stress Audits</li> <li>• the EPDR process</li> <li>• sickness absence data by department, section, teams and groups</li> <li>• information from Grievance &amp; Harassment cases</li> </ul>	The percentage of cases of long term absence is reduced by 8.7% to 50% (or less) by 1 <sup>st</sup> April 2013.	<p>Some hotspot areas already identified from absence reporting data, divisional management teams engaged e.g. Children's Social Care pilot focussing on stress which reduced the average length of time absent from work in stress cases by 53% to 4 months before return to work with no further absence in most cases.</p> <p>Departmental RSEMBs engaged</p>	<p>Lack of managerial engagement</p> <p>Data validity</p>	By end December 2012	Yellow



Dark Green
Light Green
Yellow
Orange

<ul style="list-style-type: none"> <li>• data from counselling and OH referrals</li> <li>• feedback from managers, HR teams and Trade Unions</li> </ul>					
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Status key:

Exceeded target

Achieved target

On track to achieve target

At risk of not achieving target

Missed target

No information available (pending)



**Addendum:**

Indicative examples from the planned programme of activities delivered in, or planned for, 2012/13, to coincide with national

campaigns and awareness raising weeks:

**Healthier Lifestyle:**

- Further Well-being Road Shows, 12 September at County Hall, 19th December 2012 (with a mental health focus) and March 2013 , at other county venues TBD
- Promotion of national Walk to Work Week May 2012
- 6 week weight loss sessions linked to national Eat Well for Life campaign, April – June 2012 at Countywide locations (73 employee participants enrolled)
- Additional after work physical activities inc. Zumba classes starting 25th June at County Hall and Lawn View House ( 43 attendees at taster session).
- Promotion of Food and Health day 28th July 12, working with County Catering to launch healthy choices in NCC staff restaurant/snack bars.
- Smoking Cessation : June 12 onwards, one to one support for employees with NHS support team
- Promotion of national Stress Awareness Day, November 2012

**Health surveillance:**

- Osteoporosis and Bone Density screening sessions countywide w/c 2<sup>nd</sup> July 12
- Intranet promotion of Men's Health week 11-17 June 12
- Promotion of seasonal Flu vaccination in partnership with Public Health / NHS Occupational Health service – autumn 2012.