

Nottinghamshire County Council

DIRECTOR OF PUBLIC HEALTH'S ANNUAL REPORT 2019



Health & Work

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Foreword

The environments in which we grow, live, and work exert the greatest influence on how many of us get to enjoy good health and for how long. Ensuring that the influence of social, economic and physical environments are positive must remain central to any concerted effort to improve the health and wellbeing of people in Nottinghamshire.

Amongst these influences, participation in 'good work' is a dominant factor shaping our health. Aside from securing an income (critically important as it is), the benefits of work to individuals and communities extend much further: 'good work' provides the potential for positive social interaction and connectedness, purpose, and the capacity for developing human potential and creativity. Numerous academic studies provide evidence of the benefits that these bring to health and wellbeing and the adverse impacts of worklessness.

This year my report focuses on some of what can be done to ensure that more people in Nottinghamshire enjoy these benefits. But the opportunity in this is not only for individuals and their families. The opportunity extends to the organisations which employ them and the wider economy because a workforce which participates in good work and enjoys good health and wellbeing is associated with increased productivity and contributes to growth which can benefit everyone in Nottinghamshire.



Jonathan Gribbin, Director of Public Health



The Opportunity for Nottinghamshire



Health and work - why it matters

Work is generally good for both mental and physical health. There is a strong link between worklessness and poor health; being out of work can be both a cause and a consequence of poor physical or mental health. Conversely, being in work has a strong positive influence on health, through its provision of income, social interaction, a core role, identity and purpose. For people who have been out of work, securing employment is linked to improved physical and mental health and improved self-esteem.

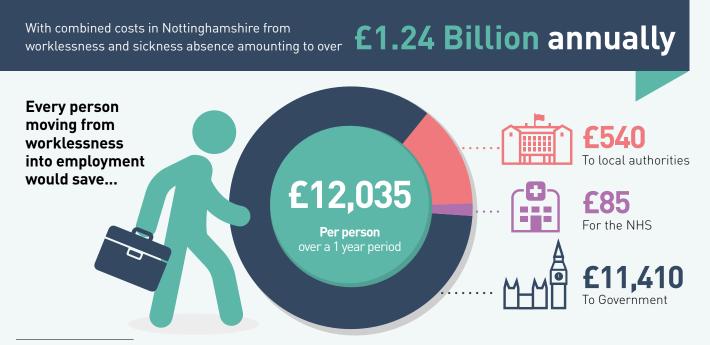
Health as an asset

Good health is a resource for people, and is essential for a thriving society and economy. Improving health across the whole population represents an opportunity to strengthen communities and the economy.

If we were able to take positive steps to address presenteeism (attending work whilst ill) and absenteeism due to poor health, up to £100 billion annually would be saved across the UK economy.¹ Supporting improved mental wellbeing could save around £15 billion per year in mental ill-health costs linked to presenteeism.² Within the NHS alone, reducing lost productivity due to ill-health to the average levels experienced in other public sector organisations would save around £500 million a year.³

The health and wellbeing of their workforce is an important consideration for employers of any size. Good working environments are linked to improved productivity and staff retention. Another consideration for all employers is that although today's workforce is living longer, it is spending many of those later years in poor health. Taken together with economic and welfare changes requiring people to work for longer, this means that more working age adults are now living with one or more long-term health condition. There is increasing understanding that providing effective adaptations and flexible support in the workplace and through healthcare services can make all the difference in enabling people with a health condition or disability to secure and retain a good job.

Health and financial benefits of moving individuals into employment in Nottinghamshire



Nottinghamshire businesses by sector and size



Productivity growth over the past 10 years



Nottinghamshire employment, unemployment and economic inactivity



Those not employed who have not been seeking work within the last 4 weeks and/or are unable to start work within the next 2 weeks

Health-related worklessness:

Those with the inability to work as a result of a long-term health condition

weeks

Those who are not working but

have been looking for work in

the past 4 weeks or are waiting

to start a job in the next 2

The Nottinghamshire Economy – Opportunities and Challenges

Strengths and Assets

The health of the population is the primary resource on which this report is focussed. But it would be remiss to overlook that Nottinghamshire is a county brimming with other strengths and resources. Known for its historical and sporting heritage, Nottinghamshire is home to creative and thriving businesses which have helped reshape the economy following postindustrial decline and attract some of the top talent in research, innovation and creativity.

Underpinning further development there is an abundance of potential sites for housing and for new or growing employers. Recent government announcements have signalled fresh investment for our town centres and high streets. Potential future investment in rail infrastructure and highways represent a catalyst for further growth and opportunity.

Demographics

Increasing life expectancy together with the age profile of the population means that the number of people in work who are aged 50 to 64 has grown from 7 million to 9 million over the last decade.⁴ There is a pressing need to consider the design of work, to address the changing needs of workers across the life course and to sustain productivity.

Nottinghamshire has a slightly higher proportion of older adults compared to national average. Based on authoritative demographic forecasts, this pattern is likely to be amplified over the next decade when many in this group will be reaching retirement age.⁵ The number of older people in this group and those after them who enjoy good health and independence will be influenced by the measures we take now.

To sustain a growing economy and an ageing population, Nottinghamshire will need to attract working age adults who want to stay, develop their careers and raise their families. Alongside working age adults who can contribute their skills to business and commerce, Nottinghamshire will also need to attract and retain a workforce who can deliver high quality health and social care to the population of older people.

The Opportunity for Nottinghamshire

The health and wellbeing of people in all our communities underpins further improvements in productivity. Ensuring that everyone has the opportunity to participate in this aligns with the national Improving Lives Programme which makes the case that "a country that works for everyone needs to help ensure that all who can work or undertake meaningful activity have the chance to do so. And that the right care and support is in place to enable all to thrive in work throughout their working lives".

In this annual report I identify some of the actions we can take now to realise a vision for growth, prosperity and aspiration that applies to individuals, families, communities and businesses in Nottinghamshire.



First Steps and Preparation for Working Life



Parents engaged in work

5% (13,400) of households in Nottinghamshire have both parents out of work compared to **6.7%** in England.

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Educational attainment

45.2% of children achieved a 9-5 pass in English and Maths in Nottinghamshire compared to **39.9%** in England

Transition to work

6.0% (970) of 16-17 year olds not in education, employment or training in Nottinghamshire compared to **6.0%** in England

School readiness

69.7% of children are school ready in Nottinghamshire

compared to 71.5% in England

Some of the strongest influences on life chances, including employment, relate to our early years. Loving, secure relationships with parents, together with the quality of the home learning environment, support a child's emotional wellbeing, brain development, language development, ability to learn, and capacity to develop and maintain good relationships with others. Positive early experiences that support a child's physical, social and intellectual development, and influence children's readiness to start school and learn, will impact on their life chances as adults. In their early years, during statutory education and at the transition to their working lives, there are opportunities to improve the life chances of children and young people, especially amongst those who will otherwise be most vulnerable to poor outcomes.

Early Years

Parental worklessness is significantly associated with adverse outcomes for children, including poorer academic attainment and not being in education, employment and training (NEET).⁶ Many organisations in Nottinghamshire working with young children exercise an important role in supporting parents towards employment, education or training. Nottinghamshire's Child Poverty strategy identifies employment and skills as an important building block and outlines a range of commitments from partners. At present there are nearly 13,400 households with dependent children in Nottinghamshire in which there is no adult in employment. ⁷ The evidence tells us that an approach that is solely focused on getting parents back into work is unlikely to significantly benefit their children. Other factors that children and their families face need to be addressed alongside worklessness, including substance misuse, mental ill-health or being a teenage parent. The Family Nurse Partnership is an example of a programme which integrates an explicit focus on employment into the support it delivers. The programme delivers to nationally evidenced standards and helps young parents to secure training and work opportunities.

Case Study - Family Nurse Partnership (FNP) in practice:

The Family Nurse Partnership (FNP) programme is a nationally evidenced home visiting service providing ongoing, intensive support to first-time teenage mothers and their babies (plus fathers and other family members, with mother's permission). Structured home visits are delivered by highly trained Family Nurses and start in early pregnancy, continuing until the child's second birthday. FNP is a preventive programme and has the potential to transform the life chances of the children and families in our society, helping to improve social mobility and break the cycle of intergenerational disadvantage.

Family nurses use programme materials and methods to enable young mothers (and fathers) to achieve three main aims:

1. To improve their pregnancy outcomes, so that their baby has the best start in life

2. To improve their child's health and development by developing their parenting knowledge and skills

3. To improve parents' economic self sufficiency, by helping them to achieve their aspirations (such as employment or returning to education).

Although **17%** of clients In Nottinghamshire have no GCSEs, more than a third of all clients are in education, employment or training by the time they leave the programme.

Enabling parents with young children to enter the workforce requires family-friendly, flexible employers and access to high quality funded childcare. According to Timewise's Flexible Jobs Index 2019, only 15% of jobs are advertised flexibly but 87% of people want to work flexibly. Alongside offering flexible working opportunities to potential employees there is a need for high quality funded childcare that will enable parents to take up employment opportunities. Nottinghamshire County Council is establishing a multi-agency, strategic 'Best Start' Group to ensure every child in Nottinghamshire has the best possible start in life, beginning in pregnancy and across their early years. It will recognise the importance of the first 1001 days in supporting child development, school readiness and the life-long impact on health, wellbeing and prosperity. This includes an aim to increase access to, and uptake of, quality childcare for some two year olds and all three and four year olds whose parents work. The group should give consideration to the impact that parental access to flexible working, childcare and employment opportunities can have on long-term outcomes for children. It should also contribute to the development of a strategic framework for inclusive employment which addresses the whole life course.

Statutory Education

Educational attainment is a strong indicator of life chances, so it is important that no child is left behind at the beginning of their school life. Schools have a powerful influence on a child's health, creating protective factors (e.g. coping with stress and overwhelming emotions) which mitigate the adverse impact of risk factors. They can prepare young people for further education or employment by helping them to understand the options available to them and by developing the skills and experience they need to gain the most from these opportunities.

Nationally there is recognition that our statutory education system fails to sufficiently prepare our children and young people to enter the workforce. The introduction of the Gatsby Benchmarks for schools and colleges has the potential to help to support all young people (including those with special educational needs) to gain better employment skills and to access high quality careers advice.



The Gatsby Benchmarks

Benchmark	Description
1. A stable careers programme	Every school and college should have an embedded programme of career education and guidance that is known and understood by pupils, parents, teachers and employers.
2. Learning from career and labour market information	Every pupil, and their parents, should have access to good-quality information about future study options and labour market opportunities. They will need the support of an informed adviser to make best use of available information.
3. Addressing the needs of each pupil	Pupils have different career guidance needs at different stages. Opportunities for advice and support need to be tailored to the needs of each pupil. A school's careers programme should embed equality and diversity considerations throughout.
4. Linking curriculum learning to careers	All teachers should link curriculum learning with careers. For example, STEM subject teachers should highlight the relevance of STEM subjects for a wide range of future career paths.
5. Encounters with employers and employees	Every pupil should have multiple opportunities to learn from employers about work, employment and the skills that are valued in the workplace. This can be through a range of enrichment activities including visiting speakers, mentoring and enterprise schemes.
6. Experiences of workplaces	Every pupil should have first-hand experiences of the workplace through work visits, work shadowing and/or work experience to help their exploration of career opportunities and expand their networks.
7. Encounters with further and higher education	All pupils should understand the full range of learning opportunities that are available to them. This includes both academic and vocational routes and learning in schools, colleges, universities and in the workplace.
8. Personal guidance	Every pupil should have opportunities for guidance interviews with a careers adviser, who could be internal (a member of school staff) or external, provided they are trained to an appropriate level. These should be available whenever significant study or career choices are being made. They should be expected for all pupils but should be timed to meet their individual needs.



The introduction of the Gatsby Benchmarks reflects the government's recognition of the value which employers themselves can bring to young people's development and employment prospects.

Educational, employment and business sector partners are already working closely together to explore how they can better develop the employability of young people in Nottinghamshire. Examples include the East Midlands Chamber of Commerce's recent introduction of a free membership scheme for secondary schools to encourage links with businesses, and the skills and employability summit hosted by Nottinghamshire County Council in Mansfield and Ashfield which has provided an excellent vehicle to ensure that the skills required in local places are nurtured.

Recommendation: Working with Enterprise Coordinators, schools in Nottinghamshire can improve the work readiness, ambition and aspiration of young people by engaging with businesses, further and higher education using the Gatsby Benchmarks.



of all pupils in Nottinghamshire have a special educational need or disability compared to **14.8%** of all pupils in England

Source: Department for Education 2018

A pragmatic but more rigorous approach is needed to track whether school-based programmes are effective for all of our young people including those in groups which are more vulnerable. Tracking the uptake of work experience opportunities is one way that partners can be informed about equity of access for our young people with additional needs. There are opportunities through the Virtual School (for children in care) and special education needs and disabilities (SEND) Triennial Review for children to encourage and track access to work experience opportunities for these groups. Learning from local experience suggests that for those with disabilities and special educational needs, expectation and aspiration for employment must be embedded as the norm, from as early as the primary school setting.

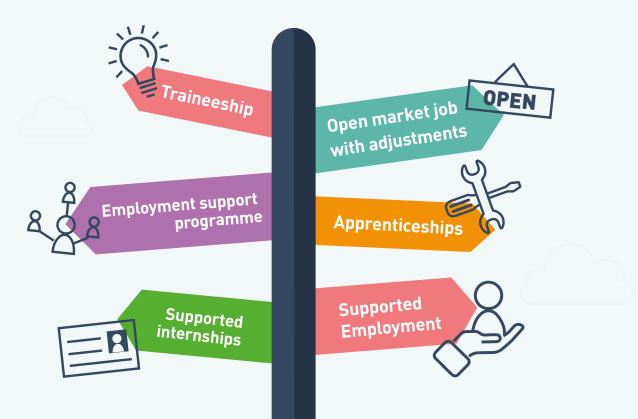
Transition to working lives

Once secondary school education is complete, and a young person is ready to transition to work or workforce-based training, they should have access to the right support and opportunities to enable them to do this. Without this considerable evidence suggests that being unemployed when young leads to a higher likelihood of long-term 'scarring' in later life in terms of lower pay, high unemployment, fewer life chances and poorer health.⁸

There are a range of programmes which provide support options for young people in their move into employment, some of which are shown on the next page.



Inclusive routes to employment



Open market job with adjustments	Gaining a job with an employer who is confident in how they can adapt the work to the needs of the worker
Traineeships	Allows people without the qualifications needed for an apprenticeship to work towards them at college and in the workplace
Apprenticeships	Inclusive apprenticeships represent an opportunity for people who are not able to gain the mandatory grades in Maths and English required to gain an apprenticeship
Employment support programme	An end to end programme which takes people who are not working and supports them to understand what they want to do, works with them to apply for jobs and works with the employer to make adjustments
Supported employment	A workplace which has additional funding to employ large numbers of people with additional needs who require workplace adaptations
Supported internships	An unpaid scheme for people with an Education Health and Care Plan to gain long term work experience with an employer who has multiple job opportunities available

Despite these opportunities, there remain a range of barriers to securing good employment. A particular challenge for young people in counties is access to good transport options. Longer travel times, reduced public transport provision and costs of car travel have been noted as social mobility issues which impact on choices for work, training and education.

The Local Transport Plan supports delivery on County Council priorities for economic development and health and wellbeing through a specific objective to improve access to employment and training opportunities. Work includes an annual programme of integrated transport infrastructure improvements (including walking, cycling and public transport improvements), as well as delivery of personal travel planning with a range of audiences.

Personalised travel planning is a longestablished behavioural change mechanism to help address congestion and increase healthy, active lifestyles by making people more aware of their travel choices as well and enabling them to make such journeys. This also helps people to access and stay in work and training by providing them with the skills (e.g. through targeted training) and means (e.g. through providing subsidised bus travel, or bicycle/moped loans) to enable them to access opportunities. The programme has delivered targeted work with jobseekers, residents and school leavers in Nottinghamshire.

Available evidence on the experience and outcomes of young people with special educational needs or of care leavers suggests that there is significant room for improvement. For both groups a lack of formal qualifications required to progress to apprenticeships (usually GCSE Maths and English) has been identified as an issue. This has been recognised nationally, and inclusive apprenticeships (for people with SEN) and traineeships (for care leavers and young people more generally) have been recently introduced. Turning these into real opportunities will require their effective promotion and, for those to whom they are targeted, support in applying for and taking them up.

There is no commonly understood single view about how many of these opportunities are available in Nottinghamshire, nor of how many of our young people have the potential to benefit from each of them. However the number of care leavers not in employment, education or training and the number of adults with learning disabilities not in work suggests that there is a mismatch between these programmes and the underlying need.

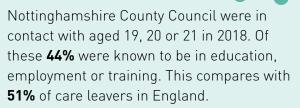
Work to address these challenges is ongoing. One example is that Nottinghamshire County Council is working with businesses to create opportunities for traineeships specifically targeted to care leavers.

Recommendation: Building on the strong support secured from local businesses, Nottinghamshire County Council should work with employers to develop traineeships for care leavers

For young people with education health and care plans, Nottinghamshire has secured funding to create supported internships. As set out by the Department for Education, "a supported internship is a study programme specifically aimed at young people aged 16 to 24 who have a statement of special educational needs or an Education Health and Care plan, who want to move into employment and need extra support to do so. Supported internships are structured study programmes based primarily at an employer. They are intended to enable young people with learning difficulties and/or disabilities to achieve sustainable, paid employment by equipping them with the skills they need for work through learning in the workplace. Internships normally last for a year and include unpaid work placements of at least six months.

Wherever possible, they support the young person to move into paid employment at the end of the programme. Although similar in aims to a traineeship or apprenticeship, supported internships differ in key ways. Young people on supported internships are expected to require a higher level of support than a trainee or apprentice, and to be offered workplace support in the form of a job coach, as well as support for their non-workplace learning. A key difference to traineeships is that interns are expected to need a longer programme than a trainee,

348 care leavers



Source: Department for Education 2019

for whom the maximum programme length is six months, before they are ready to progress to an apprenticeship or other sustainable employment."⁹ James' story, as described on the next page, provides an insight into the value and possibilities of this kind of opportunity.

More effective joint working between educational establishments, local employers, the D2N2 Local Enterprise Partnership and a range of other partners will allow us to fully articulate the needs of young people leaving school for employment and develop a clear and consistent set of options to meet this need. This can best be progressed as part of the development of wider strategic delivery framework to improve access to employment across the life course.



Case Study - Supported Internships

James started at Landmarks Specialist College with no specific vocational aim but knew he wanted to gain employment. Throughout his first year James worked hard to develop his employability and functional skills in order to prepare for work. James undertook a Supported Internship at Sainsbury's in Mansfield where he worked hard to develop his confidence and communication skills with the support of a Job Coach who accompanied him to work two days per week. James initially needed prompts and support but became able to carry out tasks such as re-stocking the fruit and vegetable isle with minimal support. James has also been working on travelling independently and hopes to take his driving test before leaving college at the end of the academic year.

The manager of Sainsbury's in Mansfield said "James is a very nice young man, always smiling and very polite to customers. I have no worries with how he is working, and I know he always works very hard. He is a pleasure to have here as a colleague and he seems very happy and fits in well".

After the end of his time at Landmarks, James secured a paid position at Sainsbury's and recently passed his driving test. He will also be returning as a Duke of Edinburgh ambassador to support learners on the DofE programme.



A Healthy Workforce



Every £1 spent on workforce health promotion initatives delivers a return on investment of between £1 and £4



With about 363,000 people engaged in employment, many of whom spend one third of their life at work, the workplace environment provides a significant opportunity for positively influencing health in Nottinghamshire. Developing the opportunity involves a proactive approach on the part of employers and employees which builds on the idea of 'good work'. Taking a wellbeing at work approach brings benefits for employers as well as employees, and both sustains and increases the prosperity of the local economy.¹⁰ But for some organisations, developing their own approach to this can be challenging. Nottinghamshire County Council's Wellbeing at Work scheme provides a straightforward way for organisations to improve the health and wellbeing of their workforce and to be recognised for doing so.

Good work

Ensuring that everyone can participate in good work benefits employees through their health and wellbeing and our local economy through increased productivity. But 'good work' includes a range of factors and has been defined in various ways. Most of these focus on fair pay, job progression and work life balance. More recently narratives around health and mental wellbeing are becoming integral to how we view good work as a society.

Public Health England's definition of good work demonstrates the multiple factors which positively impact on health and wellbeing. Work which supports healthy living incorporates a living wage, lasting security, provision of relevant training and development, and conditions and patterns of work which promote good health and work-life balance.

A plethora of legislative requirements enshrined within the Health and Safety at Work etc Act 1974 help to ensure good working conditions. The enforcement of this legislation is dependent on the type of workplace and is mostly undertaken by the Health and Safety Executive and local authorities. These statutory duties are well established and I do not intend to describe them here.

The authoritative Global Burden of Disease study highlights the wider opportunity available to people in Nottinghamshire.¹¹ It identifies that more than one third of the disease and disability which impacts the quality of life and health of employees and erodes productivity is the result of causes which are avoidable. Much of this relates to tobacco, diet and physical inactivity; other contributory factors include harmful levels of drinking and substance misuse. Addressing these risk factors may not be a statutory duty but doing so is of benefit to the individual and wider society.

The Nottinghamshire Wellbeing at Work programme

Sustaining a healthy workforce requires action both with individuals and at the level of the overall environment in which they work. This requires employers to look beyond the statutory duties placed on them and their employees and to consider wider arrangements which create a productive health-promoting environment. Some organisations already have a mature or developing approach to this and, amongst these organisations, some are involved in the Wellbeing at Work scheme offered by Nottinghamshire County Council to organisations in the county. The scheme helps organisations develop a comprehensive approach to health at work.

"The Wellbeing at Work programme has provided a mechanism for Gedling Borough Council to promote health and wellbeing messages to staff and to provide physical and wellbeing activities at lunchtime including Pilates, Mindfulness and fitness sessions in the park. We have also engaged the commissioned services including Let's Talk Wellbeing, Everyone Health and SmokefreeNotts to deliver staff drop in sessions. The services have also attended our annual staff health fair."

Gedling Borough Council



Wellbeing @ Work

Nottinghamshire County Workplace Health Award Scheme

The Wellbeing at Work programme is designed to enable organisations to take an incremental, stepped approach to developing a sustainable health-promoting culture and work environment. As part of this stepped approach, the programme comprises four levels of award ranging from bronze to platinum which recognise and celebrate the measures taken by an organisation.

These stages focus on: Health Promotion & Information by signposting services and resources; Health Development promoting local and national campaigns to raise the profile of healthy choices; Enabling & Increasing Access to local wellbeing services to promote training and learning platforms and link to local wellbeing services; Policy & Culture Change where organisations improve workplace culture to improve employee wellbeing.

Recommendation: Employers should consider programmes such as Wellbeing at Work to improve the health and wellbeing of their workforce and the productivity of the local economy The programme is free and open to any organisation in Nottinghamshire that wishes to be recognised for their work to improve the health and wellbeing of their workforce. It is grounded in the evidence about what is needed to improve health and wellbeing outcomes in the workplace and is consistent with the national 'Change for Life' and 'One You' programmes. By addressing the most significant risk factors for ill-health and loss of independence, it enables employers to invest in their local communities whilst sustaining and improving the productivity of their own organisation.

The Wellbeing at Work programme also aligns closely with other free, open access services for people in Nottinghamshire who want to make healthy changes. These services are commissioned by Nottinghamshire County Council to provide support relating to:

- Overweight and healthy eating
- Physical inactivity
- Mental wellbeing
- Alcohol and substance use
- Smoking

Case study - Wellbeing at Work

Rushcliffe Borough Council first signed up to the Wellbeing at Work scheme in March 2015 and have since achieved Bronze, Silver and currently working towards Gold. Rushcliffe have recognised for a long time now how important workplace health and wellbeing is for employees and have been very active in providing support and information, however signing up to the Wellbeing at Work scheme has helped in the following way:

- Recruitment of Workplace Health Champions internally who work together to deliver health initiatives
- Access to free training for the Workplace Health Champions
- Networking opportunities with like-minded businesses and sharing of ideas
- Providing a framework to follow to ensure we deliver across all wellbeing health strands

Promoting and developing wellbeing at work

Raising awareness can be a first step on a behaviour change journey. For instance, taking tobacco as an example, 15.4% of adults in Nottinghamshire smoke. The resultant cost to Nottinghamshire businesses due to sick leave and lost productivity is over £119 million per year. Of this, it is estimated that around £44.5 million a year is lost from smoking breaks.¹² Employers have the opportunity to start to address this by raising awareness amongst their staff and by supporting national campaigns.



Of potential wealth is lost from the local economy in Nottinghamshire each year as a result of lost productivity due to smoking

Source: ASH Ready Reckoner 2019

Enabling access to services

Let's stay with tobacco as an example to illustrate the value and relevance to employers of a wellbeing at work approach. There is a need to shift the conversation from smoking as a clinical burden to smoking cessation as a productivity opportunity to which Nottinghamshire County Council is committed by funding free smoking cessation services. Employers should view this as an opportunity to support employees wanting to reduce the harmful impact of tobacco and should sign post workers, and if possible, provide time for workers to access locally commissioned services. Smoking impacts on the health of our workforce and the chance of a person quitting smoking increases by 34% when a co-worker quits. Such interventions within a workplace are found to be effective at supporting people to quit.13

Nottinghamshire County Council will launch its new Integrated Wellbeing Service in April 2020. The new provider will integrate the service with Wellbeing at Work to engage with businesses and encourage access to stop smoking support and other healthy lifestyles support for employees. **£44.5m** estimated cost of smoking breaks to Nottinghamshire businesses £37.1m

estimated annual cost of smoking to the Nottinghamshire NHS

Source: ASH Ready Reckoner 2019

Policy and culture

The development of policy and culture are important levers for embedding wellbeing at work in an organisation. Workplace health should be prioritised by senior members of staff with named workplace champions. The Tobacco Control Declaration has provided a practical, step by step approach to becoming free from the harms of tobacco. Any organisation can participate in the declaration.

In addition to tackling smoking, the promotion of mental health represents a significant opportunity for many workplaces. Around 16% of the adult population of Nottinghamshire have experienced a Common Mental Disorder.¹⁴ An important first step is developing a supportive work environment which does not stigmatise someone who discloses a mental health condition. Thriving at Work; The Stevenson / Farmer review of mental health and employers drew on the accounts of over 200 employers, people with mental health problems and leading experts in mental health and work.¹⁵ Their report sets out core principles and standards that all employers should commit to as detailed as items 1-6 in the table below.

The Stevenson Farmer Review of Mental Health and Employers

An estimated 300,000 people in the UK lose their job every year because of a mental health problem. Many might have remained in employment if they had been given the right support. A key recommendation of the Stevenson-Farmer review is that all employers, regardless of size or industry, should adopt six core standards that lay the basic foundations for an approach to workplace mental health.

- 1. Produce, implement and communicate a mental health at work plan
- 2. Develop mental health awareness among employees
- **3.** Encourage open conversations about mental health and the support available when employees are struggling
- 4. Provide employees with fulfilling work, over which they have control and purpose
- 5. Promote effective people management
- 6. Routinely monitor employee mental health and wellbeing

The rollout of the Stevenson Farmer review recommendations has been recognised by the Midlands Engine as a local priority to increase productivity. ¹⁶A consortium has been established to work across the Midlands Engine geography on the Mental Health Productivity Pilot which will develop and test innovative interventions that seek to:

- a) mitigate and reduce sickness levels and the impact of reduced productivity for business due to employee absence, or employees working with mental health conditions without appropriate support,
- **b**) reduce the numbers of employees who leave employment due to mental illness, and
- c) support an increase in employee mental wellbeing.



Poor mental health at work costs the UK economy between

£74 billion & £99 billion

per year

Lost output



Cost to employers/self employed



Source: Stevenson / Farmer 2017



Work and Long-Term Conditions



For many people, it is a quiet assumption that our health will remain good throughout our working life and will allow us to get on with doing the things that matter to us, including doing a job that is meaningful, rewarding and provides financial security. Being at work is often treated as a sign that we are healthy, productive and taking part in the economy.

But we know that one in three employees in the UK has a long-term condition. For many, this condition or the obstacles created by organisations and wider society make it harder to come to work and to be productive. For some people, work is the cause of a health condition or exacerbates one. For significant numbers of working age adults, their health condition impacts to such an extent that they are unable to secure or maintain a job.

For many residents facing health-related barriers to maintaining or securing work, the

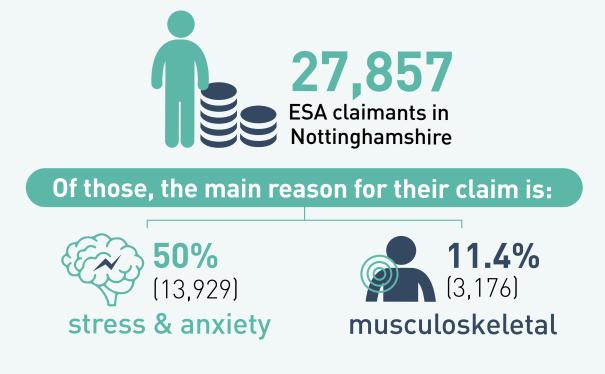
right support would make all the difference. Securing work is particularly important for individuals with a health condition or disability, not only because it promotes full participation in society and independence, but also because it can promote recovery and rehabilitation, and lead to improved health outcomes and a better quality of life.¹⁷

The national Improving Lives Programme has set out a compelling vision and makes the case that

"a country that works for everyone needs to help ensure that all who can work or undertake meaningful activity have the chance to do so. And that the right care and support is in place to enable all to thrive in work throughout their working lives".

To achieve this goal, we know from emerging evidence that there are three key components which are needed to provide the most effective support to maintain work or return to work.¹⁸

Nottinghamshire residents who have been unable to work due to an illness or disability for at least a year (Employment Support Allowance, ESA)

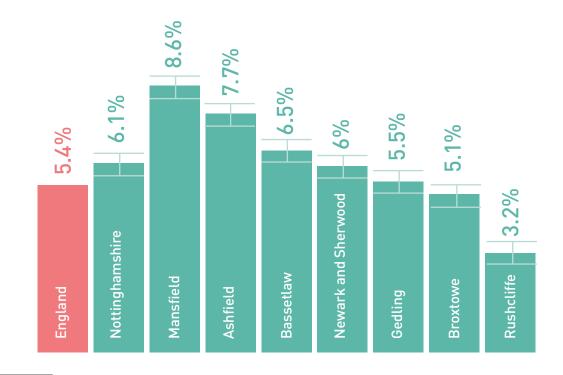


The three components of effective return to work support

- 1. Employer-focussed modifications in the work environment flexible working hours, duties or change to physical working environment.
- **2. Health-focussed interventions** 'work as a health outcome', health professionals supporting improvement of mental and physical health.
- **3. Co-ordinated case management or employment support** facilitating effective links between healthcare and the workplace.

In this context we use the term 'employment support' to refer to any service commissioned to support people to secure or maintain employment. Employers, healthcare professionals and employment support agencies each have a role in supporting individuals to secure and maintain good employment. This chapter explores these three elements in more detail and identifies important gaps in the current Nottinghamshire provision which need attention.

Percentage of working age residents in Nottinghamshire claiming Employment Support Allowance



Source: PHOF 2018

The employer's role in managing health conditions at work

Employers are increasingly recognising the value which employees and wider stakeholders place on the active promotion of the health and wellbeing of the workforce, including those with health conditions. Establishing a strong corporate reputation for this involves developing a supportive culture which does not stigmatise anyone who discloses their health condition. A third of employees with a health condition have not discussed it with their employer and it has been found, for example, that individuals with musculoskeletal (MSK) conditions will often experience worsening health, presenteeism and negative impacts on productivity through embarrassment or fear of being penalised at work if they were to discuss their condition with their manager.¹⁹

There are now a wide range of evidence-based employer focussed resources, freely available, which provide credible expert advice, information and support. A few examples are highlighted below.

Business in the Community	 Business in the Community has partnered with Public Health England to produce a comprehensive, online resource to help every organisation support the mental and physical health and wellbeing of its employees. These include: Mental health Musculoskeletal health Physical activity, healthy eating, healthier weight Drugs, alcohol and tobacco Sleep and recovery Suicide prevention Crisis management in the event of a suicide Domestic abuse
Macmillan Managing Cancer in the Workplace	Around three quarters of cancer survivors under the age of 50 will return to work, but only a third of survivors over 50 will do the same. Improving support for people living with cancer to return to work would make a significant contribution to their health and wellbeing outcomes and the economy. Macmillan found that most people who were employed prior to a cancer diagnosis want to return to work when they are ready and able. They offer Managing Cancer in the Workplace factsheets ²⁰ , and the Macmillan at Work programme, which provides expert training, consultancy, information and support for employers.

Local feedback suggests that many employers are unaware of the information and support available to them, and some employers find employment support programmes difficult to navigate and engage with. An initiative developed in Bassetlaw provides a great example of the progress that employers can make working in partnership with local community and public sector. Whilst further work between partners would be needed to help develop the integration, accessibility and visibility of the range of good support and guidance that is available currently, a reasonable first step would be the development of an employment support page on the Notts Help Yourself website. This would provide a live resource signposting both residents and employers to available support.

Case Study – Worksop Works

Emerging from the new Worksop Town Commission, the 'Worksop Works' initiative has enabled the NHS and its partners to work with Cerealto, which employs hundreds of local people, to deliver inclusive employment training for managers. The training supports managers to recruit and support employees who live with long-term conditions. Sponsored by Cerealto, 50 places have been offered on the session which is jointly delivered by the NHS-led 'Working Win' programme, the Department for Work & Pensions, D2N2 Building Better Opportunities and Bassetlaw District Council's economic development team.

The role of healthcare professionals

"Working can be considered a health outcome in itself reflecting how well we are supporting individuals to adapt to or recover from their health challenges. The majority of healthrelated worklessness is not inevitable and with the right advice and support, many individuals can achieve their working potential" Health professionals have a key role in supporting their patients to secure the benefits of employment. This extends beyond medical care and fit note certification. The 2019 Healthcare Professionals' Consensus Statement on Health and Work outlines 4 principles which are relevant for all health and care professionals, and their patients.²¹

2019 Healthcare Professionals' Consensus Statement on Health and Work

We will work together, as individual organisations and collaboratively, to enable every health and care professional to:

- 1. Understand the health benefits of good work, and the long-term effects of avoidable health related worklessness
- **2.** Have the skill to incorporate discussions about working in the context of a health outcome with patients in their care, as appropriate to the health or disability of that individual
- **3.** Feel supported to understand and interact with the wider health and work system employers, occupational health services and other bodies that have a role in assisting individuals who are not working for health-related reasons
- **4.** Recognise their own role to support healthy and safe working environments, looking after their own health and wellbeing and those of their colleagues.

In support of these principles the 'Work as a Health Outcome' (WAAHO) programme is a vocational rehabilitation approach being led by national partners.²² It aims to support health care professionals to better understand and support their patients with health and work issues. The programme offers e-learning modules for health care practitioners as well as a standardised training package (delivered by the regional work and health champion) to healthcare professionals working across NHS Trusts to give them skills and confidence to discuss the benefits of work in their routine clinical practice.²³ GP specialist registrar schemes in Nottinghamshire have the opportunity to access the same training which has benefitted schemes in other areas across the East Midlands.

Supporting people with long-term conditions to stay in work involves a mix of employer adaptions, specialist employment support, and effective medical care which is oriented to work as a health outcome. An acknowledged weakness of existing programmes is the relatively limited role they secure from healthcare professionals in promoting positive employment outcomes, and the lack of specialist employment support roles which can work effectively across both health and employment sectors. Notable exceptions to this include the embedding of employment advisers within Recommendation: Primary Care Networks and GP specialist registrar training schemes should incorporate professional development on 'promoting work as a health outcome' (such as that available from Public Health England's 'Work as a Health Outcome' clinical champion) in Protected Learning Time events (PLTs) and GP training

Improving Access to Psychological Therapies (IAPT) provision, and the Individual Placement and Support programme (IPS) described later in this chapter.

The new GP contract is an opportunity to strengthen the role of primary care doctors in supporting access to work. There are opportunities to expand the primary care workforce through the 'Additional Roles Reimbursement Scheme', which can expand the multi-disciplinary team in primary care.



This will result in social prescribing navigators and allied health professionals (AHPs) being employed by every primary care network. AHPs could include First Contact Physiotherapists, Occupational Therapists and Physician Associates. The national Work and Health Unit (a cross-government unit, jointly sponsored by the Department for Work and Pensions and the Department of Health and Social Care) is preparing the way for the use of the fit note in their consultations.²⁴ This will add capacity to primary care to engage in positive health and work conversations and support the delivery of vocational rehabilitation initiatives at scale.

Social prescribing is an NHS funded initiative to provide better support for people engaging with primary care. With the help of a link worker, individuals are supported to identify what matters to them and how these personalised goals might be met by engaging with groups and activities of interest to them. With appropriate training and development of local systems, link workers can provide an additional opportunity to connect individuals with effective employment support provision.

Recommendation: Primary Care Networks should ensure that social prescribing link workers and first contact practitioners take account of work as a health outcome and are equipped to refer people into employment support

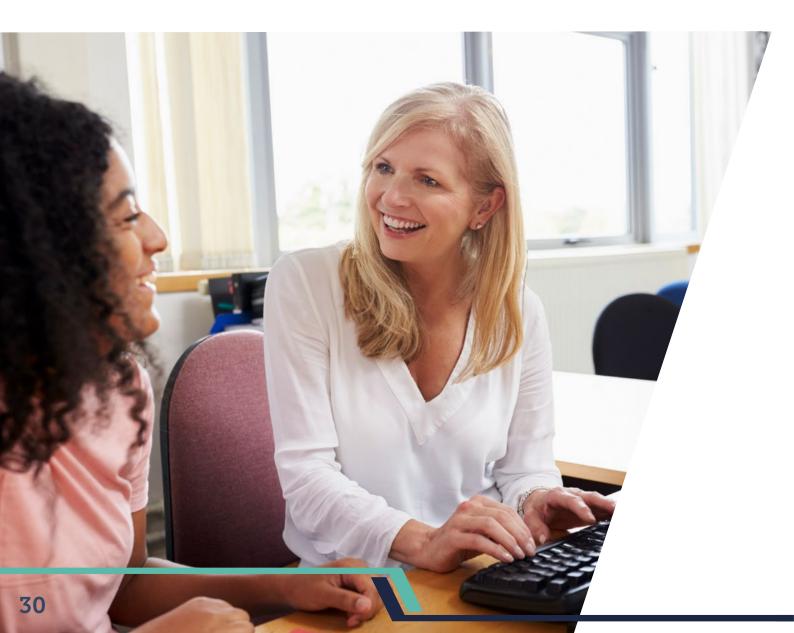
The Role of Employment Support

There is a range of support available in Nottinghamshire, which helps people to seek and secure employment. Tailored conditionspecific support, and support beyond recruitment are known to be important in helping people to overcome health barriers to finding paid work. These support individuals not only to get a job, but to maintain it.

The Individual Placement and Support programme (IPS) is a good example of tailored support, which is underpinned by a strong evidence base. It is an employment support service integrated within community mental health teams for people who experience severe mental health conditions. No one apart from the service user is given a say in whether or not the individual is 'ready', or whether a particular work outcome is 'appropriate'. It works on a 'place and train' model which supports the employee and employer in the realworld workplace environment. A review of 15 randomised control trials found a 36 percentage point improvement in competitive employment outcomes for participants receiving IPS type versus traditional interventions.²⁵ The evidence increasingly points towards the effectiveness of 'supported employment' based on a place and train approach involving intensive pre and post-employment support to the employee and employer.

The 8 principles of Individual Placement and Support

- 1. Everyone who wants to work is eligible for employment support
- 2. Employment specialists and clinical teams are located together
- 3. Competitive employment is the primary goal
- **4.** Job search is consistent with individual preferences
- 5. Job search is rapid beginning in a month
- 6. Support is time unlimited and individualised to employee and employer
- 7. Welfare benefits advice supports the person through the transition from benefits to work
- **8.** Employer engagement



Case study - 'M', as recounted by their IPS employment advisor

"M is computer programmer who was off work after a particularly difficult episode of bipolar disorder. IPS became involved through a case conference led by her community psychiatric nurse.

I had a one-to-one meeting with M where we looked at her employment history, training and skills etc. Out of this conversation we built a vocational profile. M is a highly experienced Senior Web Designer and had been undertaking large scale projects. Her current role was far from challenging, but her domestic situation was becoming fraught with escalating debt. She was travelling to work via three buses involving approximately four hours travel per day. With the vocational profile in place and knowledge of her travel and domestic situation, I began to get a stronger sense of what is available and how the whole system of recruitment functions in M's highly specialised, competitive area of work.

Addressing the distance she had to travel was a central issue. M accepted that upwards of twenty hours of travel per week was excessive and a source of stress. Her debt could be relieved somewhat by saving on travel. I helped her contact Step Change, a debt advice/management service, and M said she felt a burden had been lifted and that it was more manageable than she first thought.

After 3 weeks of effort, M landed a role with a more local company. We discussed disclosure of her health condition. I explained that I would advocate on her behalf if she wished, but she was happy to speak up for herself.

At the most recent appointment, M reported a sense of stability and that domestically, things were once more manageable with Step Change acting on her behalf making her debt more bearable.

Employment support in Nottinghamshire

Currently, employment support for people with health and complex social needs comes from a range of national, regional, local and micro programmes. Even so, detailed mapping and stakeholder engagement has shown that there are systematic issues which limit the impact of these programmes. Commissioning and delivery are fragmented with multiple employment programmes, support offers, providers and commissioners operating more or less independently. As a result some programmes may be duplicating if not actively competing with one another. It is unclear whether people are always aware of the support to which they are entitled and whether people are always enabled into the support most suitable for their needs. The landscape is difficult for employers too, who are likely to be approached by a range of employment support providers requesting their participation. There is some evidence that services commissioned to provide employment support are inadvertently incentivised to prioritise work with those closest to gaining employment, rather than furthest from the labour market and in greater need of support. Added to this, there is a lack of agreed metrics to monitor need and demonstrate outcomes. Commissioner and provider organisations do not routinely share performance metrics with local partners, leading to missed opportunities for local scrutiny and targeted action.

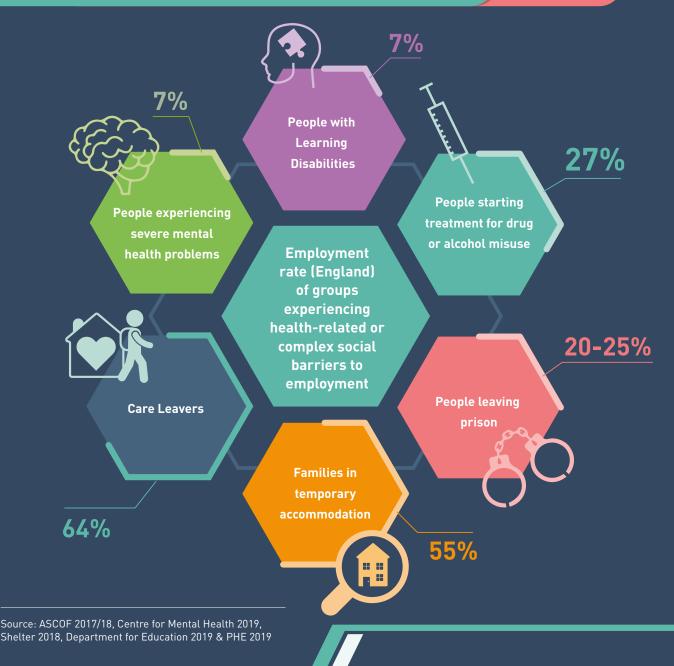
A crucial first step for Nottinghamshire is the development of a strategic delivery framework for employment support which identifies where investment will have the biggest impact. Without this, it seems likely that provision will continue on a fragmented basis, and it will remain unclear whether good outcomes or value for money are being achieved for Nottinghamshire. Recommendation: Through a partnership of local councils and other key stakeholders in Nottinghamshire, a task and finish group should be set up to develop a strategic delivery framework which will act as a guide to prioritise future investment. The framework should identify need amongst key groups, the evidence of what works and gaps in current delivery across the whole life course and for people who are furthest from the workforce.

Recommendation: Nottinghamshire County Council should develop a single narrative and pathway for the range of employment support the Council provides, to improve engagement with employers and other partners.

Recommendation: Public Health England should work with partners to develop an analytical approach bringing together health status with economic and employment data, to better understand which groups face specific health-related barriers to employment and would benefit from support.

Inclusive Employment -Overcoming Barriers to Work

England employment rate - 75.6%



Connecting people with learning disabilities to jobs

The barriers to work faced by people with a disability of any sort vary from person to person but can be multiple and complex. Some barriers may be directly linked to a health condition which impacts a person's capability and capacity in a particular role. For some people, the progression or treatment of a health condition may have disrupted education. Others experience increased challenges relating to stigma, and sometimes self-stigma which discourages them from turning their abilities into employment outcomes. In other instances, people experience barriers which arise from arrangements and expectations which it may be in everyone's interest to review and adapt.

Some people find that some additional support enables them to overcome challenges and barriers such as these and to turn their ambitions into employment. The main learning disability employment support provision in the local area is Nottinghamshire County Council's i-Work service which has supported more than two hundred people with learning disabilities into employment.²⁶

Specialist providers such as i-Work have knowledge and skills which should be shared with specialist providers of employment support and through the development of a practitioner led network.

We know that at present i-Work does not have the capacity to meet the current demand for its services. In the longer term we must look at a new model for delivering and securing inclusive employment, this will take time to understand, articulate and put into practice.

Partners from educational establishments, local employers, the D2N2 Local Enterprise Partnership and Nottinghamshire County Council should share collective knowledge about the needs of people with learning disabilities and complex social needs and feed this into the development of a strategic delivery framework.

Case Study - i-Work

B attended a local college and had completed work experience at a Food Production Factory. College provided a job coach to support travel and throughout the day on work experience.

On completing his college course, the factory offered B a job as a Production Operative. The college also referred B to iWork to provide in-work support.

iWork staff met with B, the employer and college to ensure a smooth transition and to find out what adjustments and support were required. The employer was very supportive and gave B the option to commence working 3 days per week, with the option to increase their hours later.

iWork staff attended an induction week with B, observing difficulties with completing paperwork, noting B's anxiety that others would notice his difficulties . iWork continued to provide support during working hours by phone and text communication. iWork identified that that B would sometimes miss some of the employer's communications and become stressed and anxious. Sometimes B had to leave the factory floor because he felt "about to pop". At these times iWork liaised with the employer who was then better able to communicate certain changes. This three-way liaison became the foundation for effective support, enabling B and the employer to communicate well.

Complex social challenges

The complex and multi-faceted social challenges experienced by some people is also reflected in the barriers to work which they face. Amongst the diverse groups and circumstances, the employment data for some is very sparse (e.g. for survivors of domestic abuse). For other groups, we know much more.

A national review by Dame Carol Black found that alcohol misuse may be a cause or a consequence of unemployment and is a predictor of unemployment and future job loss.²⁷ People who are in work when they start alcohol treatment tend to maintain employment and have better chances of successful completion. But few who are unemployed when they enter treatment go on to secure work during or after treatment. This highlights the critical role for support that is multi-faceted and is reflected in the way that alcohol and substance misuse outcomes for Nottinghamshire County are framed more holistically than the rather narrow, clinically oriented national measures of successful completion.

Homelessness may result from loss of employment, or from work which is chronically precarious or remunerated at levels insufficient to meet essential living costs. Being homeless presents an additional barrier to staying in work. Even when temporary accommodation can be accessed, it may be far from the place of work making it uneconomic to stay in employment and exacerbating a loss of confidence and erosion of self-esteem.

Accordingly, people with complex social barriers can benefit from support to gain employment. One such local programme is Building Better Opportunities, which is delivered by a partnership of providers and co-financed by the National Lottery Community Fund and European Social Fund (ESF).

We do not know the numbers of people with complex social needs seeking employment in Nottinghamshire so it is hard to accurately estimate the potential need for services such as Opportunity and Change. However, as with i-Work, current demand appears to outpace supply. Furthermore, we do not yet know the full range of interventions which are effective in enabling people with complex social needs to win and keep employment. Public Health and employment support commissioners will need to keep under review the findings of the ongoing pilot into the delivery of IPS provision to people experiencing substance misuse to understand whether this should be considered for Nottinghamshire.

To close the gap between the Nottinghamshire and English average, we would need to support: 36 more adults in secondary mental health care into employment more adults with learning disabilities into employment



Source: ASCOF 2017/18

Case Study - 'Opportunity and Change'

Opportunity and Change, is one strand of the Building Better Opportunities programme which, supports people with multiple and complex needs, including some of the most socially isolated and marginalised people in our local communities, to move towards employment, education and training. By engaging in a holistic range of one-to-one and group support, training and therapeutic interventions, individuals broaden their social networks, increase self-confidence and motivation, learn new skills and improve their health and wellbeing. A selection of group-based therapeutic interventions are available to help participants overcome barriers relating to mental health, housing, domestic abuse, substance misuse, and offending. One example is Equine Assisted Therapy.

Equine Assisted Therapy is a ten week programme involving care for horses and horsemanship alongside opportunities for self-care and self-management of emotions. Working with the horses, participants engage in experiential learning about how they can change the way they behave with the horse to get a positive reaction from the horse.

"When I first came I was scared of horses so I said I'd just sit and watch. Within 20 minutes I was walking around with a horse even though I was scared of them. My psychologist said she's never seen such a massive change – it was like 2 weeks and the change was massive. So now I don't take any medications at all. Nothing. None at all. Since I've been to the horses I've had nothing - no depression, no anxiety. I don't wake up in the night no more, I don't have any night terrors which was a big problem for a few years. All of them are gone."

Watch the video here: https://www.youtube.com/watch?v=_Rr2IjiSZzw&feature=youtu.be

As part of developing a strategic delivery framework, providers already delivering services for vulnerable individuals with complex social needs should engage in the development of a common data collection on employment needs and outcomes. The Local Industrial Strategy (LIS) provides an opportunity for the collective Nottinghamshire commitment to this agenda to be strengthened at a strategic level to provide the framework in which this can be achieved. Local Industrial Strategies are coproduced by Local Enterprise Partnerships in conjunction with national government. They should set out clearly defined priorities for how cities, towns and rural areas will maximise their contribution to UK productivity by allowing places to make the most of their distinctive strengths. Nationally the government has described the need for Local Industrial Strategies to ensure better

coordination of economic policy at the local level and ensure greater collaboration across boundaries. Influencing the LIS for our local area therefore represents a unique and vital opportunity.²⁸

Recommendation: The D2N2 Local Enterprise Partnership should build on its strong commitment to health and wellbeing within the developing Local Industrial Strategy, by supporting a streamlined and integrated approach to commissioning employment support for those furthest from the labour market.

Opportunities for good work

Widening access to the benefits of good work requires new work opportunities as well as people who can fill them. Many initiatives focus on supply-side initiatives which seek to develop the employability of individuals. Relatively little attention and resource is applied to shaping the employment landscape to encourage the development of appropriate opportunities. This does not involve the creation of jobs which is neither economically viable nor indicated as a need. Instead we need to ensure that every job in the labour market is shaped to be an inclusive employment opportunity.

Doing so benefits existing employees as well as potential employees who experience barriers to employment.²⁹ But it is also employers who benefit from the access which this gives them to the largely untapped resource comprising people with suitable skills who are living with a disability or complex social need. By bringing more of these people into the workforce, or enabling them to stay in the workforce, employers can access and appeal to new talent, increase employee retention and, by becoming more inclusive, enhance their appeal to new customers.³⁰

Nottinghamshire employers should be encouraged to take meaningful steps to ensure their job vacancies are recruited to in a way which provides inclusive opportunities for all. Some examples of such steps include:

 be explicit about being open to employing people with barriers to employment through signing up to the **Disability Confident Scheme** which will be included in the new government Get Ahead scheme.³¹

- ensure jobs are created which address the tasks required and not the people required. This gives an opportunity to consider job carving or job design.
- ensure recruitment practices means all jobs are considered for part time or flexible working, and selection procedures enable all residents to showcase their talents (for example considering **work trials** in place of interviews)
- make use of national support to make adaptations in the workplace for example the fit for work' resources, BiTC toolkits, and Access to work scheme
- engage with local inclusive employment support when looking for employees for example *i-Work* and Individual Placement and Support (IPS) schemes in Nottinghamshire and Bassetlaw
- work with nationally commissioned local employment support schemes such as Building Better Opportunities and Better Working Futures when looking for employees.
- consider if vacancies, at all levels of the organisation, could become opportunities for apprenticeships, traineeships or supported internships.

Recommendation: Nottinghamshire County Council, as part of their work towards Disability Confident Leader status, should collate and share best practice on inclusive employment and health for Nottinghamshire employers.



Nottinghamshire





County Council

Nottinghamshire ounty Council



I pledge to... offer a supported internship for

ASHFIELD & MANSFIELD

Afterword

For some people, the clear links between work and the wellbeing of so many of us provide reason enough for turning the recommendations into action. For others, it is the link between the health of people in Nottinghamshire and our productivity and economic prospects as a county. Others will be motivated by the opportunities here because our participation and experience of work is an overarching driver of other inequalities. Although we may identify differences of policy and approach, many of us will agree that all of these - wellbeing, economic

growth and fairness - comprise essential parts of the mental picture we can paint of a thriving Nottinghamshire.

A picture like this helpfully reminds us that health, or work or the economy are not sufficient ends in themselves but serve a broader vision of what it means to thrive. I would like to leave you with one such picture - or, at least, the broad structure of it. It proposes what a sustainable economy looks like, capturing a range of aspects. It underlines the need to pursue all of these aspects in the round.

Prosperity

Does the local area produce wealth and create jobs?

Dynamism and opportunity

Is the area entrepreneurial and innovative, does it have the skills set necessary to drive future growth?

Inclusion and equality

Is everyone benefiting from economic growth, where are there still challenges? Is the gap between richest and poorest narrowing?

Health, wellbeing and happiness

Are people healthy and active, leading fulfilling lives which provide individual prospects?

Resilience and sustainability

Is the economy having a neutral impact on the natural environment and is the built environment creating resilient places that people want to live in?

Community trust and belonging



Is there a lively and creative culture life? Do people feel safe and engage in community activities?

Source: Grant Thornton 2019

Looking at these indices you will identify some of the links between them. In last year's report I described the links between wellbeing and violence and the ways that investing in health contribute to making Nottinghamshire a safe place for everyone. In this report I have explored some of the ways that improving health and wellbeing supports productivity and inclusion. In the coming year, my team will be undertaking work which highlights the links between improving health and environmental sustainability. Each of these provides an example of how a rigorous consideration of health and wellbeing enhances the impact of policy and decision-making in matters which, on the face of it, do not present themselves as related to wellbeing.

Therefore, my final recommendation is that organisations of all sorts identify the links between health and wellbeing and the challenges they face – and of how addressing the former can contribute to the latter. Many organisations are doing just that. If you would like to explore the potential benefits of this for your organisation, please contact me at

director.publichealth@nottscc.gov.uk .

Summary of Recommendations

1	Working with Enterprise Coordinators, schools in Nottinghamshire can improve the work readiness, ambition and aspiration of young people by engaging with businesses, further and higher education using the Gatsby Benchmarks
2	Building on the strong support secured from local businesses, Nottinghamshire County Coun- cil should work with employers to develop traineeships for care leavers
3	Employers should consider programmes such as Wellbeing at Work to improve the health and wellbeing of their workforce and the productivity of the local economy
4	Primary Care Networks and GP specialist registrar training schemes should incorporate pro- fessional development on 'promoting work as a health outcome' (such as that available from Public Health England's 'Work as a Health Outcome' clinical champion) in Protected Learning Time events (PLTs) and GP training
5	Primary Care Networks should ensure that social prescribing link workers and first contact practitioners take account of work as a health outcome and are equipped to refer people into employment support
6	Through a partnership of local councils and other key stakeholders in Nottinghamshire, a task and finish group should be set up to develop a strategic delivery framework which will act as a guide to prioritise future investment. The framework should identify need amongst key groups, the evidence of what works and gaps in current delivery across the whole life course and for people who are furthest from the workforce.
7	Nottinghamshire County Council should develop a single narrative and pathway for the range of employment support the Council provides, to improve engagement with employers and other partners.
8	Public Health England should work with partners to develop an analytical approach bring- ing together health status with economic and employment data, to better understand which groups face specific health-related barriers to employment and would benefit from support.
9	The D2N2 Local Enterprise Partnership should build on its strong commitment to health and wellbeing within the developing Local Industrial Strategy, by supporting a streamlined and integrated approach to commissioning employment support for those furthest from the labour market.
10	Nottinghamshire County Council, as part of their work towards Disability Confident Leader status, should collate and share best practice on inclusive employment and health for Not-tinghamshire employers.



Annex 1: update on progress against recommendations from 2018 Annual Report on Prevention of Violence

Recommendation

18/1 Police, health and voluntary sector stakeholders should incorporate the identification and support of past and potential victims of violence in services for high-risk groups

18/2 County Council Public Health Team should pilot work to empower services users to exercise increased control by equipping frontline staff to enquire about experience of childhood adversity

18/3 Community Safety Partnership and A&E departments should ensure data from A&E departments is routinely shared and is used to improve community safety

18/4 Reduce knife crime in Nottinghamshire through piloting and rigorous evaluation of Public Health approaches

Update on progress

Leading body: Safer Nottinghamshire Board (SNB).

Progress: The County was successfully awarded funding alongside Nottingham City to develop the Violence Reduction Unit (VRU) in 2019. The VRU are completing a Joint Needs Assessment in 2019/20 to identify the needs and support for victims and perpetrators which will inform a County/City action plan.

Outcomes: Evidence base will be shared across the County, gaps will be identified, funding will be focused to areas of highest need.

Leading body: NCC Public Health

Progress: Funding and implementation of the 'Routine Enquiry about Childhood Adversity' (REACh) programme. Staff delegates from 8 organisations across the public care and protection system have been recruited.

There are another 4 services to be recruited and 53 training places to fill meet the total of 900 training places which will run until April 2020. Implementation leads in each organisation will receive a further six months post-training support to ensure a sustainable implementation and integration into the existing services.

Outcomes: REACh will evaluate improved service users' engagement with services and changing demand for services. The independent evaluation by Liverpool John Moores University will produce an interim Evaluation Report in January 2020.

Leading body: Safer Nottinghamshire Board (SNB)

Progress: SNB continues to bring together data from the police, Community Safety Partnerships (CSPs) and health partners in order to improve community safety. This aggregated data is being applied to the hospital emergency information to improve each organisation's response to alcohol related violence. Alongside these developments in April 2020 the hospital's emergency care dataset will also be able to include fuller information on the causes of injuries including identifying factors assessed as the influential causes of the injury.

Outcomes: This work will contribute to and be further shaped by the newly established Nottingham and Nottinghamshire Violence Reduction Unit (Autumn 2019) as it develops the leadership and strategic coordination role of the local response to serious violence.

Leading body: NCC Public Health/ Nottinghamshire Violence Reduction Unit (VRU)

Progress: Councillors approved use of the Public Health grant to co-fund a targeted youth work programme for high-risk individuals. Nottinghamshire has made a successfully bid for additional funding to establish a Violence Reduction Unit across the City and County. This funding will enable the development of public health approach to violence and a Joint Strategic Needs Assessment of violence reduction.

Outcomes: New targeted interventions for high-risk young people. A clear statement of the need and about the evidence of what works in violence reduction to guide future investment and activity.

Recommendation

18/5 Ensure all frontline staff working with children, young people and families have opportunity to access training that will equip them with skills to recognise and respond appropriately to ACEs in young people

18/6 Improve resilience of young people by evaluating and improving schools-based resilience programmes in Nottinghamshire

18/7 Reduce incidence and impact of cyberbullying through schools-based work with Schools Health Hub (SHH) and the Tackling Emerging Threats to Children team (TETC).

Update on progress

Leading body: NCC Public Health.

Progress: Public Health has provided input on Adverse Childhood Experiences (ACE) and their impact on the 'What's New in Safeguarding' updates training, available to all frontline staff and was attended by 507 delegates during 2018/19.

An on-line learning module on ACE's is now available on the Nottinghamshire Safeguarding Children Board (NSCB) learning platform for all staff in organisations registered with Safeguarding Children Procedures. This was accessed by 337 staff since its launch in March 2019 to end of October 2019 and has evaluated very positively.

Outcomes: The children and young people workforce is trained to recognise ACE's

Leading body: NCC Public Health.

Progress: The resilience building programmes delivered by Each Amazing Breath CIC, 'Take 5 at School' programme and Young Minds 'Academic Resilience Programme' has funded engagement with a total of 60 Nottinghamshire schools.

The evaluation is being provided by Nottinghamshire County Council Education Psychology Services. An interim evaluation was completed in June 2019 with early qualitative findings; Schools staff and pupils/students for both programmes said that it was a positive and enjoyable experience, identified positive changes in psychological wellbeing and coping skills.

The Take 5 programme emphasised ownership and was inclusive; the Academic Resilience Approach emphasised staff wellbeing and learning and engagement.

Outcomes: The resilience programmes aim to develop inner resources for self-awareness, self-confidence, self-esteem and self-efficacy; provide early identification of and intervention of children with emotional mental health and wellbeing difficulties; and improved relationships and sense of belonging. Attendance and achievement are also being monitored and evaluated.

Leading body: NCC Public Health and the TECT/SHH team

Progress: The specialist worker role supporting schools with cyber-bullying has been extended to 2021. The websites are being widely promoted which aim to provide key information on a range of Public Health issues including cyber – bullying. The monthly averages for both website usage/views per page over the last year, (1st January 2019 – 30th November 2019), are noted in the table below:

Monthly averages	Health for Kids	Health for Teens
Average number of users per month	74	104
Average number of page views per month	116	210

The impact and effectiveness of the websites is being evaluated as part of the 'You're Welcome' exercise where young people carry out reviews for Health for Teens and parents/carers review the relevant sections for the Heath for Kids website. There is currently an interim report available on findings to date and a final report ready by July 2020.

Outcomes: Children and young people can recognise signs of being bullied and be aware of what action to take to access support and address the issue.

Recommendation

18/8 Schools Health Hub (SHH)

and Tackling Emerging Threats to Children (TETC)

teams should support schools to deliver evidence based appropriate Personal, Social, Health &

Economic education (PSHE)

18/9 Reduce the incidence of suicide and self-harm in Nottinghamshire by prioritising the highest impact interventions set out in the Notts Suicide Prevention Framework for Action

18/10 Reduce the incidence and impact of mental health problems through widespread promotion of 'Every Mind Matters' self-care guide

18/11 Increase the number of people able to access social prescribing interventions to help recover from mental health problems

Update on progress

Leading body: Public Health and the TECT/SHH team

Progress: Completion of assessment of gaps and needs. The teams are now preparing a package of support for schools for the implementation of Department of Education Relationship & Sex Education (RSE) guidance. Education provision of RSE is compulsory for all Secondary schools Countywide from September 2020, and Relationship Education for primary schools. Within this agenda signs of abuse, Child Sexual Exploitation (CSE), bullying, and understanding what a 'healthy' relationship is will be covered.

Outcomes: Schools independently and confidently delivering quality assured PSHE/RSE sessions including information to ensure children and young people understand and can recognise signs of grooming, signs of an unhealthy relationship including domestic violence and emotional abuse and be aware of what action to take.

Leading body: NCC Public Health

Progress: Public consultation on an updated Suicide Prevention Strategy and Action Plan was completed on 7th August. The Nottinghamshire Suicide Prevention Group adopted the strategy in October. NHS England has provided funding to initiate postvention bereavement support for those bereaved by suicide across the Nottinghamshire ICS footprint during 2019/20. It is anticipated that around 260 referrals for postvention bereavement support will be made in 2019/20, based on the previous year's rate of suicide deaths. In September promotion as part of World Suicide Prevention Day enabled an NCC social media campaign reach c305K people with twelve posts. Real Time Surveillance has commenced.

Outcomes: Reducing the number of suicides in the County. The most recent available data shows mortality by suicide in Nottinghamshire decreased between 2017 (72) and 2018 (47) and this decrease was seen across all districts. Source: Suicides in the UK: 2018 registrations, Office for National Statistics.

Leading body: NCC Public Health/Integrated Care System Nottingham and Nottinghamshire (ICS) Mental Health Prevention Workstream

Progress: The promotion of 'Every Mind Matters' campaigns through workplace health schemes; promotion during Mental Health Awareness week 2019; and the community and voluntary sector providers accessing the Public Health Commissioned service which delivers Mental Health and Suicide Prevention awareness and training.

Outcomes: In Feb 2019 a contract for Mental Health and Suicide Prevention awareness and training commenced; between July and September 160 people participated in the training from a wide range of community and voluntary sector groups and providers.

Leading body: NCC Public Health/ICS Mental Health Prevention Workstream.

Progress: A countywide, community asset-based approach to reduce social isolation and loneliness has been launched. This Community Friendly Nottinghamshire is focusing engagement in the areas of identified need, helping communities to come together to act on shared visions, enhancing neighbourhoods and overcoming concerns.

Outcomes: Community Friendly Nottinghamshire, currently funded by Public Health Grant for 2 years 2019-20, has recently adopted a community development approach called "Community Organising". This approach will enable more people, citizens and the wider workforce, to be trained facilitating greater reach and impact. A monitoring approach for "Community Organising" is being developed.

Recommendation	Update on progress
18/12 Reduce the impact of self-harm by ensuring that every A&E department provides NICE compliant assessment and interventions for every individual admitted following self-harm	 Leading body: NCC Public Health Progress: Self-harm audit at Nottingham University Hospital (NUH) is complete. The audit is being reviewed by clinical experts from Nottinghamshire Healthcare NHS Foundation Trust before circulating more widely to the Suicide Prevention Group. Outcomes: Following clinical review the findings of the audit at NUH will be reviewed by Nottinghamshire Suicide Prevention Steering Group to identify follow- up actions.
18/13 Improve the response to domestic violence and abuse (DVA) by promoting awareness and training to help communities professionals and specialist services to respond appropriately	Leading body: NCC Public Health and Domestic and Sexual Abuse Executive. Progress: A new prevention, promotion and training service contract has been developed to be accessible to all partners and professionals working on the domestic abuse agenda in the County. The contract will be awarded in December 2019 with a launch date of April 2020. In addition, the new survivor information cards and posters in ten languages are being circulated by the specialist provider Equation including information cards for men and the LGBT population. A targete "Help a friend" campaign has been delivered and the National Women's Aid Federation England pilot 'Change That Lasts' will continue through to 2021. Outcomes: The breadth of professionals trained (including Domestic and Sexual Abuse practitioners, family support workers, housing officers); other professionals briefed (including GPs, Magistrates), all contributing to improving knowledge and skills and referrals enabling improved support in DVA situations.
18/14 Reduce the incidence of domestic violence by improving early intervention and prevention for example by working with the Tackling Emerging Threats to Children (TETC) team to enhance prevention activity in schools and other settings.	 Leading body: NCC Public Health and Domestic and Sexual Abuse Executive. Progress: In addition to the initiatives highlighted in recommendation 18/8 and 18/13, support to develop early intervention work and prevention has been enhanced with resourcing an initiative to support Children Affected by Domestic Abuse (CADA) using the Public Health grant Outcomes: Schools and family workers taking up the opportunities and developint their knowledge, awareness and skills in engaging with domestic abuse. This is being assessed through formal training evaluation assessments.
18/15 CCGs should make specialist provision for the therapeutic support of victims and survivors, both children and adults, especially in relation to sexual abuse	 Leading body: Domestic and Sexual Abuse Executive and Office of the Police and Crime Commissioner Progress: Discussions between the Office of the Police and Crime Commissioner (OPCC) and the NHS Clinical Commissioning groups have agreed on pilot service models. In addition, the OPCC has commissioned a specialised provider to prepara a Nottinghamshire sexual abuse needs assessment report. Outcomes: Following completion of the needs assessment, Autumn 2019, the OPCC will look to make the commissioning decisions. A Nottinghamshire model for the specialist therapeutic support will be sought, to be commissioned as part of CCG mental health services budgets.

Recommendation	Update on progress
18/16 Evaluate the Nottinghamshire Integrated Offender Management pilot and review other national and international evidence to reduce the risk of re-offending by perpetrators.	 Leading body: Domestic and Sexual Abuse Executive Progress: The evaluation report was completed in August 2019 outlining fourteen recommendations. These recommendations include for the Domestic Violence and Abuse Integrated Offender Management (DVA IOM) teams to be maintained and function in a multi-agency manner and to be co-located. The recommendation is also for the Independent Domestic Violence Advocates (IDVAs) to continue as an integral part of the programme. Outcomes: The final evaluation will be tabled at the Executive meeting in December 2019 and future developments agreed.
18/17 Secure funding to expand programmes for working with young people, including young people that harm.	Leading body: NCC Public Health and Domestic and Sexual Abuse Executive Progress: As highlighted in 18/14, Funding accessed from Public Health reserves. Outcomes: Specialised, preventative work with vulnerable young people developed
18/18 Health and Wellbeing Board (HWB) partners should write to Ministers and local MPs to alert them to the cost of harmful drinking to communities in Nottinghamshire and the evidence about the beneficial impact of Minimum Unit Pricing (MUP) for residents and communities	 Leading body: Health and Wellbeing Board Progress: In July the Health & Wellbeing Board held an alcohol themed workshop around the eight points alcohol ICS plan. The focus concentrated on the role board members can do within their own organisations championing alcohol as a public health concern. Further work is required to mobilise HWB partners to advocate for the beneficial impact of MUP. Outcomes: Local actions which demonstrate leadership and commitment to reducing alcohol-related ham in Nottinghamshire were identified, including the opportunities for Board members to take on a role as 'Alcohol Champions' within their own organisations.
18/19 Ensure that local licensing policy is fully informed by public health intelligence about the full extent of the local impact of alcohol	Leading body: NCC Public Health Progress: The intelligence team have provided data to the District Councils' for informing alcohol licencing decisions. Outcomes: District Councils are informed on the local impact of alcohol
18/20 Public Health commissioned services should include the delivery of Alcohol Identification and Brief Advice (IBA), targeting individuals who are drinking at levels presenting a risk to health	 Leading body: NCC Public Health, ICS and Alcohol Pathway Group Progress: An alcohol IBA training model and implementation plan in partnership with the Nottinghamshire Alcohol Pathways Group has been established. Public Health has commissioned Change, Grow, Live (CGL) to deliver this alcohol identification and brief advice (IBA) training. CGL have recruited a training post to engage organisations across the ICS and train professionals within these organisations. Outcomes: The train the trainer approach has been implemented amongst a breadth of the targeted audiences. Alcohol Champions are being established within organisations in order to sustain the training capacity longer term. Health and Wellbeing members discussed at the September alcohol workshop their role in supporting the delivery of the IBA.

Annex 2: References and Notes

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- ³⁰ The 'purple pound' is a term used to describe the spending power of disabled people and their families. Estimates from the Department for Work and Pensions state that the 'purple pound' is worth around £212 billion to the national economy a figure Nottinghamshire business' should not ignore. With three guarters of disabled people and their families leaving a shop or business because of poor customer service or lack of disability awareness, employing staff with disabilities is surely a good first step to changing both culture and service delivery. (Department for Work and Pensions (2014) High street could be boosted by £212 billion 'purple pound' by attracting disabled people and their families [Press Release] Available from: https://www. gov.uk/government/news/high-street-could-beboosted-by-212-billion-purple-pound-by-attractingdisabled-people-and-their-families [Accessed 4th December 2019].
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Nottinghamshire County Council

W nottinghamshire.gov.uk

- **E** director.publichealth@nottscc.gov.uk
- **T** 0115 977 5781

Public Health, County Hall, Nottinghamshire NG2 7QP



