Report for:	Staffing and Remuneration Committee
Item number:	11
Title:	Monitoring success of Workforce Health and Wellbeing Strategy
Report authorised by :	Tamara Djuretic, Assistant Director of Public Health
Lead Officer:	Tamara Djuretic, Assistant Director of Public Health
Ward(s) affected:	None

Report for Key/ Non Key Decision: Non key decision

1. Describe the issue under consideration

- 1.1 The organisation's Strategy for Workforce Health and Wellbeing has been developed to promote and encourage health and wellbeing at work and it is closely aligned to the Workforce Plan.
- 1.2 There has been a significant progress with implementing the Strategy across the Council and we are receiving very positive feedback from staff, at all levels, on a number of initiatives implemented.
- 1.3 This paper proposes a set of overarching indicators that we will measure in order to understand if the Strategy is making desired impact and if it is improving outcomes for staff.

2. Cabinet Member Introduction N/A

3. Recommendations

3.1 To discuss and endorse proposed measures and targets set for the Workforce Health and Wellbeing Strategy implementation over the next three years.

4. Reasons for decision

- 4.1 Workforce Health and Wellbeing Strategy was published in June 2015 and a number of interventions have been implemented as part of the Strategy implementation.
- 4.2 It is cruicial to understand the overall impact of the Strategy to be confident that focus on workforce health and wellbeing is making a difference and that interventions commissioned and delivered are effective and evidence-based. S&R Committee is therefore asked to support ongoing monitoring of the Workforce Health and Wellbeing programme progress and agree proposed indicators and set targets for the next three years.



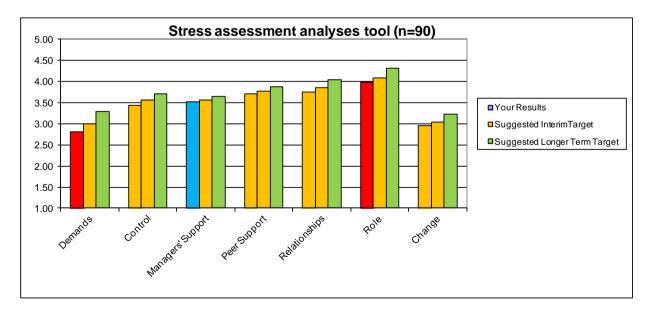
5. Alternative options considered N/A

6. Background information

- 6.1 Haringey Workforce Health and Wellbeing Strategy was published in June 2015 and it proposed a set of measures that are focusing on process and three overall outcomes measures:
 - > Overall reduction in sickness absence
 - Reduction in work related injuries and illnesses
 - > Improved mental health and wellbeing of all staff

Sickness absence measure – As discussed at the last S&R Committee meeting, measuring overall reduction in sickness absence may not truly reflect effectiveness of the Workforce Health and Wellbeing Strategy as there are a number of other initiatives aimed at reducing sickness absence. Overall rolling year sickness absence data from October 2014 to October 2015 suggest an average of 6.9 sickness absence days (varied from 2.7 days for cold/flu, 10.6 for back related conditions to 20.5 days due to stress/mental ill health). It is therefore proposed to focus on the reduction of average number of sickness days due to stress/mental ill health year on year however setting a meaningful target at this stage may be a challenge.

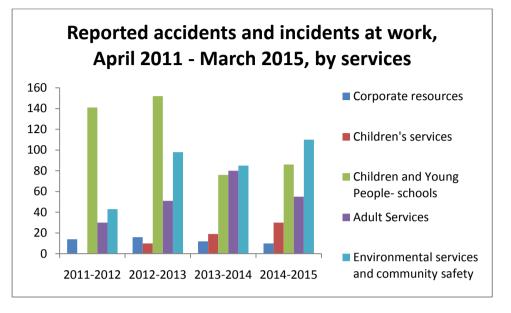
Instead, it is proposed to use standard HSE stress assessment tool across the Council on annual basis. We recently conducted a baseline survey - a snapshot of stress assessment where we received 90 responses from staff across the Council and the tool proposes interim targets (proposed to achieve by 2016-2017 and longer-term targets (to be achieved by 2017-2018). They are described in chart below.



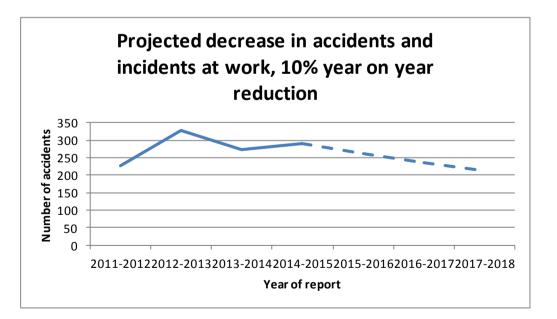
6.2 Reduction in work related accidents – At present, all accidents and incidents at work are reported to Health, Safety & Wellbeing team on a regular basis.



Although number of staff has been reducing over the last years, overall number of accidents remains similar with a slight increase in reporting over the last year (see chart below). This could be either a reflection of true number of accidents or better awareness of reporting system. Rates per 1,000 staff increased from 58.8 in 2011/12 to 102.7 in 2014/15.



It is proposed to decrease actual number of accidents and incidents at work by 10% each year for the next three years, with a particular focus on services with the highest number of accidents (Environmental services) and those where number of accidents is increasing (Children's services). Chart below proposes trajectory for 2017-2018 (reduction from 291 accidents and incidents reported in 2015-2016 to 213 reported in 2017-2018.



6.3 Mental health and wellbeing of staff – At present, mental health of staff is not routinely recorded. We therefore developed a short mental health and wellbeing survey based on standard questionnaires utilised widely such as Warwick Edinburgh short scale for measuring mental health and wellbeing and workforce wellbeing survey used as part of the Healthy School package (Appendix I). We



are aiming to receive a response from 20-30% of staff (400-500. This information will be used as a baseline for monitoring success of the Strategy over the next three years.

<u>https://www.snapsurveys.com/wh/s.asp?k=144648010862</u> It is planned to integrate proposed questions into the staff survey that will be conducted at the beginning of 2016.

7. Contribution to strategic outcomes

7.1 Workforce Health and Wellbeing Strategy is supporting successful delivery of Haringey's Workforce Plan and it is closely aligned with Haringey's Health and Wellbeing Strategy 2015-18 and Sport Framework.

8. Statutory Officers comments (Chief Finance Officer (including procurement), Assistant Director of Corporate Governance, Equalities)

Finance and Procurement

8.1 Outcomes and interventions measured within the Strategy will be co-ordinated and delivered within already allocated resources in the Health, Safety and Wellbeing Team, Public Health Team and Leisure Department.

Legal

8.2 There are no legal implications arising from the recommendations of this report.

Equality

- 8.3 The Council has a public sector equality duty under the Equalities Act (2010) to have due regard to:
 - tackle discrimination and victimisation of persons that share the characteristics protected under S4 of the Act. These include the characteristics of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex (formerly gender) and sexual orientation;
 - advance equality of opportunity between people who share those protected characteristics and people who do not;
 - foster good relations between people who share those characteristics and people who do not.
- 8.4 This Strategy aims to deliver better health outcomes for all staff, particularly those experiencing poorer mental health at work. We will analyse information on ethnicity, pay grades, services, age and sex whenever data is available.

9. Use of Appendices

Appendix I - Workplace Wellbeing survey for staff

10. Local Government (Access to Information) Act 1985

a. Haringey's Workforce Health and Wellbeing Strategy

Appendix I - Workplace Wellbeing Survey for staff



About you

- Q1) Which service do you work in?
- Q2) How long have you worked in the council:
- Q3) Are you a manager? Yes/No If so what tier and grade:
- Q4) Are you largely desk based? -Yes -About half the time -No

Q4) Please tell us your ethnic status (Option list will be provided)

Wellbeing Survey (Warwick Edinburg short questionnaire)

Below are some statements about feelings and thoughts

Q5	Please tick the box that best describes your experience of each over the last two weeks							
		None of the time	Rarely	Some of the time	Often	All of the time		
	I've been feeling optimistic about the future							
	I've been feeling useful							
	I've been feeling relaxed							
	I've been dealing with problems well							
	I've been thinking clearly							
	I've been feeling close to other people							
	I've been able to make up my own mind about things							

Wo	orkplace Wellbeing Survey						
Q6	Please tick the box that best describes your feelings at work						
		Strongly agree		Neither agree nor disagree	Disagree	Strongl disagre	
	Communications are clear and effective				-		
	Support is available in terms of counselling, advice, and ways of dealing with grievances, conflicts or harassment						
	Employees are involved in the						



decision-making process. We have some control over our work			
There is flexibility and support where possible over working hours, job-sharing, childcare, or home difficulties			
We work well together. We have our bad days, but morale is mostly good			
People are well matched to the jobs they have. Objectives are clear, and people usually receive enough training			
We've had some training in managing stress. We try to support one another			
We feel really valued within this organisation; proud to work here			

