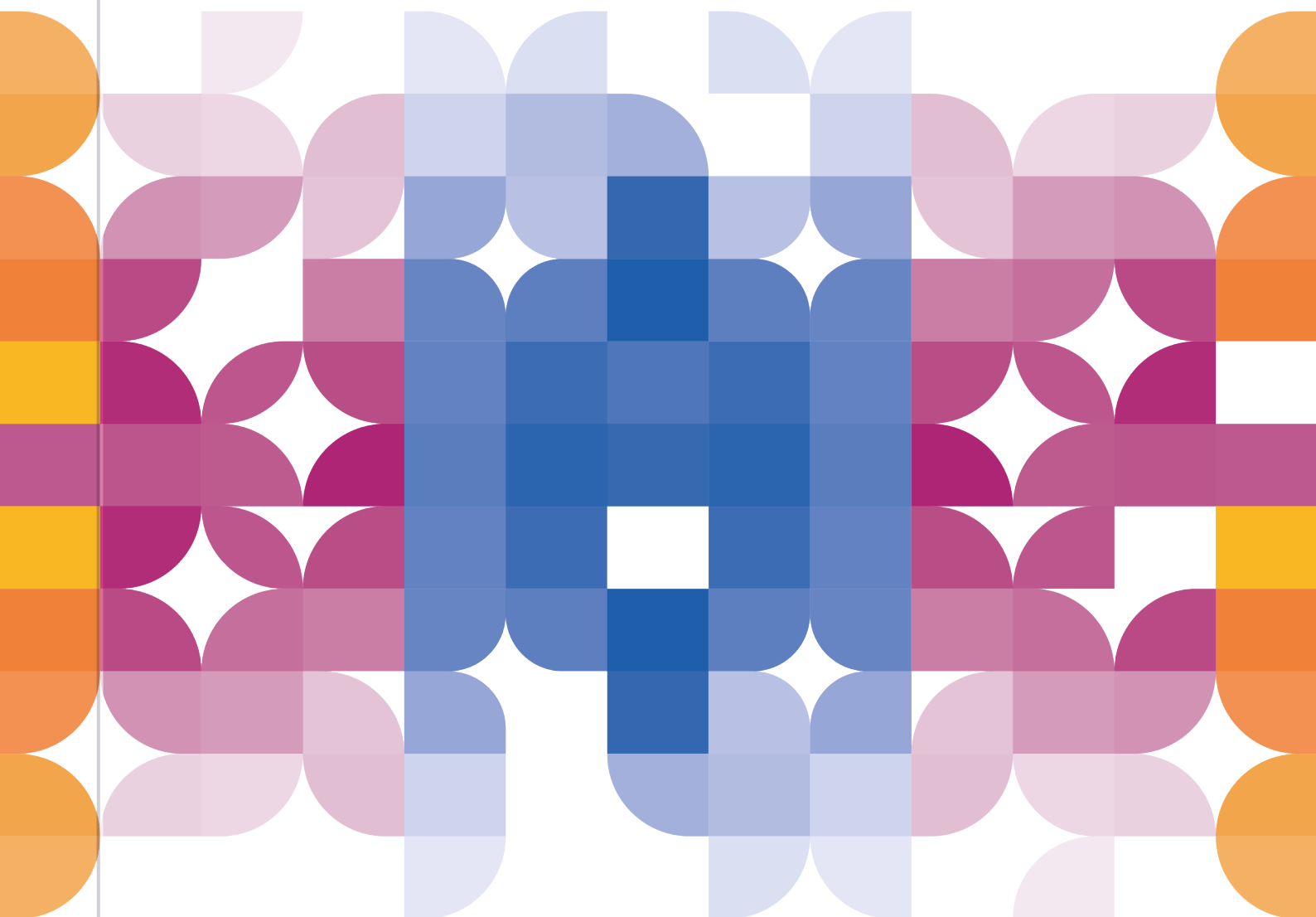


A rapid evaluation of the Enhanced Occupational Health and Wellbeing Programme across Hampshire and the Isle of Wight



Anna Badley, Jeni Malpass, Dr Sarah Williams
June 2023

Contents

1. Summary Infographic
2. Introduction
3. Background
4. About this rapid evaluation
5. Key themes
6. Case study on the Menopause Support Programme
7. Case study on the Musculoskeletal Support Programme
8. Case study on Employee Disability and Neurodivergent Advice Service (EDNA)
9. Future directions
10. References and acknowledgments



A RAPID EVALUATION OF THE ENHANCED OCCUPATIONAL HEALTH AND WELLBEING PROGRAMME ACROSS HAMPSHIRE AND THE ISLE OF WIGHT



AIMS

- To evaluate the unified approach to Growing Occupational Health and Wellbeing services across Hampshire and Isle of Wight
- To understand and learn from areas of excellence within the programme that can translate to other ICS/ICB areas

METHODS

We completed a rapid qualitative appraisal, a form of rapid evaluation method that provides a snapshot of a particular context. We completed 45 interviews, talking to people across organisations contributing to the programme's collaborative workforce.



MAIN FINDINGS

Integration vs personalisation: the journey into a unified approach – There is support and optimism for an integrated system which increases access and avoids duplication.

Innovation: releasing the catalyst for change – A shift in focus to proactive, preventative services which protect people and keep them well at work.

Sustainability: looking to the future, retaining the momentum – A clear willingness for the programme to continue yet apprehension concerning the withdrawal of offers if funding ceases.

Musculoskeletal, Menopause and Employee Disability and Neurodivergent Advice services and offers are generating impactful early results that are making a difference to our NHS workforce.

20,000

How we've reached
colleagues in Hampshire and the Isle of Wight
to help improve their health & wellbeing



Leadership circles

A SPACE FOR PEOPLE MANAGERS AT ALL LEVELS TO COME TOGETHER, SHARE THEIR EXPERIENCES, BE HEARD AND WORK THROUGH COMPLEX CHALLENGES.

Sign up on Eventbrite to access the sessions.
<https://bit.ly/32LBe0k>

A series of 4-hour, themed online sessions based on 16 principles for leading compassionately through challenging times.

Circle key staff, assign a mentor and provide peer-on-peer feedback on tasks.

I'M WORRIED ABOUT THE COST OF LIVING

A free, confidential, non-judgemental and provides personalised wellbeing support.

12th September 11.00-13.00 Non-clinical staff
29th September 13.00-15.00 Clinical staff
10th October 10.00-12.00 Non-clinical staff
2nd November 10.00-12.00 Primary Care

Deaf Awareness Training

One of the biggest problems that deaf people face is access to communication. We are delighted to partner with 'Respect' to provide deaf awareness training to colleagues across the ICS. This training will give you confidence in talking to deaf colleagues and patients.

12th September 11.00-13.00 Non-clinical staff
29th September 13.00-15.00 Clinical staff
10th October 10.00-12.00 Non-clinical staff
2nd November 10.00-12.00 Primary Care

Wellbeing Walk & Talk

Do you want to get fitter?
Increase your daily step count?
Relax, chat and enjoy a hot walk with others?

Join the Health and Wellbeing Walk Leaders!

A CONVERSATION captured

WELLFEST

The Inclusion & Wellbeing Event 2022

4-6 July 2022 Itchen Valley Country Park

CHECK YOUR STAFF NEWSLETTER FOR DETAILS ON TICKETS

Conversations on BURNOUT

A 100 QUESTIONS SERIES WITH RAZEL ANDERSON TURNER

UNDERSTANDING AND PREVENTING BURNOUT FOR YOURSELF AND THE PEOPLE YOU WORK WITH

ASK ME ABOUT SUPPORT

MENOPAUSE ADVOCATES

MENOPAUSE MEET-UPS

Virtual meet-ups to provide a safe space to talk about menopause. Everyone is welcome.

Staff listening sessions

Focussing on what matters to you

ALL SESSIONS ARE COMPLETELY CONFIDENTIAL AND DELIVERED BY OUR TRUSTED PARTNER INCLUSION INCLUDED.

Fitness classes

Mondays, Wednesdays, Fridays: 7-7.30am

THESE MORNING CLASSES ARE BRILLIANT FOR ME AS JOINING A 'LIVE' GROUP GETS ME UP AND GOING IN THE MORNING AND I LOVE THE PERSONAL INTERACTION.

TEAM ADMINISTRATOR, SOUTHERN HEALTH

Health & Wellbeing

HAMPSHIRE & ISLE OF WIGHT

MENOPAUSE SUPPORT

ALL ICS STAFF WELCOME!
WED, 15 JUNE 2022
10:00 - 11:00 AM

QUEST SPEAKER
KAREN ARTHUR
HOST OF THE PODCAST
MENOPAUSE WHILST BLACK

Investing in the mental health and wellbeing of your team

Level 7 Strategic Approaches to Mental Health & Wellbeing Accreditation
Apply now

STAFF PHYSIO SERVICE

70% of satisfaction survey respondents said the Staff Physiotherapy Service support from their GP/other health professionals for their MSK issue

your PEOPLE PORTAL

Health and wellbeing advice, sessions and training for all NHS and Primary Care colleagues.

WWW.HIOWPEOPLE.NHS.UK

Wellness Recovery Action Plan

A 3-day course that uses a prescriptive evidence-based practice and empowers you with the skills and confidence to deal with challenges in and out of the workplace.

WELLNESS WORKSHOPS for NHS staff

A safe environment to:

- Connect with other people
- Share how you're feeling
- Explore ways to keep yourself well

Presented by Discover Wellness

LGBT Allies Event with MindOut

A session for LGBT Allies across the ICS. MindOut is a mental health service run by and for lesbians, gay, bisexual, trans, and queer people.

Monday 25th July 2022 14:00-16:00

Spaces are limited so follow the QR code below to register in advance on zoom.

ONLINE YOGA

Wednesdays @ 7pm

ONLINE MENOPAUSE AWARENESS SESSIONS

Part of the Menopause Support Service for NHS and Primary Care colleagues in Hampshire and Isle of Wight.

30 mins online with MenoHealth

A 3-PART ONLINE SERIES WITH LEE CHAMBERS

Men's Mental Wellbeing
Male Allyship and Inclusion
Men and Menopause

EDNA

Employee Disability and Neurodivergent Advice

THERE'S A LOT OF ASSUMPTIONS ABOUT WHAT PEOPLE WITH DISABILITIES CAN AND CAN'T DO

one-to-one appointment

with one of our **MENOPAUSE ADVISERS**

Introduction

Hampshire and Isle of Wight (HIOW) is a trailblazer in Growing Occupational Health and Wellbeing (OHWB) services, focusing collaborative efforts on creating systemwide, integrated and multi-professional services that support large-scale health improvement of our workforce across all partner organisations, ultimately improving the health and wellbeing of our NHS people.

The NHS Health and Wellbeing Framework was used to strategically scope workforce needs, and an investment plan was developed based on this. Since 2021, new needs-driven, systemwide OHWB services have been created, which include:

- increased access for Primary Care
- systemwide menopause services
- a systemwide staff physiotherapy service
- an innovative Employee Disability and Neurodivergent Advice Service (EDNA).

The core objective is to reduce absence, increase retention and increase recruitment by making HIOW a good place to work. The Enhanced OHWB Programme has reached over 20,000 staff across the ICS to help improve their health and wellbeing, with 8,331 recorded face-to-face engagements with people since September 2022.

The success of this approach demonstrates what can be achieved through a unified focus on health and wellbeing, shifting towards a proactive focus that promotes and protects the health and wellbeing of NHS people.



“The success of this approach demonstrates what can be achieved through a unified focus on health and wellbeing.”

Background

The last few years have shown the NHS workforce working through considerable pressure. The pandemic highlighted the NHS workforce going above and beyond as well as placing a spotlight on wellbeing and occupational health need. Beyond the pandemic, the pressure has been sustained, with the NHS workforce working through the aftermath of COVID-19 as well as the impacts of workforce shortages, and increases in public demand (NHS England, 2022). The context of care has placed the need for occupational health and wellbeing support to the forefront, making it a strategic priority for the NHS (NHS 2023).

In 2022, NHS England published the Growing Occupational Health and Wellbeing Together strategy, providing a roadmap for improving the health and wellbeing of NHS people. The document pulled together strategic objectives from multiple reports and policy agendas across the health and social care setting including the NHS People Plan, The NHS Health and Wellbeing Framework and NHS Long Term Plan to set out four strategic drivers and areas for collaborative action.



1

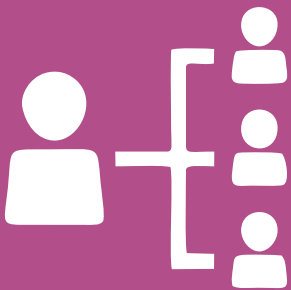
Growing the strategic identity of OHWB

2



Growing our OHWB services across systems

The four strategic drivers for the Growing Occupational Health and Wellbeing Together strategy



Growing our OHWB people

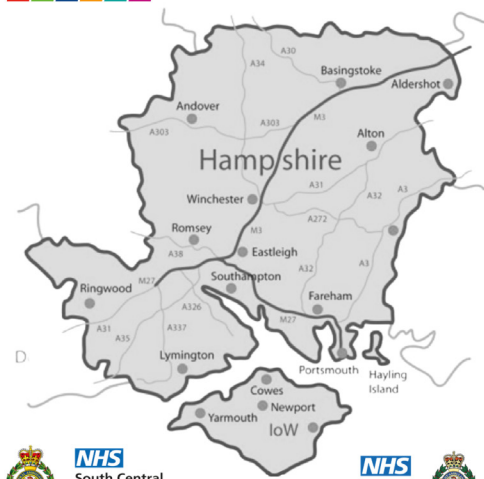
3



Growing OHWB impact and evidence-based practice

4

NHS
Hampshire and Isle of Wight



In response to the growing need for OHWB services and to the Growing OHWB Together national strategy (NHS England, 2022), HIOW was awarded funding to develop an enhanced Occupational Health and Wellbeing programme that worked closely with all existing health and wellbeing teams across the system in order to enhance the wellbeing offers. The programme was based on delivering a hub and spoke model that recognised the differences across ambulance, community, Primary Care, mental health and acute providers while delivering an integrated approach.

The programme includes the following providers:

- Hampshire Hospitals NHS Foundation Trust
- Isle of Wight NHS Trust
- Portsmouth Hospitals University NHS Trust
- Solent NHS Trust
- University Hospital Southampton NHS Foundation Trust
- Southern Health NHS Foundation Trust
- South Central Ambulance Service
- HIOW Primary Care Services

About this rapid evaluation

This rapid evaluation comprised of a central evaluation that explored:

- The unified approach to the Enhanced OHWB Programme
- The process of integrating the Enhanced OHWB Programme
- The process of co-ordinating the Enhanced OHWB Programme

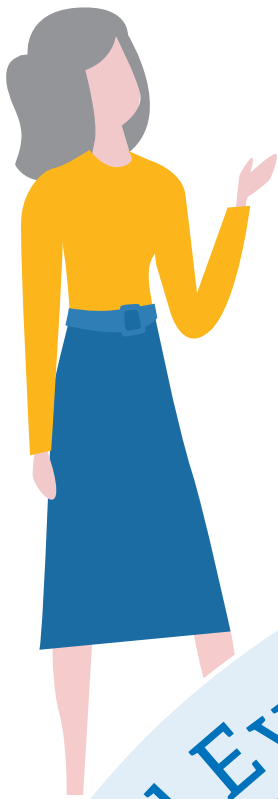
A series of three case studies were also completed to showcase individual work packages within the Enhanced OHWB Programme to create regional and national shared learning.

The case studies focussed on the following areas:

Menopause Support Programme

Staff Physiotherapy Service

Employee Disability and Neurodivergent Advice (EDNA) Service



The rapid evaluation took place between November 2022 and March 2023 across HIOW. A core evaluation project team of eight people, which included patient and public contributors, were involved in both data collection and data analysis. We used training and buddy support systems to maximise the potential of building capacity and capability research and evaluation methods. The team completed 45 interviews using both face-to-face and remote methods. Interviews took between 20 and 45 minutes and were recorded and transcribed or selectively transcribed based on the rapid evaluation aims. Interviews were based on quality improvement (continuous and methodical improvement) and appreciative inquiry (looking at what works well and why, learning from excellence).

Rapid Evaluation

Rapid evaluation methods provide a basis for identifying operational challenges and generating a platform for taking action (Vindrola- Padros 2021). Based on intensive and team-based data collection, rapid evaluation methods gain in-depth data from multiple sources over a short and intense data collection period. Data is analysed iteratively, informing subsequent cycles of data collection and emerging findings. The timeliness of rapid methods lends itself to the fast-paced context of the NHS, enabling evidence for both policy and applied intervention. There is also the wider value of the team-based and participant focus of the methods by increasing capacity and capability and centring value on the participant voice. Since 2020, Solent NHS Trust's Academy of Research and Improvement, under the mentorship and guidance of University College London (UCL) Rapid Research, Evaluation and Appraisal Lab, has established an Evaluation hub providing both internal and external expertise, training, and delivery of rapid evaluation methods in health and community settings.

About this rapid evaluation

The central rapid evaluation explored three key areas of the OHWB Programme: unification, integration and co-ordination.

Underpinning these areas were three key themes:



1. Integration vs personalisation: the journey to a unified approach

The benefits of integration – efficiency, access, and collaboration

Central to most of the participant responses was the overall support and optimism for an integrated system. Positivity about integration was linked to generating efficiency and increasing access to support. Participants felt that a central system avoided duplication, releasing time within individual Trusts to focus on Trust-specific occupational health issues. Many participants also felt that the centralisation of the occupational health and wellbeing offer would enable increased access.

“The biggest pro of integrated working is that we are not duplicating work - we are able to share what is good and what works well quickly. We are able to share resources and also share what we have found not to work so well, saving others time.”

“I think people realised there is a finite resource in wellbeing ... so coming together meant that things can be done at scale and people could be benefit from all of the fantastic work that’s been going on across the system immediately.”

“I think it makes sense to integrate and because ... the services are fairly similar that are offered across all the organisations, I’m assuming its more efficient and cost effective to run it in an integrated way, and that way you know everyone’s got access to everything.”

“It worked really well being able to support colleagues from all organisations, colleagues feel comfortable talking to a neutral person away from their organisation.”

Participants described add-on benefits to an integrated approach such as increased collaboration and networking across the system, beyond individual Trusts. Participants shared that collaboration was beneficial in generating richer discussions from a diversity of voices and this created a platform for shared learning.

“Integration has been an excellent thing... I think there are opportunities where there can be a one size fits all – and give opportunities to teams who are small or underfunded to have more access to services.”

“I think the idea behind it was absolutely fantastic. Really, really good, because it means that it doesn't matter where you live. You can access things like Physio.”

“One of the main pieces of feedback we've been receiving is getting people together in a room from different organisations and linking them up ... has definitely been a benefit.”

“Some of the feedback we've also received is that some of the conversations have been richer. Because when we put people into breakout rooms, you've got this diversity of opinion and perspective and experience.”

The journey to integration: organisational sovereignty, intense growth, and stability

Despite the outcomes of integration being viewed positively, there were several barriers to achieving this. Some responses voiced concerns about integration as opposed to individual organisation sovereignty. This perception was driven by initial concerns of duplication and loss of personalisation.

“[Some organisations] were very much pulling their shutters down, 'we're looking after our health and wellbeing of our staff, and we don't need any further help from you' ... One of our biggest successes has been the collaboration ... Getting people across the system to talk to one another, share the practice, and understand the benefits that a programme such as ours can bring to the rest of the system.”

“In practice the organisations are different, and they have their own anomalies, and they have their own differences and sometimes that can be the difficult part ... There may be some teething problems around that and that may resolve itself eventually.”

“One size doesn't always fit all. I guess that the individual organisations do operate differently ... and that makes it harder to give a bit more of the tailored approach to [each] member staff.”

One of the first issues to overcome was communication. Staff reported being overwhelmed by health and wellbeing offers, which made programme planning challenging as organisations did not fully understand what the integrated offer really meant. In response to the COVID-19 pandemic, there were many offers of support for staff from many different providers. However, once the systemwide programme was established and settled, trust and confidence in the integrated approach grew, leading to overwhelmingly positive views of integration.

“Communication hasn’t always been the best... Sometimes you weren’t sure whether to set up a [support intervention] because you heard the system was putting some ... together. So, you’re thinking well no point in me investing lots of money in this as a Trust if the system is going to do it.”

“There’s just so much stuff to try and navigate your way through and keep on top of, that’s probably the hardest thing. But that shouldn’t stop what we offer... I think it’s trying to find platforms where people can access what the information is.”

“Trying to communicate [offers] out into the organisation can be confusing because people don’t know if it’s a HIOW offer or a Trust offer. Which you could argue does that matter?”

“We’re probably still working in ... a reactive kind of way with sickness, absence and management, referrals, and things like this. So, we try and work collaboratively as much as we can. Just [making sure everyone is] understanding what is on offer.”



To streamline communication, the programme’s delivery team set up communities of practice with wellbeing and OH leads from the different Trusts to encourage information sharing, and they instigated a weekly newsletter sent to all wellbeing, OH and communications colleagues, with details of systemwide offers together with assets for colleagues to share on their staff platforms and spaces. To bring everything together in an easy-to-access place, the team created the People Portal – a website for all colleagues to be able to get support, sign up to sessions and catch up on sessions delivered.

2. Innovation: releasing the catalyst for change

Shifting the focus: from a reactive offer to a proactive approach

Many noted a marked difference in Trust wellbeing services that were regarded as reactive and the Enhanced OHWB Programme approach that was regarded as proactive. The difference was notable in the offers available, with many of the enhanced offers being targeted at prevention of ill health and promotion of wellness. The integration of the service across the system led to a change of focus and mindset to protecting people working and keeping them well at work.

“Getting the managers to recognise the importance of releasing their staff to attend ... and it’s also giving our staff the confidence to ask their managers for permission to attend.”

“At first it was just reacting, I was having to react to the demands that were coming [but since] we have had the health and wellbeing framework it’s become more formalised and it’s looking more strategically, and the governance. So, it’s evolving every week. ”

“Doing some real prevention work and supporting staff to stay well in work and it’s lovely to have all the reactive stuff and be picking up people when they’re falling. But we really need that preventative kind of approach to keep people well at work.”

A safe space for innovation: leadership for growth

For many, the shift in focus was enabled by the central leadership driving the Enhanced OHWB Programme. **A lot of the offers were new and evolving, generating a wave of innovation to support the wellbeing of the systemwide NHS workforce.** Leaders within the Enhanced OHWB Programme were encouraged to test ideas, move at a fast pace, and implement new and novel ways of doing things. More broadly, this was facilitated by the leadership practicing workforce safety, making people feel safe and supported if things didn't work or go to plan.

“We're big into [testing] proof of concept ... and so we'll try it with a group of staff through our communities of practice.”

“I think we do find ways of doing things ... quicker [and] legitimately without cutting corners.”

3. Sustainability: looking to the future, retaining the momentum

Short-term funding vs long-term planning

The enthusiasm for the new model and way of working was often stifled by uncertainty about the future. For many this stemmed from a lack of clarity of future funding streams. This uncertainty at times limited the progress of certain workstreams. For some, frustration and concern were evident, with clear willingness for the programme to continue to build amid concerns of the withdrawal of some offers if funding were to stop.

The sustainability of the programme is hard...which is difficult not only internally for the programme staff ... but equally for consistency across [the system].”

“I think it doesn't help that people are on fixed term contracts...because it sets the wrong tone ... It feels like people are putting in a lot of work to a programme, and [uncertainty of the future] kind of undermines the value of it.”

“Where the funding is not quite known ... it feels like things are potentially in limbo ... It takes us quite a long time to get messages out to people and there's always that fear that just as we're starting to make headway and people are starting to understand, things are pulled.”

“It could be detrimental to say we've had that support but we're going to pull it now. And actually, a year is not a very long [time] to really understand how well something's working.”

Growing into the future: the scope and vision for health and wellbeing

The programme delivered a new model of enhancing OHWB offers by shifting Trusts and cultures into proactive thinking to help to keep people well in work. The scope and breadth of the service offers expanded and changed over time showing how integration can lead to efficiencies and innovations. As people looked to the future, many felt the challenges NHS people face continued to grow as people dealt with increasing pressures. Whilst the scope and future of the Enhanced OHWB Programme remains uncertain, the progress made so far offers the potential to continue to tackle ever-growing needs in supporting NHS people to remain well in work.

“After all that fabulous work bringing us all together ... we've got to an amazing stage across HIOW in partnership working, but I think we're probably still only about 30% of the way there. I think there's still masses of work to do and part of that for me is the longer-term work, which is culture change. But we need the offers to be sustained ... in order for us to make this [long-term change] happen.”

Case Study: Menopause Support Programme

1,144 colleagues attended
MenoHealth sessions

240 1:1 appointments
delivered by Menopause
Advisers

50 colleagues trained as
Menopause Advocates across
the system

The Enhanced Health and Wellbeing Programme has created a space to unite a menopause support workforce formed by people across HIOW organisations who have a special interest or experience in menopause. This has enabled a centralised approach ensuring that employees across the system have equitable access to menopause information, resources and support which supplements existing provision in individual Trusts. Collaborators have created menopause guidance and policy that can be adapted and adopted across organisations.

The Menopause Support Programme has successfully created a range of offers for employees across Trusts and Primary Care. MenoHealth sessions have witnessed an impressive attendance of 1,144 colleagues, while an additional 240 colleagues have availed support through 1:1 consultation delivered by Menopause Advisors. Alongside this, 50 colleagues working within organisations across the system are trained as Menopause Advocates.

“The [delivery team] is made up from people across different organisations ... [This] means all of the organisations have an understanding of what works within their space”



There is a drive from the Menopause Support Programme that HIOW NHS Trusts and Primary Care are recognised as menopause friendly workplaces. Successful accreditation will increase the reputation of system partners as organisations that take women’s health issues seriously.

Increasing awareness, reducing stigma

Breaking down barriers to accessing support for a diverse workforce, and addressing the stigma associated with menopause has been a central focus of the programme. A range of offers have been established to support a change in the narrative associated with menopause to promote an open and inclusive culture.

“I want to challenge [common] phrases like; women can be emotional, women are hormonal.”



MenoHealth sessions, which are open to all colleagues, take place fortnightly, and address a series of topics, such as nutrition, sleep, depression, exercise, and body changes through the lens of menopause. These sessions are a favourite among staff as evidenced by the increasing number of registrants to the series. Initial MenoHealth webinars drew approximately five attendees, however this has increased to an average of 30 delegates per session with over 1,144 colleagues joining sessions.

Wider awareness and education have been promoted through a World Menopause Day event and menopause awareness sessions for colleagues. These initiatives are shaping a culture where those experiencing menopause symptoms are supported to remain well personally (at home) and professionally (at work). Staff reported several positive outcomes as a result of attending the MenoHealth and awareness sessions. Firstly, the sessions are helpful and attendees welcomed signposting to an extensive range of resources and information. Secondly, the sessions contributed to an increased sense of belongingness as “it made you realise you’re not on your own” and, “it’s good to feel like you’re not alone.” Thirdly, staff were empowered to highlight menopause in team meetings and enquire about becoming a champion.

Feedback also highlighted concerns about the capacity and ability of male partners, colleagues, and managers to support struggles with menopause in the workplace. Responding to these concerns, the programme has successfully commissioned and delivered a three-part men’s health series – 1. Men’s Mental Wellbeing; 2. Male Allyship and Inclusion; 3. Men and Menopause. Facilitated by a psychologist and a wellbeing coach who advocates for menopause and men’s health, these sessions were designed to cultivate and progress male allyship and further break down menopause stigmas.

Menopause is a key issue in the NHS workplace and line managers play a vital role in supporting people experiencing menopausal symptoms. To improve direct workplace support the programme is set to launch a catalogue of training for managers and team leaders across Trusts. The training will include menopause awareness webinars and general Q&A sessions for managers, paving the way for open conversations which recognise and understand the impact of menopause on colleagues. It is anticipated that more employees will feel comfortable to share when menopause symptoms are negatively affecting them and their ability to perform work-related duties which will result in increased incidences of menopause being recorded as the reason for sickness absence.

The Menopause Support Programme recognises the diversity of the NHS workforce and the barriers to support that may be experienced by BAME and LGBTQ colleagues.

“We talked a lot over the last weeks in our team [about the importance] of diversity and inclusion and how you can challenge certain stigmas.”



Initial steps have been taken to increase diversity within the provision of support with a successful session facilitated by Karen Arthur, host of ‘Menopause Whilst Black’ podcast, attended by 44 employees.

Being aware that there is no single experience of menopause the support programme is taking steps to boost its reach and inclusivity through collaboration with and/or signposting to:

- The Daisy Network charity regarding premature ovarian insufficiency and the impact of premature menopause
- Transgender and non-binary communities; recognising transitioning can lead to menopause
- Menopause Whilst Black podcast; Menopause Taboo in Women from Different Ethnic Groups podcast
- ADHD Foundation – A guide to ADHD and the Perimenopause/Menopause

1:1 Consultations

The 1:1 consultation service has been a triumph within the Menopause Support Programme. It has enabled employees across the system to access advice from individuals who have extensive knowledge of menopause and the impact of symptoms. In the first 10 months of the service, there were more than 270 contacts made to this service, which utilises a holistic tiered approach. Initial consultations with Menopause Advisors focus on general health and wellbeing providing an opportunity to explore, identify and offer advice tailored to the individual's experience of symptoms related to menopause. For example, sleeping issues, feelings of stress and anxiety, memory problems or 'brain-fog' or recognising that excess weight is particularly relevant and impacts the severity and longevity of menopause symptoms. The Menopause Advisors include nurses with expertise or a special interest in menopause. If required, a second appointment can be made to provide further space for individuals to discuss evidence-based menopause and lifestyle advice and support. The advisory team have clinical supervision from a Menopause Specialist Clinician and can refer people for additional advice and input in complex cases. There have been seven referrals to the Specialist Clinician since the service launched in April 2022.

The 1:1 consultations are accessed via self-referral; it was important to the Menopause Advisors that staff found it easy to have "somewhere to go and someone to talk to" without cumbersome referral and access pathways which may hinder or prevent individuals' seeking support. Employees receiving 1:1 consultation valued high quality advice delivered with compassion and understanding. People found it helpful that they could "speak with someone who understood my condition" and liked "being able to speak about experience and feelings in a comfortable way and be signposted to resources and information".

Menopause Advocates

A significant contributor to the success of the Menopause Support Programme has been the creation of Menopause Advocates within Primary Care and each NHS Trust across HIOW. The advocates are keen and highly motivated individuals who have received in-depth CPD accredited training from 'Henpicked: Menopause in the Workplace' which enables them to provide support, signposting, awareness workshops and managers' workshops. There are currently between 2 and 8 advocates in each organisation and the popularity of the role has seen an oversubscription in training requests which is currently being managed by a holding list. With an eye towards inclusivity there will be a focus to diversify advocates.

"We've got a waiting list of people that want to become an advocate, and I think that's a really good measure of success."



Establishing a collaborative to standardise the role and duties of Menopause Advocates and Menopause Advisors has led to the formation of a Community of Practice (CoP). The CoP is evolving beyond a focus on standardisation of support with aspirations for a joint enterprise of shared practice where advocates and advisors learn with and from each other to enrich the menopause support within and across organisations. Through this platform there are plans to:

- Upskill and increase advocates' confidence in facilitating webinars and workshops
- Develop a Menopause Champion role
- Support a systemwide application for accreditation as a menopause friendly workplace

Next steps and longer-term goals

The continuation of the current Menopause Support Service and steps that can be taken to further improve the offer were described as reliant on the ability to secure sustained funding.

- Recognising that it can be challenging for clinical colleagues to find time to access online support, the programme continues to promote the value of the Menopause Advocates and Menopause Advisors to offer an 'outreach' approach to support with advocates working with teams onsite to provide training and raise awareness.
- Development of Menopause Champions across organisations, cascading training.
- With the concept of intersectionality in mind, understanding that people are more than the condition they are experiencing, consider ways in which to raise awareness of and engagement with the service among the wider diverse workforce.
- Aim to gain the Henpecked accreditation by March 2024, making HLOW ICS a menopause friendly workplace.



Key Learning

- The Enhanced OHWB Programme provided the opportunity to develop coordinated and comprehensive menopause support across NHS Trusts and Primary Care.
- Online awareness events and sessions have been successful, with increasing numbers of registrants and positive feedback from staff, such as an increased sense of belonging and empowerment.
- Male allyship and recognising diversity in menopause leads to a better understanding of the different experiences of menopause and ensures that support and resources are accessible and inclusive to all individuals who are going through this transition.
- The use of a wraparound approach to health and wellbeing through the 1:1 consultation service has been successful in enabling employees across the system to access advice tailored to the individual's experience of symptoms related to menopause and contributing lifestyle factors.
- A menopause support workforce comprising registered professionals and other motivated staff creates flexibility in access and a wider range of opportunities for clinical and non-clinical colleagues to access information, support and resources.



Case Study: Staff Physiotherapy Service

68% of colleagues who took part in a feedback survey said this service had stopped them needing to contact their GP

93% of colleagues would recommend the service to a colleague or a friend

83% of colleagues believe it's had a positive impact on their health and wellbeing

The Enhanced OHWB Programme provided an opportunity for NHS Trusts to transform employee access to musculoskeletal (MSK) support services. The enhancement focused on the integration of existing Staff Physiotherapy Services for NHS staff to improve choice, equity, and collaboration and to enable people to access clinics in a location convenient to them, regardless of their employing Trust. The Staff Physiotherapy Service contributed to the Enhanced OHWB Programme's online hub, the People Portal, providing access to a range of self-help resources, virtual classes, and evidence-based advice to support prevention and self-management of common MSK disorders.

A survey completed by colleagues who had accessed the service underscores the considerable benefits and support provided. Specifically, 68% of colleagues stated that the service had effectively eliminated the need for them to consult their General Practitioner. An overwhelming 93% expressed their willingness to recommend this service to both colleagues and friends. Additionally, an impressive 83% of respondents attributed a positive impact on their overall health and wellbeing to the service.

The Staff Physiotherapy Service is available to approximately 46,000 NHS employees working across the following Trusts:

- University Hospitals Southampton NHS Foundation Trust
- Southern Health NHS Foundation Trust
- Solent NHS Trust
- Portsmouth Hospitals University NHS Trust
- Isle of Wight NHS Trust
- Hampshire Hospitals NHS Foundation Trust
- HIOW Integrated Care Board

A cross-Trust community of practice was formed, which included physiotherapist professionals and clinicians. There was overwhelming support within the community of practice to create the integrated service; being able to contribute to service design and having an opportunity to raise and solve concerns quickly removed potential barriers to collaboration.

"I think the really important bit of having that community of practice [enabled us] to take all the best bits from each of those six Trusts and learn from them to make sure everyone shares that best practice."



The community of practice supported the notion of an 'NHS Family' recognising that integration can improve access and equity of support for employees, making it the right thing to do.

"I think that the spirit of collaboration, the spirit of system working, and the spirit of ... all working for the NHS [shows] this isn't about organisational sovereignty. This is about the right thing for our people."



Before the launch of this enhanced service in July 2022, individual Trusts had local schemes for their own staff that enabled them to access staff physiotherapy services where they work. The enhanced service has integrated these provisions into one ICS-wide service to enable a greater choice of location for NHS employees across HIOW who can now self-refer and book physiotherapy at anyone of 22 locations across the region.

Simplifying referrals

A single standardised Staff Physiotherapy Service self-referral form has created a single point of access to the service. Since the launch in July 2022 there have been 1,598 staff referrals. The online self-referral form was positively received with 89% agreeing that it was easy to access the Staff Physiotherapy Service. This positive trend continues with service users reporting that they perceived it to be a brief period from referral to appointment and that they were seen very quickly. An objective of the Staff Physiotherapy Service was to streamline referral processes, including the onward referral pathway, by removing the need for individuals to visit their General Practitioner (GP). Instances where onward referral was required, e.g., for orthopaedic management, were also considered to happen promptly.

"I was able to see a highly capable professional, quickly and in a way that was easy to work around other work commitments."

"Quick to get an appointment in a place I can get to."

"I was promptly referred to Orthopaedic for a steroid injection which came through within a couple of weeks."

"When pain interferes with mobility and focus, it's wearing. Getting skilled help as quickly as possible is encouraging."

Keeping well at work

More than 68% of people felt that the enhanced Staff Physiotherapy Service had prevented them from having to access support from their GP or other healthcare professional. Members of staff have reported a range of advantages in negating this need. There are NHS staff members across the ICS who are experiencing MSK disorders and are not seeking help from a GP as they are concerned that it is not important enough to warrant GP attention, that the wait for appointments will be too long, and that a lengthy wait while experiencing pain may mean an extended period away from the workplace.

"I would not have bothered going to the GP until it was much worse and then it is likely I would have had taken time off work due to back pain."

"This service also saved me making an appointment to see my GP which would have meant a much longer process and possibly time off of work in the future."

"It was great to be able to access a physio appointment without a GP referral as I kept putting off seeing my GP because it didn't seem 'important' enough."

12% of those who have accessed the Staff Physiotherapy Service were off work at the time of self-referral due to their problem. The wrap around support through physiotherapy treatment and the People Portal resources has been of value to staff in helping keep them well and manage their condition.

“Without this, I think I would be becoming more deconditioned, and further problems were starting because I was compensating for my injury. Last time I went via my GP and it was complicated and time consuming, and the level of help I got was less. I’m benefitting from live group zoom physio sessions which are really helpful.”



For some, their concern is either caused or exacerbated by work related activities. There is therefore a sense that it is just and fair that organisations which value the health of staff will have programmes like the Staff Physiotherapy Service available.

“I had previously been referred for a similar problem 3 years ago by H4work and had waited 6 months for an appt. This time, I was seen and started treatment within 2 weeks. As it is an issue mainly caused by work and that is affecting my work it seems appropriate and good that I was seen quickly this time and treated at work without needing to see my GP or go privately.”



Freedom of choice:

A major benefit of the Staff Physiotherapy Service is the option for staff to access physiotherapy at a site or location that would not have been available to them before the HIOW integration of services. Many staff have taken advantage, selecting appointments with physiotherapy professionals based outside their employing Trust. The choice itself is a real success of the Staff Physiotherapy Service. Staff have valued the flexibility and freedom to decide where they would like to be seen, whether that was in their place of work or closer to home. Almost 90% of service users felt the location of their physiotherapy appointment was convenient.



“Very convenient to have a service in our local community, and place of work.”

“I was offered three different sites for attending an appointment and opted for GWM (Gosport War Memorial Hospital) as it is closest to my home and easy to get to and park at.”

“Quick to be seen and most convenient to attend the appointment whilst onsite at work.”

“The location of appointment was extremely important, makes it easier to schedule and attend.”

Impact on mental health and wellbeing

A positive outcome of the Staff Physiotherapy Service has been its impact on people’s mental health and wellbeing. Those who have accessed the service have an optimistic view of the future as they consider being able to return to physical activities and the prospect of becoming pain free with increased movement. Many of them are directly linking this to their overall sense of wellbeing.

“I was convinced before I started physiotherapy that I was going to have to live with the pain but she rehabilitated me to the point I can now be as active as I like without having to worry or go through the paralysing pain I used to experience daily.”

“To be able to access the service so quickly has prevented me from further injury or pain which would likely have forced me to give up running. This would have had a significant impact on my mental wellbeing.”

Next steps and longer-term goals

The continuation of the Staff Physiotherapy Service is reliant on the ability to secure sustained funding. To progress this further and to prove the value of continuing this Service, the team will:

- Scope areas of the system that are currently under-provisioned and build further capacity to increase employment availability.
- Deep dive into absence and sickness data to track potential trends or impact points and work up correlation between spend per head on MSK services and sickness absence data.
- Deliver further development of a systemwide proactive and preventive approach to MSK disorders, considered through the lens of policy, procedure and practice to uplift skill and competency.



Key Learning

- It is possible to integrate Staff Physiotherapy Service across NHS Trusts to deliver an enhanced service over a wider geographical area.
- A greater choice of treatment location has enabled staff to be pragmatic, attending physiotherapy appointments without having to travel long distances.
- Staff are hesitant to look for support if they think that it will take too long to get, or if it means having to take time off work. Making it easier for staff to seek help from physiotherapy services through an easy to navigate self-referral form encourages people to reach out, particularly those who want to avoid approaching their GP.
- Staff value the additional support resources on the People Portal which provides them with tools to manage their issue, preventing deconditioning.
- By providing flexible, time-efficient support, tools and resources to treat and manage concerns the enhanced programme is having a positive impact on people's holistic health and wellbeing.

Case Study: Employee Disability and Neurodivergent Advice (EDNA) Service

82% of colleagues say EDNA will help them stay in their role

45% of colleagues say EDNA has prevented them needing to take time off work

83% of colleagues would recommend EDNA

The Enhanced OHWB Programme secured funding for a new initiative, the Employee Disability and Neurodivergent Advice (EDNA) service. EDNA is a confidential advisory service for NHS and Primary Care employees across HIOW who are living with a disability, long-term condition and/or are neurodivergent. Through a specialist team of Disability and Accessibility Advisors EDNA offers employees multifaceted support which includes:

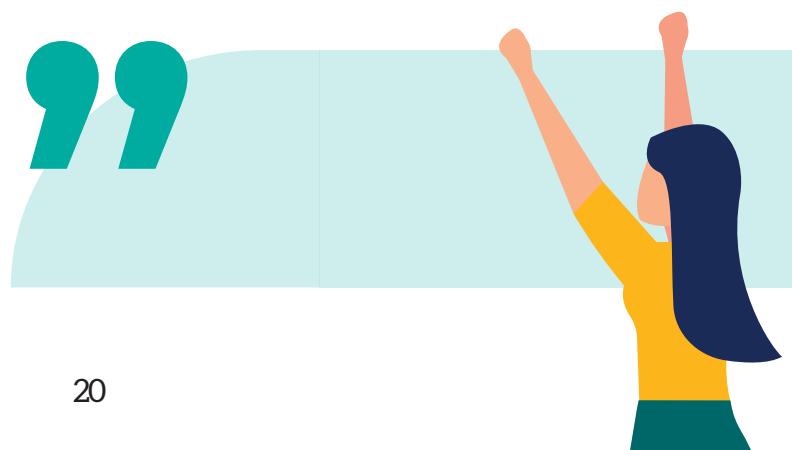
- 1:1 consultation
- Advice for workplace reasonable adjustments
- Information and signposting
- Advocacy
- Manager training and advice
- Employment rights and advice
- Say Hello to EDNA (a series of online awareness sessions)

Via EDNA, NHS and Primary Care organisations across the ICS are prioritising disability and neurodiversity awareness to help create supportive, inclusive, and productive workplaces in which employees feel valued and respected. With the correct support colleagues with a long-term disability and/or neurodivergence can thrive and flourish in their role.

Demand for disability and neurodiversity focused support

EDNA was launched in December 2022 and received over 150 referrals in the first three months. Colleagues can be advised to refer by Occupational Health or their line manager or they can choose to self-refer. They do not require a manager referral, which has increased the accessibility of the service. Organisations have shared the self-referral pathway on their intranets and this information is also available on the HIOW People Portal, the online hub created as part of the wider Enhanced OHWB Programme. Most referrals are from individuals who have been working within their organisations for more than six weeks, however there are increasing referrals from individuals in their first six weeks of employment and a smaller number from individuals starting with an organisation soon. Early data indicates that there is an appetite for support from EDNA services from both clinical and non-clinical colleagues and that individuals are returning for follow-up support.

“We don’t have any gaps at all, we’re full in all our appointment slots. As soon as somebody puts in a referral, they’re taking the very next slot.”



Empowering the individual:

Central to the EDNA service is the 1:1 consultation with an EDNA Advisor. Consultations enable the individual to share specific challenges and barriers that are being experienced and preventing them from performing at their best. Many of the people accessing EDNA support are coming from a place of vulnerability, having potentially experienced bias and discrimination personally and professionally. EDNA Advisors have described how they strive to create a space for the employee to feel safe when disclosing their needs and feel reassured that the advisor they are talking to can help.

“Sometimes you’re the first person that they’ve spoken to about their disability or long-term health condition ... it’s being sensitive to that. But also understanding it’s a safe space for them to talk about that and to know that there is support available and they’re not alone.”

“I find that some people do come to us, and they feel that they’ve tried every avenue. They don’t have any other support available out there, and I think we have quite a lot of knowledge and skills. There’s always something I say to somebody, it’s never the end we can always support you.”

The opportunities created through 1:1 consultation for targeted assessment, support and advice have been a real strength of the service, leaving employees feeling empowered.

“I always felt uncomfortable and hid my learning disability. Thanks to the advisor encouragement and support I feel able to talk and let others know of my condition and no longer feel embarrassed by it.”

“Feel very positive about moving forward with my role especially after this assessment. So, I’d just like to thank the service.”

A key outcome of 1:1 consultation has been the practical support and resources which are recommended, sourced, and made available as a direct result of the employee’s interaction with the service. A prime example of this being the help that EDNA offers individuals and line managers through raising awareness of and accessing the Government’s ‘Access to Work’ scheme. This scheme helps people stay in work if they have a physical or mental health condition or disability. The EDNA team supports employees and managers with applications and makes themselves available for follow-up if necessary.

“I was referred by occupational health and my line manager and I have left feeling very supported with a clear plan going forward. It was useful to hear about different resources and tools I could look at that I otherwise wouldn’t have known about and especially the government scheme to help with the funding element. I feel very positive about moving forward with my role especially after this assessment.”



Recognising that individuals do not always disclose their disability at interview stages or when they move roles within an organisation the EDNA team has considered ways in which they can help people feel more comfortable and assured in raising their needs in new work environment. After each consultation a full and comprehensive letter is written and sent to the employee which details recommendations and individual support requirements. EDNA Advisors advocate that

employees could show the letter or share the information with managers, meaning that they may not have to repeat conversations and assessments. The concept of individuals having something to share if they would like to has gathered real momentum and there are plans to work with Solent NHS Trust's Diversity and Inclusion team to develop a 'This is me' passport which contains information on the conditions a person is living with and the adjustments that they need. This is based on the premise that the passport can go with the individual if/when they move roles within a Trust or even on to a different Trust in HIOW ICS.

Benefits for the organisation

EDNA is positively raising the profile of NHS organisations in HIOW by helping to move towards more disability and neurodiverse friendly workplaces who do not only see the disability and long-term conditions, but they also see individuals' skills and strengths. EDNA is supporting both the individual and organisations through recruitment and HR processes and is working with managers to boost awareness and understanding of disability, neurodiversity, and reasonable adjustments. Providing this service can potentially bolster recruitment and retention of staff through fostering workplace environments that are sensitive to the needs of the workforce, promoting inclusivity and nurturing health and wellbeing.

"[The EDNA Advisor] has been helping a staff member from my team and following that I have met with her to go through her recommendations. [The EDNA Advisor] has been absolutely great - she very patiently went through all the recommendations with me and her rationale behind the adjustments needed. The service that has been set up to provide support to organisations / staff / managers is efficient too. [She] was very forthcoming with dates which was so helpful in getting action plans put together sooner rather than later."

"You guys are amazing! You really helped ease my anxiety and really help support my learning needs. More NHS trust should have this service as it's so valuable."



EDNA is recognised as a trailblazing initiative. Organisations outside the HIOW ICS have contacted the EDNA delivery manager with requests for sharing practice and learning.

Next steps and longer-term goals

The continuation of the current EDNA service and steps that can be taken to further improve the offer are detailed below:

- Employees who refer to EDNA before their employment start date or within a six-week period after their start date will receive a recommendation from their advisor to apply to Access to Work. The organisation will not incur a cost for any reasonable adjustments that are made within this period unless they are standard adjustments that an employer must already have in place
- Further consider EDNA through intersectionality and continue to reach out to BAME and LGBTQ colleagues
- Work with other services within organisations (e.g., Occupational Health, HR) to further embed awareness of the support EDNA can offer therefore raising the profile of EDNA across services and with current and future employees
- Contribute to the development of a 'This is me' passport, in collaboration with colleagues from the Diversity and Inclusion team



Key Learning

- There is an appetite at both an individual and organisational level for an NHS service which prioritises disability and neurodiversity awareness and support for employees. Organisations outside the region are keen to learn from this initiative.
- Employees accessing the service are empowered to talk about their learning disability and/or neurodivergence which is enabling Trusts to provide the appropriate support and adjustments for the individual to flourish in their role.

Future Direction

The Integrated Care System (ICS) Enhanced OHWB Programme is continuing to generate impactful results that are making a difference to our NHS people as evidenced in this evaluation. The programme is funded by capital and a sustainable long-term revenue funded programme would ensure it can continue to deliver benefits to all HLOW NHS people.

References and Acknowledgments

Reference list

- NHS England (2022) Growing Occupational Health and Wellbeing Together: Our roadmap future NHS England: London
- NHS England (2020) We are the NHS: People Plan 2020/21 action for us all NHS England: London
- NHS England (2021) NHS Health and Wellbeing Strategic Overview NHS England: London
- NHS (2019) The NHS Long Term Plan NHS: London

Acknowledgements

Thank you to the project team; Elizabeth Fofana, Amie Zolanvar, Natasha Turner, Mary Ramsay, Ann Williams, Natalie Parker, Anna Peachey.

Appendix

Driver 1. Growing the strategic identity of OHWB

- 1.1 Integrated OHWB (Occupational Health and Wellbeing)
- 1.2 Strategic voice of OHWB
- 1.3 A trusted and proactive brand
- 1.4 Collaborative action and investment in OHWB

Driver 2. Growing our OHWB services across systems

- 2.1 Inclusive, needs-driven, and well-resourced OHWB
- 2.2 Integrated service user pathways
- 2.3 Common service development framework
- 2.4 Service innovation
- 2.5 Quality improvement
- 2.6 Maximising technology and digital
- 2.7 Integrated Care System collaboration
- 2.8 Improving access for smaller healthcare organisations and primary care

Driver 3. Growing our OHWB people

- 3.1 Multidisciplinary OHWB workforce planning
- 3.2 Attractive career pathways and talent management for OHWB professionals
- 3.3 Credible and accessible OHWB education and training
- 3.4 Empowered OHWB leaders
- 3.5 Empowered OHWB workforce
- 3.6 Developing all NHS managers in supporting employee health and wellbeing

Driver 4. Growing OHWB impact and evidence-based practice

- 4.1 Using data to demonstrate the impact of OHWB
- 4.2 Driving OHWB practice
- 4.3 Demonstrating the value of OHWB
- 4.4 Driving the OHWB market
- 4.5 Demonstrating the impact of this strategy