EAST SUSSEX WELLBEING AT WORK ACCREDITATION PROGRAMME

Independent Evaluation Report Year 2

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January 2024

Executive summary

Background

This report sets out the results of the second year of the evaluation of the East Sussex Wellbeing at Work programme.

The evaluation aims "To understand to what extent the East Sussex Wellbeing at Work programme has achieved its intended outputs, impacts and outcomes, and understand the factors that influenced this including the process undertaken in developing and implementing the programme."

The evaluation comprised:

- Development of key indicators
- A programme stakeholder survey
- A survey of participating workplaces
- A survey of workplaces that were not participating
- An employee survey
- Semi-structured interviews with selected stakeholders and employers
- A 'deep dive' of the topic of Mental Wellbeing at Work

Findings

- The design and implementation of the programme has followed best available evidence and good practice and has benefited from co-production between employers, employees, and external stakeholders.
- Despite very limited resources, over 130 organisations have registered onto the programme during the first two years and these registrations have continued at the same rate in year two as in in year one.
- The companies registered on the programme collectively employ around 18,000 individuals.
- There is evidence that the programme has led to improved knowledge and understanding of the health and wellbeing issues that they can help to influence and support.
- Across the two years (based on 59 organisations) over 100 new health and wellbeing policies have been developed, most notably in relation to the two areas of greatest concern – mental health and wellbeing and musculoskeletal health.
- It is challenging to assess the impact on employees' health and wellbeing. This would be best achieved by an evaluation design that set out to explore this issue in depth.

Recommendations

- Seven recommendations are made for changes to the programme.
- Six recommendations are made for approaches to future evaluation.

Contents

1. Introduction

In November 2018, East Sussex County Council Public Health Team approved a paper that outlined the options to develop a workplace health programme for East Sussex[1]. In 2020 the team started to develop a 3-year pilot programme with the aim to:

"Improve health and wellbeing of employees in the workplace setting, particularly targeting workers who may experience health inequalities, e.g. low skilled, low paid and from economically deprived communities."

In December 2020 Cavill Associates, working with Progress Health Partnerships were commissioned to:

- Conduct an evidence review of workplace health-related interventions and provide expert advice and support to the development of the Healthy Workplace Programme and inform the final model, subsequently launched in Spring 2021.
- Design an appropriate outcome framework (see section 2)
- Design an evaluation framework & toolkit to assess the impact and outcomes of the new East Sussex Healthy Workplace Accreditation Programme 2021 – 2023, to inform future investment decisions.

In June 2021, following successful completion of this preparatory work, Cavill Associates and Progress Health Partnerships were appointed to conduct an independent evaluation over the first two years of the programme.

This report sets out the results of the second year of the evaluation and builds on the findings from the year 1 report (December 2022).

2. East Sussex Wellbeing at Work Outcomes Framework

Following completion of the evidence review and programme design, the evaluation team worked with stakeholders to develop an outcomes framework for the programme. This was used to identify key evaluation measures to assess effectiveness of the programme implementation in the short term:

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[1] Martin H. East Sussex Health Workplace Programme: Review of options. Public Health Senior Team (2018)

Fig 1: East Sussex Wellbeing at Work Outcomes Framework (text-only readable version at Appendix 4)

wellbeing at work
EAST SUSSEX

EAST SUSSEX COUNTY COUNCIL: WORKPLACE HEALTH

East Sussex County Council Workplace Health Accreditation programme is designed to support and recognise achievements in workplace health and wellbeing

The programme aims to develop a range of accreditation standards across a range of workplace health topics and support local companies in developing and implementing actions to support standards across the areas of:

Healthy Eating and Healthy Weight   Physical Activity   Mental Wellbeing   Musculoskeletal Disorders   Leadership, Management and Culture Change   Smoking Cessation   Alcohol and Substance Misuse

Managing Sickness Absence and Staff Turnover   Health and Safety   Environmental Sustainability

CONTEXT

Why Workplace Health: On average, adults spend one third of their life at work, therefore our jobs and our workplaces can directly and indirectly influence physical and mental health and wellbeing. making it a key setting for health promotion activities.

Geography: East Sussex has a population of 555,000 residents of which 53% (304,000 people) are of working age. In 2017 there were over 24,000 active businesses. 86% were micro businesses (<10 employees) and 11% were small business 10-49 employees) The county faces a number of challenges including a low wage economy, high levels of worklessness and benefit dependency in the more deprived wards, under representation of high growth sectors, and the majority of Small and Medium Sized Enterprises (SMEs) only serving local markets.

Importance of workplace health and wellbeing: Just under a third of working age people in the UK have a long-term health condition. One in 4 UK employees reported having a physical health condition, and 1 in 5 of those employees with physical health conditions also reported having a mental health condition. Across the UK, in 2019/2020, over 38 million working days were lost due to work-related illness or injury. Stress, depression or anxiety and musculoskeletal disorders account for the majority of days lost due to work-related ill health, costing businesses, the equivalent of £81bn in 2018. A growing body of research has demonstrated that the support of health and wellbeing in the workplace has a positive impact on staff, business and organisations. Primarily evidence-based workplace interventions look to support specific health conditions (most notably mental health and wellbeing), lifestyle interventions and cultural/ organisational system change.

East Sussex Workplace Health Accreditation Scheme: East Sussex County Council Public Health are collaborating with partners and stakeholders to develop a Workplace Health programme, containing a free accreditation scheme for businesses. The programme aims to improve health and wellbeing of employees in the workplace setting (particularly targeting workers who may experience health inequalities, e.g. low skilled, low paid and from economically deprived communities).

INPUTS

Governance
East Sussex County Council
Public Heath
Project Board
Project Steering Group

Active Stakeholders
East Sussex County council
Public Health - Health Improvement Specialist; Health improvement principal; Head of public mental health; Consultant; Community resilience, Commissioning manager; health protection specialist; Sustrans; Living Streets; University of Brighton; Chamber of Commerce

Finance
Public Health Budget:
£42,500 (2020/21)
£33,000 (2021/22 recurring)

Strategies and Guidance
• East Sussex Economic Development Strategy
• East Sussex Growth Strategy
• East Sussex JSNA
• NICE workplace health guidance (various)
• Public Health England. Local Healthy Workplace Accreditation Scheme Guidance

Staff
1 full time project coordinator
1 0.6 WTE project support officer
3 coaches
27+ Cancer Champions

Formative Research
East Sussex Workplace Health Evidence Review (Parker & Cavill Dec 2020)
Draft East Sussex Workplace Accreditation Standards

ACTIVITIES

Programme Management
- Coordination and management of programme including developing programme infrastructure; ensure effective delivery; and stakeholder engagement
- Ensure a universal and targeted approach at a scale and intensity proportionate to the degree of need ('proportionate universalism')
- Development of data and access to data sources (eg health inequalities data) to identify and support appropriate action
- Centrally run website with information and resources
- Supportive/robust assessment process and award panels
- Marketing and communications
- Programme Evaluation

Business Support
- Agree and define support requirements for businesses
- Engage and support businesses based on local need
- Identify businesses, employer and employee needs
- Staff access to high quality training on relevant health issues
- Support awards applications

Accreditation Programme
- Delivery of robust accreditation programme across three levels:
  - Bronze (building foundations for a healthy workplace)
  - Silver (Advanced)
  - Gold (Aspirational)
- Achievement of a range of criteria across the following domains
  - Health promotion
  - Physical activity and active travel
  - Healthy eating and healthy weight
  - Mental health and wellbeing
  - Smoking, alcohol and substance misuse
  - Sickness absence and return to work
  - Workplace culture and leadership
  - Health and safety
  - Musculoskeletal health
  - Environment and sustainability

LEADING TO

OUTPUTS

Organisational
- Finalised delivery model
- Finalised governance model
- Monthly and annual monitoring data
- Annual evaluation report
- # Stakeholders engaged / supported
- # and type resources developed
- # internal and external events / meetings supported
- # Full and part time staff working on the programme
- £ investment into the programme
- Development and maintenance of website and digital resources
- Development of marketing and promotional materials

Business
- # Business approached (by size/type)
- # Business registered / expressing interest (by size and type)
- # Business registered by geographic area
- # Business registered by level of achievement (gold, silver, bronze)
- # Employees reached by programme (by age, gender, ethnicity, priority post code)
- # Employees engaged with specific health and wellbeing condition / concern
- # Employers / employees upskilled
- # Actions taken by employers relevant to the programme

OUTCOMES

SHORT TERM (Cognitive)
- Stakeholders demonstrate improved knowledge, in the area of workplace health and wellbeing
- Employers have increased awareness of opportunity for promoting health and wellbeing in the workplace
- Employers demonstrate improved knowledge, in the area of workplace health and wellbeing
- Wellbeing policy developed in workplace settings (co-produced with employees)
- Measured improvement in knowledge and confidence relating to health and wellbeing in employees
- Employers say they are motivated and intend to create healthier environments
- Employers commit to continuing to progress through the accreditation scheme
- Increased opportunity for healthy workplace activity

MEDIUM TERM (Behaviour)
- Employers implement and monitor workplace health and wellbeing policies
- Employers maintain and progress workplace health accreditation
- Measured sustained adoption of healthy behaviours by employees
- Measured improvement in employee mental and emotional wellbeing
- Measured improvements in employee physical health
- Measured improvements in quality of life of employees
- Measured reduction in sickness absence of participating employers
- Measured increase in productivity of participating employers
- Measured improvements in staff retention of participating employers

CONTRIBUTING TOWARDS

LONG TERM

Improved and supportive working conditions

⇒ Creation of vibrant and healthy workplaces across East Sussex
⇒ Sustainable employment with flexibility for work/life balance
⇒ Thriving business sector across East Sussex
⇒ Employees empowered to support, shape and contribute to their employment
⇒ Increased early detection of health and workplace issues

Increased opportunities to work

⇒ More people in work, well and more productive
⇒ Improved efficiency and productivity of workplaces

Improved health and wellbeing of the working age population

⇒ Whole system approach to employee health and wellbeing
⇒ Employers and employees receive appropriate and timely health and wellbeing support
⇒ Improved health of the workforce
⇒ Greater equality in healthy life expectancy between poorest and wealthiest areas
⇒ Reduced health inequalities

EXTERNAL FACTORS AND INFLUENCERS

• The programme cannot achieve these outcomes without working in partnership with a wide range of local, regional and national organisations and must engage with and utilise other local services
• The programme requires sustained investment from multiple sources to maximise the impact of the scheme
• COVID-19 has affected the way we work, with more home working. This must be considered if the effectiveness of the programme is to be maximised
• COVID-19 has placed unprecedented burdens on business, who are having to operate at reduced incomes, reduced staffing numbers, increased expenditures
• BREXIT will place as yet unknown pressures on many businesses that require significant business focus in the coming months

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3.Evaluation aim, objectives, and methodology

3.1 Evaluation aim

To understand to what extent the East Sussex Wellbeing at Work programme has achieved its intended outputs, impacts and outcomes, and understand the factors that influenced this including the process undertaken in developing and implementing the programme.

3.2 Evaluation objectives

1. To develop a detailed understanding of the programme, through background desk research, pre-existing documentation, and data, and through discussions with programme stakeholders.
2. To critically appraise the process of developing and implementing the Wellbeing at Work programme and advise East Sussex County Council on the progress of the programme, to assist in identifying key lessons learned, for real time informing of the future programme needs.
3. To engage effectively and gather the views and opinions of stakeholders involved in the programme to gather new qualitative data and sense check new and existing quantitative data.
4. To engage effectively with a sample of employees to explore their perceptions of the programmes and gather new participant data where feasible.
5. To gather and analyse new and existing programme level quantitative data, collected through this programme, to include as a minimum key output data, short-term impact data and medium-term outcome data.
6. To draft and then finalise an annual evaluation report with key findings that address the main questions of the evaluation and draw clear recommendations based on objective findings of the research.

3.3 Evaluation methodology 2022/23

A programme of evaluation activities was agreed following completion of the year 1 evaluation. This included the following:

Key indicators

Working from the programme Logic Model (Section 2, above) and building on the developed evaluation framework, we agreed and finalised the key evaluation indicators and measurement tools for the evaluation. A data collection framework was agreed

with East Sussex to ensure consistent data collection at a programme and individual workplace level.

Programme stakeholder survey

A survey was sent to identified stakeholders who had been involved in the development of the programme in Sept 2023. This explored their perceptions of the achievements of the programme to date and ideas for potential improvements.

Participating workplace survey

A survey was sent to all workplaces that had registered for the programme by Sept 2023 (n= 78). This explored their experiences of being involved in the programme, their changes to policies and programmes, and their ideas for future improvements.

Non-participants workplace survey

A survey was sent to all workplaces that had registered interest for the programme but had not signed up, to understand the reasons behind this (n=4).

Employee survey

Along with the employer survey, employers that had registered for the programme by Sept 2023 were asked to send a survey link to all their employees. This explored employees' perceptions of the programme in their workplace, and any impacts it had had on their health.

Semi-structured interviews with selected stakeholders and employers

Fourteen selected stakeholders and employers were invited for a semi-structured interview with a member of the evaluation team. Ten accepted and interviews were conducted over Zoom and followed a semi-structured interview guide that explored perceptions of the success of the programme and remaining challenges.

Mental Wellbeing at Work Deep Dive

Following the recommendation from year 2, a deep dive into the high levels of sickness absence as a result of mental ill-health was conducted. This included: analysis of the data provided to the programme by employers on sickness absence and mental health; exploration of national data on mental health sickness absence; survey of employers and their interest in mental health and wellbeing; a focused session on mental health among the workplace wellbeing champions and award leads from registered workplaces; and two focus groups of employers who were interested in discussing the issue. The report is available from the programme team.

4. Findings

4.1   About the accreditation awards

East Sussex Wellbeing at Work is the County standard of good practice in health and wellbeing in the workplace. The programme will guide employers on a journey of health improvement through a framework of awards which contain specific criteria to achieve. The programme takes a holistic approach, covering the following topics:

- Physical activity and active travel
- Healthy eating
- Musculoskeletal health and health & safety
- Mental health
- Sickness absence, return to work and prevention
- Alcohol, substance misuse, and stop smoking
- Leadership, management, and workplace culture

Available awards:

- Wellbeing at Work Commitment: To achieve this award an employer must pledge to improve wellbeing in their organisation, conduct an employee health assessment and take forward one action for improvement.
- Small Business Awards (organisations with 2-49 employees) – Gold Silver and Bronze (Each award has 10 criteria to meet)
- Business Awards (organisations with 50+ employees) – Gold Silver and Bronze (Each award has 20 criteria to meet)

4.2   Workplace Registrations

Fig 2: Number of companies registered
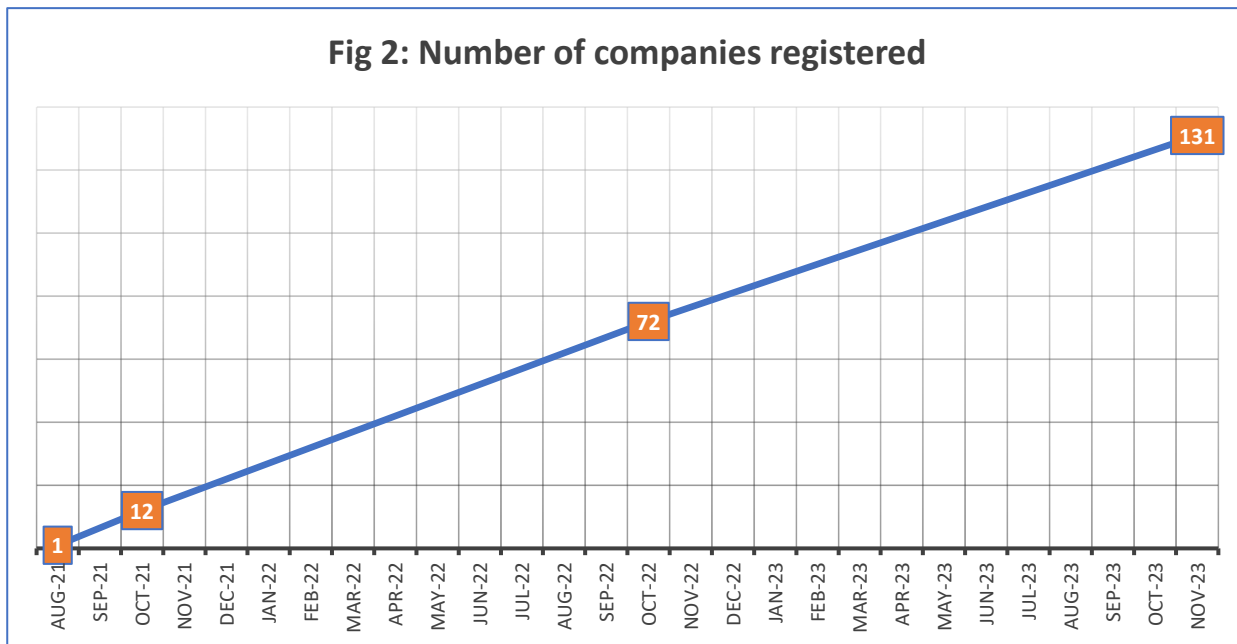
Since launch 131 organisations have registered onto the programme (December 2023). The steady growth in registrations since launch is shown below.

Fig 3: Number of organisations by size

- Med/Large
- Small
- unknown
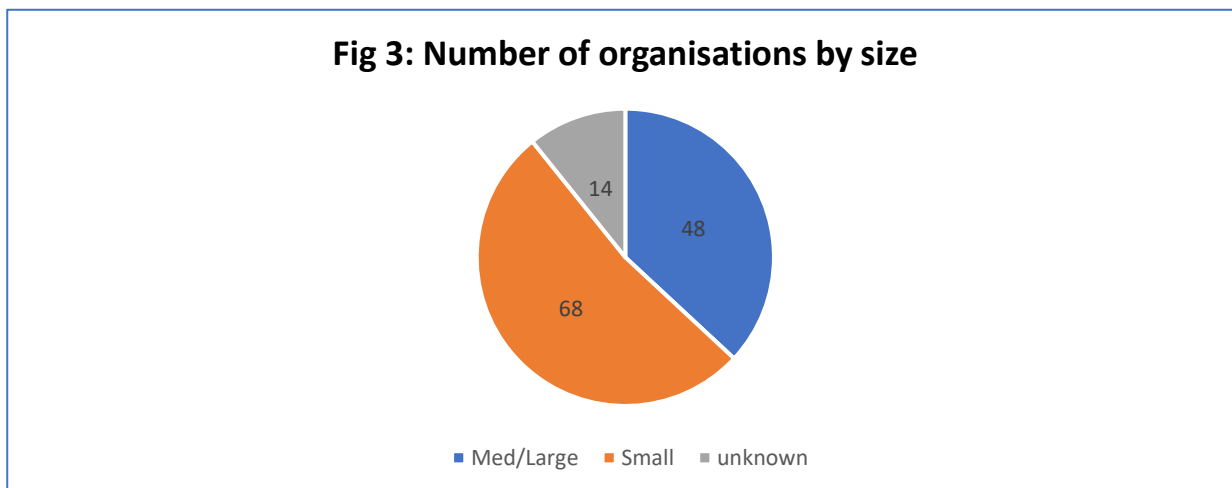
Just over half of all registered businesses are micro/small companies (n=68) and 37% are medium/large companies (n=48).

Fig 4: Number of registered organisations by business type

Business type	Value
Domicilary Care	1
	2
Hospice	2
	2
Childcare	2
	3
Construction	3
	4
Home care	4
	6
Local authority/Council	6
	10
Education	12
	12
Other / Unknown	13
	17
Charity	32

24% of companies registered on the programme are charities (n=32) and 13% are health care providers (n=17).

Of 68 organisations providing data, 52% are private sector companies, 22% are public sector and 27% are third sector organisations.

Out of 131 organisations registering, seven (5%) have withdrawn from the process. These companies have been surveyed to understand their reasoning behind this and 4 companies returned the survey (all third sector organisations). There was a mixed response as to the reasons for not progressing. For one organisation it was lack of time, for another it was a lack of senior buy-in to undertake the award, and the third said they wanted to focus on other wellbeing initiatives.

Fig 5: Number of organisations working towards accreditation

Accreditation	Value
Working towards Silver	4
Working towards Bronze	22
Working towards Commitment	5

Fig 6: Number of organisations recieving accreditations

Category	Value
Total	53
Gold Award	1
Small Business Gold Award	1
Silver Award	2
Small Business Silver Award	3
Bronze Award	12
Small Business Bronze Award	13
Commitment Award	21
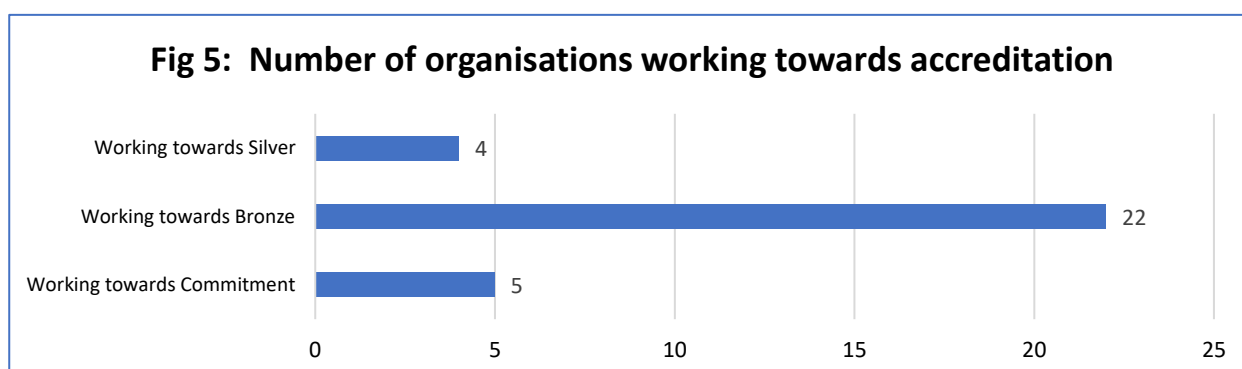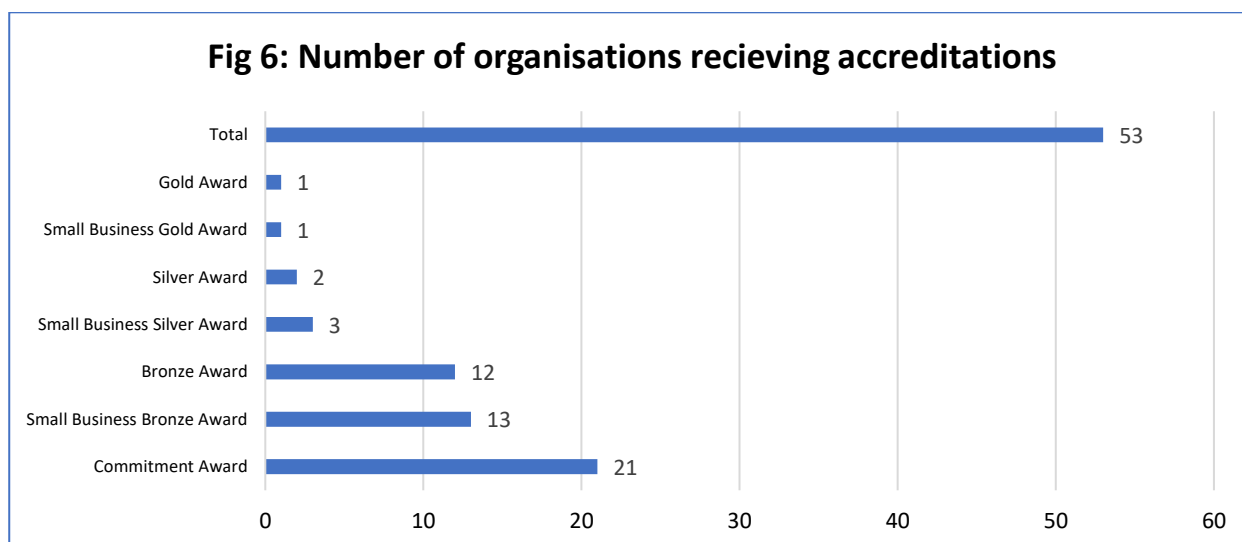
31 organisations (24%) are currently working towards an accreditation (figure 5)

A total of 53 organisations have achieved an accreditation at varying levels (Appendix 2).

This is a significant growth on year one – where only seven organisations had been accredited.

4.3   Data on the employees covered by the programme.

68 organisations provided data on their employees (52% of the organisations registering on the programme). Note missing data from other companies is still being collated.

This showed that **17,915 people** are employed by the participating organisations, a growth of around 10,000 employees since year 1. The data demonstrates a significant potential reach of the programme to influence employee health and wellbeing.

Gender of employees

49 organisations provided a breakdown of employees by gender. 28% of employees are male and 72% female. This is reflective of the organisations engaged on the programme with healthcare and charities generally employing more females than males.

Ethnicity of employees

Fig 7: Employees by ethnicity
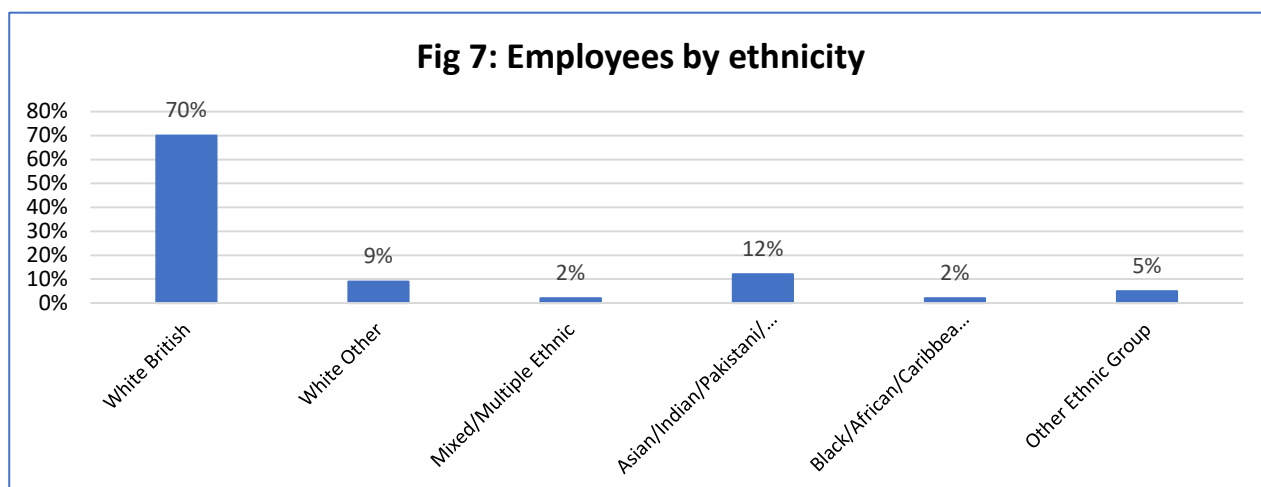
45 organisations provided an ethnic breakdown of employees. 70% of employees were classified as *'White British'*. This is significantly lower than the local population in which 92% are classified as White British. 12% of employees are Asian.

Age of employees

Fig 8: Age of employees
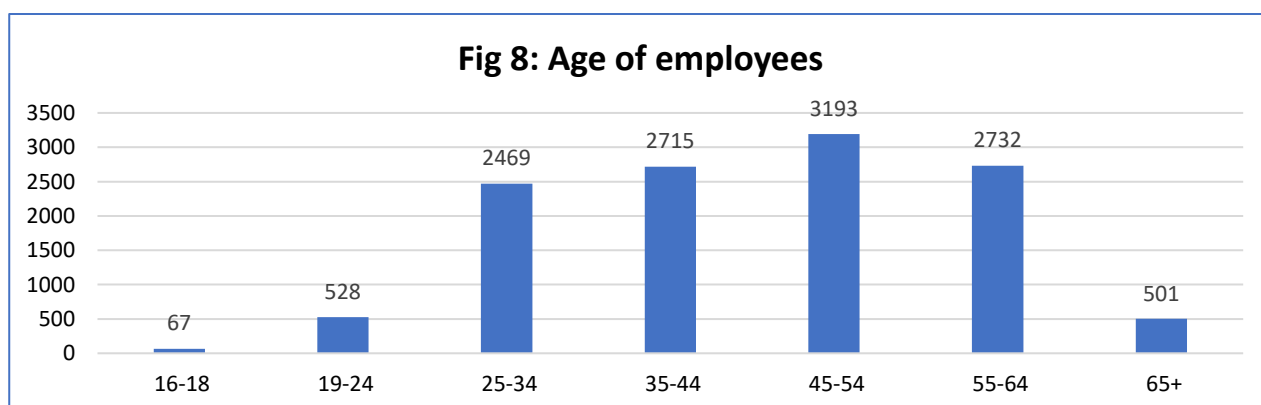
36 organisations provided a breakdown of employees by age group (n=12,205 employees). The data shows that the organisations predominantly employ an older population group, with 52% of employees aged over 44 years and just 5% aged under 25 years.

4.4   Sickness absence data

42 organisations provided data on number of sickness absence days over a 12-month period – in total this amounted to 156,910 days across the organisations whose combined employee numbers were 12,305

Number of days sick

The number of sickness absence days per employee ranged from a low of 0 days in a micro-organisation with 4 employees, to a high of 17.8 days with a medium-sized employer with 113 employees. Across the 42 organisations supplying sickness absence the average number of sick days per employee was 4.6, mirroring the UK average[2].

Sixteen of the 42 organisations (38%) had an average employee sickness absence rate higher than the national average. Large companies had the highest average sickness levels of 14.14 per employee, whilst micro companies had the lowest levels at 1.86 per employee. The most notable businesses with high rates of sickness absence were organisations providing health and social care activities. This is in line with the year 1 evaluation findings and still reflects national data that shows people working in caring, leisure and other service occupations have the highest rates of sickness absence. We should note however that these high rates are not reflective of all registered health and social care providers registered on the programme, with some having very low rates of sickness absence

Reasons for sickness absence

Thirty-two organisations provided data on the reasons given for sickness absence (n=99,286 days in a 12-month period). Of these, musculoskeletal (MSK) and mental health accounted for the most sickness absence days, followed by minor illness and infectious disease.

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[2]

https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/labourproductivity/articles/sicknessabsenceinthelabourmarket/2021

Fig 9: Reasons for sickness absence

Reason	Value
Substance abuse	11
Pregnancy related disorder	3,622
Long term conditions (cancer, heart disease etc)	6,535
Infectious disease (flu, covid-19 etc)	17,661
Minor illnesses (coughs, colds, headaches etc)	18,341
Mental health (anxiety, stress etc)	25,296
Musculoskeletal (neck or back pain, fractures etc)	27,820

When broken down by company size however the data shows that whilst MSK and mental health are the biggest contributors to sickness absence in large and medium-size companies, for small and micro companies the most significant contributors are minor illness and infectious disease.

Table 1: Contributors top sickness absence by company size.

	Large (250+ employees)	Medium (50-249 employees)	Small (10-49 employees)	Micro (<10 employees)
Average number of sick days per employee	14.14	6.97	3.42	1.86
Percentage of sick days as a result of MSK	19%	9%	2%	9%
Percentage of sick days as a result of MH	17%	8%	11%	0%
Percentage of sick days as a result of minor illness	11%	25%	40%	30%
Percentage of sick days as a result of infectious disease	11%	19%	35%	61%

4.5 Training provision

There has been a significant growth in the number of training courses delivered in the past 12 months – rising from 14 at the end of year 1 evaluation through to 34 by December 2023. Alongside the growth in the amount of training provision by the programme there has been growth in the breadth of training provided in year two, with additional training courses offered relating to the menopause, wellbeing for men, and support in midlife. These courses were introduced as a direct result of requests from workplaces.

To date 333 employees have been trained in health and wellbeing provision, a growth from 117 participants at the end of year one. A breakdown of training courses provided, and numbers trained per course is shown in the table below:

Table 2: Number of training courses delivered, and employees trained.

Course	Number of courses delivered	Number of people trained
Workplace Health and Wellbeing Champion	8	81
Mental Health First Aid	5	48
Mental Health Awareness	5	57
Managing Mental Health	6	49
Menopause Demystified	2	35
Wellbeing for men	2	26
Supporting people during midlife	2	29

Suggestions for new training offers included: managing stress in the workplace; avoiding musculoskeletal issues; and 'bespoke' training (designed specifically around a workplace's needs).

5. Employers' perspectives

5.1 Respondents

50 organisations responded to the registered business survey; 85% of the 59 organisations that had registered on the website over the past 12 months (since the last report). In addition, we held depth interviews with 7 organisations registered on the programme from an invite list of 12 (58%). Depth interviews were conducted with 2 micro-organisations, 3 small organisations, 1 medium organisation and 1 large organisation.

Fig 11: Which of the following best describes your company/organisation?

Category	Percentage
Private sector company	50%
Public sector organisation	16%
Community, Voluntary, Charity, Social Enterprise	32%
Union	2%
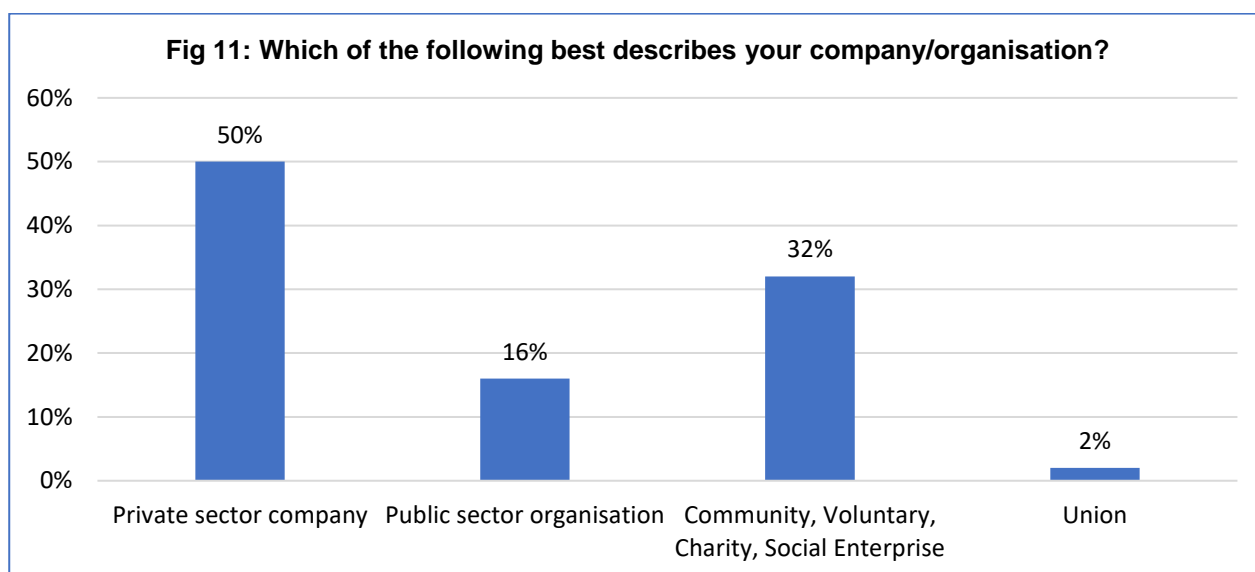
Half of the survey responses (n=25) came from private sector organisations and a third (n=16) from CVSE organisations.

4 organisations completing the survey were micro, 25 were small organisations, 14 returns were from medium-sized organisations and 7 from large organisations.

Together these organisations employ approximately 12,000 people, highlighting the potential reach of the programme.

Of the 50 organisations completing the survey, 92% had progressed on the programme beyond registration. Of these:

- 12 were undertaking or achieved their Commitment award
- 20 were undertaking or achieved the Bronze award
- 7 were undertaking or achieved Silver award
- 2 were undertaking or achieved Gold award.

Fig 12: How did you hear about the programme?
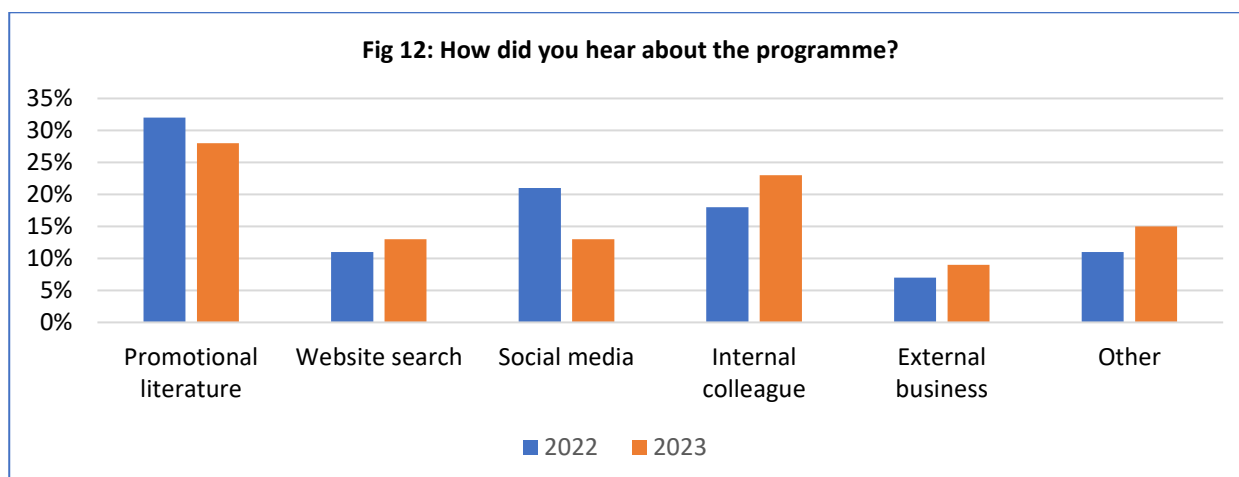
5.2 How they heard about the programme

Reflecting the 2022 survey findings (n=29 responses), in 2023 the most effective mechanism for promoting the programme was through promotional literature (newsletters / flyers etc) via direct marketing (28%). There has been growth in programme promotion via internal colleagues – rising from 18 to 23%, and from external businesses – rising from 7 to 9%. This highlights the importance and potential for word-of-mouth promotion. Reflecting the growth in website users 13% of survey completers had heard about the programme through a website search an increase from 2022. Despite the difficulties reported in utilising social media 13% of survey respondents found out about the programme via social media – though this was a decline from 21% in the previous year. Facebook was the social media platform that created the greatest engagement (5 sign-ups), followed by Linkedin (2 sign-ups).

5.3 Reasons for engagement

The interviews with organisations signed up to the programme showed that they had strong support for the programme and signed up mainly to show commitment to their employees' health:

"When we set up we just wanted to make sure that we can do the best not just for the community that we work in, but also for the staff"

"It should just be a given and if staff are happy, they will stay with you. If staff are happy, they will work well. And it's sort of the least we can do really as employers, I suppose and we've just looked to grow that onwards from there."

Some of the organisations specifically mentioned that they were attracted by the structured nature of the programme – being able to work through the levels – and that it was run by a trusted public sector organisation.

Within the survey, organisations were asked to list the top three reasons for engaging with the programme. The results were broadly reflective of the 2022 survey, with three quarters of respondents wanting a framework to follow to improve workplace health and wellbeing, two thirds of respondents wanting to gain recognition for their work on employee health and wellbeing, whilst just under half of respondents wanting to support retention of employees.

Interestingly reducing sickness absence (17%), supporting recruitment (13%) and help with managing a particular health and wellbeing concern (9%) were of far less importance.

This data gives insight as to the key messages to promote when marketing the programme to potential new employers.

Fig 13: What are the 3 main resaons you registered for the programme?
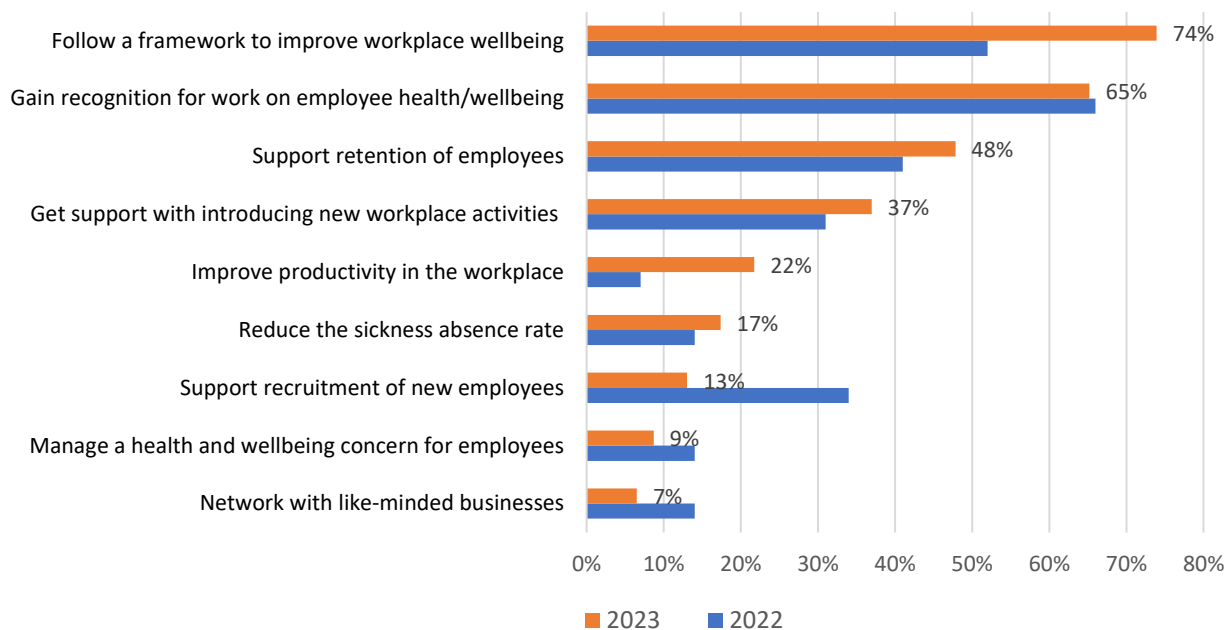
Asked to comment on their reasons for registering the following comments provide a broad reflection of responses.

"We were aware that we needed to positively impact the health & wellbeing of staff. The programme seemed to provide an excellent framework to support the initiatives."

"We wanted to establish an environment in which staff value their own health and feel that this is valued by us."

"We had looked at national frameworks for employee wellbeing but wanted to sign up to one locally that would be more focused on the area and issues of where we live."

"I wanted to get the recognition of the award and to provide my staff with a health and well-being offer in order to maintain high retention rates."

"I had started to focus on wellbeing and then found this award scheme which offers everything I had hoped."

"We are currently reviewing our wellbeing strategy as well as working with our recruitment and retention colleagues Accreditation will support this work."

"To proactively promote staff wellbeing, to demonstrate how we value our staff, to encourage recruitment, to assist in managing staff sickness and to support staff with their work/life balance."

5.4   Topics of most interest

Organisations were asked to highlight the topics that were of greatest interest to them. The data broadly reflects the data from the previous year in terms of topics of most and least important. In 2023:

100% of organisations stated that 'mental health and wellbeing' was one of the main topics of interest (a slight increase from 93% in 2022)

"Mental health is at an all-time high, particularly since Covid and this can affect staff and the workplace, want to do the best we can to support the staff with this."

"We know that this is a big area where people are struggling and really want to tap into male mental health issues as feel it's an area that is being missed within the organisation."

79% stated that 'musculoskeletal health' was of significant (an increase from 62% in 2022).

"Make sure the work environment is suitable for staff to prevent musculoskeletal issues, causing pain and low mood and sickness which affects the staff, the business and may mean the staff member leaves."

"Many of our staff team (nurses and carers in particular) experience musculoskeletal issues, so support to help staff address this is very important to us."

Perhaps unsurprisingly these areas are two of the major drives of sickness absence as covered in the previous section. The other two topics of significant in interest were leadership, management, and workplace culture (81% of respondents)

> *"We want to model a positive, supportive, workplace culture. Supportive, responsive leadership and management is already evident, but we would like to make further improvements wherever we can."*

and 'healthy eating (79%, an increase from 62% in 2022).

> "It is becoming increasingly expensive to eat well, but if done well is a critical part of many other health benefits."

Of least interest to employers are 'stop smoking' and 'alcohol and substance misuse' (both of interest to 21% of respondents) these were the areas of least interest in 2022 as well.

> "Our staff have a very low rate of smokers, and they all know about one you to help them if they wish to stop smoking."

Fig 14: Which of the following topics are you most interested in for your workplace
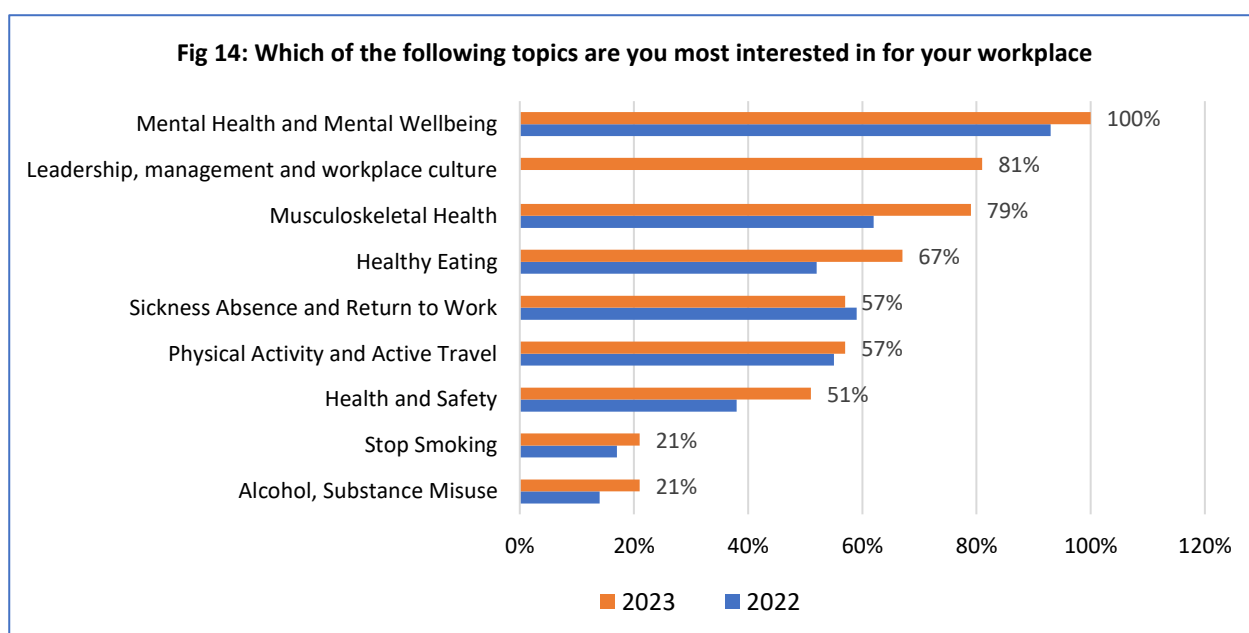
This data gives some clear indications of health topics to focus on in the next phases of the programme.

5.5 The differences made within workplaces

> "The programme has been really good, definitely glad that we signed up. I think the wellbeing team was initially anxious that it would be a tick box exercise, but it hasn't been that at all, we've been able to achieve real change in our organisation."

Changes to organisational policy and procedures

One of the main successes of the programme has been the way that it has influenced organisations' ways of working and their general ethos towards health and wellbeing. This is quite hard to quantify, but interviewees talked about their focus on health being increased, and their appreciation of staff health being enhanced:

> "from the feedback that the managers have got…making sure that we are committed to our people's continued wellbeing"

One of the most tangible ways of demonstrating this enhanced focus is in the wide range of new policies that have been developed or existing policies enhanced as a result of engaging with the programme. This year, (based on question responses from the employer survey n=35), reflecting the priority areas identified by companies highlighted above: 69% of companies had introduced/enhanced policy regarding mental health and mental wellbeing and 58% on musculoskeletal health.

Fig 15: Percent of organisations introducing/changing policy in a given area

Area	Percent
Mental Health and Mental Wellbeing	69%
Musculoskeletal Health	58%
Health and Safety	38%
Leadership, Management and Workplace Culture	34%
Healthy Eating	28%
Sickness Absence and Return to Work	21%
Physical Activity and Active Travel	21%
Other	16%
Stop Smoking	11%
Alcohol, Substance Misuse	7%

> "We have introduced a monthly segment in the staff teams meeting to provide updates and also have open door policy for all staff regarding mental health and wellbeing. Staff trained in mental health first aid."

> "We have introduced dedicated Wellbeing Policy Manager Guidelines Menopause Policy."

> "We have made our Mental Health Action Plan available to all employees."

> "Introduced dedicated policy and guidelines for managers. Introduced wellbeing questions to monthly 1:1 and appraisals."

Fig 16: Number of organisations introducing new policy in identified area
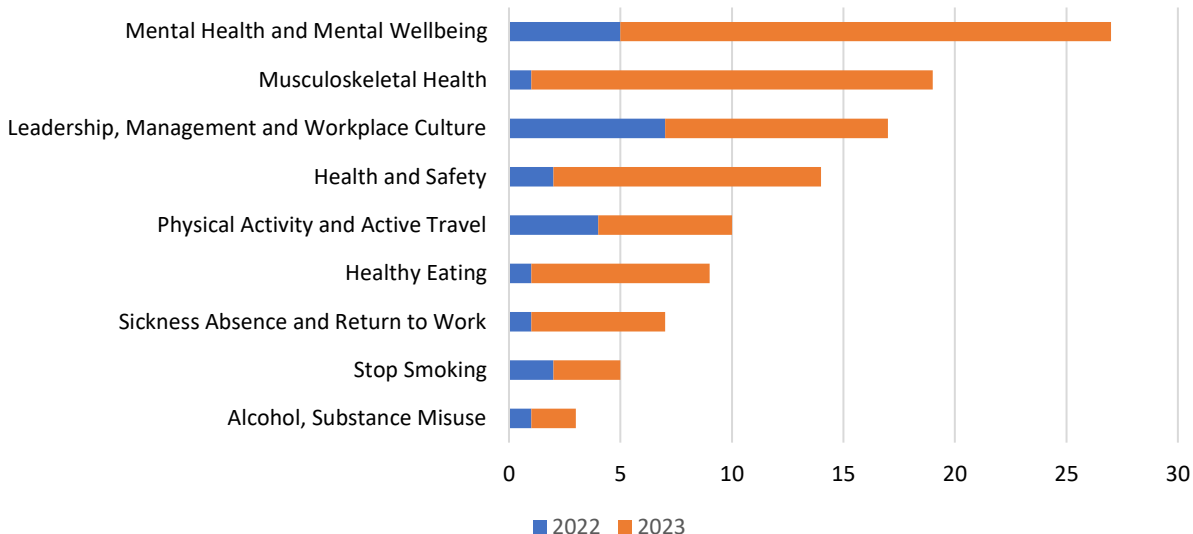
"We now include MSK recording/reporting in our monthly H&S meetings."

"We revised policy/process for reporting MSK issues and signposting to support available."

"We have a big pilot project underway in one of our departments to look at causes and rates, preventative measures, management of symptoms/ conditions, and ongoing support needed."

"Hybrid working has necessitated an update to our ways of working and flexible working policies to address MSK whilst people work more from home. DSE set up, equipment, etc."

Lifestyle related policy has been introduced / enhanced by fewer organisations, though these changes are still significant: Healthy eating (28%); physical activity (21%), stop smoking (11%) and alcohol and substance misuse (7%).

Across the two years of the evaluation **a total of 111 new/updated health and wellbeing policies have been introduced as a result of this programme**, based on the 57 organisations completing the surveys. The most prominent growth areas between the two years have been on mental health and wellbeing (n=27 organisations), musculoskeletal health (n = 19 organisations) and leadership management and workplace culture (n = 17 organisations).

Employee health needs assessment

82% of organisations responding to the survey have conducted an employee health needs assessment / health and wellbeing survey. This is a significant growth from year

one when just 62% of registering organisations had completed an employee health and wellbeing survey. The data from these surveys/assessments was not made available for this report as it is considered sensitive to each local organisation. From the discussions it also appears that in some cases these surveys were used to prompt more detailed discussions with staff:

> "On the survey, it showed there was a lot more interest in…physical activity and things like that. But when we sat down it was more kind of mental health. Interesting."

5.6   Initiatives, actions and campaigns introduced

Fig 17: Percent of ortganisatioons introducing initiatives or campaigns since joining the programme

Category	Percent
Mental Health	68%
Physical Activity and Active Travel	56%
Healthy Eating	53%
Musculoskeletal Health	42%
Leadership, Management and Workplace Culture	38%
Health and Safety	19%
Stop Smoking	17%
Sickness Absence, Return to Work and Prevention	17%
Alcohol, Substance Misuse	6%

Of the 37 organisations that answered the question on the survey, all have introduced specific initiatives or campaigns to support health and wellbeing.

Reflecting the development of policy on mental health outlined above, this topic had also led to actions or interventions by over two thirds of organisations:

> "Increased awareness in the workplace. Lots of courses undertaken by several members of staff."

> "In support of mental health awareness week all staff given a wellbeing hour voucher and encouraged to send in photos of what they did, lunch & learn webinar on anxiety to raise awareness and how to support each other, introduction to mindfulness session, enhanced signposting and support service through internal intranet."

> "Have more than doubled the number of Mental Health First Aiders. Have increased awareness of mental health with colleagues attending Mental Health Awareness training."

"We've promoted our wellbeing champions, mental health first aiders and employee assistance programme. We've promoted wellbeing initiatives, such as walking meetings, in our wellbeing newsletter. Promoted sleep well resources from Health in Mind, anxiety self-help guides from NHS inform, loneliness and mental health at work page from Mental Health UK and money helper website for cost-of-living concerns."

This perhaps reflects on the findings earlier in the report that show mental health issues were a leading reason for sickness absence.

Whilst changes in policy relating to lifestyle related behaviours were not as numerous as other areas, it is interesting to note that introducing specific actions for physical activity and healthy eating have been carried out by over half of all companies.

"Provided details for couch to 5k, park runs, staff take part in charity walks, app with exercises and podcasts."

"Cycle to Work annual invite for enrolment to Cycle to Work Scheme."

"Currently completing a in house walking challenge in small teams. The challenge was to see which team could do the most additional miles walked."

"Fresh fruit in office, healthy eating week"

"Branded water bottles given to all staff to encourage regular hydration

Have put up posters in the kitchen areas, encourage healthier snacks during training and meetings."

"Various nutrition/healthy eating and hydration workshops available to all employees."

A full list of policy, actions and initiatives introduced and highlighted on the survey can be found in appendix 2.

5.7 Main successes of programme engagement

"Fantastic. So many opportunities; courses, training on so many topics, putting staff at the heart of what we do. Every single company should be involved in this programme."

Organisations were asked to highlight the main successes of their engagement with the programme. These main successes fall broadly under three themes:

Workforce consultation and engagement: organisations talk about their success in engaging staff in the process from the outset, the effectiveness of establishing internal health and wellbeing groups to advise on the programme and the impact of surveying staff on their health and wellbeing.

> "We now have a fab wellbeing team made up of a good cross-section of staff across the organisation, we have wellbeing champions and mental health first aiders. We got the sickness policy changed after five years, several other important policies have been reviewed and updated after our feedback including bereavement, carers, safeguarding, and lone working. We have been able to launch new initiatives, including walking lunches and one day of volunteering and we have a great newsletter."

> "We have now completed the employee survey, which has always been the primary first objective."

> "Staff survey which allowed us to assess areas where staff needed more training or advice. For example, managers recognised that sleep was something affecting staff and training was provided to managers."

Senior management buy-in: organisations talk about the changes that have occurred at a senior management level and raising awareness of health and wellbeing amongst managers – this has led to an increased focus at an organisational level and greater willingness to invest resource into the way they operate and prioritise health and wellbeing throughout the organisation.

> "Getting Senior Management Team on board with progressing wellbeing initiatives."

Impacts on workforce retention and productivity: Whilst not quantifying the impact, several organisations highlight the key success has been related to greater staff retention and increased productivity

> "Raised awareness and improved retention of staff."

> "Staff retention and happiness has improved."

> "Achievement of an award advertises to potential employees that we are a wellbeing aware employer."

> "Engagement of staff and increased productivity and better atmosphere in the office.

5.8 Challenges that remain

"It is sometimes very prescriptive with topics that make it a little restrictive to achieve accreditation areas or focus on what feels right for your organisation."

The most significant challenges reported by organisations completing the survey related to the **time required to achieve accreditation** when faced by competing workload pressures and **time pressures and financial resources** to implement actions within the workplace.

"There is a lack of organisational budget to implement ideas"

"Wellbeing in a high-volume, high-pressure work environment where staff are time poor."

"Having time to focus on the requirements of this accreditation will be challenging due to reduced team capacity."

"Building not suitable to be able to do everything we would like, lack of space and funding … no funding available from council or health authority."

"As a charity we have limited resources and finances, this impacts on our ability to introduce solutions that we know would benefit our employees so have to look for alternatives."

Several organisations highlight the impact on employee health and wellbeing on external factors beyond the work environment – most frequently highlighted is the current cost of living crisis and its impact on mental wellbeing. Organisations also highlight difficulties relating to adapting to hybrid working ad how do they attempt to support / influence the home environment.

"Stresses outside of the workplace. Money worries etc."

"Moving quickly to a hybrid working environment means we haven't had the processes and policies in place beforehand, so we are still playing catch up with this, but we are getting there now."

Overall, organisations involved in the programme appear very happy with the way that it is progressing:

"The programme has been expertly thought out and it is clear that it has been designed through actually listening to feedback and understanding the objectives provided by businesses - as it totally provides a holistic framework for companies to work with."

Their main ask would be to continue to adapt the programme's procedures to make it as light-touch as possible. To ensure the ask of employers is pragmatic whilst maintaining rigour.

6.Employees' perspectives

All employers that had registered on the programme in the last 12 months were sent a link to a short online survey of employee attitudes. The link was available throughout the year, and this increased uptake on the previous report. Employers were encouraged to send it on to their employees and reassured that all data would be confidential and non-identifiable at a company or individual level.

It is not known how many employers sent the survey link on to their employees, but we have received responses from employees of 16 separate organisations (27% of organisations registered in 2023). This is a marked improvement on the 2022 survey when employees from only 3 companies responded.

75% of companies whose employees completed the survey were classified as small companies (10-50 employees). There were 2 medium sized companies responded and 1 micro company. Combined the companies employ a total of 397 employees. Of these 139 employees completed and returned the survey, 35% of total employees within these companies. This is considered a high response rate per company for a survey of this type.

6.1 About the employee respondents

Fig 18: How long have you worked at the organisation?
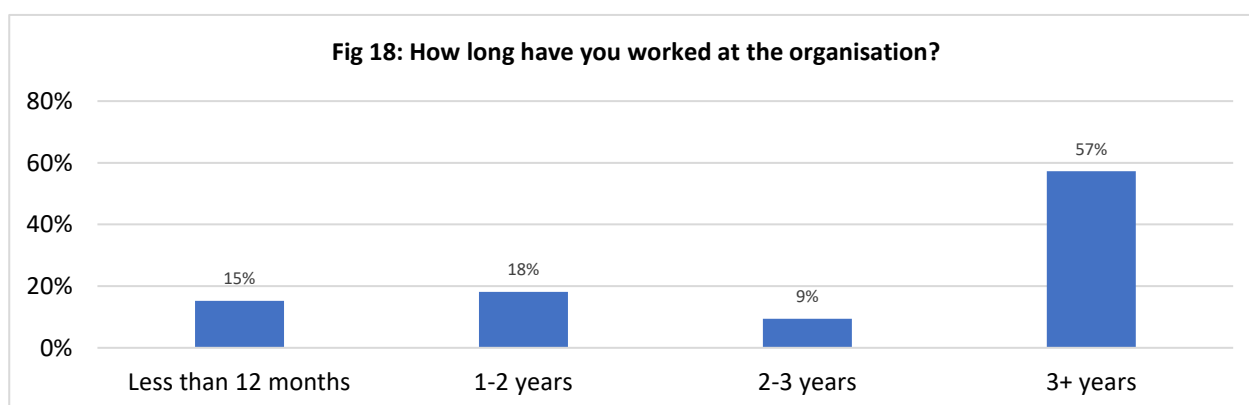
Over half of survey respondents had worked at the organisation for over 3-years and just 15% had worked there less than 12-months.

This provides reassurance that the employees responding to the survey have a good understanding of the organisation that employs them.

There is good awareness from employees of their organisation's involvement in the Wellbeing at Work programme, with 79% (n=109 employees) being aware of their involvement and just 13% unaware (n=18 employees).

Fig 19: Which of the following describes how much you know about the East Sussex Wellbeing at Work programme?

I know lots about what it does	11%
I know a bit about what it does	41%
I have heard of it but don't know much about it	34%
I have never heard of it until today	14%
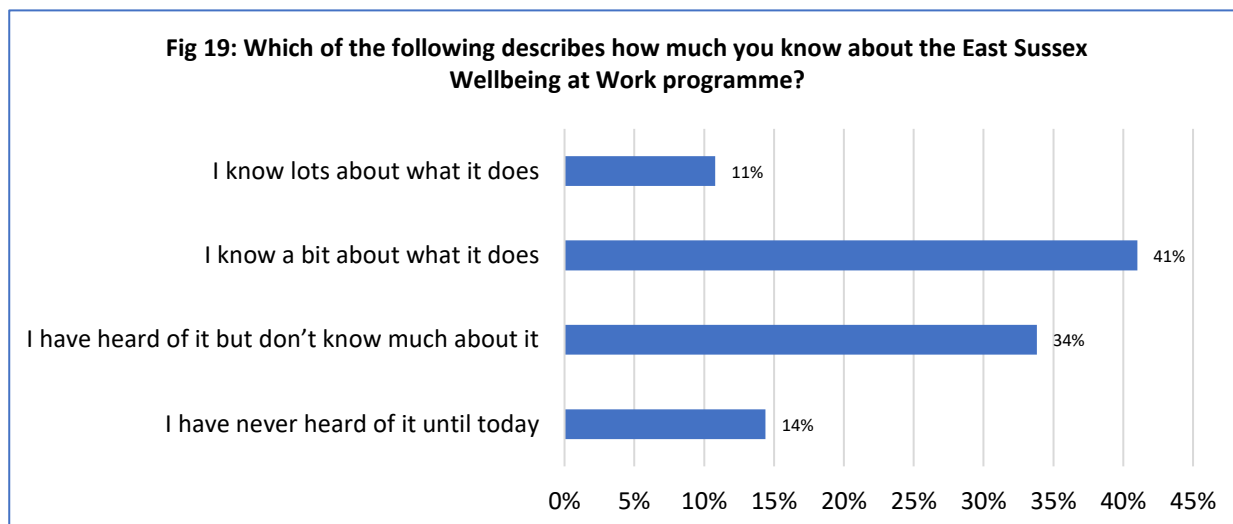
However, when asked how much they know about the programme 48% of respondents have either never heard of the programme or do not know much about it.

Half of respondents know something about the programme. This data highlights the potential for improved internal communication about the organisation's involvement with the programme.

> "I've been working for 20 years in construction, [company name] are by far one of the leaders when it comes to support for staff with regards to health and wellbeing and one of the reasons I chose to join the business."

6.2 Importance of health and lifestyle to employees

Fig 20: How important are health and lifestyle issues to employees

	Not important	Neutral	Important
Leadership, management and workplace culture	3%	17%	80%
Stop Smoking	58%	14%	28%
Alcohol and Substance Misuse	38%	23%	39%
Specific health conditions	12%	14%	74%
Mental Health and Mental Wellbeing	2%	5%	93%
Health and Safety		17%	83%
Musculoskeletal Health	3%	12%	85%
Healthy Eating	2%	12%	85%
Physical Activity and Active Travel	10%	19%	71%

Mirroring the responses from employers, mental health and wellbeing is the most important health and lifestyle issue to employees (62% very important and 32% quite important).

Conversely 72% of employees did not see stop smoking as important and 61% did not see support around alcohol and substance misuse as important.

Employees placed greater importance on support around physical activity and healthy eating support than their employers.

Asked if there are other health and wellbeing issues that they would like the organisation to focus on, the most frequently referenced was support on improving work/life balance, remote working and on environmental sustainability.

6.3 Support provided by employer to employee

"I've have never worked anywhere before [company name] where my health and wellbeing has been considered and encouraged. [Company name] has been amazing in supporting me with my recovery and mental health."

Fig 21: I feel the management of my workplace really care about health and wellbeing of its employees
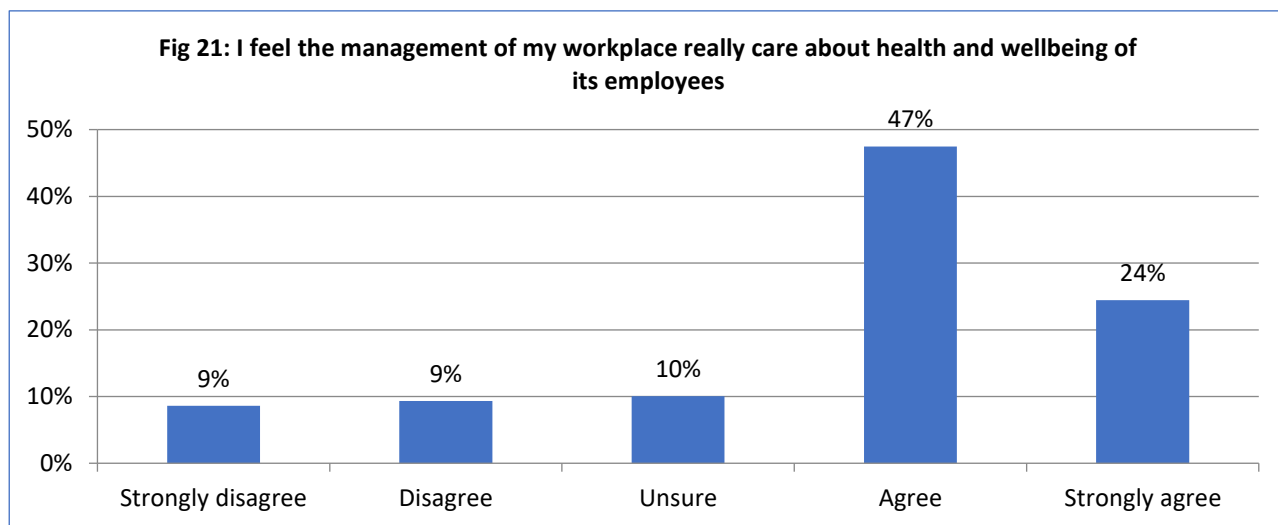
71% of survey respondents either agree (47%) or strongly agree (24%) that their employer truly cares about the health and wellbeing of their employees.

"I feel that I am valued and that the senior team care about my wellbeing. This has created a great culture across the business."

18% (n=25 employees) disagreed or strongly disagreed with this statement.

70% of employees (n=97) agree that their personal health and wellbeing is supported at work and 14% (n=20) disagree that their personal health and wellbeing is supported at work.

Fig 21: Has your organisation provided support in the workplace in the following areas?

Area	Yes	No	Don't know
Leadership, management and workplace culture	44%	21%	35%
Stop Smoking	10%	55%	35%
Alcohol and Substance Misuse	13%	51%	36%
Specific health conditions	21%	45%	34%
Mental Health and Mental Wellbeing	64%	18%	18%
Health and Safety	55%	14%	31%
Musculoskeletal Health	33%	43%	24%
Healthy Eating	36%	51%	13%
Physical Activity and Active Travel	35%	45%	20%

■ Yes   ■ No   ■ Don't know
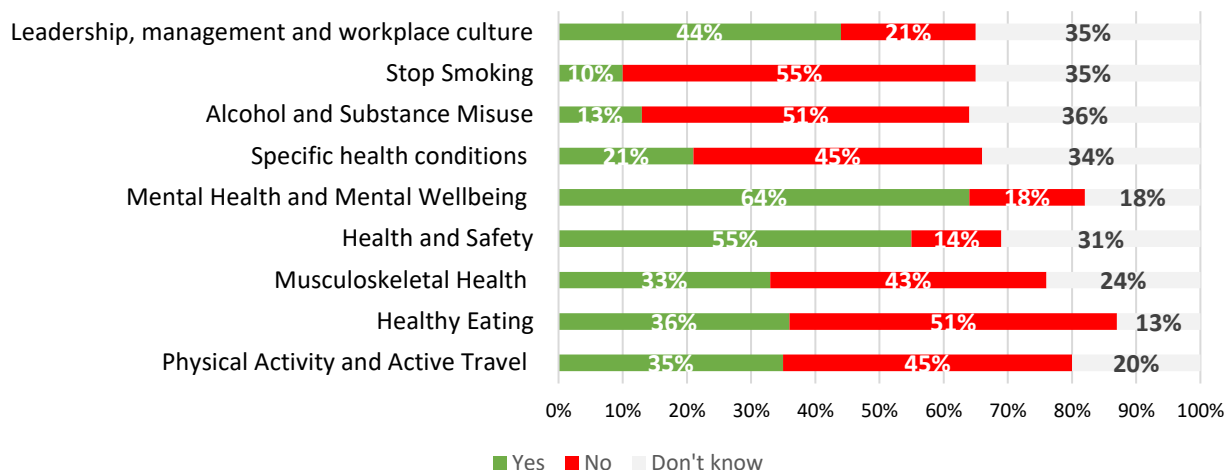
Employees acknowledge significant support by their employer since joining the programme across a broad area of health and wellbeing. These interventions include promotion of issue, training provision, equipment, activity, opportunity, and development of policy.

> "I have serious health issues and I feel very supported. Flexi working. Time off for appointments and other adjustments if and when needed. Senior team very accessible when needed."

Almost half of survey respondents (44%) had reported positive change in the leadership, management, and culture within their organisation.

> "Management have been very supportive and enabled lots of changes/improvements since joining the WAW programme, eg regular communications on Wellbeing in staff newsletters, updates at firmwide meetings and creating a chill out area to relax in with sofas etc in the middle of the office."

> "We now have an open door, SMT are very approachable, seem to care, keen to see and encourage a good work/life balance, socials, focus of one to ones, management suggestions and encourage feedback to improve working environment."

> "Excellent leadership - have really grasped the health agenda."

What has become a recuring priority throughout this report has been the high importance of Mental health and wellbeing and nearly two thirds (64%) of employees responding to the survey highlight that their organisation has provided employees with this support.

"Manager and CEO has been very supportive with my mental health; they have always been there if I have needed support with my mental health."

"We have access to an employee assistance program for mental health support. Office manager and ops manager have trained in mental health first aid."

"Representatives around the office that you could go and speak to confidentially."

"Session on anxiety with a psychologist; mental health first aiders in the office; chill out area in the office; every Friday afternoon drinks/social time in the chill out area; regular staff social events/parties; drop-in sessions with mental health first aiders; opportunities for flexible/hybrid working."

"My organisations have been supportive with my counselling and trauma therapy. They are supportive if I need to have appointments for health in work time."

A full list of interventions brought in by organisations since their involvement in the programme are listed in Appendix 3.

Only 18% of employees responding to the survey have been involved or engaged in the planning of the interventions. Evidence suggests that the most effective workplace interventions are those that engage most with employees in the planning phases, and this is something organisations may consider moving forwards.

6.4   Additional support that organisations could provide

Employees were asked to highlight areas of additional support that they would like from their employers in the future.

Lifestyle 'incentives' to be made available to employees most frequently mentioned were access to gyms / free gym memberships and access to free / affordable healthy food in the workplace.

Workstation adjustments frequently highlighted – a significant number of respondents feel that the organisation needs to make adjustments to workstations including chairs in particular.

"I would very much welcome a change with regards to my working space and seating."

"The desks and chairs are significantly inadequate. There is minimal depth to the kitchen worktop that serves as a desk, there is no leg room, no arm support as worktop depth is not deep enough, my computer screens are far too close to my face, I am having to angle them to be able to focus properly and even then I have to tilt my head back. The chairs are as inadequate as the desk."

Improved facilities were also frequently highlighted. Employees did reflect on the physical limitations of office space but many requested improved cycling facilities, shower/changing facilities, and relaxation areas.

> "Provide shower and changing facilities and secure bike storage so that the team can go running and cycling to and from work - we have a lot of space in the office so should be doable."

> "Provide shower facilities to encourage people to cycle to work or exercise at lunchtime, provide a sick room if people feel unwell at work."

> "Install a bike rack. More space behind and around desks. Somewhere to sit at lunch and breaks that is just for staff and has a table."

More staff engagement this was raised in a variety of ways, however there is a clear request from employees that they are actively engaged in discussions on supportive health and wellbeing. Three employees from different organisations wanted the company to actually mean what they say and not use the accreditation as simply a 'box-ticking exercise'

> "I think more staff engagement in regards to wellbeing. I've only been here a short while but regular employee conversations with management to understand issues and queries are always important."

> "Please give staff a voice, without feeling intimidated."

> "Listen and actually mean what they do and not just tick a box."   "Actually care rather than box ticking."

The final area of additional support that was frequently raised was to consider **Working policies.** Several suggested that companies engage staff in discussions about potential for 4-day working weeks or more flexible working:

> "More flexible working and consideration for workloads and impact on mental wellbeing / stress

> "Consultation and examination of a 4-day week to help work on the affects and causes of stress due to work load"

> "Improve sick policy introduce paid health and wellbeing day(s)"

7.Stakeholders' perspectives

7.1   Description of stakeholders

A survey of stakeholders (identified by the providers) was conducted (n=6). These stakeholders were people who had been involved in the development of the programme. They included people from the Council as well as employers who had helped develop and test the programmes outputs, including the programme commissioners, members of the advisory group and the programme deliverers. The survey was supplemented by a deep dive focus group made up of members of the programme delivery team (n=3).

7.2   Satisfaction with the development of the programme

A key question in this survey asked stakeholders what they thought of some of the main aspects of the programme. The chart below shows that levels of satisfaction were extremely high. The overall design and management of the programme was rated 'good' or 'excellent' by 100% of respondents (n=6). Similarly, 84% (n=5) rated the support provided to workplaces as 'good' or 'excellent'. Only one stakeholder (a programme deliverer) gave a 'poor' rating and that was for communication from the programme to stakeholders.

Fig 10: How would you rate the following aspects of the programme to date?
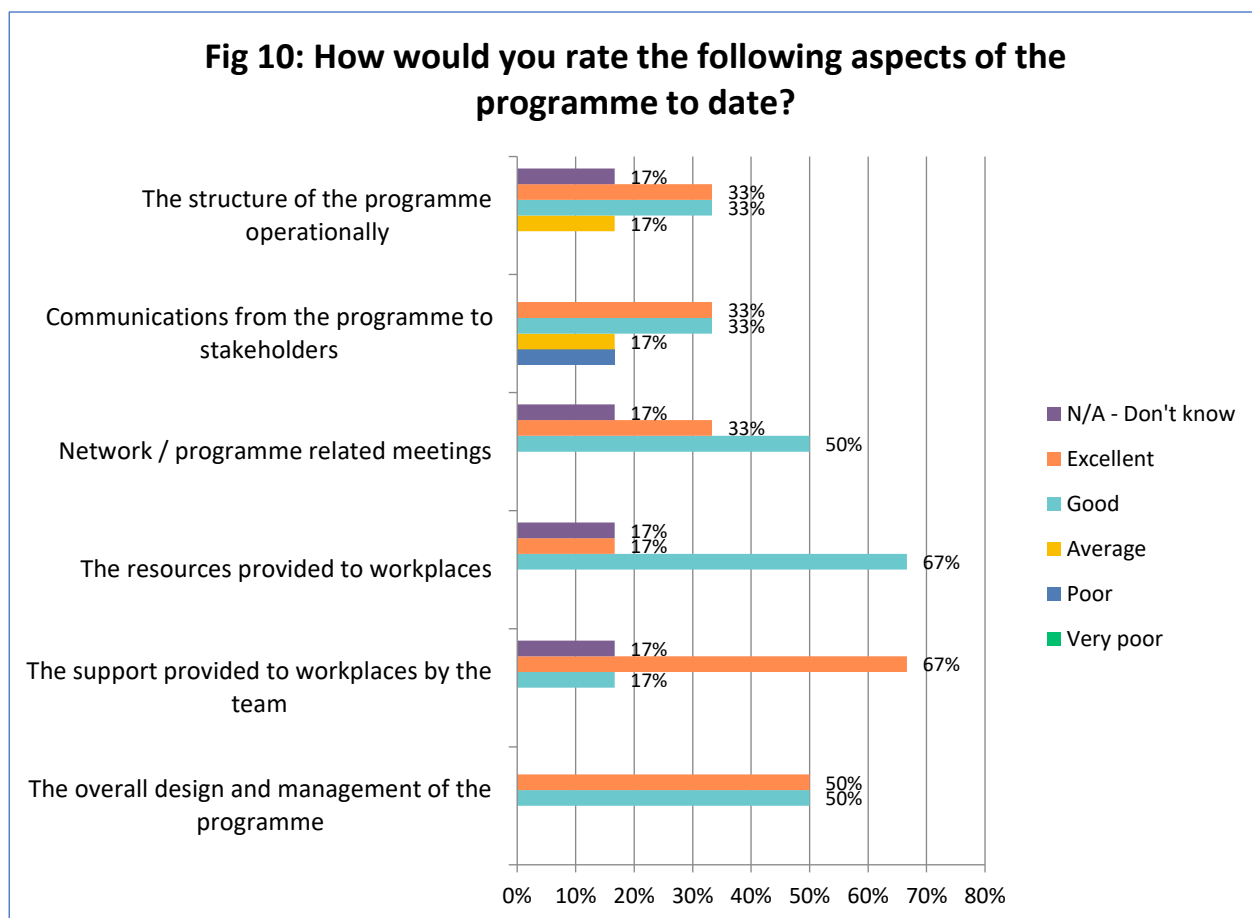
The programme team noted that there had been a lot of change in the last year – mainly staff changes – but they felt the programme was still on track to deliver an effective programme. The overall success of recruitment meant that at some times they felt they were working at capacity:

> "I think that was a bit of a recognition that…we wanted to grow the programme and do loads of communications to bring new workplaces on board. But…we didn't have really much extra time to be doing that."

7.3 Overall effectiveness

Stakeholders were asked: "How effective do you feel the programme has been overall?" with a rating scale from 0 (totally ineffective) to 100 (highly effective). The mean score from all respondents was 80/100 – an increase from the previous year (71/100) showing very positive opinions of the programme's effectiveness to date.

7.4 Main successes of the programme

Stakeholders were asked what they considered to be the main successes of the programme. Responses were grouped into a few categories:

The reach of the programme in engaging employers

Stakeholders highlight that they encouraged that the programme is reaching a broad range of organisations in terms of size, sectors, and operations, especially highlighting engagement with small to medium workplaces.

> "A key success has been the engagement with a range of organisations especially the small to medium workplaces that make up so much of the organisations/ landscape of East Sussex."

> "Reach of programme to employers- organically growing through minimal/limited communications."

The range of supporting resources provided to organisations

Stakeholders noted that the programme has been effective in delivering resources required by organisations to support employee health and wellbeing. In particular, stakeholders reflected on the quality of training provision.

> "Breadth of areas (or provision) and support to employers across wellbeing at work spectrum."

> "A success has been the ability to bring resources to organisations that they would otherwise not be able to gain access."

"Another success is its training scheme, although the training itself has not been evaluated on a broader scale, individual course feedback forms/evaluation seem promising. Courses are often fully booked, and at worst, they have proved a great incentive for employers to join the scheme."

Bespoke provision

Stakeholders talked about the unique bespoke provision provided by the programme to participating organisations. This differentiates the programme from other workplace wellness programmes and provides enhanced local support to participating organisations

"I feel the main successes of the programme are its bespoke, 1-1 support that it provides to participating employers. I feel this is a unique offer locally, and something that employers appreciate. Other schemes may not provide this level of 'coaching' or guidance, instead relying on digital resources or guidance packs. I also feel a success of the programme is its work to check and ensure that employers have implemented the criteria, with evidence assessments and site visits. It ensures that the award is not a 'tick box' exercise, and means the award itself holds some weighting."

For the programme team, the main success was that despite the stresses on staffing and time, they still managed to grow the programme:

"I think we still have new employees even though we…didn't do any promotions at all this year…we still kept growing and onboarding new employers. So that's…a really positive aspect of the programme."

7.5 Main challenges encountered by the programme

Capacity of the programme team

The main challenge raised by stakeholders was the limited capacity in relation to staffing and resource. Although this capacity has been adequate in setting up and mobilising the programme there are concerns that moving forward it may limit the ability for the programme to keep up with increasing demand, with the resources available.

"Capacity [of the team] is the main challenge. The team has grown but still only able to support a small proportion of employers."

"[Developing] operational documentation / processes to enable sustainable growth, whilst understanding the capacity within the internal team to support workplaces."

"One challenge when I worked on the programme was capacity - although since the staffing level has increased, so this should improve somewhat, and allow more businesses to be supported and work to be done on areas which require attention (e.g. social media/comms)."

Providing evidence of impact

Stakeholders recognised that the programme has been proactive in independently evaluating the reach and short-term impacts of the programme in terms of outputs (engagement with stakeholders and employers) and outcomes at an employer level (such as policy and practice change), they recognise the difficulties in evaluating impact of the programme at an employee level. Stakeholders recognise that this takes time and resource and the need to consider the best methodologies for this moving forward.

"One of the main challenges is evidencing impact of the programme on employee wellbeing."

"I think evaluation of the impact of the scheme at an employee level is a challenge. Getting participation in employee surveys for the evaluation has been challenging, so this may need rethinking in the future, and discussion on the opportunities for further collection of data and insight as to the impact of the programme."

This evaluation has sought to test employee surveys to gather limited data and test potential future approaches and the findings from this survey are reported in section 7 below.

Communications and marketing

The final area of challenge for the programme relates to communications between the programme, stakeholders and employers. In particular, the programme team have encountered difficulties in the use of social media (a key recommendation from the year 1 evaluation report).

"There is an absence of a clear PR strategy."

"Establishing a social media presence for the programme, using its identifiable branding, that celebrates employers successes and encourages new participation in the scheme remains a challenge. The barrier is largely the council policy - they will not approve [Social Media] accounts for the programme, instead encouraging use of existing East Sussex County Council platforms where post engagement is extremely poor."

7.6 Key lessons learned by stakeholders

It is clear from stakeholders that they have used the evaluations to understand key lessons that will enable the programme to continue its progression.

Responsive to needs of varying organisations

There has been significant learning about what is feasible and pragmatic in engagement with different types of organisations and the unique challenges they face such as employers of different sizes, sectors, industries, those that work in different ways (e.g. hybrid, office based etc), those that may have mixed role types (e.g. some office based, some routine workers, some manual, drivers etc).

> "There needs to be adequate time assigned to proactively manage the programme, to be able to follow up the workplaces and keep their momentum going."

> "The accreditation programme is appealing to some employers to award their commitment to wellbeing of employees. The programme appears to support a sequential progression on their journey to enhancing employee wellbeing - i.e. progression through different awards."

Increasing reach

Stakeholders recognise the pressures organisations are under and that there is a need not to overburden organisations with, for example, the time required for organisations to engage effectively with the accreditation scheme.

> "We need more proactive follow up of workplaces that have previously expressed an interest in the programme, to understand what they need to move from 'interested' to 'actively moving to an award'."

> "We need a review of the [programme] criteria to ensure that they are still relevant, that they still reflect best practice, and that we signpost to services and resources which are still freely available in East Sussex. The aim was to undertake this in summer 2023 but was not possible at the time due to staffing changes."

> "It is important for organisations from all sectors and of all sizes to be able to access information / training."

Communications and Marketing

Stakeholders highlight importance of effective communications. The programme team, have worked to monitor usage of the programme website (www.wellbeingatwork.eastsussex.gov.uk).

It is clear that significant efforts have continued to be made in enhancing the website over the past 12-month and this has led to an increase in the number of unique visitors to the site. Between January 2023 and September 2023 there has been 2012 unique visits to the website with average monthly unique visits of 233.5, an increase from 128.7 unique monthly visits during the same period in 2022. Between January and September 2023, the average monthly requests (via the website) for account creation or information stood at 12 per month.

The programme team also produces regular newsletters and there appeared to have been a steady increase in the sign ups to the newsletter. Unfortunately, a significant number of fake newsletter sign ups (approx 175) from summer period was identified October 2023. There are currently (January 2024) 215 newsletter subscribers, an increase from 180 the previous year (180).

Newsletter readership over the year has dipped off from a peak of 69% of the mailing list opening the newsletter (April 2023) to a low of 19% in September 2023. However it is reported that this was as a result of the 'fake sign-ups' mentioned above.

7.7   The programme team's views on the past year

For the programme team it has been a year of great changes (mainly with staff changes) but also continued growth and continued focus on what employers want. The team is justifiably proud of its success to date:

> "I think there's been a lot of change. But actually…during those periods and bringing in…fresh eyes from [name] and [name] it's actually a positive thing, hopefully in the long run. And especially being able to…increase the capacity on the programme as well."

8. Discussion

The workplace environment both directly and indirectly influences physical and mental health and wellbeing. On average, adults spend one third of their life at work, therefore our jobs and our workplaces can have a big impact on our health and wellbeing, making it a key setting for health promotion activities, with the potential to reach and influence the health of large numbers of people. A growing body of research has demonstrated that the support of health and wellbeing in the workplace has a positive impact on staff, business, and organisations.

The approach to supporting health and wellbeing taken by East Sussex County Council could be considered a 'conventional programme' comprising of four key components: a set of evidence-based standards; an assessment process; an awards process; and direct support to workplaces (most notably in the provision of training and supporting resources). Whilst there are comparable programmes nationally and regionally, evaluation of these accreditation schemes is generally lacking[3] and the East Sussex programme should be applauded for integrating a robust evaluation process into the programme from the outset.

Below we look at the achievements of the programme against the outcome framework that was developed at the outset to assess reach and impact.

8.1 Outputs – The reach of the programme

Over the first two years of the evaluation, we have been able to demonstrate that the design and implementation of the programme has followed best available evidence and good practice and has benefited from co-production between employers, employees and external stakeholders such as public health bodies. The finalised governance model has worked well and has proven robust over the first two years despite changes to some key staff. The governance of the programme clearly considered the range and sizes of businesses and attempts have been made to make to the process as pragmatic as possible for participating businesses.

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[3] The Work Foundation. Workplace health interventions and accreditation schemes: A rapid evince review and global mapping exercise. (2019)

OUTPUTS

Organisational

- Finalised delivery model
- Finalised governance model
- Monthly and annual monitoring data
- Annual evaluation report
- # Stakeholders engaged / supported
- # and type resources developed
- # internal and external events / meetings supported
- # Full and part time staff working on the programme
- £ investment into the programme
- Development and maintenance of website and digital resources
- Development of marketing and promotional materials
- # Workplace Health Champions trained

Business

- # Business approached (by size/type)
- # Business registered / expressing interest (by size and type)
- # Business registered by geographic area
- # Business registered by level of achievement (gold, silver, bronze)
- # Employees reached by programme (by age, gender, ethnicity, priority post code)
- # Employees engaged with specific health and wellbeing condition / concern
- # Employers / employees upskilled
- # Actions taken by employers relevant to the programme

"The programme has been expertly thought out and it is clear that it has been through actually [listening to] feedback and the objectives provided by businesses as it totally provides a holistic framework for companies to work with."

This is best evidenced by the output data for the programme. Despite very limited resources, over 130 organisations have registered onto the programme during the first two years and these registrations have continued at the same rate in year two as in in year one. Over half of companies registered are micro or small organisations – organisations that traditionally have less resource to invest in this type of programme. It may have been thought that public and third sector organisations (by the nature of their services) would be those most likely to engage in this type of programme, so it is encouraging that over half of companies registered are private sector organisations.

Complex data collection systems were established at the outset and again, despite a significant ask of participating organisations, they have proven effective in gathering key data including sickness absence data, employee health needs plus key output data. There has been significant growth in the numbers of organisations progressing through the awards between year 1, when there were just 7 organisations achieving a bronze or silver accreditation, through to year 2 when 53 organisations had achieved accreditation with several progressing through the award levels. Both stakeholders and employers have highlighted the value in the accreditation system and the programme has received unanimous support from both.

"I feel that the programme has done well over the past two years to develop from a concept to a fully operational programme, supporting a range of employers across the county. For the next few years, I feel that consideration needs to be made to the programme's sustainability - from a cost perspective, but also from the perspective of keeping employers involved once they have completed all award levels. The possibilities to grow schemes such as these are endless, so there will need to be thought given to the priorities of the county and the programme, so that the focus is somewhat narrowed and so that it works to reduce health inequalities."

As with year one, the only responses that were less favorable in relation to the accreditation scheme was the amount of time and resource required to achieve accreditation. Whilst the robustness of an award gives rigor and value to the process there is a need to perhaps review the criteria and examine if there is potential to
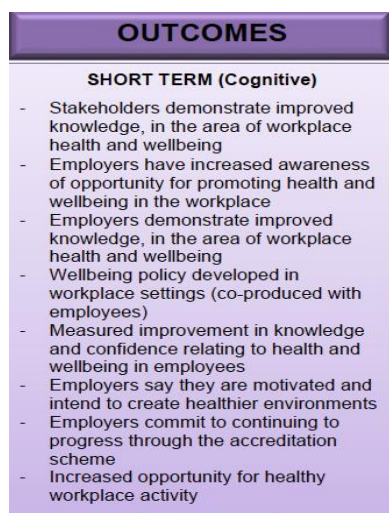
streamline in any areas. Whilst the topics covered by the programme have clearly been well thought through and evidence based, employers and employees appear to have been more focused on certain areas, notably mental health and wellbeing; musculoskeletal health; leadership management and culture. Some of the lifestyle related criteria – in particular stop smoking, and alcohol and substance misuse - have received less attention, perhaps because they have an impact on fewer employees.

It is extremely encouraging that significant support – most notably in the form of training - has been provided to organisation around mental health and wellbeing in particular, and in relation to workplace health in general. In year two the programme has been responsive to meeting training needs identified by organisations and has delivered wider training offers including male and female mid-life and menopause. The training has been unanimously well received and organisations consider it a key aspect of the programme delivery, with over 320 individuals trained to date.

The reach of the programme into a very high number of individuals is impressive. The companies registered on the programme collectively employ around 18,000 individuals. Based on national data we can estimate that around a third of these individuals (36%) have a long-term health condition (n= 6,480)[4]. This data demonstrates the significant potential reach of the programme to date.

8.2 Outcomes: what difference has the programme made?

OUTCOMES

SHORT TERM (Cognitive)
- Stakeholders demonstrate improved knowledge, in the area of workplace health and wellbeing
- Employers have increased awareness of opportunity for promoting health and wellbeing in the workplace
- Employers demonstrate improved knowledge, in the area of workplace health and wellbeing
- Wellbeing policy developed in workplace settings (co-produced with employees)
- Measured improvement in knowledge and confidence relating to health and wellbeing in employees
- Employers say they are motivated and intend to create healthier environments
- Employers commit to continuing to progress through the accreditation scheme
- Increased opportunity for healthy workplace activity

The success of the programme cannot be assessed based on the output data alone. We therefore have sought to see the difference the programme is making to organisations in the first instance (a key focus of this year's evaluation) and then on employees' health and behaviours.

Through qualitative data gathered via surveys and interviews, there is evidence that the programme has led to improved knowledge and understanding of the health and wellbeing issues that they can help to influence and support. Furthermore, 82% of organisations have now

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[4] https://www.health.org.uk/publications/long-reads/what-we-know-about-the-uk-s-working-age-health-challenge

conducted their own employee health needs assessment, to understand and respond to the needs of their employees.

> "We received information on the initiative and valued the concept being introduced around making every contact count and how we could use this in our workforce."

> "We wanted to establish an environment in which staff value their own health and feel that this is valued by us."

One of the key outcomes for the programme in the short term was to support organisations in developing or enhancing their workplace policies around specific topic areas. We look to assess this through the employer survey. Findings showed that organisations collectively had enhanced / developed policy covering every aspect of the programme criteria. Across the two years (based on 59 organisations) over 100 new health and wellbeing policies have been developed, most notably in relation to the two areas of greatest concern – mental health and wellbeing and musculoskeletal health.

> "We now have a … wellbeing team made up of a good cross section of staff across the organisation, we have wellbeing champions and mental health first aiders. We got the sickness policy changed after five years, several other important policies have been reviewed and updated after our feedback including bereavement, carers, safeguarding and lone working."

Organisations have reported that engaging staff in their health and wellbeing has led to an increase in staff morale and an appreciation that the organisation values them as individuals. This in turn, it is reported, has led to increased productivity and improved staff retention. There is no quantitative data available as yet to support these changes (productivity/retention/ morale data); this is something the programme could consider.

MEDIUM TERM (Behaviour)

- Employers implement and monitor workplace health and wellbeing policies
- Employers maintain and progress workplace health accreditation
- Measured sustained adoption of healthy behaviours by employees
- Measured improvement in employee mental and emotional wellbeing
- Measured improvements in employee physical health
- Measured improvements in quality of life of employees
- Measured reduction in sickness absence of participating employers
- Measured increase in productivity of participating employers
- Measured improvements in staff retention of participating employers

There are often disparities between change at an organisational and policy level and change brought about through implementation, at an individual employee level.

The programme is working hard to try and understand changes to at an employee level and – building on the recommendations from the year one report – have looked to understand the impacts on employees. This has not been without difficulties. There has been a reluctance amongst employers to circulate the employee survey, in particular among the larger employers, despite reassurances on employee and organisational confidentiality. For some it was reported

that this was because they already undertake their own internal staff surveys, whilst for others management considered the survey too intrusive. There certainly now seems to be an opportunity to discuss this in more detail with organisations and to gather consensus to assess impacts in the future.

However, one in four organisations achieving accreditation did circulate the employee survey and, when circulated, one in three employees completed the survey, demonstrating a high level of acceptability amongst employees. The findings in general highlight that the employees are aware of and in favour of their organisation signing up and engaging on the programme and three quarters felt that this demonstrated the company's commitment to the health and wellbeing of their employees. The survey highlighted a synergy between the topics the company place as most important to those that the employees consider of most importance. Encouragingly there were a significant number of employees reporting an improved culture within their workplace over the past period and they report significant interventions now taking place within their workplace to benefit their health and wellbeing.

Whilst these early results are encouraging, they are not a measure of changed behaviours. If we are to truly understand the impact of the accreditation programme at an organisational or individual level the next stage would be to implement an evaluation on the impact of the programme on employee attitudes and behaviours: have the changes in policy, the introduction of training and lifestyle initiatives – the 'nudges' – led to behaviour change?

9. Recommendations

For the programme

1. As the first-year evaluation said, continue the good work! The programme is now well established and in a good position to be upscaled to reach more employers across East Sussex. This could be challenging in the face of pressures on staffing and resources within local authorities but is the key issue for the programme to have significant impact across the County.
2. The programme should continue to attempt to streamline the process for registration and accreditation to stop it becoming a barrier to progression through the awards. Obviously, this must not be done at the expense of rigour. It would be a useful exercise to conduct a review of criteria and accreditation requirements to make sure they are still relevant.
3. The programme depends on strong communications, and this should be as focused and clear and positive as possible. The possibilities of separate focused social media

accounts (i.e. not only using the council's main account) should continue to be explored.

4. The programme might review the nature of the organisations it is reaching, particularly with regards to reducing health inequalities. There is limited data on the socio-economic status of employees reached by the programme and this could be enhanced.

5. Similarly, the programme might continue its focus on small- and micro-sized companies, as these are the most likely to benefit from the programme as they are less likely to have strong corporate wellness policies.

6. The training offer has been extremely well-received and should be continued. A continued focus on mental health is likely to be welcomed along with a focus on musculoskeletal health.

7. The findings of the mental health deep dive should be implemented, and another deep dive considered, perhaps on musculoskeletal health.

For the evaluation

1. The programme is almost unique among workplace health programmes in that it was evaluated independently from the start. This should continue.

2. The core data collection system should continue as this allows ongoing monitoring of progress.

3. Annual surveys of employers and employees should also continue as they allow an assessment of progress. Stakeholder surveys appear to be less useful (as stakeholders are universally supportive) and these surveys could be replaced with depth interviews.

4. The focus in year three should be on increasing the rigour of the evaluation methodology to capture employee outcomes. Ideally this would be a controlled evaluation collecting pre- and post-data among employees in organisations that have registered and comparing to those that have not. This would help to answer the question: "does the programme lead to health benefits?' But would be costly and challenging.

5. In the absence of a controlled evaluation, the focus in year 3 should be on collecting impact data from employees, with a focus on their changes in knowledge and behaviours. This will require a new methodology and may target specific workplaces through depth evaluation case studies.

6. Promote the findings of the work to date. It may be time for a journal article aimed at the public health community, as well as less formal articles in the trade press.

Appendix 1: Organisations receiving awards (15/12/2023)

Award level	Workplace name	Month awarded
Gold Award	Servomex Group Ltd	September 2023
Small Business Gold Award	Affinity Select Insurance Services Ltd	November 2023
Silver Award	Servomex Group Ltd	November 2022
Silver Award	Wealden District Council	September 2023
Silver Award	Sussex Housing & Care	December 2023
Silver Award	St Wilfrid's Hospice	December 2023
Small Business Silver Award	Havens Community Hub	November 2023
Small Business Silver Award	Industrial Construction (Sussex) Limited	July 2023
Small Business Silver Award	Affinity Select Insurance Services Ltd	July 2023
Bronze Award	Wealden District Council	March 2022
Bronze Award	Servomex Group Ltd	June 2022
Bronze Award	Feilo Sylvania UK Ltd	November 2022
Bronze Award	FSN	January 2023
Bronze Award	St Wilfrid's Hospice	January 2023
Bronze Award	East Sussex County Council	January 2023
Bronze Award	Sussex Housing & Care	January 2023
Bronze Award	Knill James LLP	February 2023
Bronze Award	East Sussex College Group	November 2023
Bronze Award	Rathfinny Wine State	November 2023
Bronze Award	Heringtons Solicitors	September 2023

Bronze Award	Kurt J.Lesker Company	September 2023
Small Business Bronze Award	Ridgeview Wine Estate	June 2022
Small Business Bronze Award	Care To You Healthcare	January 2023
Small Business Bronze Award	Havens Community Hub	January 2023
Small Business Bronze Award	Gradient Consultants Limited	January 2023
Small Business Bronze Award	Industrial Construction (Sussex) Limited	January 2023
Small Business Bronze Award	Affinity Select Insurance Services Ltd	January 2023
Small Business Bronze Award	The Village Shop & Café	January 2023
Small Business Bronze Award	Care for the Carers	July 2023
Small Business Bronze Award	Seaview Project	August 2023
Small Business Bronze Award	Dawson Hart Solicitors Limited	September 2023
Small Business Bronze Award	Old School Surgery	December 2023
Small Business Bronze Award	APAC Ltd	December 2023
Small Business Bronze Award	Mitchell & Cooper	December 2023
Small Business Bronze Award	Community Supporters	December 2023
Small Business Bronze Award	East Sussex Recovery Alliance	November 2023
Small Business Bronze Award	One You East Sussex	November 2023
Small Business Bronze Award	Let's Do Business	November 2023
Commitment Award	Design Specific Ltd	June 2022
Commitment Award	The Prideaux Group	May 2022
Commitment Award	Age UK East Sussex	August 2022
Commitment Award	Affinity Select Insurance Services Ltd	September 2022
Commitment Award	Wealden Community Care Ltd	November 2022
Commitment Award	Fieldskill Ltd	November 2022
Commitment Award	Knill James LLP	November 2022

Commitment Award	Spring Care PA's Battle Limited	November 2022
Commitment Award	APAC Ltd	January 2023
Commitment Award	Community Supporters	January 2023
Commitment Award	Adams and Remers	January 2023
Commitment Award	East Sussex Recovery Alliance	January 2023
Commitment Award	Seaview Project	April 2023
Commitment Award	Heringtons Solicitors	April 2023
Commitment Award	Rotherfield St Martin	May 2023
Commitment Award	Ashdown Audio Visual	July 2023
Small Business Silver Award	Industrial Construction (Sussex) Limited	July 2023
Small Business Silver Award	Affinity Select Insurance Services Ltd	July 2023
Commitment Award	Old School Surgery	August 2023
Commitment Award	Mitchell & Cooper	September 2023
Commitment Award	Saffrons Park Nursery	September 2023
Commitment Award	Integrated Family Healthcare	October 2023
Commitment Award	Citizens Advice Eastbourne	November 2023
Commitment Award	Sussex Community Foundation	December 2023
Commitment Award	Charles Cox Ltd	December 2023

Appendix 2: Key examples of changes to policy, practice and initiatives introduced by organisations since joining the programme

Physical activity and active travel

- Advised staff of the local park runs and couch to 5k
- Have a health assured app which has exercise you-tube videos and podcasts
- Organised several walking meeting, social activities and friendly competitions
- Investigating bike to work schemes
- Introduction of lunch time walks
- Additions to Staff Intranet, Senior Manager testimonials
- We have a football team. encourage lift sharing. regular outdoor activities
- Our contact centre team have undertaken weekly 30 minute 'walk' and talk sessions
- Monthly staff walks
- Encourage physical activity in Newsletters
- Will be implementing a running group
- Cycle to Work annual invite for enrolment to Cycle to Work Scheme.
- Re-introduced some physical activities that were popular pre-lockdown.
- Encouraged staff to walk to work, and encouraged care shares for staff working in the same venues.

Healthy Eating

- Increased staff awareness around healthy eating.
- Provide fresh fruit in the office.
- Fresh fruit delivery to office
- Healthy Eating week / Healthy posters up
- Placed notices and signs in the food areas
- Issued Healthy Eating Guidance
- Regular promotion of Healthy Eating including as part of awareness days.
- Reintroduced free fruit following COVID rules being lessened.
- Intranet articles with signposting to coincide with awareness days
- Encouraged staff to be more aware of drinking water when at work
- All staff provided with a free water bottle

MSK

- Revised policy/process for reporting MSK issues and signposting to support available

- Encouraging staff to take regular breaks from desk
- Arranging for local firm to come and carry out health check
- Centralized printing so that everyone has to get up and walk to get it.
- Big pilot project underway in one of our departments to look at causes and rates, preventative measures, management of symptoms/conditions, and ongoing support needed.
- Updated risk assessment on manual handling
- Health care cash plan employee benefit so they can claim back treatment
- Improved notices around the building. We have encouraged people to sit properly and use the equipment properly (we offer special mice, keyboards etc). We ensure that a H&S assessment is undertaken whenever anyone changes desks and at least annually.
- Carried out WSA and purchased items required to support MSK health, also provided standing desks
- Promoted Sussex MSK Partnership East's resources and our workstation assessment
- Back Care Awareness week campaign
- Cash plan promotion
- WSA and replaced items, standing desks etc
- Increased awareness, posters around the office, installed standing/seating desks

Health and Safety

- Lone Working Policy
- Reviewed our safeguarding and lone working policies
- Introduced reasonable adjustment forms within our policies
- New policy in place
- We have reviewed our full suite of H&S policies and procedures
- Stress in the workplace risk assessment to be conducted
- Everyone has regular training through an online system
- Introduced a range of mandatory training sessions which include but not limited to. DSE Lone Working Manual Handling Slips, Trips and Falls.
- We have a new workstation assessment, which all staff completed for home and office working

Mental Health and Wellbeing

- Increased amount of Mental Health First Aiders
- Increased awareness in the workplace. Lots of courses undertaken by several members of staff.

- Have a monthly segment in the staff teams meeting to provide updates and also have open door policy for all staff regarding mental health and wellbeing. Staff trained in mental health first aid.
- We have 2x MHFA's and a wellbeing committee
- Have offered training, introduced wellbeing champions, and have regular social activities among the team
- Wellbeing Policy and action plans
- Training for additional members of staff
- Thought of the week / Mental Health First Aid training
- introduced a specific Health and Wellbeing policy
- Issued signposting and offered training - Overcoming Overwhelm
- Signposting to resources
- Offered training to managers, to help if staff are dealing with poor mental health. Introduction of 2 mental health first aiders
- Various wellbeing awareness campaigns on stress and mental health awareness.
- All staff have been trained in Mental Health at various levels.
- Updated policies and signposted to resources

Sickness absence and return to work

- The CEO has undertaken ACAS sickness absence training and we're developing a sickness and return to work policy
- Sickness policy reviewed 2023, introduced more robust return to work process as well as clear guidance on escalation.
- Now providing more training to managers on Sickness Absence Management. Have a more structured approach to monitoring absence.
- Complete overhaul of our sickness absence policy & procedure, including menopause as a reason for absence and currently working on introducing Wellness Action Plans and This is Me passports (like a disability passport but for everyone).
- This has been reviewed and changed to remove the Bradford Factor (something staff have been requesting for over 5 years, so a significant change).
- Work within People Services team on support and monitoring
- Looking to launch an app with our attendance management service provide.
- Altered some of the supervision document to incorporate signposting and additional questions.
- Run workshops for managers on managing sickness absence.
- We've promoted our new sickness policy

Alcohol and substance misuse

- Increased signposting to information & support
- Additions to Staff Intranet
- Drink Wisely campaign including Mocktails event

Stop smoking

- Additions to Staff Intranet
- One You East Sussex coming on site to support us with Stoptober.
- Met with OYES to discuss the possibility of on-site clinics
- Display information
- Increased signposting to information & support

Leadership Management and Workplace Culture

7. Staff change, training provided and one manager has completed a leadership course and I am currently on a course.
8. Wellness questions introduced as part of the 1:1 and appraisal process.
9. Wellbeing champions in every office
10. Opened up our Leadership and Management programme to more employees (not just those in management) to improve the workplace culture and values.
11. Staff wellbeing team now, including two wellbeing champions and a regular wellbeing newsletter.
12. Mental health awareness training offered to managers. Senior Leaders taking part in wellbeing campaigns - role-modelling. Wellbeing policy currently being written
13. Training for all staff on Mental health
14. Set up a wellbeing lead in each office.
15. MHFA training for the MD and Practice Manager
16. Members of SLT now have a regular slot in our employee briefings to focus on wellbeing. Our recruitment project team are focusing on promoting what we offer as an employer on wellbeing
17. Launched a new wellbeing newsletter and promoted initiatives to reduce environmental impact at work including ecosia website, use of electronics, commuting in a green way, creating a green office environment and recycling.
18. Meeting with paid staff and volunteers to discuss and develop understanding of survey responses; Have called for expressions of interest in being a workplace champion.
19. Training and recruited a wellbeing champion in each office
20. Wellbeing Networking, courses

Appendix 3: Key examples of changes introduced by organisations since joining the programme that employees have recognised / benefited from

Physical activity and active travel

- Organisation of workplace health walks
- Operational group meeting walks
- Development of walking groups
- Development of sports / Fitness groups
- Cycle loan scheme / incentives for cycle purchase / cycle to work scheme
- Encourage physical activity in newsletters and office communications
- Drive to net zero – support for people to reduce car use
- Discount gym memberships
- Promotion of park run / charity run/walks
- Walking / cycling work place challenges
- Improved facilities for cycle storage
- Promotion of exercise apps.

Healthy Eating

- Increased staff awareness around healthy eating.
- Provide fresh free fruit in the office.
- Provision of healthy lunch options in staff canteen
- Free healthy meal for shift workers
- Healthy snack options now provided at meetings and internal celebrations
- Healthy Eating week / Healthy posters up
- Placed notices and signs in the food areas
- Issued Healthy Eating Guidance
- Health wellness and diet app

MSK

- Introduced adjustable sit/stand desks
- Encouraging staff to take regular breaks from desk
- Online courses and advice literature – desk set up and posture
- Training on home working
- Access to private health care
- Promotion of regular movement
- Provision of physio advice / support

- Insurance benefits to include chiropractor
- New office chairs to support posture
- Provision of Pilates sessions in the workplace to improve posture
- Training session provided by MSK expert
- DSE Surveys regarding work station

Health and Safety

- New lone worker policy implemented
- New health and safety training provision
- Online information / training / advice
- Health and Safety policy now operated and monitored
- Regular consultation with staff
- Provision of appropriate PPE
- Risk assessments frequently conducted.

Mental Health and Wellbeing

- Mental health and wellbeing workshops have been provided in workplaces
- Monthly 1-1 mental health and wellbeing sessions provided
- Online course and access to supportive literature
- Signposting to supportive external organisations for support
- Dedicated staff to support mental health and wellbeing – mental health first aiders
- High level training available to staff
- Access to employee assistance programme for mental health
- Flexibility provided around work/life balance to support staff wellbeing
- Updated policies and signposted to resources
- Access to free therapy sessions

Support for specific health conditions

- Very supportive and understanding culture at the top of the organisation
- Flexible working for staff with Long Term Condition – in particular cancer mentioned frequently
- Training and support for Menopause
- Provision of private health care
- Adequate adjustments made within work for those in need
- Additional leave for medical attendance

Alcohol and substance misuse

- Increased signposting to information & support
- New / updated policies in place and actioned

- Support (and understanding) for employees in treatment
- Drink Wisely campaign including Mocktails event
- Online and in person awareness raising events

Stop smoking

- Additions to Staff Intranet
- Support for staff in wanting to quit
- Signposting for smokers to appropriate support
- Non-smoking workplaces supported by information to smokers to support quit.

Leadership Management and Workplace Culture

- More regular support meetings focusing on health and wellbeing at a senior level and engaging front line staff
- Developed a supportive of positive office/workplace culture
- Senior Leadership Team have made themselves available and approachable to discuss health and wellbeing concerns easy to approach
- Survey's to find out what employees would like to learn more about in relation to health, and to raise any issues the team has in the workplace.
- Provided a wide variety training courses and opportunities for development
- Invested funding to support employees with progression
- Updated policies and are implementing them
- Improved communication internally with regular opportunities promoted in newsletter
- Monthly or annual appraisals that consider health and wellbeing

Appendix 4. East Sussex Wellbeing at Work Outcomes Framework text-only version

Introduction

East Sussex County Council Workplace Health Accreditation programme is designed to support and recognise achievements in workplace health and wellbeing.

The programme aims to develop a range of accreditation standards across a range of workplace health topics and support local companies in developing and implementing actions to support standards across the areas of:

- Healthy Eating
- Physical Activity and Active Travel
- Mental Health and Wellbeing
- Musculoskeletal Health and Health and Safety

- Alcohol, Smoking and Substance Misuse
- Sickness Absence, Return to Work and Prevention
- Leadership, Management and Workplace Culture

Context

Why Workplace Health?: On average, adults spend one third of their life at work, therefore our jobs and our workplaces can directly and indirectly influence physical and mental health and wellbeing. making it a key setting for health promotion activities.

Geography: East Sussex has a population of 555,000 residents of which 53% (304,000 people) are of working age. In 2017 there were over 24,000 active businesses. 86% were micro businesses (<10 employees) and 11% were small business 10-49 employees) The county faces a number of challenges including a low wage economy, high levels of worklessness and benefit dependency in the more deprived wards, under representation of high growth sectors, and the majority of Small and Medium Sized Enterprises (SMEs) only serving local markets.

Importance of workplace health and wellbeing: Just under a third of working age people in the UK have a long-term health condition. One in 4 UK employees reported having a physical health condition, and 1 in 5 of those employees with physical health conditions also reported having a mental health condition. Across the UK, in 2019/2020, over 38 million working days were lost due to work-related illness or injury. Stress, depression or anxiety and musculoskeletal disorders account for the majority of days lost due to work-related ill health, costing businesses, the equivalent of £81bn in 2018. A growing body of research has demonstrated that the support of health and wellbeing in the workplace has a positive impact on staff, business and organisations. Primarily evidence-based workplace interventions look to support specific health conditions (most notably mental health and wellbeing), lifestyle interventions and cultural/ organisational system change.

East Sussex Workplace Health Accreditation Scheme: East Sussex County Council Public Health are collaborating with partners and stakeholders to develop a Workplace Health programme, containing a free accreditation scheme for businesses. The programme aims to improve health and wellbeing of employees in the workplace setting (particularly targeting workers who may experience health inequalities, e.g. low skilled, low paid and from economically deprived communities).

Inputs

- Governance
- East Sussex County Council Public Heath
- Project Board

- Project Steering Group
- Active Stakeholders
- East Sussex County council Public Health - Health Improvement Specialist; Health improvement principal; Head of public mental health; Consultant; Community resilience, Commissioning manager; health protection specialist; Sustrans; Living Streets; University of Brighton; Chamber of Commerce
- Finance
- Public Health Budget:
- £42,500 (2020/21)
- £33,000 (2021/22 recurring)
- Strategies and Guidance
- East Sussex Economic Development Strategy
- East Sussex Growth Strategy
- East Sussex JSNA
- NICE workplace health guidance (various)
- Public Health England. Local Healthy Workplace Accreditation Scheme Guidance
- Staff
- 1 full time project coordinator
- 1 0.6 WTE project support officer
- 3 coaches
- 27+ Cancer Champions
- Formative Research
- East Sussex Workplace Health Evidence Review (Parker & Cavill Dec 2020)
- Draft East Sussex Workplace Accreditation Standards

Activities

- Programme Management
- Coordination and management of programme including developing programme infrastructure; ensure effective delivery; and stakeholder engagement
- Ensure a universal and targeted approach at a scale and intensity proportionate to the degree of need ('proportionate universalism')
- Development of data and access to data sources (eg health inequalities data) to identify and support appropriate action
- Centrally run website with information and resources
- Supportive/robust assessment process and award panels
- Marketing and communications
- Programme Evaluation
- Business Support
- Agree and define support requirements for businesses
- Engage and support businesses based on local need

- Identify businesses, employer and employee needs
- Staff access to high quality training on relevant health issues
- Support awards applications
- Accreditation Programme
- Delivery of robust accreditation programme split between a Micro + small workplace aware scheme and Medium + Large workplace awards across four levels:
- Commitment; Bronze; Silver; Gold
- Achievement of a range of criteria across the following domains
- Physical activity and active travel
- Healthy eating
- Mental health and wellbeing
- Alcohol, smoking and substance misuse
- Sickness absence, Return to work and Prevention
- Leadership management and Workplace culture
- Musculoskeletal health and Health and safety

Outputs

- Organisational
- Finalised delivery model
- Finalised governance model
- Monthly and annual monitoring data
- Annual evaluation report
- # Stakeholders engaged / supported
- # and type resources developed
- # internal and external events / meetings supported
- # Full and part time staff working on the programme
- £ investment into the programme
- Development and maintenance of website and digital resources
- Development of marketing and promotional materials
- Business
- # Business approached (by size/type)
- # Business registered / expressing interest (by size and type)
- # Business registered by geographic area
- # Business registered by level of achievement (gold, silver, bronze, commitment)
- # Employees reached by programme (by age, gender, ethnicity, priority post code)
- # Employees engaged with specific health and wellbeing condition / concern
- # Employers / employees upskilled

- # Actions taken by employers relevant to the programme

Outcomes

- SHORT TERM (Cognitive)
- Stakeholders demonstrate improved knowledge, in the area of workplace health and wellbeing
- Employers have increased awareness of opportunity for promoting health and wellbeing in the workplace
- Employers demonstrate improved knowledge, in the area of workplace health and wellbeing
- Wellbeing policy developed in workplace settings (co-produced with employees)
- Measured improvement in knowledge and confidence relating to health and wellbeing in employees
- Employers say they are motivated and intend to create healthier environments
- Employers commit to continuing to progress through the accreditation scheme
- Increased opportunity for healthy workplace activity
- MEDIUM TERM (Behaviour)
- Employers implement and monitor workplace health and wellbeing policies
- Employers maintain and progress workplace health accreditation
- Measured sustained adoption of healthy behaviours by employees
- Measured improvement in employee mental and emotional wellbeing
- Measured improvements in employee physical health
- Measured improvements in quality of life of employees
- Measured reduction in sickness absence of participating employers
- Measured increase in productivity of participating employers
- Measured improvements in staff retention of participating employers

LONG-TERM

- Improved and supportive working conditions
- Creation of vibrant and healthy workplaces across East Sussex
- Sustainable employment with flexibility for work/life balance
- Thriving business sector across East Sussex
- Employees empowered to support, shape and contribute to their employment
- Increased early detection of health and workplace issues
- Increased opportunities to work
- More people in work, well and more productive
- Improved efficiency and productivity of workplaces
- Improved health and wellbeing of the working age population
- Whole system approach to employee health and wellbeing

- Employers and employees receive appropriate and timely health and wellbeing support
- Improved health of the workforce
- Greater equality in healthy life expectancy between poorest and wealthiest areas
- Reduced health inequalities

EXTERNAL FACTORS AND INFLUENCERS

- The programme cannot achieve these outcomes without working in partnership with a wide range of local, regional and national organisations and must engage with and utilise other local services
- The programme requires sustained investment from multiple sources to maximise the impact of the scheme
- COVID-19 has affected the way we work, with more home working. This must be considered if the effectiveness of the programme is to be maximised
- COVID-19 has placed unprecedented burdens on business, who are having to operate at reduced incomes, reduced staffing numbers, increased expenditures
- BREXIT will place as yet unknown pressures on many businesses that require significant business focus in the coming months