

January 2020

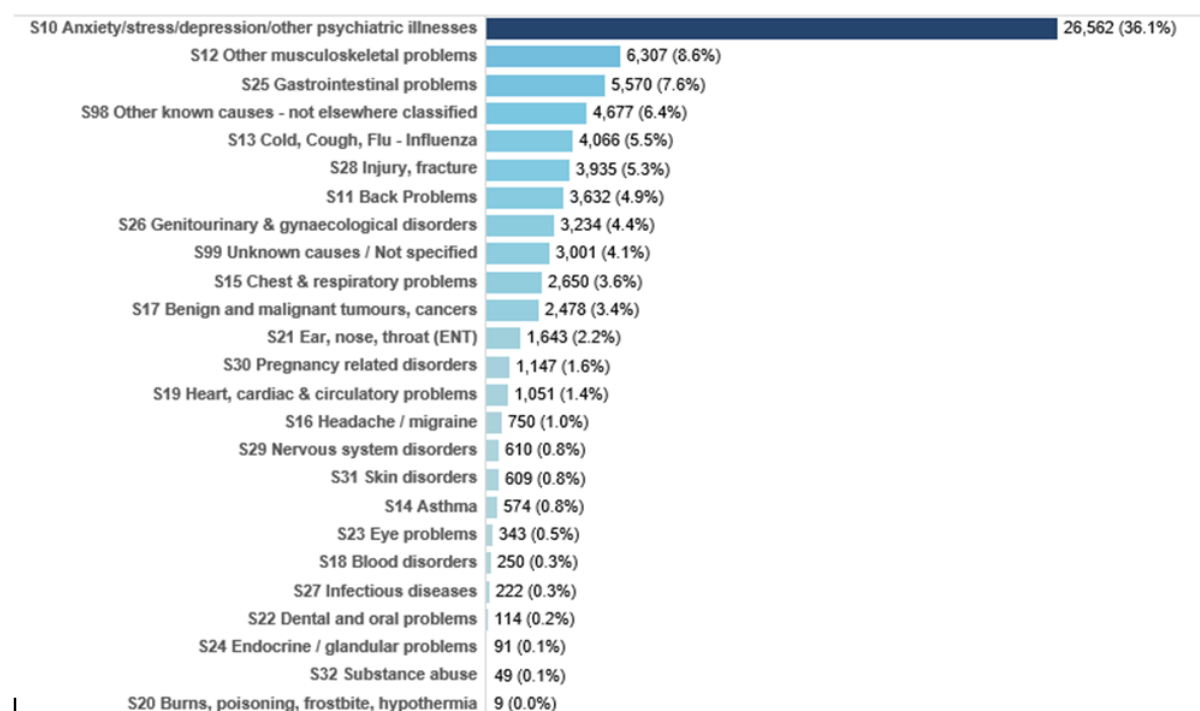
Sickness Absence and Staff Wellbeing approaches

1. Introduction

This paper sets out the current sickness absence profile across Pennine Care and the activities in place to support the reduction of absence and improvements in health and wellbeing.

2. Sickness Absence profile

The following chart provides the main reasons for absence both in terms of days lost and reasons for absence for a 12 month period up to December 2019.



As set out above the main reasons for 'days lost' are:

- Stress, Anxiety and Depression
- Musculoskeletal problems
- Gastrointestinal problems

3. Support for staff

3.1 Occupational Health

The Trust Occupational Health service is available to provide support for staff and managers in the management of sickness absence.

The Occupational Health service also provides advice and treatment for staff to prevent and manage Musculoskeletal conditions as follows:

- * PhiL – Physio Triage/Advice Service
- * Musculoskeletal Management Referral
- * Musculoskeletal (Treatment)

In addition to the Occupational Health service, the Trust has established a range of services for our employees to support the reduction of absence through prevention and health improvement.

3.2 Staff Wellbeing Service

The staff wellbeing service is a well regarded in-house service which offers a range of support to our workforce.

The services include counsellors, Cognitive behavioural therapists, Psychological wellbeing practitioners, arts psychotherapists and EMDR (Eye- movement desensitisation therapy for trauma) specialists.

During 2018-19:

- Over 30 staff workshops and courses have been run including interventions for bereavement, men’s mental health, sleep issues, BAME, LGBTQ, women’s health and the menopause, Mindfulness for chronic pain (including MSK), mindfulness and yoga, Acceptance and Commitment therapy, team bespoke wellbeing sessions and outreach ward visits.
- 4 x two day Mental Health First Aid accredited courses have been delivered to 60 staff
- Training support to managers in staff wellbeing and mental health stigma
- 1 to 1 post-incident interventions

Feedback on the services shows very positive outcomes with 95 per cent of staff saying where appropriate, the support helped them to stay in work or return to work sooner from sick leave.

3.3 Training and Health and Wellbeing support

Prevention is key therefore the Trust has specialist training and advice in place on how to minimise harm and injury when control and restraint measures need to be implemented. Also specialist advice and training in moving and handling supported by the moving and handling co-ordinator. The Core and Essential Skills Training team also support procurement of the correct equipment for clinical areas.

In addition, the health and wellbeing group meet regularly to recommend, agree and plan actions in support of staff wellbeing. Areas of development through the group are set out below:

- Commissioned wellbeing programmes including - Perform@Your Peak and Mental Health First Aid
- Provision of Schwartz rounds as support for staff to deal with the emotional impact of service delivery
- Team effectiveness model
- OD support to look at effectiveness of teams and creating a great place to work.
- Workshops on resilience and coping with change, leadership training and team development such as the Go Engage Pioneer team programme.
- HR support to application of wellbeing and attendance at work policies including: flexible working policy, managing attendance policy. HR teams provide workshops and drop in clinics in application of these policies.
- HR teams also provide support to managers in managing absence and proactively address long term sickness.

4. Staff Survey Responses

The NHS staff survey 2018 theme of health and wellbeing shows that staff reported their health and wellbeing to be better than the average for comparator trusts (6.2 as opposed to 6.1 on a range of 1 – 10 where 10 is excellent). Further detail shows the questions that make up the response

	PCFT	Average
I am satisfied or very satisfied with the opportunities for flexible working patterns	65%	60.4%
The Trust definitely takes positive action on health and wellbeing	32.8%	30.9%
In the last 12 month’s I have experienced MSK problems as a result of work activities	21.4%	23.4%
In the last 12 months I have felt unwell as a result of work related stress	40.1%	41.1%
I have come into work in the last 3 months despite not feeling well enough to perform my duties	55%	55.9%

5. Conclusion

We take the health and wellbeing of our workforce extremely seriously and recognise the challenges faced particularly by our front line staff members working within mental health and learning disability services.

Our Occupational Health and Staff Wellbeing services have been set up to address the most common reasons for absence in order to act pro-actively to offer support to our staff, however, we will continually review our service offers to ensure we meet the needs of our staff.

The committee are asked to note the content of the report.

Nicky Littler
Director of Workforce
January 2020

This dashboard provides an overview of your current Organisation's status against the Health and Wellbeing Framework

