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Society of Occupational Medicine

The Future of Occupational Health – building wellbeing into organisational life

Dr. Jennifer Napier

Contents

Introduction

"Health is created and lived by people where they learn, work, play and love".

World Health Organization, Ottawa Charter for Health Promotion (1986)[1]

Whilst the fundamentals of good health and safety remain crucial for preventing accidents and work-related diseases, there is growing interest in how workplaces can actively promote health and wellbeing. Occupational health has an opportunity to enhance the value of our offer for the 21st century, helping foster happier, healthier human lives, and vibrant, successful organisations.

The description of occupational health formulated by the World Health Organization and International Labour Organization places occupational health at the heart of the development of both knowledge and practice to improve the health and wellbeing of working age adults.

*"Occupational health should aim at: the **promotion** and **maintenance** of the highest degree of **physical, mental and social well-being** of workers in all occupations…the main focus in occupational health is on three different objectives:*

(i) the maintenance and promotion of workers' health and working capacity;

(ii) the improvement of working environment and work to become conducive to safety and health; and

*(iii) development of work organisations and **working cultures** in a direction which supports health and safety at work and in doing so also promotes a **positive social climate** and smooth operation and may enhance productivity of the undertakings."*[2]

In this paper, we set out the leading role of occupational health practitioners as strategic advisors to organisations on the wellbeing at work agenda. But first we turn to what wellbeing is, why it matters to organisations, and how it is fostered.

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1 World Health Organization (1986), Ottawa Charter for Health Promotion.

2 ILO/WHO 1950 statement (updated in 1995), adopted by the International Commission on Occupational Health.
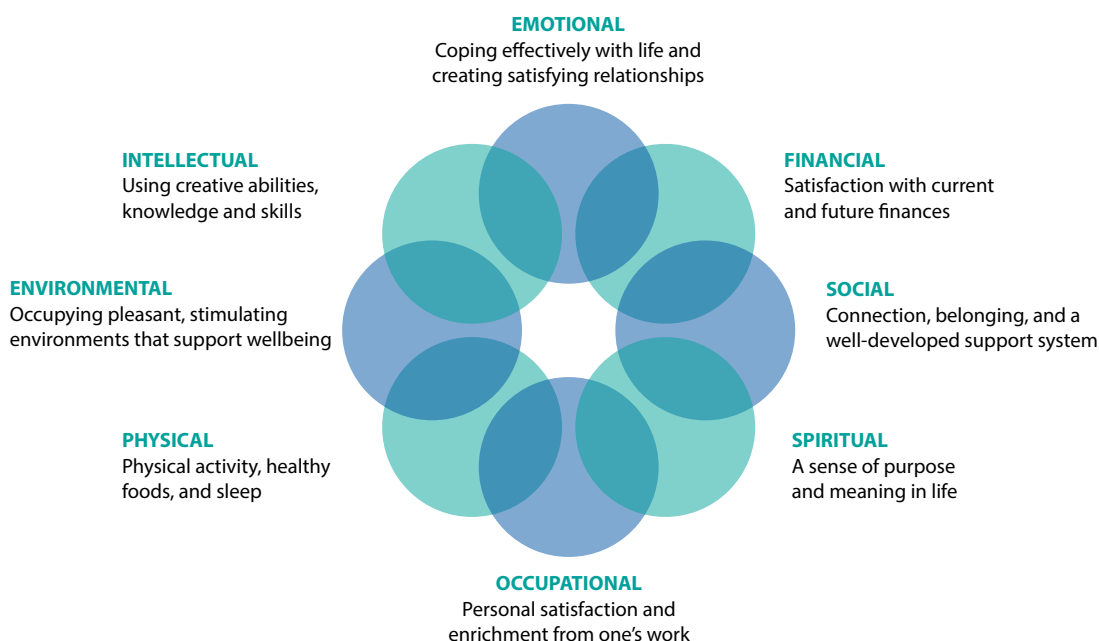
What is wellbeing?

A state of wellbeing is what most people aspire to. The concept of wellbeing offers a dynamic and holistic view of humans, encompassing life satisfaction and positive functioning[3,4,5,6]. The UK Office for National Statistics Measuring National Wellbeing Programme defined personal wellbeing as:

"How satisfied we are with our lives, our sense that what we do in life is worthwhile, our day to day emotional experiences (happiness and anxiety) and our wider mental wellbeing."[7]

Whilst individual lifestyle choices around physical activity, adequate sleep and a healthy diet play a significant role in supporting both health and wellbeing, the broader socioeconomic and physical contexts in which we live and work have the largest overall impact [8]. National[9] and international[10] programmes are tracking the links between personal wellbeing and social, environmental and economic conditions.

8 DIMENSIONS OF WELLNESS

EMOTIONAL
Coping effectively with life and creating satisfying relationships

INTELLECTUAL
Using creative abilities, knowledge and skills

ENVIRONMENTAL
Occupying pleasant, stimulating environments that support wellbeing

PHYSICAL
Physical activity, healthy foods, and sleep

FINANCIAL
Satisfaction with current and future finances

SOCIAL
Connection, belonging, and a well-developed support system

SPIRITUAL
A sense of purpose and meaning in life

OCCUPATIONAL
Personal satisfaction and enrichment from one's work

What is the difference between health and wellbeing?

As health practitioners it is useful to distinguish between health and wellbeing, as well as to understand how the two are linked. In everyday language health is often used to describe the absence of disease,

3   Felce, D & Perry, J. Quality of life: its definition and measurement. *Research in Developmental Disabilities. (*1995); 16(1): 51-74.

4   Danna, K & Griffin, R. Health and well-being in the workplace: a review and synthesis of the literature. *Journal of Management.* (1999); 25(3): 357-384.

5   *Mental Health for All: A public health approach to mental health improvement.* Faculty of Public Health & Mental Health Foundation.

6   Ryff, CD & Keyes CLM. The Structure of Psychological Well-being Revisited. *Journal of Personality and Social Psychology* (1995) 69:719-727.

7   https://whatworkswellbeing.org/about/what-is-wellbeing/

8   Kahneman, D; Diener, E; Schwarz, N (eds) *Well-being: the foundations of hedonic psychology* (1999). New York: Russell Sage Foundation.

9   https://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/articles/measuresofnationalwellbeingdashboard/2018-09-26

10   http://www.oecd.org/statistics/measuring-well-being-and-progress.htm

whereas the World Health Organization defines health as *"a state of complete physical, mental and social wellbeing and not merely the absence of disease and infirmity"*. Good physical and mental health contribute significantly to personal wellbeing, and in turn wellbeing supports improved health outcomes[9,11,12]. Those who rate themselves with better wellbeing not only feel healthier and make better lifestyle choices[13], but also have a decreased risk of disease, illness and injury, with better immune functioning, speedier recovery from operations, illnesses and injuries as well as increased longevity[11]. Feeling happier and more contented reduces death rates by 20%[12], and the risk of reduced functioning through illness and illness behaviour[14]. However, wellbeing requires more than physical and mental health. It requires that the contexts in which we live and work offer security, connection and meaning.

Why does workplace wellbeing matter?

Work is the best form of welfare – growing evidence shows that good work is the most effective way to improve the wellbeing of individuals, families and communities[15]. Developing 'good work' is a key goal for preventing illness and improving wellbeing[16,17]. Being in work offers financial reward, social connections, satisfaction and a sense of meaning and purpose[18]. Conversely, unemployment negatively affects our health and wellbeing as well as mortality rates[15,19].

The modern labour market emphasises knowledge and service work, posing new challenges which include sedentary work, altered contracts, automation, digitisation, and an on-going need for learning. Improving the wellbeing of the working age population will be a key enabler in supporting adaptation and flourishing in the contemporary world of work.

Working adults spend a significant proportion of their waking hours at work, thus workplaces are a key influence on people's overall health and wellbeing. A global conversation about improving the wellbeing of the working population has developed amongst business leaders, policy-makers, academics and health practitioners.

The business case

1.4 million people in the UK suffer an illness they believe has been caused or made worse by their work, particularly stress, anxiety, depression and back pain[20]. Our 'always on' work culture promotes unhealthy behaviours such as 'presenteeism' and 'leaveism'[21]. Poor mental health alone has been estimated to cost employers up to £42 billion in lost productivity, with over half of this cost caused by presenteeism[22].

A Department of Work and Pensions survey showed that 88% of UK employers agreed that their

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11 Pressman, SD; Cohen, S. Does positive affect influence health? *Psychology Bull* (2005) 131: 925-971

12 Chida, Y & Steptoe, A. Positive psychological wellbeing and mortality: a quantitative review of prospective observational studies. *Psychosom Med.* (2008) 70(7): 741-56.

13 Chanfreau et al. Predicting Wellbeing, Nat Cen: www.natcen.ac.uk/ media/205352/predictors-of-wellbeing.pdf

14 Stewart-Brown, L & Layte, R. Emotional health problems are the most important cause of disability in adults of working age. *Journal of Epidemiology and Community Health.* (1998) 51: 672-5.

15 Waddell, G & Burton, K (2006) *Is work good for your health and wellbeing?* London:TSO.

16 *Good Work: A response to the Taylor Review of Modern Working Practices.* (2018) London: HM Government.

17 *Improving Lives: The future of work, health and disability.* (2017) Department for Work and Pensions & Department of Health.

18 Kahneman, D; Diener, E; Schwarz, N (eds.*) Wellbeing: The Foundations of Hedonic Psychology.* (1999) New York: Russell Sage Foundation.

19 CDC – NHANES (National Health and Nutrition Examination in US 1971-75) – employed women have higher sense of well-being.

20 Labour Force Survey 2017/18   http://www.hse.gov.uk/statistics/lfs/index.htm

21 Working during allocated time off.

22 *Mental health and employers: The case for investment.* (2017) London: Monitor Deloitte.

corporate social responsibility includes encouraging employees to be physically and mentally healthy[23]. Whilst wellbeing is more holistic and aspirational than simply the absence of disease, by addressing wellbeing at work, employers help to prevent ill-health.

The global business community has recognised their interest in ensuring that health and wellbeing of the working age population is improved[24]. In the face of an ageing workforce, shifting the health and wellbeing of the working population in a positive direction – by creating contexts that support wellbeing – will become an increasingly important way of retaining knowledgeable, skilled workers. Although there is data to suggest a reasonable ROI on wellbeing initiatives can be made, the data is variable and can be hard to apply in specific contexts. An alternative case can be built by taking a 'value of investment' approach, highlighting the indirect benefits that will accrue to the organisation. Wellbeing of staff is a core enabler of organisational aspirations, and FTSE 100 companies that demonstrate best practice in employee health and wellbeing show a higher than average shareholder return[25]. Increasing wellbeing has been shown to improve productivity[26,27] and multiple measures of organisational performance, in particular customer satisfaction and staff turnover[25]. With organisations competing for highly skilled employees, demonstrating a commitment to staff wellbeing is increasingly important in attracting and retaining talented workers.

Employers have a duty of care to take all reasonable steps to protect the health, safety and welfare of their employees under the Health and Safety at Work Act, as well as through employment and civil law[28]. This includes minimising the risk of stress-related illness. The requirements under an employer's duty of care that are relevant to workplace wellbeing are wide-ranging and include:

- Undertaking risk assessments
- Ensuring a safe working environment
- Ensuring staff do not work excessive hours
- Providing areas for rest and relaxation
- Protecting staff from discrimination, bullying or harassment
- Consulting employees on issues which concern them

The social/public health case

Influences at work can have a profound impact on individuals, with a positive ripple effect on their communities. Therefore workplace health and wellbeing has gained prominence on the policy agenda[29,30], with growing interest in partnerships between government, healthcare and industry[31].

Roughly one third of UK employees have a long-term health condition; one quarter of employees report

23 Young, V & Bhaumik, C. *Health and well-being at work: a survey of employees.* (2011) London: Department for Work and Pensions.

24 *Global Risks 2010: A Global Risk Network Report.* Geneva: World Economic Forum.

25 *Why Invest in Employee Wellbeing? Factsheet* (2017) What Works Centre for Wellbeing. https://whatworkswellbeing.org/product/why-invest-in-employee-wellbeing/

26 *Job Quality and Wellbeing briefing* (2017) London: What Works Centre for Wellbeing https://whatworkswellbeing.org/product/job-quality-and-wellbeing/

27 Krekel, C et al. (2019) Employee well-being, productivity, and firm performance: evidence and case studies. In: *Global Happiness and well-being policy report.*

28 http://www.acas.org.uk/index.aspx?articleid=3751

29 *Improving Lives: The future of work, health and disability.* (2017) Department for Work and Pensions & Department of Health.

30 A UK region explores employer incentives on wellbeing. *The Financial Times* (September 2017)

31 Knowsley Chamber of Industry and Commerce in collaboration with Knowsley Public Health, https://www.knowsleychamber.org.uk/working-well/

having a physical health condition[32], and surveys suggest a 15% prevalence of diagnosable psychiatric disorder[33, 34]. Using the workplace to promote and facilitate healthy living may prevent the development of risk factors such as obesity, and delay the onset or progression of disease[35]. As described earlier, improving people's wellbeing can improve their health as well as their health behaviours. And health itself – especially mental health – is a crucial aspect of overall wellbeing, so workplaces that protect the mental health of their staff make a significant contribution to wellbeing.

In the face of an ageing workforce, shifting the health and wellbeing of the working population in a positive direction – by creating contexts that support wellbeing – will become an increasingly important way of retaining knowledgeable, skilled workers.

What supports workplace wellbeing?

There are calls on the government to count not only quantity of employment in the Labour Force Survey, but also its quality – including health, safety and psychosocial wellbeing, job design, social support and cohesion, voice and representation, and work-life balance[36,37]. The Carnegie UK Trust expert working group identified a set of metrics to assess work quality[37], underscoring the need to take a whole organisation approach[38].

1. Terms of employment – job security, minimum guaranteed hours, underemployment

2. Pay and benefits – pay and satisfaction with pay

3. Health, safety and psychosocial wellbeing – physical injury, mental health

4. Job design and nature of work – use of skills, control, opportunities for progression, sense of purpose

5. Social support and cohesion – peer support, line manager relationship

6. Voice and representation – trade union membership, employee information, employee involvement

7. Work-life balance – over-employment, overtime

The domains of the Health and Safety Executive Management Standards map closely onto these quality metrics, and include the additional aspect of organisational change[39]. Both physical and mental health have been shown to be related to the balance between the demands made on employees and the amount of control they have, as well as the degree of support they have from managers and colleagues[44,45].

Those who are satisfied with their work have a 7% lower rate of absenteeism and presenteeism compared with those who are unhappy with their job[40]. The psychosocial work environment has a crucial influence

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32   Workplace health: applying All Our Health: Evidence and guidance to help healthcare professionals encourage people to live healthy lifestyles at work. (2015) London: Public Health England.

33   *Health Survey for England* (2016) NHS Digital.

34   *Adult Psychiatric Morbidity Survey, 2014* (2016) NHS Digital.

35   *The Case for Investing in Public Health*. (2014) Geneva: World Health Organisation.

36   Taylor, M (2017) Good Work: The Taylor Review of Modern Working Practices.

37   *Measuring Good Work: The final report of the Measuring Job Quality Working Group*. (2018) https://www.carnegieuktrust.org.uk/publications/measuring-job-work-executive-summary/

38   *Health and well-being at work* (2018) London: CIPD.

39   What are the Management Standards? Health and Safety Executive. http://www.hse.gov.uk/stress/standards/index.htm

40   Hafner, M; van Stolk, C et al. *Health, wellbeing and productivity in the workplace: A Britain's Healthiest Company summary report*. (2015). Santa Monica & Cambridge: RAND Corporation.

on sickness absence[41], with lower rates of absence in smaller work units, in roles with adequate control, good supervisor and social support, and where the work is inherently meaningful[42,43,44].

An integrated 'whole organisation' response is important in establishing a healthy culture, rather than offering piecemeal wellbeing initiatives. Such an approach is supported by a strong and visible commitment from senior leaders and line managers, and through alignment with organisational values, policies and practices that are 'wellbeing friendly'. Mental health needs to be comprehensively addressed in a workplace wellbeing programme – raising awareness, creating safe, fair work conditions and routinely monitoring mental wellbeing[45]. The features of an organisational culture that supports wellbeing include:

- Leaders who help staff see how their role fits into the bigger organisational picture
  - > Defining organisational purpose and values in a meaningful way that engages staff
  - > Ensuring staff feel valued
  - > Ensuring good connections between teams and the wider organisation

- Line managers who respect and develop their staff
  - > Gallup research has shown that 70% of an employee's motivation is influenced by the line manager[46]
  - > Line managers have a crucial influence on the health and wellbeing of their teams, setting the team psychosocial climate as they respond to their staff on a day-to-day basis, as well as in how they apply company policies and practices
  - > Line managers can support wellbeing by enabling staff development through constructive feedback and opportunities to use and develop skills

- Consultation that listens to the views and concerns of employees
  - > Developing an open style of communication that helps staff understand what is happening and why, forms the fabric of a healthy work culture[47]
  - > Ensuring that employees have effective channels for influencing the organisation

- Relationships based on trust and shared values[48]
  - > Good workplace relationships are fundamental to healthy, productive workplaces. Such relations are built upon effective policies for managing people to create a safe, fair environment. Equality, diversity and inclusion initiatives enable people with different capacities and backgrounds to participate in work

41   North, F; Syme, L et al. Psychosocial Work Environment and Sickness Absence among British Civil Servants: the Whitehall II Study. *American Journal of Public Health*. (1996) 86(3):332-340.

42   Marmot M, et al. Contribution of job control and other risk factors to social variations in coronary heart disease incidence. *Lancet*. (1997);350(9073): 235-9.

43   Schaufeli W & Taris T. A critical review of the Job Demands-Resources Model: implications for improving work and health. In: Bauer GF, Hämmig O (eds.) *Bridging Organizational and Public Health: A Transdisciplinary Approach* (2014). New York: Springer Science and Business Media.

44   Stansfeld S, Candy B. Psychosocial work environment and mental health—a meta-analytic review. *Scandinavian Journal of Work Environment & Health* (2006) 32(6): 443-462.

45   Farmer, P & Stevenson, D. (2017) *Thriving at work: The Stevenson / Farmer review of mental health and employers.*

46   *Why Invest in Employee Wellbeing? Factsheet* (2017) What Works Centre for Wellbeing.

47   *Health, work and wellbeing.* (2012) London: ACAS.

48   Macleod, D & Clarke, N. *Engaging for success: enhancing performance through employee engagement.* (2009) London: Department for Business, Innovation and Skills.

Whilst there is emerging evidence around how to improve wellbeing at work, important questions remain to be answered – how and why interventions work, for whom and under what circumstances[49]. The evidence so far suggests that organisations that view wellbeing as a measure of success have improved productivity due to lower absenteeism and presenteeism.

The role of occupational health in improving wellbeing

Too many managers and employees are unclear about what is on offer via occupational health[50]. To ensure that occupational health offers an approach that is relevant to twenty-first century organisations, we need to broaden our conversations beyond the disease model, flagging up opportunities to promote health and holistic wellbeing.

Occupational health has a privileged understanding of organisational life through interactions in the consulting room and workplace assessments, including health risk management. We are thus well-placed to communicate the importance of a 'whole organisation' approach to wellbeing, and to influence policy and culture to embed staff health and wellbeing. Our expertise involves synthesising workplace and clinical perspectives.

- A workplace approach offers different levels of input, and can be used for wellbeing interventions:

  > Some of the greatest health advances result from addressing the causes of diseases rather than just treating the consequences[51]

  > Upstream interventions aim to promote healthy physical behaviours, e.g. enabling access to exercise, healthy food, good work-life balance and rest

  > Addressing the environmental determinants of health, for example promoting access to green spaces and a pleasant, well-designed physical environment

  > Support for all – disseminating information and resources[52], or offering events linked to national health and wellbeing campaigns[53]

- Clinical lens – supporting individual wellbeing

  > Offering targeted support for those who are struggling - training people to develop personal resources, skills or problem-solving has been shown to have a positive effect on wellbeing[54]

  > Making every contact count means that consultations are an opportunity to help individuals improve their health and wellbeing[55]

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49   Whitmore, M; Stewart, K et al. (2018) *Promising practices for health and wellbeing at work: A review of the evidence landscape.* Santa Monica & Cambridge: RAND Corporation.

50   Farmer, P & Stevenson, D. (2017) *Thriving at work: The Stevenson / Farmer review of mental health and employers.*

51   *The Case for Investing in Public Health.* (2014) Geneva: World Health Organisation.

52   *Better Mental Health for All: a public health approach to mental health improvement.* (2016) London: Faculty of Public Health and Mental Health Foundation.

53   Wellbeing calendar, can be accessed at: https://www.nhsemployers.org

54   *Job Quality and Wellbeing briefing* (2017) London: What Works Centre for Wellbeing

https://whatworkswellbeing.org/product/learning-at-work/

55   http://makingeverycontactcount.co.uk/

> The biopsychosocial approach – assessing how attitudes, behaviours and social context shape an individual's recovery and health – forms a strong foundation from which to signpost to appropriate wellbeing resources[56].

Gain leadership buy-in and build strong partnerships

Wellbeing is an end in itself, but also a means to an end. By aligning with the values, purpose and strategic priorities of the organisation, we can design and implement a programme that is tailored to that setting. Is the challenge addressing sickness absence, raising productivity or morale, and what drivers of wellbeing are likely to be most relevant[57]?

At times, however, taking a lead on wellbeing might involve challenging the values and culture of an organisation and pointing out where practices are likely to be eroding wellbeing. Furthermore wellbeing initiatives may themselves be an opportunity to redefine the type of organisation people want to be working for.

Occupational health practitioners can raise awareness of how wellbeing is linked to multiple aspects of organisational life. Working in partnership with stakeholders in the broader organisation[58] we can:

> Ensure organisational policies have human wellbeing at their heart

> Develop physical workplaces that are optimised beyond basic legal requirements to promote wellbeing

> Work with line managers to create high quality training and resources to sustain the wellbeing agenda

> Involve staff in the design and roll-out of wellbeing initiatives

> Work closely with communications to keep staff aware of the wellbeing initiatives, with appropriately tailored messages

56 e.g. 5 ways to wellbeing https://issuu.com/neweconomicsfoundation/docs/five_ways_to_well-being?viewMode=presentation

57 *Workplace wellbeing questionnaire: methodology.* (2018) What Works Centre for Wellbeing.

https://whatworkswellbeing.org/product/workplace-wellbeing-questionnaire-methodology/

58 *Job Quality and Wellbeing briefing* (2017) London: What Works Centre for Wellbeing

https://whatworkswellbeing.org/product/job-quality-and-wellbeing/
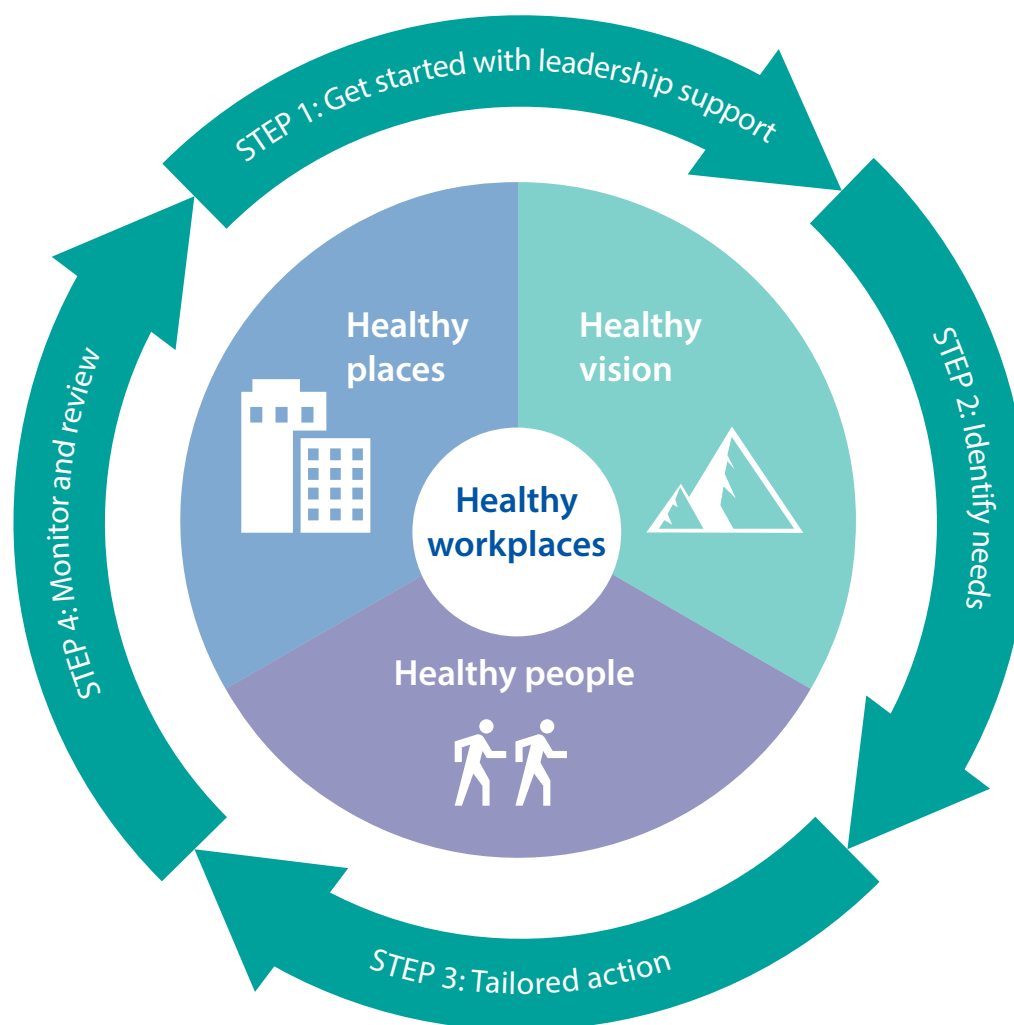
Identify needs, and draw on evidence and best practice

Conducting a health needs assessment[59] forms a baseline against which to monitor progress, identifying issues that need addressing, and early wins that could help build momentum. It may include a staff survey[60], supplemented by other data (sickness absence, use of EAP and OH), or focus group and staff discussions. In some cases, using an external body to conduct a survey can be useful for benchmarking your organisation, and can be motivating to staff[61].

As the evidence base on the determinants of wellbeing at work develops, occupational health practitioners can help translate the implications of the evidence for their particular organisations[62,63], ensuring that resources are invested well, with clear benefits. See Appendix C for resources that can be used to support workplace wellbeing.

59   *Workplace health needs assessment: How to use the assessment and HNA questions.* (2017) London: Public Health England & Healthy Working Futures.

60   *Workplace wellbeing questionnaire: methodology.* (2018) What Works Centre for Wellbeing.

61   E.g. Britain's Healthiest Workplace. https://www.vitality.co.uk/business/healthiest-workplace/

62   www.whatworkswellbeing.org

63   https://worklifeapp.whatworkswellbeing.org/

Tailored action

The information gathered through the health needs assessment can be fed into a health and wellbeing maturity matrix. See Appendix A for an example maturity matrix which offers an overview of how wellbeing can be embedded and integrated throughout an organisation. A mapping exercise can be used to inform a wellbeing strategy. Such a strategy requires a long-term approach, with interventions aimed at both individual and organisational levels, as well as both physical and mental health. Having clear lines of accountability and reporting to senior management and board is crucial in securing long-term organisational commitment. See Appendix B for a range of policies to consider reviewing to ensure wellbeing is at the core of the organisational life. When reviewing policies, consider how integrated the policy is with other organisational systems, as well as how robust the accountability procedures are.

Monitor and review

Having a wellbeing programme and strategy that is responsive to feedback and that keeps up with organisational change is important, so that the programme remains relevant and fresh. Building in on-going monitoring from the outset offers information to those using the services, and those committing resources to the programme. This requires clear thinking about which wellbeing outcomes matter most, as well as how to ensure that the wellbeing programme is fully integrated within the wider organisation[64].

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64   *Healthy workplaces: a model for action.* (2010) Geneva: World Health Organization.

Conclusion

This is a time in which society needs to build evidence and practices that encourage sustainable and evolutionary employment practices. Taking a 'whole system' partnership approach, occupational health practitioners can be at the centre of supporting a healthier, happier working environment and working age population.

Occupational health – with its expertise in the influence of work on health, and of health on work – can play this key role by taking every opportunity to build collaboration and influence in the wider organisation.

We can enjoy helping create health where people work, and living up to the ideals set out by the WHO and ILO, of **promoting** and **maintaining** the highest degree of **physical, mental and social wellbeing** of workers in all occupations.

Dr Jenny Napier
Occupational Physician
RPS Group

Alongside her enthusiasm for occupational medicine, Jenny has a special interest in wellbeing at work. She has been involved in developing and implementing wellbeing strategies and programmes with a range of organisations in healthcare, finance, motorsports and the charitable sector. Jenny moved into Occupational Medicine from General Practice and GP appraising, during which time she conducted academic research exploring the wellbeing of senior GPs. She has postgraduate qualifications in consulting and leading in organisations, and is a certified coach. Jenny enjoys looking after her own wellbeing through yoga and singing in a choir.

Appendix A: Occupational health and wellbeing maturity matrix, adapted from 'Be healthy, be safe, be well framework' – Queensland public sector

Criterion	1. Limited Limited appreciation of the benefits of proactive and integrated approaches to health and well-being (H&W)	2. Reactive H&W approach is ad-hoc	4. Pro-active Appreciation of the benefits of a proactive approach, with some integrated H&W	5. Leading Wholly integrated H&W approach embedded in all levels of business as usual
Leadership commitment and engagement	No visible leadership commitment 'Officers' lack full awareness of their H&W legal obligations Communication on H&W is limited H&W outcomes are not identified as an important measure of business success Investment in H&W not seen as a business imperative	Leadership commitment is only visible in response to sickness absence, injuries Some 'officers' have a working knowledge of H&W risks Communication to all staff occurs after a H&W issue H&W outcomes are not identified in executive performance agreements Benefits of investing in proactive H&W approaches is not valued	Leadership visible in pockets of the organisation 'Officers' have good working knowledge of H&W risks H&W commitments are communicated to staff regularly Executives have H&W outcomes identified in their performance agreements Benefits of proactively investing in H&W are valued and sometimes realised	Executive leadership commitment to H&W is visible across the organisation 'Officers' have solid knowledge of organisational H&W risks Executive members are key champions for H&W and communicate to all staff on a regular basis Senior management have H&W outcomes integrated into their performance agreements Benefits of investing in proactive approaches to H&W are fully realised
Best practice systems and review	H&W strategies, action plans and initiatives don't exist Programmes for H&W are sporadic and isolated Governance systems are weak There are no incentives and recognition for good H&W performance	Policies and plans address minimal obligations Reactive H&W programmes are developed after injuries or illnesses Governance systems do not link to H&W Incentives and recognition for good H&W are ad hoc	Clear vision and strategies for H&W exist beyond minimal obligations Programmes link to overall H&W plan and evidence from research, audits or evaluations Governance systems are embedded Recognitions for good H&W performance exists, but not linked to performance measures	H&W is linked to organisational vision and values, processes fully mapped H&W strategies, action plans and initiatives result from strong evidence, audits and evaluations Governance systems are embedded in the way work is done, clear accountability Incentives and recognition for good H&W performance exists and are built into performance measures

Worker engagement and participation	Everyone sees H&W as someone else's responsibility	Committees, champions and corporate teams drive the H&W focus	Leaders collaborate with the workforce to drive the H&W focus, and encourage individual responsibility for H&W	Everyone is aware of and shares responsibility for their own H&W as well as workplace outcomes
	There is no recognition that H&W and positive workplace culture are linked	There is some recognition that positive workplace culture supports H&W	Link between H&W and workplace culture is recognised	Workers are proactively engaged in needs assessment and planning
	Workers don't participate in H&W needs assessment or planning	Workers are passively engaged in H&W needs assessment and planning	Workers engaged and participate in H&W needs assessment and planning	Workers at all levels participate actively in H&W programmes
	Workers are not participating in H&W programmes	Workers participate in mandatory H&W programmes	Some workers participate in H&W programmes	
Measurement and account-ability	No H&W performance targets	H&W performance data collected, but no targets or reporting	H&W are reported to senior executive team and in annual report	Meaningful H&W targets reported, and performance linked to senior executive contracts
	H&W performance measures are not captured	H&W performance measures are lag indicators	H&W performance measures mix lead and lag indicators	H&W performance measures balance lead and lag indicators and influence proactive risk management
	Some H&W outcomes are measured only when imposed by external body	H&W performance is reviewed, audited and evaluated	H&W performance is reviewed, and audited with focus on improvement	H&W outcomes measured, reviewed and evaluated to achieve benchmark
	H&W audits are not conducted	H&W audits are conducted after incidents	Regular H&W audits conducted	H&W audits conducted and drive continuous improvements

Appendix B: Domains of occupational health influence on wellbeing

Domain	Examples
Fitness for work	*Role and health risk assessment*
Health surveillance	*As appropriate*
Pre-placement – new starters & role change	*Induction* *H&W training and introduction to resources and culture*
Management and self referrals	*Monitoring of volume/reasons – proactive response*
Sickness absence management	*Data quality – patterns proactively responded to*
First aid	*Standards identified, monitoring*
Resilience & psychosocial wellbeing	*Mental wellbeing training, resources, awareness* *Social work environment* *Team cohesion fostered*
Physical health & wellbeing	*Physical work environment – light, temperature, noise* *Promoting physical activity and healthy eating options* *DSE* *Physiotherapy* *Alcohol, smoking resources and interventions* Sleep
Management systems/governance/people	*Use of OH information/Reporting* *Health promotion opportunities embedded* *Organisational design* *Job design* *Change programmes* *Project management* *Enabling staff control* *Feedback and appraisals* *Staff communication* *Staff participation and voice* *Staff social opportunities* *Work/home balance* *Presenteeism/leaveism* *Managers adequately trained and resourced* *Ownership and accountability clear* *Management information and reporting* *Processes mapped* *Training and support systems in place*

Organisational policies	General health and wellbeing
	Health and Safety
	First aid
	Induction, appraisals and training
	Manual handling
	Display screen equipment
	Driving for work
	Smoke-free workplace
	Alcohol and substance misuse
	Physical activity
	Healthy eating
	Mental health
	Absence management
	Bullying and harassment
	Equal opportunities and diversity
	Working hours policy
	Flexible working policy
	Maternity & paternity, care of dependents
	Breastfeeding
	Bereavement

Appendix C: Wellbeing at work resources

Smoking	**NICE** (2007). Workplace health promotion: how to help employees stop smoking https://www.nice.org.uk/ **Public Health England** resources https://campaignresources.phe.gov.uk/ **Smokefree England:** guidance and resources for smoke-free workplaces http://www.smokefreeengland.co.uk/what-do-i-do/business/
Healthy eating	Healthy eating advice is included amongst other health and wellbeing advice in **Public Health England's** 'One You' campaign www.nhs.uk/oneyou **Eatwell Guide** https://www.gov.uk/government/publications/the-eatwell-guide The **British Heart Foundation** offers resources to encourage healthy eating at work www.bhf.org.uk/health-at-work/inspire-workplace-health/eating-well/what-works-well

Physical activity	**NHS Livewell** tips on exercise and other health advice
	https://www.nhs.uk/live-well/
	
	Business in the Community & Public Health England
	  • *Physical Activity, Healthy Eating and Healthier Weight: a toolkit for employers*
	  • *Musculoskeletal health in the workplace: a toolkit for employers*
	https://wellbeing.bitc.org.uk
	
	NICE Physical activity in the workplace (Public Health Guideline 13)
	https://www.nice.org.uk/guidance/ph13
	
	HSE Display screen equipment (DSE) workstation checklist
	http://www.hse.gov.uk/msd/dse/assessment.htm
	
	Sustrans: resources to get people cycling and walking more
	https://www.sustrans.org.uk/
	
	Step Count Challenge: teams set joint walking targets
	https://stepcount.org.uk/

Alcohol	**British Heart Foundation** offers an example of an alcohol policy https://www.bhf.org.uk/informationsupport/publications/health-at-work/health-at-work-guide-to-alcohol Drinkaware shares information on safe drinking https://www.drinkaware.co.uk/
Sleep	**Business in the Community & Public Health England** *Sleep and recovery: A toolkit for Employers* https://wellbeing.bitc.org.uk/all-resources/toolkits/sleep-and-recovery-toolkit **The Sleep Council** shares healthy sleep tips and resources https://sleepcouncil.org.uk/
Social wellbeing	**Relate** offers guidance to those with relationship difficulties https://www.relate.org.uk/ **Carers UK** supports those who care for dependents https://www.carersuk.org/home

Mental wellbeing	**HSE** outlines management approaches for reducing stress http://www.hse.gov.uk/stress/standards/ **Business in the Community** *The mental health toolkit for employers* https://wellbeing.bitc.org.uk/all-resources/toolkits/mental-health-employers-toolkit **NICE** Promoting mental wellbeing at work (Public Health guideline 22) https://www.nice.org.uk/guidance/ph22 Advice for small and medium sized businesses https://www.nice.org.uk/guidance/ph22/resources/advice-for-small-and-mediumsized-businesses-pdf-67277917 **Department of Health**, *Advice for employers on workplace adjustments for mental health conditions* https://www.nhshealthatwork.co.uk/images/library/files/Government%20policy/Mental_Health_Adjustments_Guidance_May_2012.pdf **Time to Change** campaigns to raise mental health awareness https://www.time-to-change.org.uk/ **Mind**: guidance for staff and managers, including wellness action plans https://www.mind.org.uk/ **New Economics Foundation**: Five ways to personal wellbeing https://neweconomics.org/2008/10/five-ways-to-wellbeing-the-evidence
Financial	**Citizens Advice Bureau** offers advice on managing finances and debt https://www.citizensadvice.org.uk/ **National Debtline** https://www.nationaldebtline.org/
Management	**NICE** *Workplace health: policy and management practices (NG13)* *Managing long-term sickness and incapacity for work (PH19)* https://www.nice.org.uk/ **ACAS**, practical guidance on management, including Health, work and wellbeing http://www.acas.org.uk/

General resources	**Workplace Wellbeing Charter**
	https://www.wellbeingcharter.org.uk/
	
	Example of a health calendar:
	https://safety.networkrail.co.uk/healthandwellbeing/health-awareness-calendar/
	
	HSE offers advice on employer's responsibilities
	http://www.hse.gov.uk/workers/employers.htm
	And risk assessment http://www.hse.gov.uk/risk/
	
	The government outlines guidance on
	  • The Equality Act (2010) https://www.gov.uk/guidance/equality-act-2010-guidance
	  • Reasonable adjustments https://www.gov.uk/reasonable-adjustments-for-disabled-workers
	  • Access to work https://www.gov.uk/access-to-work