

## Rolling out wellbeing conversations across the NHS – case studies

### Staffordshire and Stoke on Trent CCGs

#### What was the aim?

In order to support the health and wellbeing of their NHS people, and in-line with the intentions outlined in the NHS People Plan and People Promise, Staffordshire and Stoke - On-Trent CCGs explored how to use wellbeing conversations to support colleagues to work from home in a safe and ergonomically suitable environment, where necessary reasonable adjustments had been made.

#### What was the solution?

At the start of the pandemic and when staff were being encouraged to work from home where possible, Staffordshire and Stoke -On-Trent CCGs encouraged all line managers to have wellbeing conversations with their staff, to explore what new approaches would need to be considered to support staff to be well when working from home.

Using wellbeing conversations to explore how the organisation can support staff to be well at work encouraged solutions to come from within the organisation and encouraged a people centric approach, where line managers had a greater understanding of the needs of their colleagues. In turn this created a shift in the organisational culture, in which staff health and wellbeing was considered a priority.

#### What were the results?

Staff wellbeing conversations were also implemented in team meetings, and colleagues were encouraged, where comfortable, to raise concerns or issues. Colleagues felt that this approach would enable them to informally resolve issues in a collaborative manner, rather than needing to formally report concerns.

Additional weekly interventions were developed, including a wellbeing Wednesday communications and monthly virtual development days. Staff engagement and wellbeing conversation check in questions were devised to share with managers to support them having conversations with colleagues, and several videos on the new ways of working were produced by staff, including videos on topics such as how to look after your health and wellbeing, flexible working and the role of wellbeing guardian.

All this ongoing work to support the health and wellbeing of staff has led to a new level of openness and inclusive working across the CCGs, and whilst it cannot be directly attributed to the change in culture, it has been noted that sickness absence and leaver rates have reduced since the launch of this support.

	March	April	May	June	July
<b>Sickness Absence Rate</b>	3.20%	1.77%	1.02%	0.27%	0.18%
<b>Calendar Days Lost to Sickness</b>	265	133	101	38	24

	March	April	May	June	July
<b>Leavers in Month (FTE)</b>	4.93	3.00	4.89	1.00	1.00
<b>Turnover Rate</b>	1.97%	1.22%	1.99%	0.40%	0.40%

	March	April	May	June	July
<b>% Days Lost attributable to Long-Term Episode</b>	62.26%	69.92%	68.32%	78.95%	12.50%

## What are the next steps?

All CCGs have agreed that these new ways of working will continue to be rolled out through ongoing wellbeing conversations, where line managers explore the needs of their staff going forward. A consultation to change the language around “office based working” in contracts to “home based working” has taken place and an agreement has been reached so that working from home will now be the norm for the majority of staff.

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