

# Wellbeing @ Work

## Workplace Health Needs Assessment Report

Loughborough University - Nov / Dec 2019



**LEICESTER-SHIRE  
& RUTLAND SPORT**  
PHYSICAL ACTIVITY & WELLBEING



Loughborough  
University

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# Workplace Health Needs Assessment Report

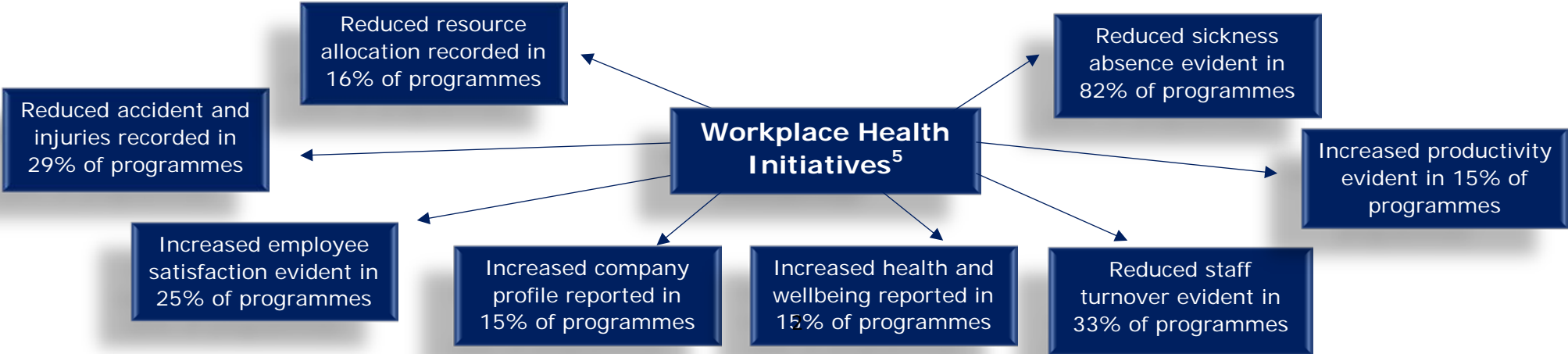
## The Case for Action

UK businesses are currently facing losses of 6.9 days sick leave, per employee, per year costing the UK economy over £29bn (1). Across Leicestershire, Leicester and Rutland, organisations are experiencing peaks of up to 14 days per employee, over double the national average!

Back in 2011, the government set up a review of the sickness absence system to help reduce the 140 million days lost to sickness absence each year and how it could be changed to help people stay in work, reduce costs and contribute to economic growth (2). Average absence has increased most in the public sector, where it is now 50% higher than in the private sector. The level of absence across the UK also tends to be higher in larger organisations, regardless of sector, and on average manual workers have 1.5 more days absence per year than non-manual workers (3).

Indirect and direct costs can cause employers to spend the equivalent of approximately 9% of their annual costs on absence. The estimated cost remains considerably higher in the public than private sector (£789 compared to £400 per person, per day) (4). By tackling sickness absence, the employer can benefit from retaining human capital, reducing staff turnover costs, improved reputation and a more engaged and productive workforce.

There is compelling evidence that the introduction and development of workplace health initiatives can make a positive contribution economically through reduced recruitment costs, increased revenues and reduced healthcare costs amongst other factors. Typically, holistic wellbeing programmes can be expected to show a positive financial return over a two year period. Although an earlier pay back can be seen using more targeted interventions, it's vital that organisations are realistic about financial impact and should look at improvements in health, productivity and team morale in the interim.



## **Organisation: Loughborough University - November / December 2019**

This report compiles data which has been collected from employees at Loughborough University as part of their recent Workplace Health Needs Assessment during November / December 2019.

For each question within the needs assessment, a basic analysis has been carried out and, where possible, a comparison to national data has been given to help to identify areas of concern.

Where the sample size is big enough (>10 individuals), the key data has been explored further to identify any differences across demographic groups. Where necessary, demographic characteristics are grouped to increase the sample size. This is to ensure that individuals cannot be identified by their responses to certain questions. The graphs from this analysis can be found in the Appendix (results are only included if there are reasonable differences between demographic groups).

Also included in the Appendix are the headline results for each area of the University (Imago, Professional Services, and Academic Staff) to allow for further comparisons between employee groups.

For each area of health and wellbeing, appropriate recommendations have been provided based upon the results given to support the development of future health strategies/action plans. These include both actions that your organisation can implement but importantly signposting to local organisations specialising in each area who can provide more targeted advice/interventions.

**Survey Response Rate: 787 (approx. 24% based upon estimation of 3,300 total employees).**

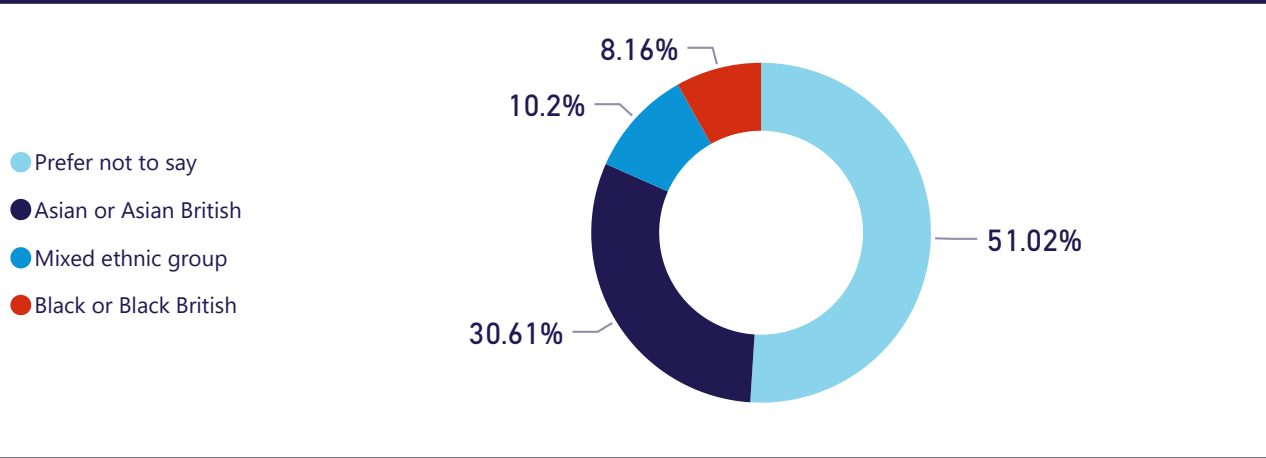
Please note that results are self-reported and may not be 100% accurate.

*Source: Public Health England & Healthy Working Futures (2017) 'Workplace Health Needs Assessment'*

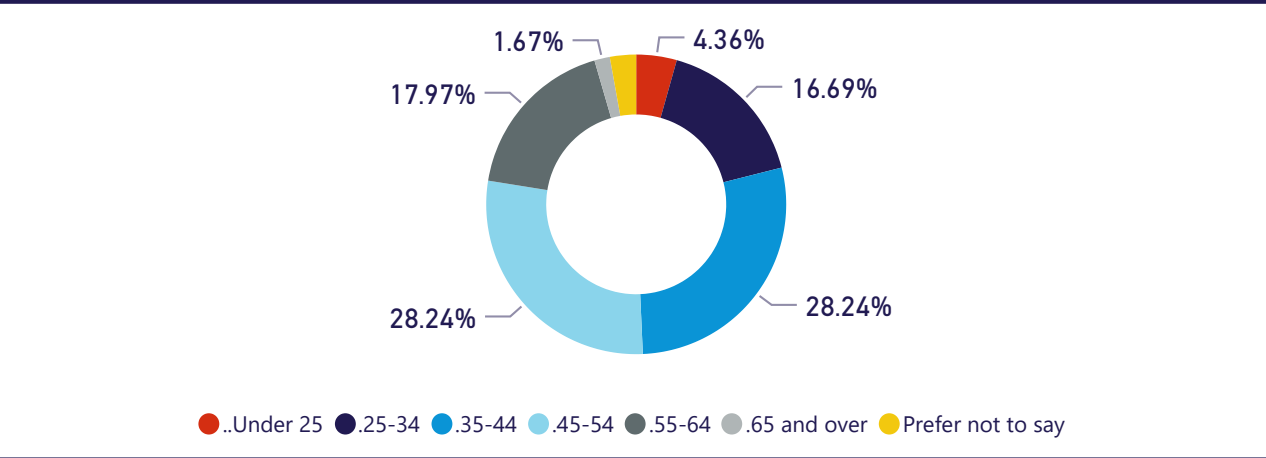
# Respondent Demographics

In this section we look at the breakdown of respondents by demographic characteristics (gender, age, ethnicity, disability, and area of work):

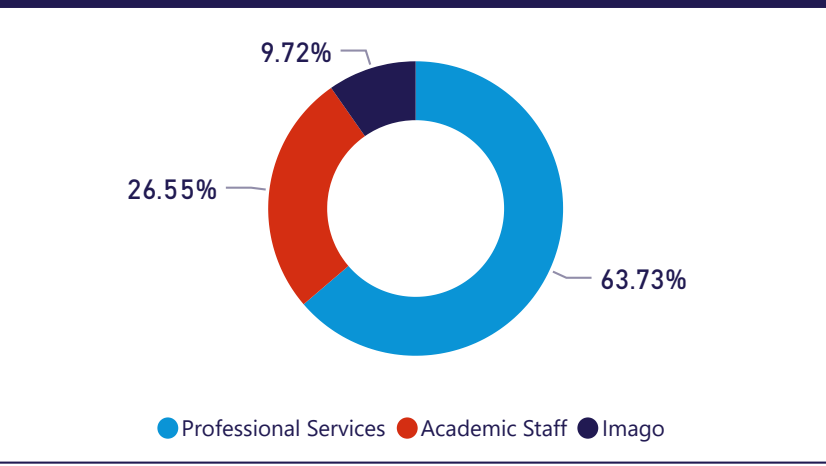
## Ethnicity



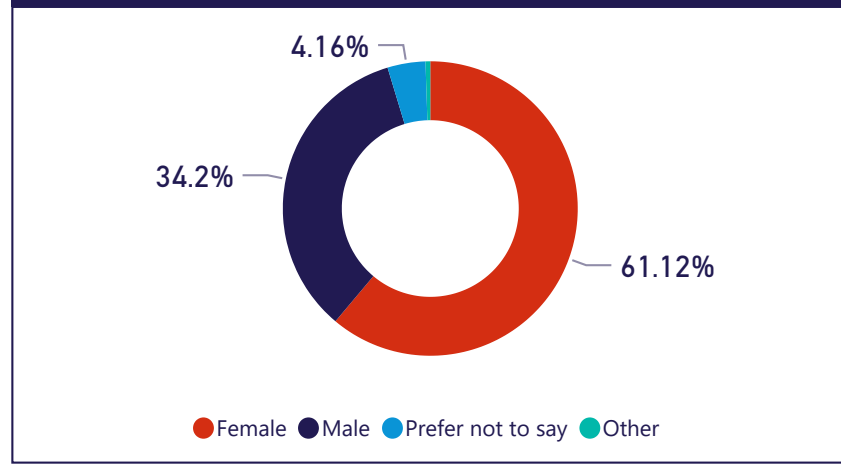
## Age



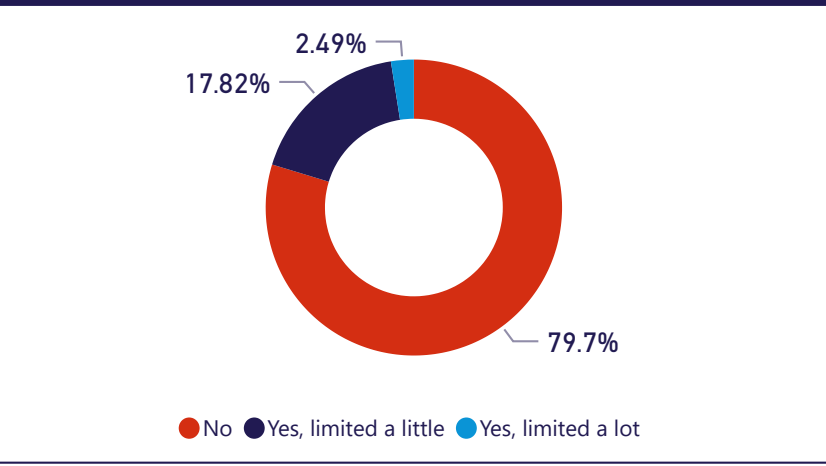
## Area of work



## Gender



## Disability



# General Health and Wellbeing



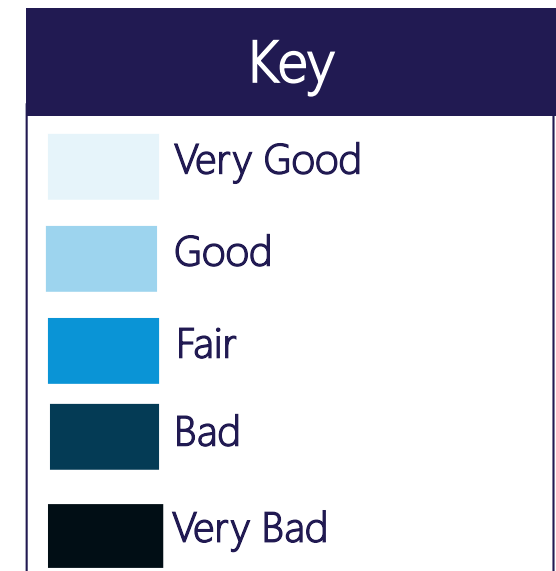
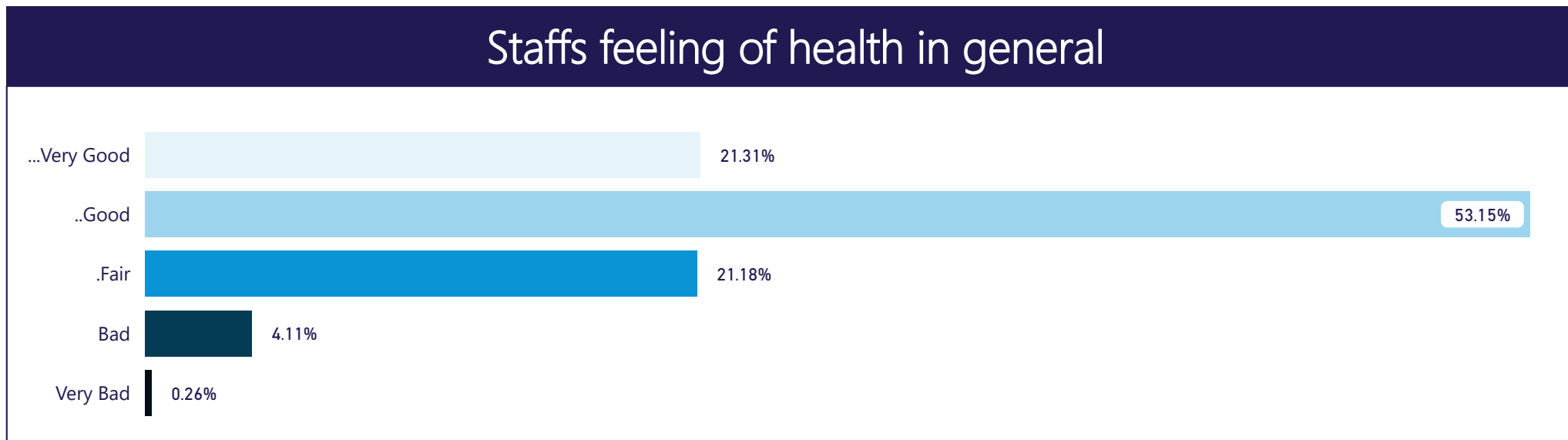
*This section aims to find out about the self-reported health and wellbeing of employees.*

Research suggests that people with higher levels of personal wellbeing make better lifestyle choices – they are more likely to eat healthier, be more physically active and less likely to smoke (6). People who are working tend to have a higher level of personal wellbeing, but can depend on factors such as job quality, security and the quality of relationships in the workplace. A working team with higher wellbeing are likely to be more productive.

The navy boxes throughout the document give national data (General Lifestyle Survey, 2011) on each area of health and wellbeing. For example, 34% of people surveyed nationally felt their health was 'very good'.



## Loughborough University Results



# General Health and Wellbeing

Let's see how this looks when we break general health and wellbeing down further:

National Average  
'Satisfaction with life  
in general'  
**78.5%**

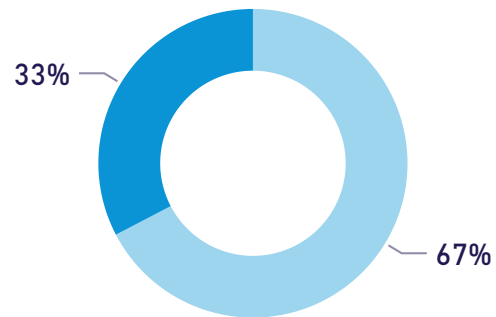
National Average  
'Feeling that life is  
worthwhile'  
**81.8%**

National Average  
'Happiness'  
**73.3%**

National Average  
'Anxiousness'  
**61.1%**

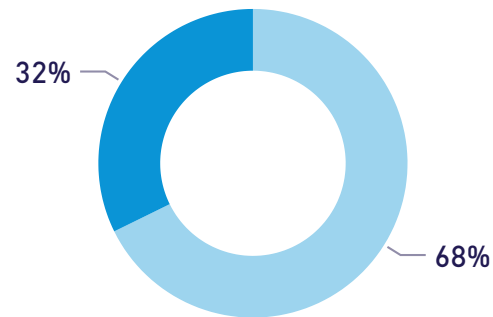
## Loughborough University Results

Satisfaction with life in general



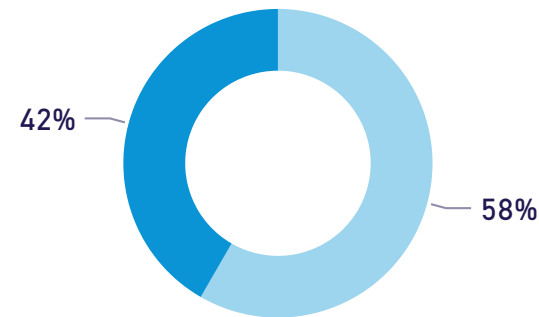
● More Satisfied ● Less satisfied

Feeling that life is worthwhile



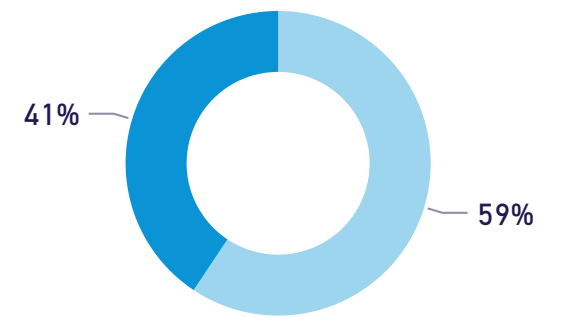
● More Worthwhile ● Less worthwhile

Happiness



● Happier ● Less happy

Anxiousness



● More anxious ● Less anxious

## How to compare your data to the national average?

These questions can be analysed by comparing your data in the charts to the national survey results given above. Satisfaction with life is achieved by rating it a 7,8,9 or 10, and this is the same for feeling that life is worthwhile, and happiness.

Anxiety percentage relates to the percentage of people that have answered a 3 or below.

## Recommendations to improve general health and wellbeing

- Develop a Mental Health at Work policy and ensure it includes stress, anxiety and depression as these are the three most common mental health conditions.
- Consider what different tools you could promote to employees to raise awareness of wellbeing. One example is the 5 ways to wellbeing tool (see below), which showcase 5 behaviours that have been shown to improve wellbeing. These include connect, be active, take notice, keep learning and give. More information can be found here: <https://www.gov.uk/government/publications/five-ways-to-mental-wellbeing>.
- Consider allowing some staff to attend a Mental Health First Aid course, provided by Mental Health First Aid England which teaches skills for providing first aid and support to people experiencing mental health issues. More information can be found here: <https://mhfaengland.org/>
- Participate in national promotional campaigns such as Mental Health Awareness week, World Health day, International Women's day and run a timetable of activities such as health walks, coffee mornings, and cake & colour sessions. This works well if linked to a charity element.
- Consider hosting discussions or focus groups with employees to get further information on what issues they face and the sort of support they would like. This could range from management training, workshops, mental health coping strategies or training for their line manager.
- If employees have shown lower than expected levels of wellbeing, then cross reference with later questions on workplace culture and line managers questions to explore any correlation with quality of the job or relationships at work.

### Contact Details for Local Services:

#### Let's Talk Wellbeing

Telephone: 0115 876 0157

Email: [letstalklcr@nottshc.nhs.uk](mailto:letstalklcr@nottshc.nhs.uk)

Website: <http://www.nottinghamshirehealthcare.nhs.uk/leicestershire-county-and-rutland-service->



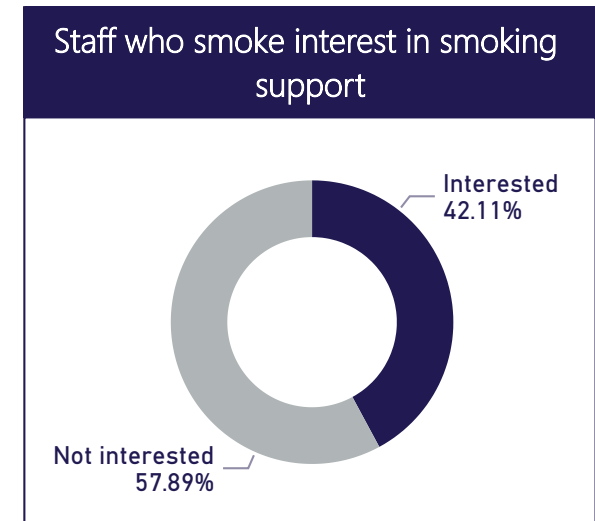
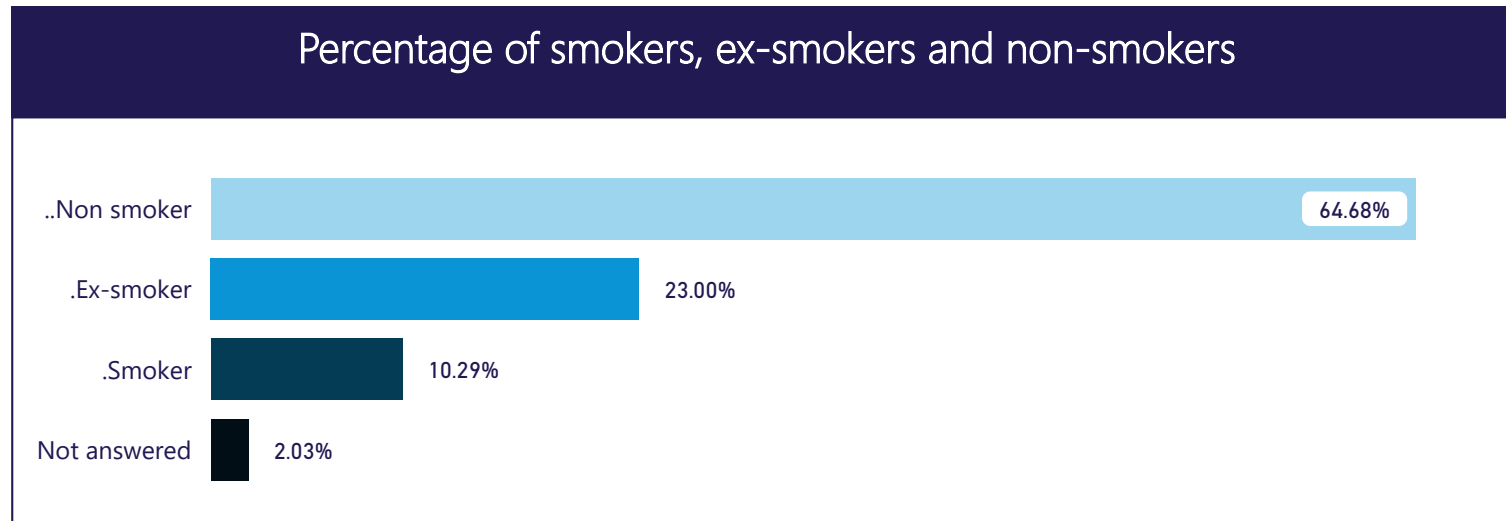
# Smoking

This section aims to find out how many employees smoke and what support they feel would help them quit.

Smoking is the leading cause of premature death and preventable illness in England. Studies suggest that smokers take 0.7 -2.7 more days off sick per year than non smokers (7). Across the UK economy smoking related sick leave represents a cost to businesses of £288 million per year. Employers who provide smoking cessation support could benefit from reduced sickness absence, increased productivity and contribute to promoting healthier lifestyles among their workforce (8). It has been found that when smoking cessation initiatives are offered in the workplace they are successful in reducing the number of employees who smoke (9). Not only does the financial impact of smoking affect business, it can also present a huge burden to the individual. On average, a smoker spends £3,600 on cigarettes each year which can add stress of lower disposable income and less funds for healthy eating and physical activities.

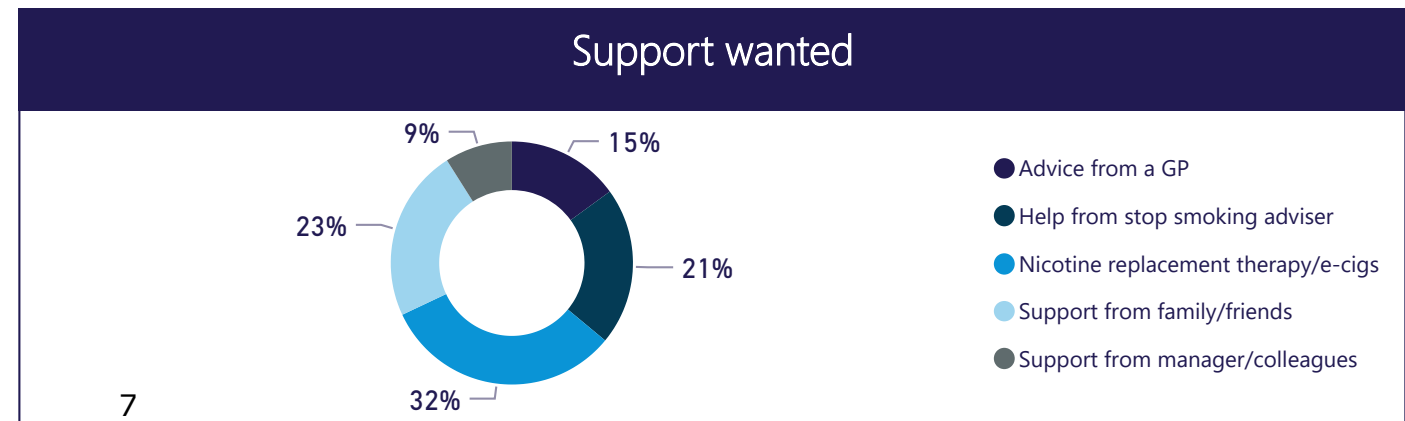
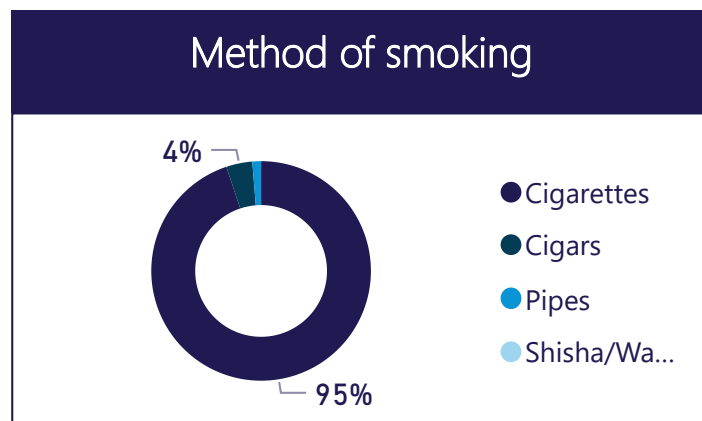
### Key

- Non smoker
- Ex-smoker
- Smoker
- Not answered



National Average Smokers  
**18%**

**81**  
Total number of smokers





## Recommendations to reduce smoking

- Incorporate a smoking cessation policy into an overall smoke-free workplace policy, adhering to smoke-free legislation. Ensure this also includes a position on e-cigarettes.
- Consider raising awareness about the benefits of stopping smoking through free employer resources from Public Health England. These can be found here: <https://campaignresources.phe.gov.uk/resources/campaigns>
- Participate in national campaigns such as Stoptober and National No Smoking Day. Raising funds for a charity can be a great motivator to reduce or quit smoking habits.
- NICE guidance recommends that employers inform employees about the possibilities, different types of help and local stop smoking services (contacts below).
- Evidence indicates that the most effective smoking cessation programmes have multiple components; including group counselling, individual's therapy, pharmaceutical interventions and incentive schemes tailored to your workplace setting. A one size fits all approach is likely to bring fewer benefits.
- Consider on site stop smoking support. Allow staff to attend smoking cessation services during work hours or allow reasonable time off to gain support without losing pay.
- Self-help materials are often less effective. Interventions should be tailored to your specific workforce sector and individual smoking patterns. This may look different across your departments/areas of work and this should be considered.

### Contact Details for Local Services:

#### Quit Ready Stop Smoking Service

QR provide both information and training for individuals and workplaces. Expert advisors can come out and provide support, pharmacotherapy and advice on e-cigs amongst other workplace initiatives. Services are free of charge.

Telephone: 0345 646 6666

Text: Ready to 66777

Email: [Quitready@leics.gov.uk](mailto:Quitready@leics.gov.uk)

Website: [www.quitready.co.uk](http://www.quitready.co.uk)

### Did You Know?

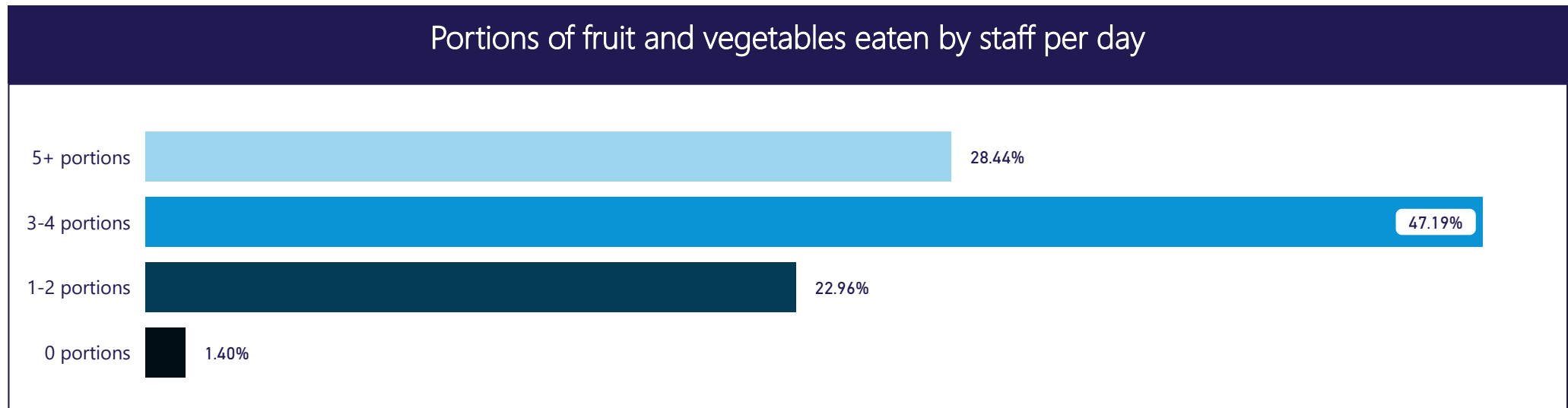
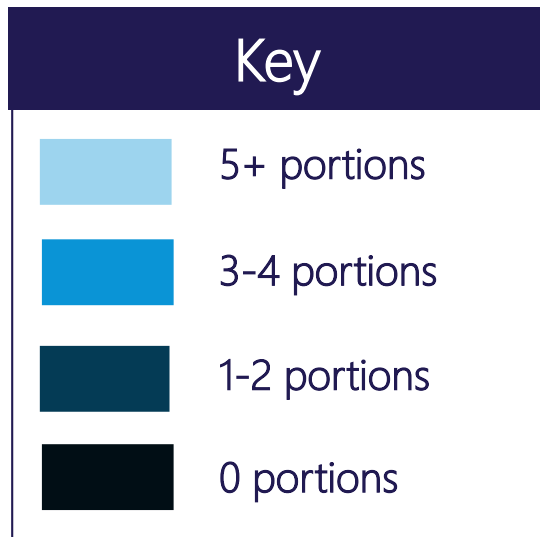
Over a working week, smoking breaks cost businesses around £26 per smoker. That's £1,815 a year for a full-time employee!



# Healthy Eating

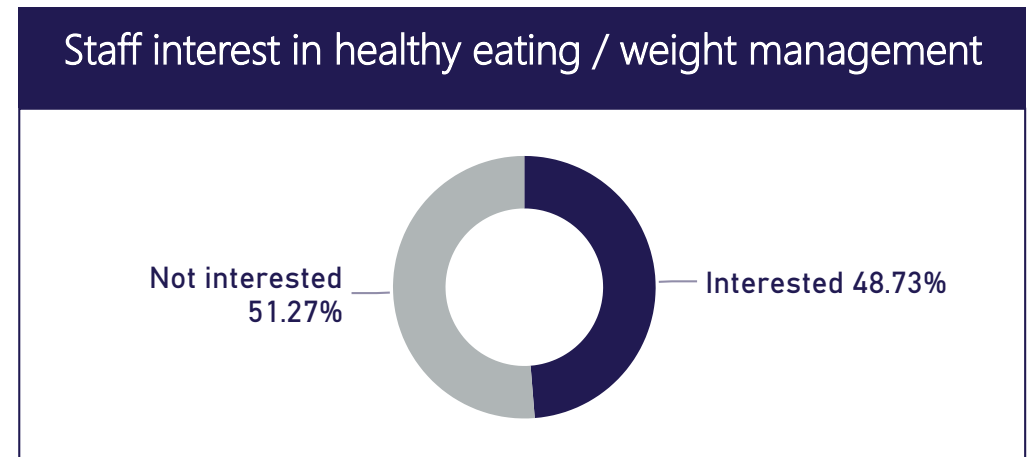
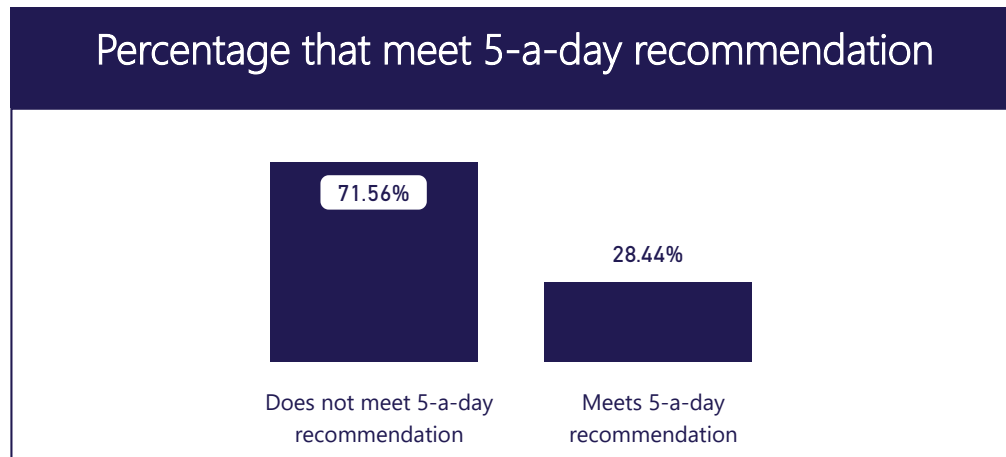
This section aims to find out if employees have a healthy diet. Research suggests fruit and vegetable consumption is a reasonable marker of overall diet.

Employees who have a healthy diet and are a healthy weight are better protected against ill health such as heart disease, high blood pressure, stroke and diabetes. Eating a well-balanced diet with minimal sugar will also help to build an individual's immune systems, reducing the likelihood of illness and disease. There is strong evidence to show that workplace interventions can lead to improvement in diet and that participation in a workplace programme can result in greater weight loss, reduction in BMI and decreasing body fat percentage (10).



National Average meeting 5-a-day recommendation  
**30%**

**3.44**  
Average number of portions per day



## Recommendations to improve healthy eating

- Develop and promote a healthy eating policy or statement.
- Promote healthy eating guidance using resources such as the Eatwell Plate and educate employees on portion sizes and food groups. More resources can be found at on NHS Choices site: <https://www.nhs.uk/Livewell/healthy-eating/Pages/Healthyeating.aspx>
- Raise awareness through a healthy eating campaign such as [www.nhs.uk.oneyou](http://www.nhs.uk.oneyou) and promote initiatives such as Sugar Swaps.
- Conduct periodic weigh-ins and BMI calculations for willing staff. Undertaking regular staff assessment and triage individuals to healthy lifestyle advice. Many providers can offer health checks including Health Improvement or Physical Activity Development Teams in your local authority.
- Embrace the social benefit that food brings – enjoy team lunches of homemade healthy recipes, coffee and (healthy) cake mornings.
- Encourage healthy eating at work – if food is served on site then ensure there are healthy options such as providing healthier alternatives in vending machines.
- Price healthier food cheaper than less healthy options in workplace cafeterias.
- Ensure water is freely and easily accessible to all staff.
- Contact local grocer to supply range of fruit once a week.

### Contact Details for Local Services:

#### Leicestershire Weight Management Service

Telephone: 0116 305 1510

Website: [leicestershirewms.co.uk](http://leicestershirewms.co.uk)

### Did You Know?

A large pharmaceutical company who offered staff a package of activities including healthy eating challenges and healthier options in the cafe saw an 8.5% reduction in absenteeism, saving £1.2 million.

**Weight  
Management**  
Leicestershire

# Alcohol

*This section aims to find out the number of employees that drink at a level that may put their health at risk, which would be above the government's lower risk guidelines.*

Creating a culture in the workplace that supports employees to drink within the guidelines is important for the health and wellbeing of employees and for your organisation. Drinking above the guidelines can impact on an employee's ability to work. Alcohol misuse affects employee concentration and increases mistakes and accidents. Organisations which prioritise rewards, reduce stress and have a supportive rather than punitive environment can help to reduce alcohol misuse amongst staff.

Drinking too much can increase the number of illnesses through heart disease, stroke, depression and some cancers which is bad for both health and business. Businesses in the UK lose an estimated £7.3bn each year because of time off work and lost productivity due to alcohol related ill health (11). A significant proportion of adults who are at risk for alcohol related problems are employed. Research has shown for every £1 spent on screening and brief interventions/referrals, companies saved over £4 over a two-year period in sickness absence related costs (12).

A score is calculated upon individual's answers across the 3 alcohol related questions (0 = minimum, 12 = maximum). The higher the score, the greater the risk. Higher risk typically translates to drinking less often but more units when alcohol is consumed or drinking on a regular occasion.

## Did You Know?

Individuals in work are more likely to drink during the week than those unemployed. This can correlate to high stress levels and dissatisfaction with the work environment.

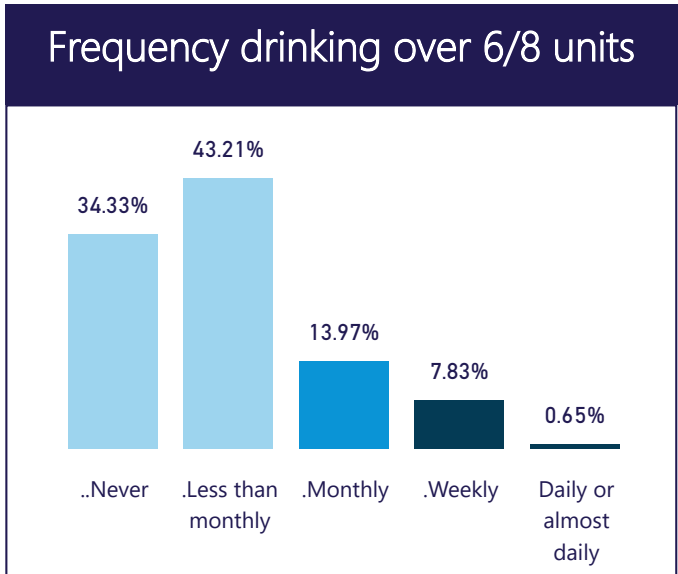
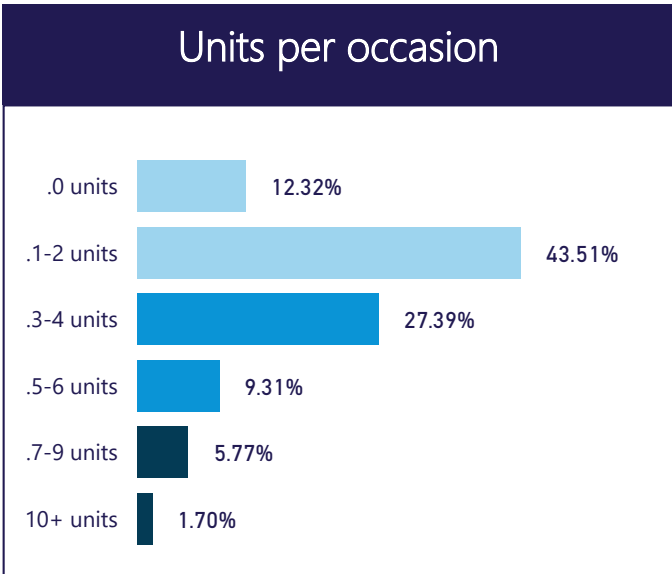
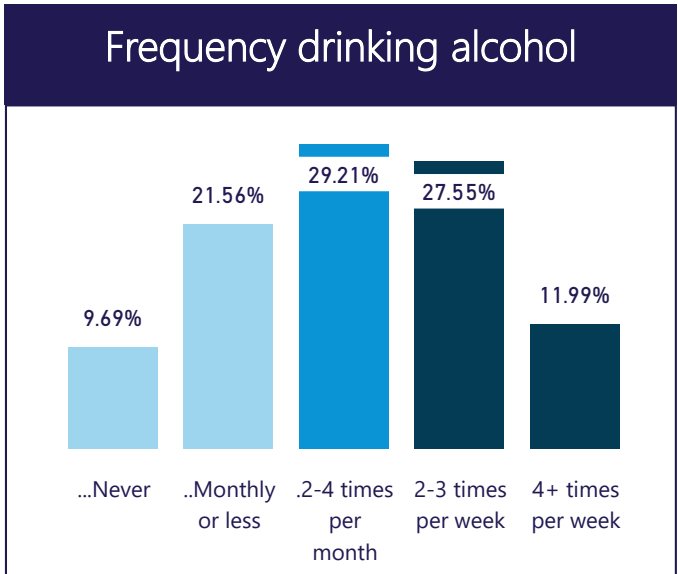
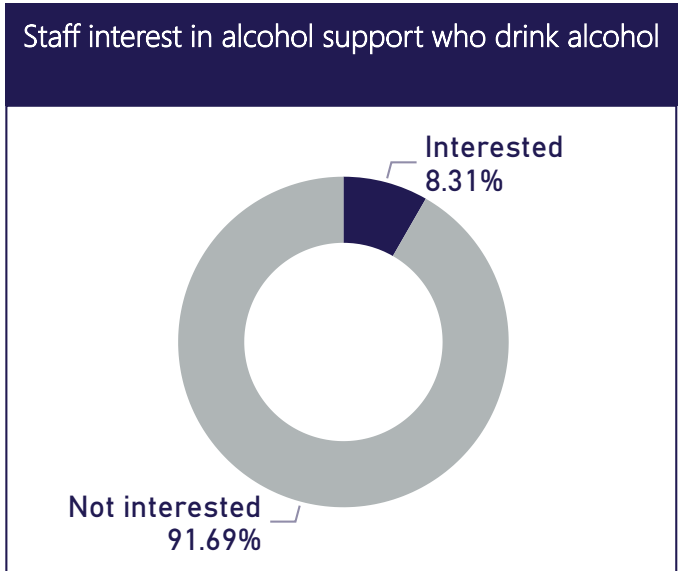
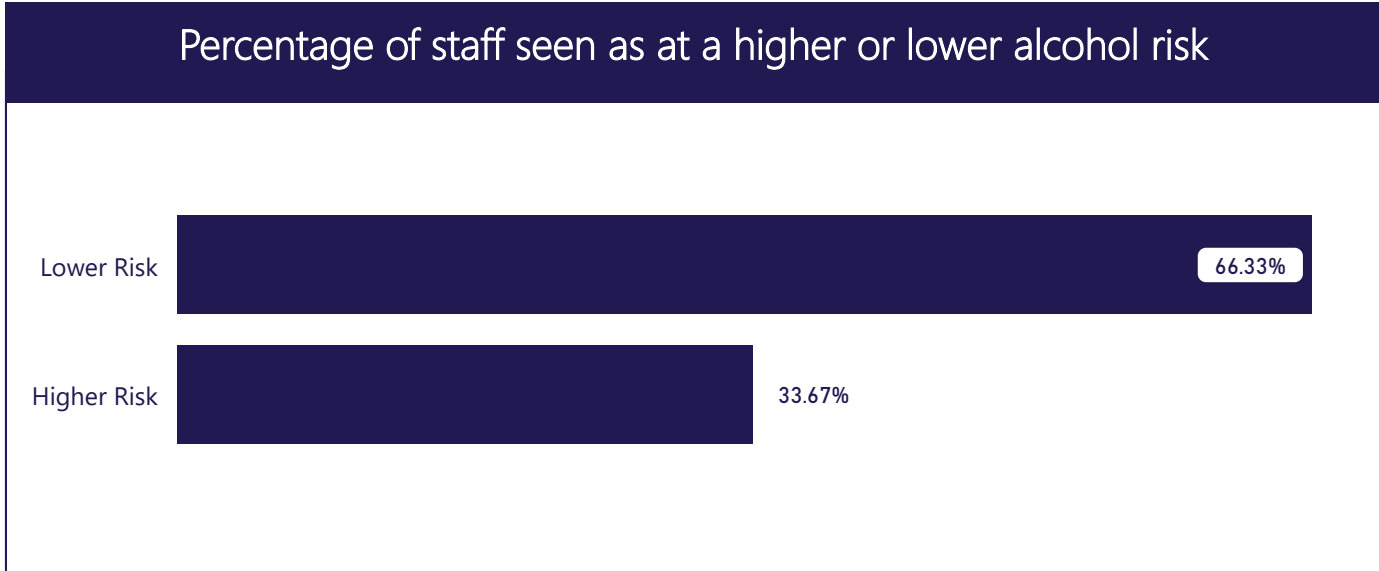
# Alcohol

**3.72**  
Average Alcohol Risk Score

National Average Higher Alcohol Risk  
**25%**

**Key**

- Low risk
- Medium risk
- High risk



## Recommendations for alcohol awareness

- Develop and promote an alcohol at work policy which covers all key aspects; managing problems, prevention and organisational culture. Good examples of these are available from The British Heart Foundation.
- Provide resources on lower risk drinking using the One You drinks tracker app/website.
- Contact your local authority public health team (details below) for advice on local services and training in delivering alcohol identification and brief advice, which is a simple technique to help people to reduce their health risk from alcohol. There is good opportunity to promote for public health interventions due to the high exposure of the message, the likelihood of noticing change in employees' health and opportunity to intervene with the advantage of leverage to retain employment.
- Encourage participation in national campaigns such as Dry January. Initiatives with a charity focus always work well.
- Organise socials and team building functions that do not include alcohol.
- Psychosocial or skills training for staff and/or supervisors increases knowledge and skills on recognising and dealing with individuals suffering alcohol misuse. This aims to aid peer support, peer referral and intervention as well as positive attitudes.

### Contact Details for Local Services:

#### Turning Point

Turning point is the integrated substance misuse service for Leicestershire, Leicester and Rutland. Turning point provide advice, support and a range of treatment options.

Telephone: 0330 303 6000

Website: <http://www.turning-point.co.uk/leicester,-leicestershire-and-rutland.aspx>

**Leicestershire County Council Public Health** – for health promotion resources related to alcohol.

Email: [Antonia.Gallo@leics.gov.uk](mailto:Antonia.Gallo@leics.gov.uk)



# Physical Activity

*This section aims to find out the number of employees who are physically active enough to benefit their health and so meet the government's recommended physical activity guidelines.*

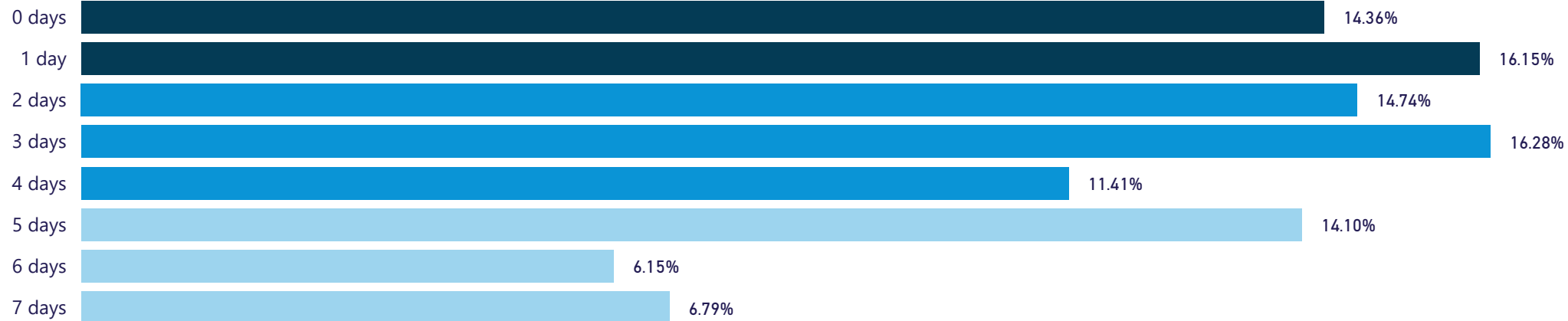
The cost of physical inactivity in England has been estimated at £8.2bn a year (13). Increasing physical activity could lead to many business benefits. Employees are less likely to suffer from major health conditions or injury at work, are more productive and less likely to take sick leave. In fact, it has been found that physical activity in the workplace can reduce sickness absence by 20% (14). Physical activity helps to protect against musculoskeletal disorders which account for 19% of all sickness absences nationally (15). It contributes greatly to mental wellbeing and will also help to mitigate some of the problems associated with an ageing workforce. The loss of skilled workers due to ill health retirement poses serious risk and is particularly common in small to medium sized enterprises (16). Encouraging older employees to increase activity levels and adopt healthier lifestyles can help to reduce the impact of age-related chronic diseases.

It is recommended by the Chief Medical Officer that adults (aged 16+) should be doing the below amount of physical activity (17). Individuals doing less than 30 minutes moderate activity per week are classed as inactive.

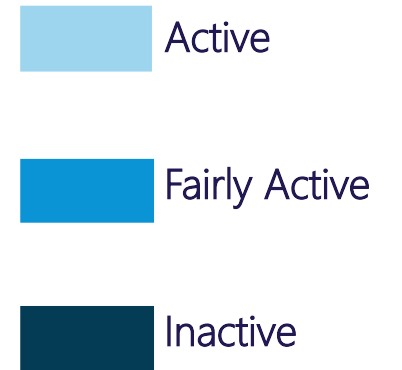
- Adults should aim to be active daily. Over a week, activity should add up to at least 150 minutes (2½ hours) of moderate intensity activity in bouts of 10 minutes or more – one way to approach this is to do 30 minutes on at least 5 days a week. Moderate intensity causes the individual to get warmer, breath harder and makes their heart beat faster but they are still able hold a conversation. Examples include brisk walking, cycling, gardening.
- Alternatively, comparable benefits can be achieved through 75 minutes of vigorous intensity activity spread across the week or combinations of moderate and vigorous intensity activity. Vigorous intensity causes the individual to get warmer, breath much harder, causes their heart to beat rapidly and becomes difficult for them to hold a conversation. Examples include running, swimming, exercise classes.
- Adults should also undertake physical activity to improve muscle strength and balance on at least two days a week. Examples include lifting weights, yoga, carrying heavy shopping bags.
- All adults should minimise the amount of time spent being sedentary (sitting) for extended periods. Examples include taking regular breaks at work and breaking up long commutes by walking part of the journey.

# Physical Activity

Number of days staff taking part in 30mins of physical activity



## Key

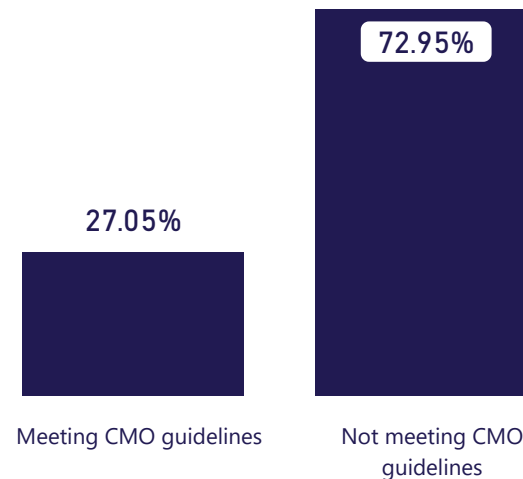


National Average  
Achieving 150 mins  
**61.8%**

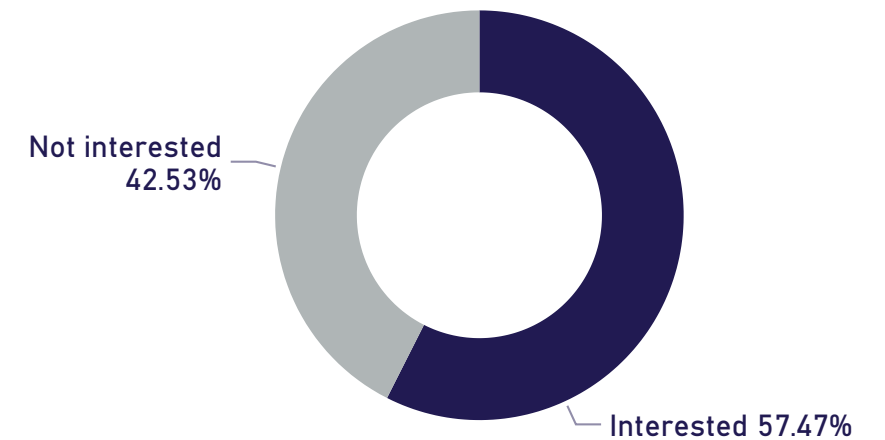
**346**

Number of staff doing 2 days  
of strength training a week

Percentage of staff meeting CMO 150mins a week guidelines



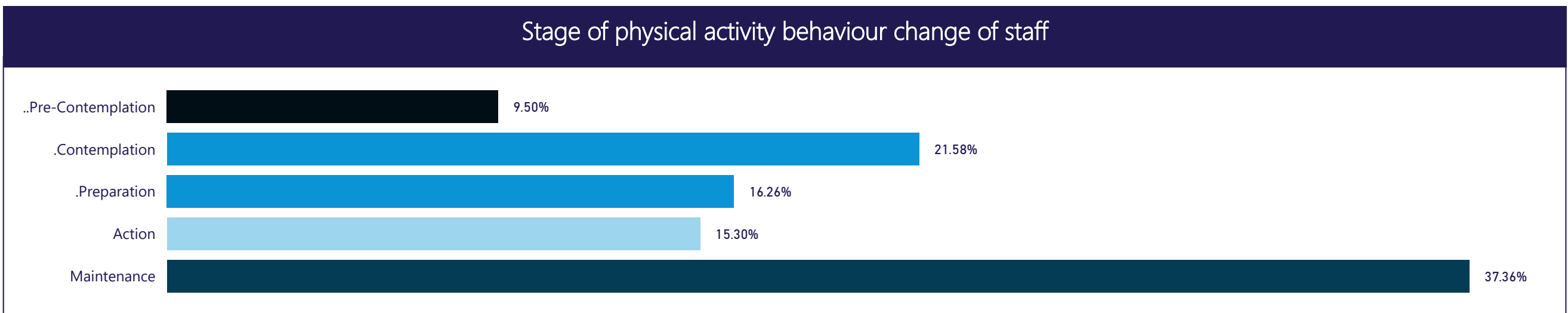
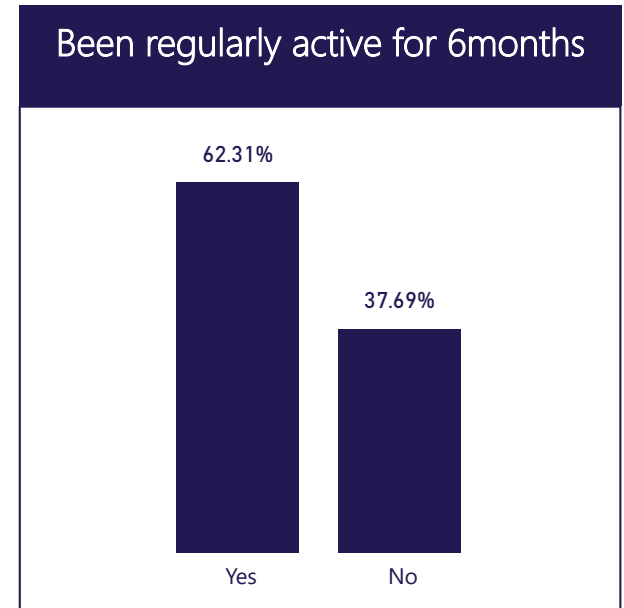
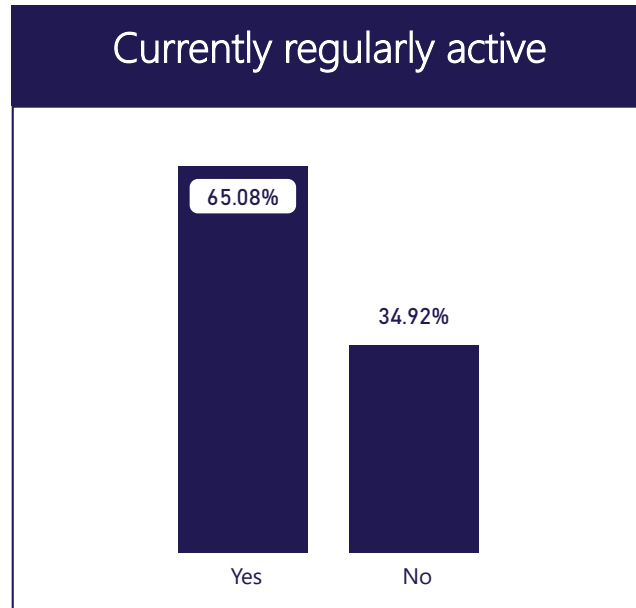
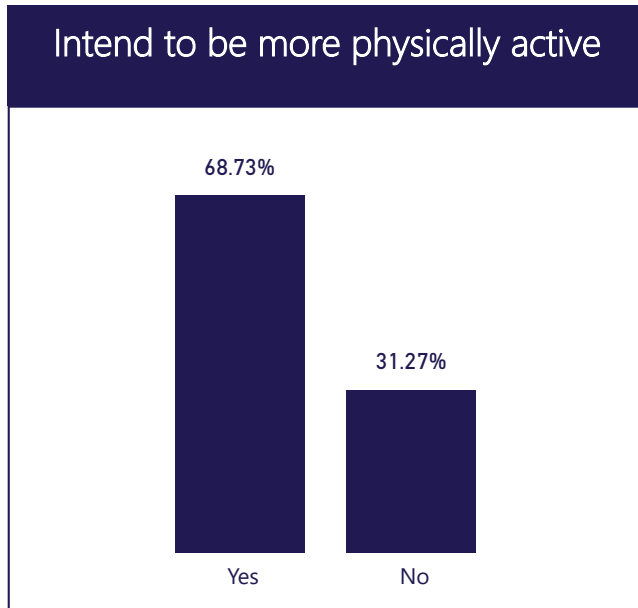
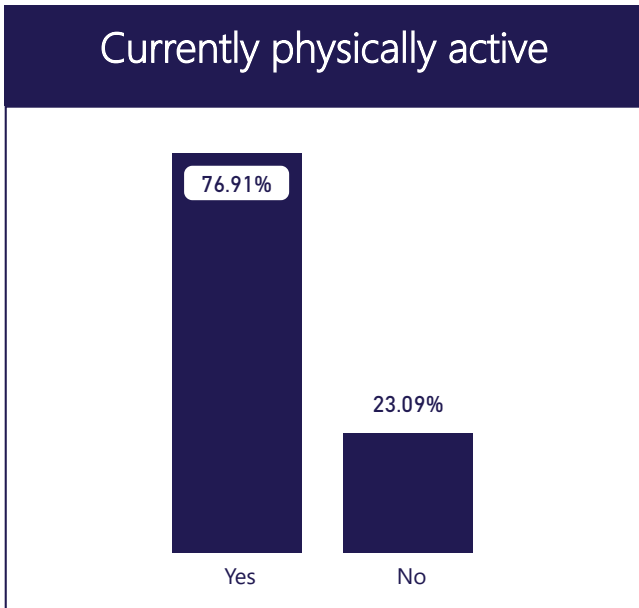
Staff interest in physical activity support





# Readiness to Change

This section aims to identify employee's stage of change. This will determine their readiness to act on a healthier behaviour, in this instance becoming more physically active.



# UNDERSTAND THE COMPLEX NATURE OF INACTIVITY

**29% of the adult population are inactive.** These are people who don't achieve a total of 30 minutes of at least moderate intensity physical activity in a week. This means they are not undertaking walking, cycling, or any kind of sport or exercise where their heart rate increases and they are mildly out of breath for at least 30 minutes a week. **But there are three distinct behaviours.**

**7% (3.1M)**

**Doing Nothing**  
(no activity at all in the last 28 days)

#### Demographics

Closest fit to inactive stereotype:

- older profile
- over half with a limiting illness/disability
- 58% female / 42% male

#### Behaviours

- size of this group varies depending on the time of year (8% of the population in winter, 5% in summer).
- a high proportion cite health/disability/injury/age as the main reason for doing less activity

**3% (1.4M)**

**Not Doing Enough**  
(some moderate activity but less than 30 minutes)

#### Demographics

Younger profile than the other inactive groups – most representative of society

- 57% female / 43% male
- 27% have a limiting illness/disability

#### Behaviours

Low levels of overall activity (even including light intensity):

- relatively few 'active' sessions in a week and short average duration
- gardening and walking are often the main activities

**19% (8.2M)**

**Missing the Intensity**  
(only light intensity activity in the last 28 days)

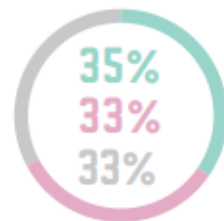
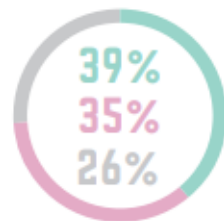
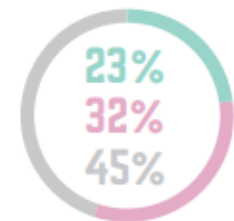
#### Demographics

- 58% female / 42% male
- 22% limiting illness/disability
- more even spread of ages

#### Behaviours

The largest group is already quite 'active'

- on average 4.5 hours per week of usually just one lifestyle activity e.g. walking
- For the small number engaged in some sport, it's almost eight hours per week of light activity



Age: ● 16-44 ● 45-64 ● 65+

Different messages and approaches will be needed to successfully target these different behaviours.

Data source: Active People Survey (April 2015 - March 2016)

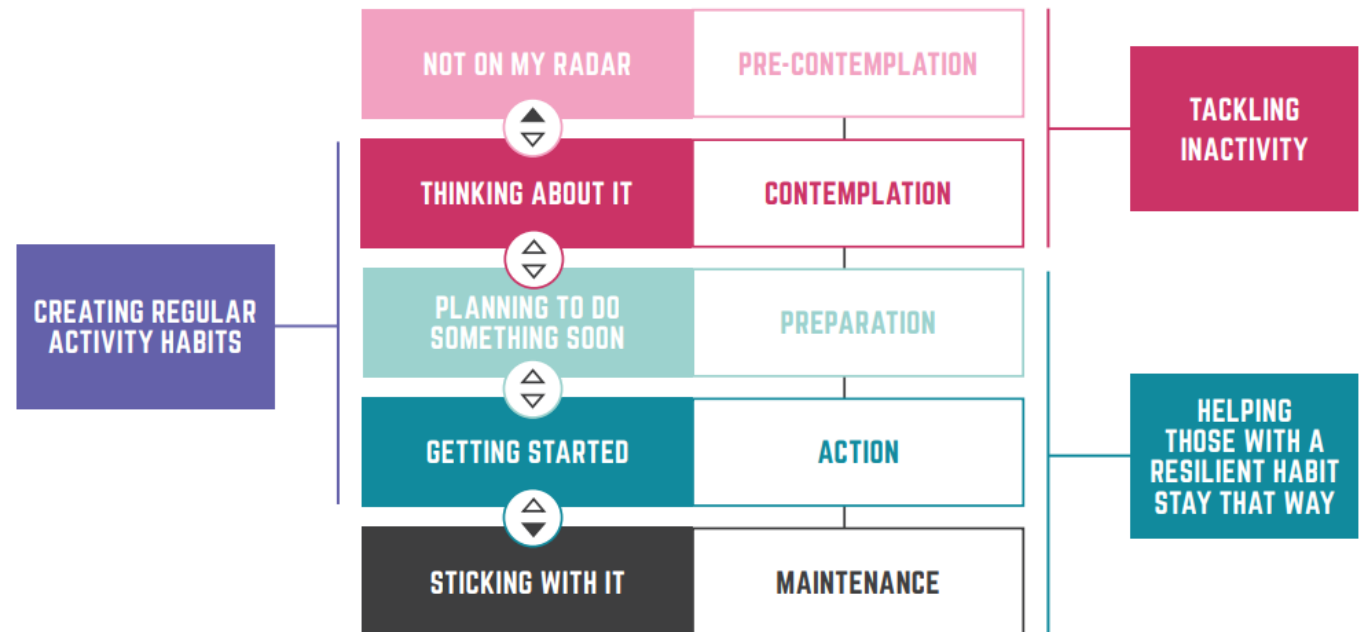


Diagram 1: Sport England, Understanding the complex nature of inactivity

Diagram 2: The Sport England three behavioural challenges and their alignment to the Transtheoretical Model of Behaviour change.

Source: <https://www.sportengland.org/media/11546/applying-behaviour-change-theories-real-world-examples-from-ghga.pdf>

## Recommendations to increase physical activity

- Develop and promote a physical activity policy to maximise opportunities for staff to be active.
- Promote the benefits of physical activity by signposting them to One You campaign [www.lrsport.org/oneyou](http://www.lrsport.org/oneyou).
- Peak promotions through national campaigns and/or sporting challenges e.g. National Walking Month, Cycle to Work week, Olympic Games, World Cup etc.
- Consult with employees on the activities that they would be interested in, such as a lunchtime walking group, yoga/Pilates class, pedometer challenge, couch to 5k or running groups, charity challenges.
- Consider onsite facilities and their appropriateness to provide opportunities to be physically active whilst at work e.g. showers, bicycle racks.
- Promote Active Travel initiatives – contact the Safe and Sustainable Travel Team at Leicestershire County Council for local programmes and incentives.
- Contact local leisure facilities to negotiate corporate discounts for employees.

Encourage employees to:

- Take active breaks e.g. group walks, lunchtime running groups.
- Carry out lifting and handling safely.

Encourage desk-based workers to:

- Move away from their desks to speak to their colleagues rather than emailing.
- Use stairs not the lift.
- Take phone calls standing up.
- Implement, where possible, walking meetings.

### Contact Details for Local Services:

#### **Leicester-Shire and Rutland Sport, Active Partnership**

Telephone: 01509 564874

Email: [b.cornish@LRSport.org](mailto:b.cornish@LRSport.org)

Website: [www.lrsport.org](http://www.lrsport.org)

#### **Charnwood Borough Council, Active Charnwood**

Telephone: 01509 634673

Email: [active.together@charnwood.gov.uk](mailto:active.together@charnwood.gov.uk)

Website: <http://www.charnwoodsport.org.uk/>

# Sleep



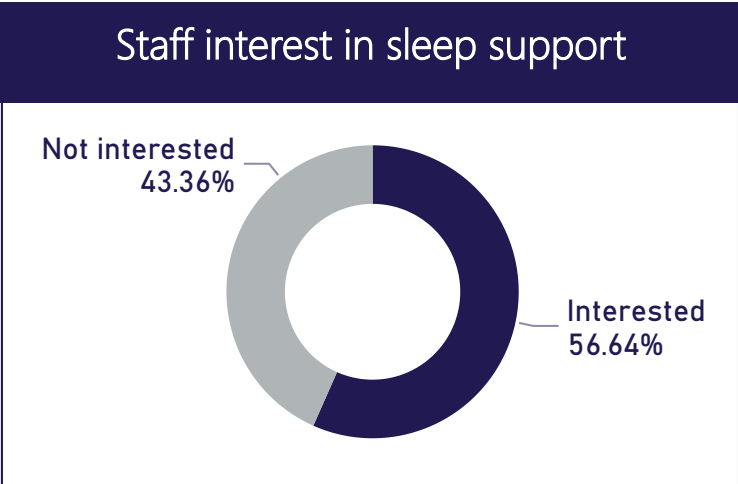
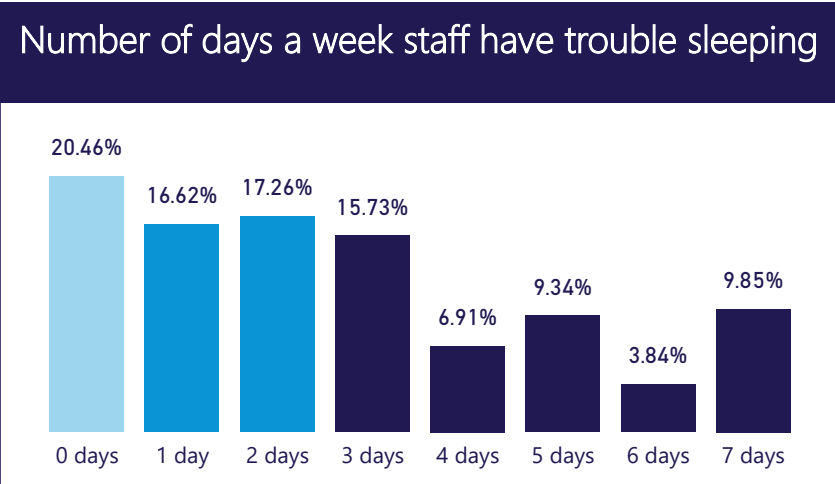
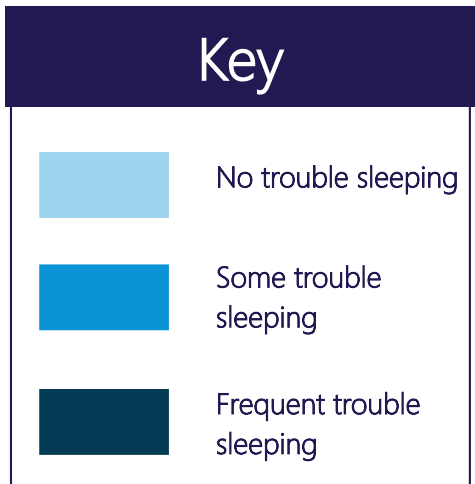
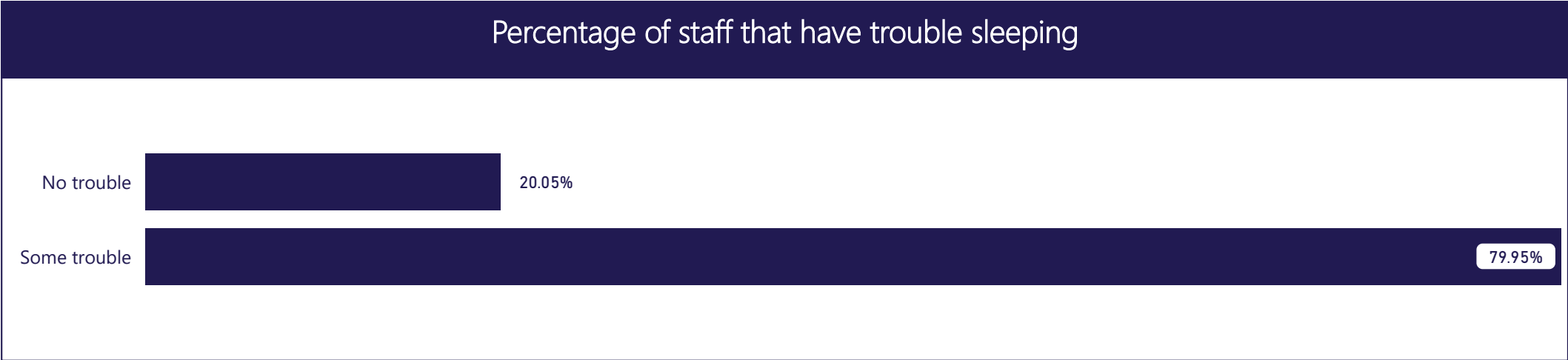
This section aims to find out the number of employees who report having problems with their sleep as this can be detrimental to work performance and impact on their overall health and wellbeing.

Sleep has been linked to many benefits such as basic human functioning, improved memory and immunity. Regular poor sleep puts you at risk of serious medical conditions, including obesity, heart disease and diabetes – and can shorten life expectancy. Individuals who get lack of sleep have significantly worse productivity, performance and safety outcomes in comparison to people who get enough sleep. Almost 50% of people nationally say that stress or worry keeps them awake at night.

National Average trouble sleeping  
**50%**

**2.65**  
Average no. of days a week staff have trouble sleeping

**Did You Know?**  
People who sleep less than 6 hours or more than 8 hours per day are less likely to achieve weight loss than those who have 6-8 hours sleep per night (18).



## Recommendations for better sleep management

- Raise awareness through campaigns such as One You and signpost employees to resources on sleep such as those on the Sleepio website: <https://www.bighealth.com/resources/>
- Use the TUC Sleep Toolkit to promote key sleep messages: [www.tuc.org.uk/workplace-issues/health-and-safety/fatigue-guide-health-and-safety-representatives](http://www.tuc.org.uk/workplace-issues/health-and-safety/fatigue-guide-health-and-safety-representatives).
- Regular exercise is a good way to improve sleep quality so promote this wherever possible.
- Consider a holistic approach to sleep management and address issues with caffeine and nicotine intake to increase likelihood of improving sleep quality.
- Provide or organise meditation and/or mindfulness sessions for staff.

Promote the following tips on sleep:

- Go to bed at same time each night and rise at the same time each morning.
- Avoid large meals before bed.
- Avoid caffeine and alcohol before bedtime.
- Avoid nicotine.

### Contact Details for Local Services:

#### Let's Talk Wellbeing

Telephone: 0115 876 0157

Email: [letstalkcr@nottshc.nhs.uk](mailto:letstalkcr@nottshc.nhs.uk)

Website: <http://www.nottinghamshirehealthcare.nhs.uk/leicestershire-county-and-rutland-service->



# Work & Health



*As an employer you will be familiar with the need to provide a healthy and safe working environment and to manage risks appropriately. Evidence shows the health and wellbeing benefits are greater for employees if they have good jobs and are in a supportive, social and physical work environment.*

Good work includes having a living wage, control over work, career development opportunities, flexibility, protection from adverse working conditions, ill health prevention and stress management strategies. Support for sick and disabled people to return to work is also key. When people have these quality conditions, they are more likely to be productive and less likely to leave the organisation (19).

An employee’s job role, along with the social and physical environment are all elements of what can make work good or bad. This can have either a positive or negative impact on staff health and wellbeing and in turn on organisational performance. Research suggests that good work is good for health. Conversely, bad work will have a negative impact on workforce health and wellbeing which in turn could lead to increased sickness absence, higher staff turnover and lower productivity.

At a staggering 43% of all working days lost due to ill health, stress and depression are now the leading contributors. The financial cost of mental health sick leave is a massive £26bn per year, the equivalent of £1,035 for every employee (20). This is an area that should be prioritised as it carries great potential for employees to be off work for longer periods of time (21).

National Average  
Not satisfied  
**18%**

National Average  
Satisfied  
**66%**

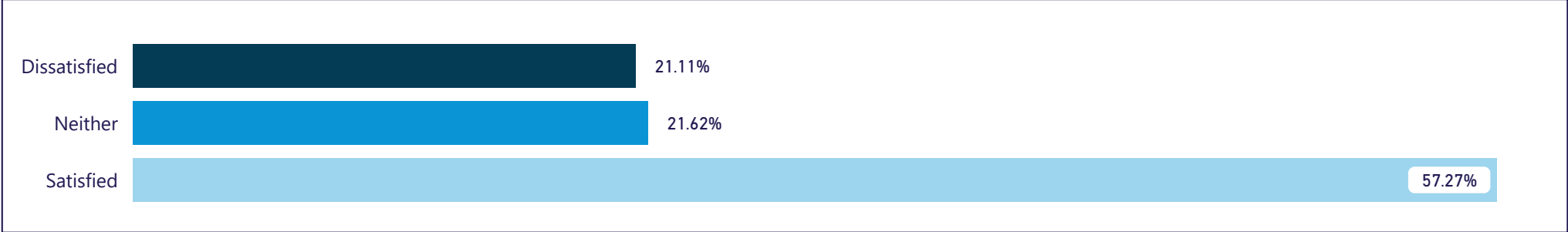


### Key

- Satisfied
- Neither satisfied nor dissatisfied
- Not satisfied

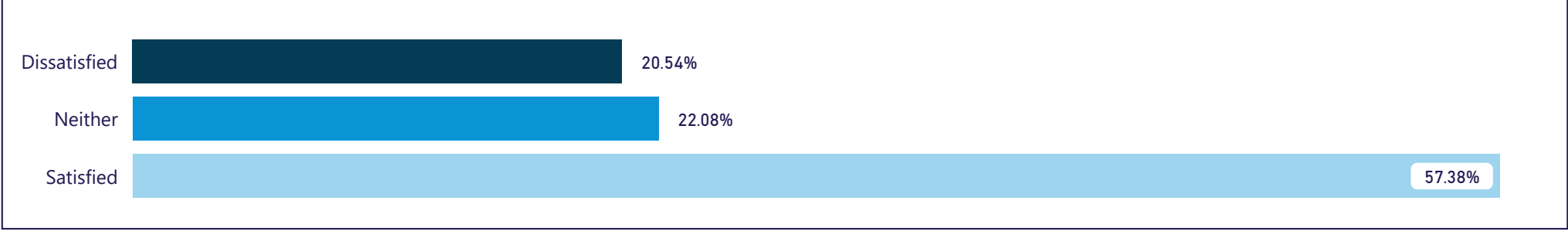
# Work & Health

## Percentage of staff satisfied with the workplace physical environment



The physical environment at work, for example an uncomfortable temperature or poorly designed work area, can be as much as source of pressure as the social environment.

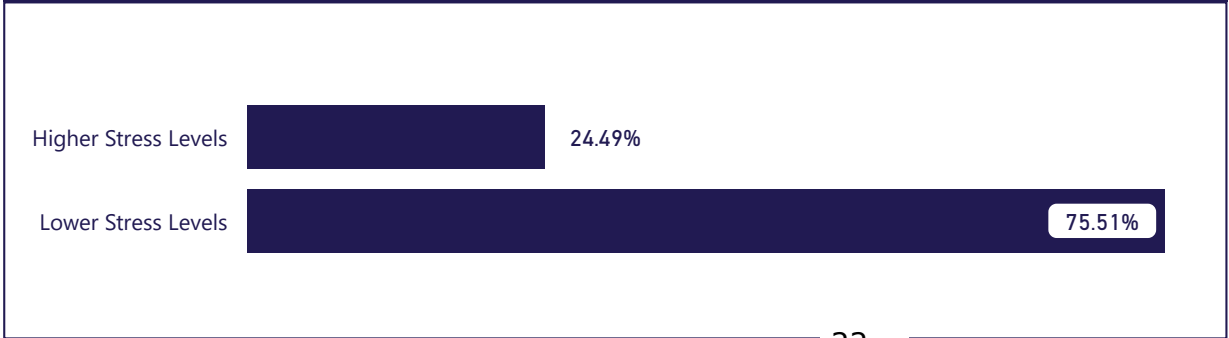
## Percentage of staff satisfied with the workplace social environment



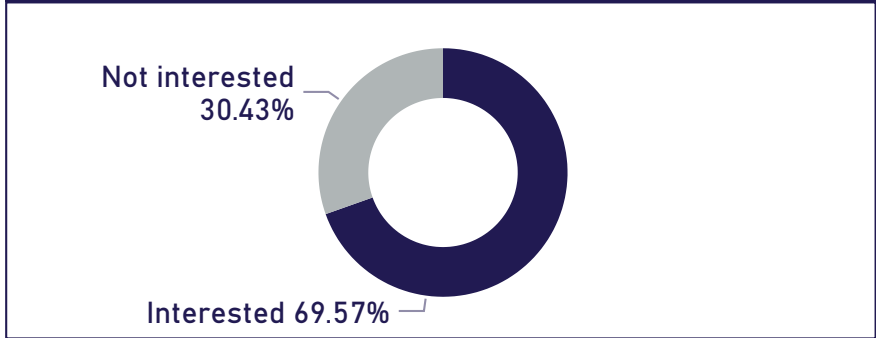
The social environment at work is the organisation of work and its culture; the attitudes, values and practices which affect the wellbeing of employees.

National Average finding job stressful  
**16.7%**

## Percentage of staff that find their job stressful



## Staff interest in mental health & stress support



## Recommendations to improve workplace environment and mental wellbeing

- Develop a Mental Health at Work policy and ensure it includes stress, anxiety and depression as these are the three most common mental health conditions.
- Train line managers to recognise the signs of stress and take steps to manage these. This can be done by offering a stress risk assessment developed by the Health and Safety Executive (HSE).
- Consider allowing some staff to attend a Mental Health First Aid course, provided by Mental Health First Aid England which teaches skills for providing first aid and support to people experiencing mental health issues. More information can be found here: <https://mhfaengland.org/>
- Consider what different tools you could promote to employees to raise awareness of wellbeing. One example is the 5 ways to wellbeing tool (see below), which showcase 5 behaviours that have been shown to improve wellbeing. These include connect, be active, take notice, keep learning and give. More information can be found here: <https://www.gov.uk/government/publications/five-ways-to-mental-wellbeing>
- Consider hosting discussions or focus groups with employees to get further information on what issues they face and the sort of support they would like. This could range from management training, workshops, mental health coping strategies or training for their line manager.
- Consider holding focus groups or one to ones to get more detail on why staff may feel dissatisfied. This can often link to staff communication, can this be improved?
- Consider factors discussed as part of the physical and social environment question, can these be amended and improved? Depending on questions receiving poor satisfaction scores in 'Workplace Culture' Section (page 24) you may wish to rethink and improve managerial approaches, flexible working, team building and skill development.
- Provide or organise meditation and/or mindfulness sessions for staff.



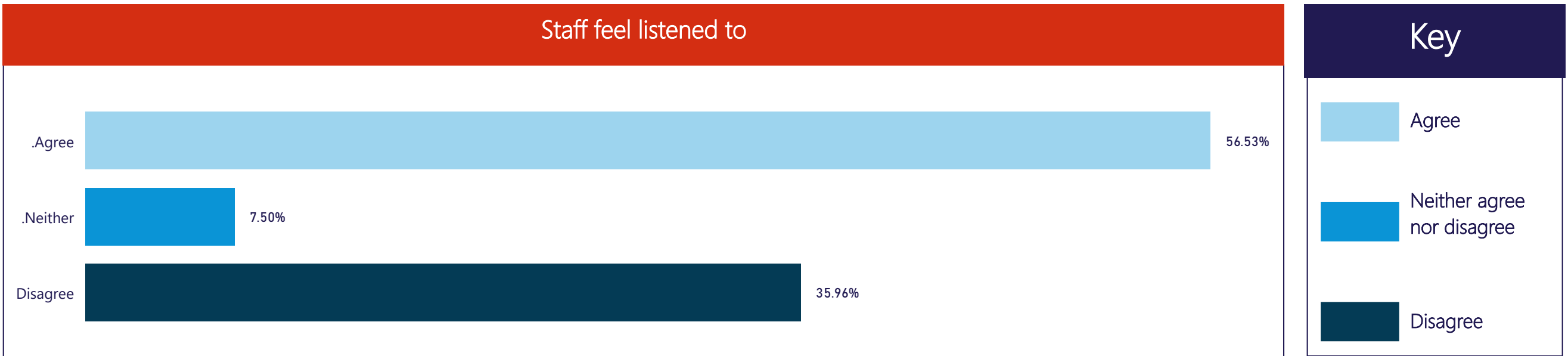
# Culture

*This section aims to find out more about work organisation and culture which may be affecting staff wellbeing and work performance.*

Improving the organisation’s workplace culture can improve employee wellbeing and build positive staff engagement. Research suggests that several factors can increase employee engagement including; clear visible leadership, effective line management, employees feeling they have a voice and believing that their employer has integrity and is true to values. Conversely, a sense of injustice and unfairness arising from management processes or personal relationships can increase stress and poor mental health (22).

**Note:** Due to the number of questions in this section, the report will show the organisations highest and lowest scoring questions. Full scores can be found in the Appendix section.

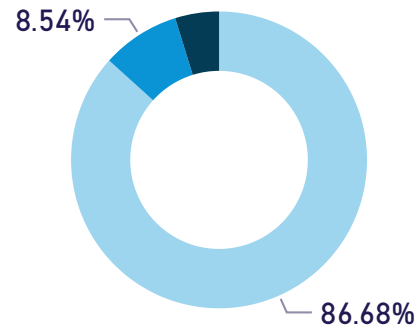
## Worst scoring/biggest area for improvement



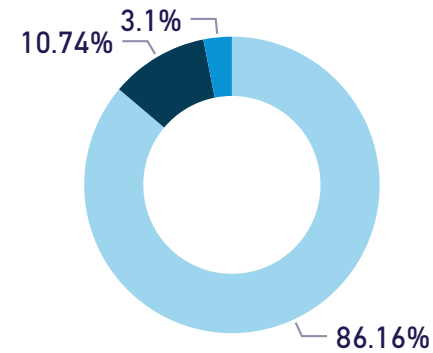
# Culture

## High Scoring

1:1 meetings take place regularly

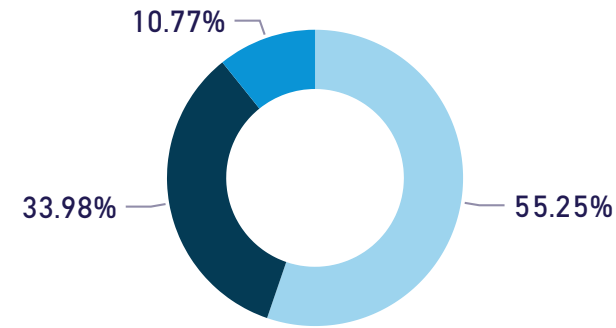


Staff can decide order of work

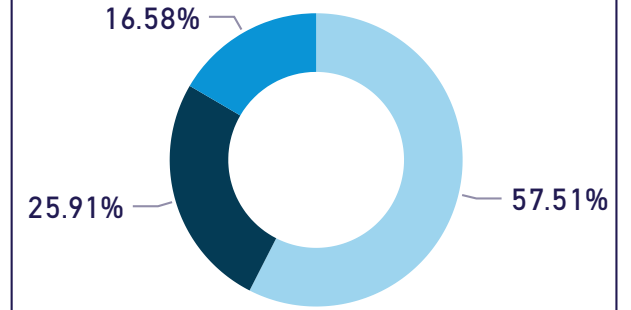


## Low Scoring

Communication is good



Negative feedback is constructive



## Recommendations to improve workplace culture

Depending on which questions have scored most poorly, the organisation may wish to consider the following:

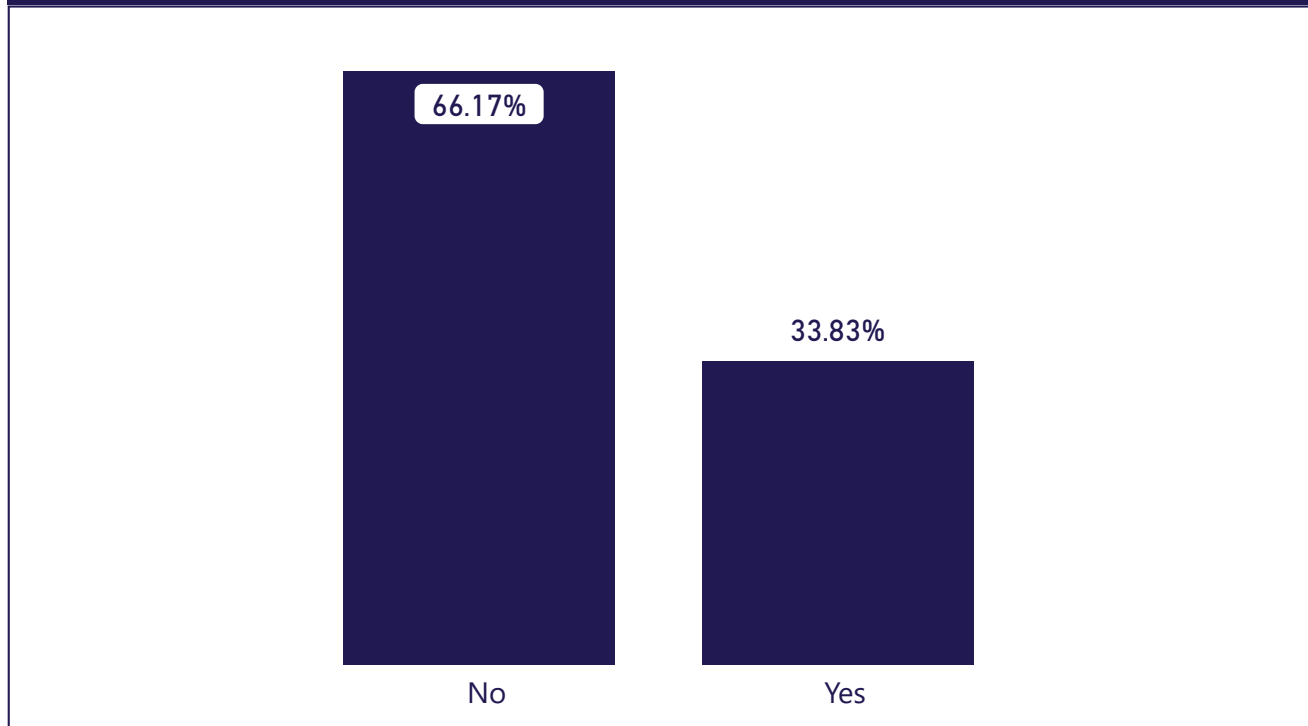
- Ensure staff have some control, where possible in how they do their work e.g. flexible hours, working from home.
- Involve staff more in planning new practices and activities.
- Encourage a good work/life balance and support opportunities for staff to socialise together. This could be extended to doing a shared activity for the community such as volunteering together, or a team challenged can be a great way to build team morale and relationships.
- Praise staff for good work and help them to feel valued and appreciated.
- Give line managers adequate time, training and resources to ensure they balance the aims of the organisation with concern for the health and wellbeing of employees.
- Find opportunities for staff to learn new things and develop their skills.
- Widely promote and encourage health and wellbeing and take responsibility to ensure staff are taking care of themselves. This can include promoting support for staff who are parents or carers for example.

# Workplace Illness

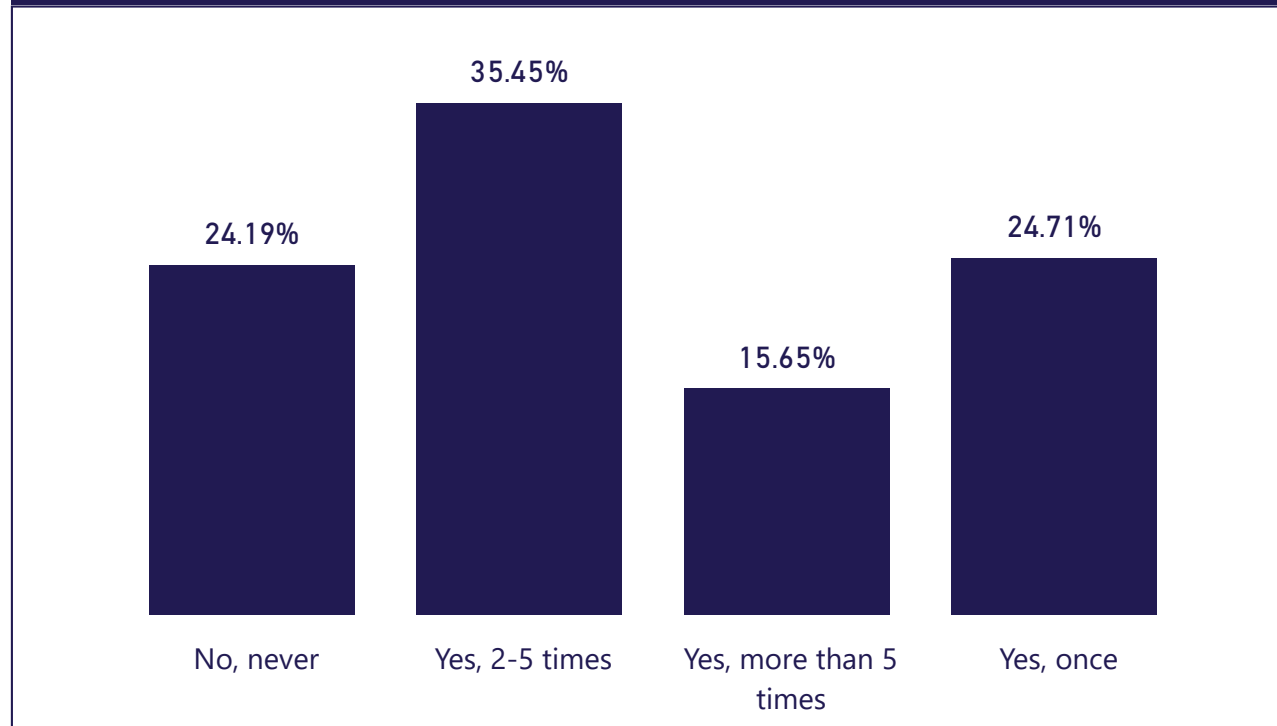
*This section aims to find out the number of employees that have suffered an injury or illness caused or made worse by their job and levels of presenteeism.*

Poor quality work or poor working conditions can cause ill health. Some employees attend work whilst sick, rather than taking sickness absence. This is known as presenteeism and can be a greater financial burden (up to 1.5 times more) to businesses than the costs of sick leave. Presenteeism is on the increase (22) and can result in significant loss of output and productivity. Attending work whilst sick leads to reduced productivity and increases the chance of passing on infectious disease to someone else. Presenteeism is associated with anxiety, particularly when job security is threatened, as well as high workloads and stress. In a national study, 89% of people who turned up for work unwell admit they are less productive (23).

Percentage of staff suffered from an injury or illness in last 12 months that was caused or made worse by their job

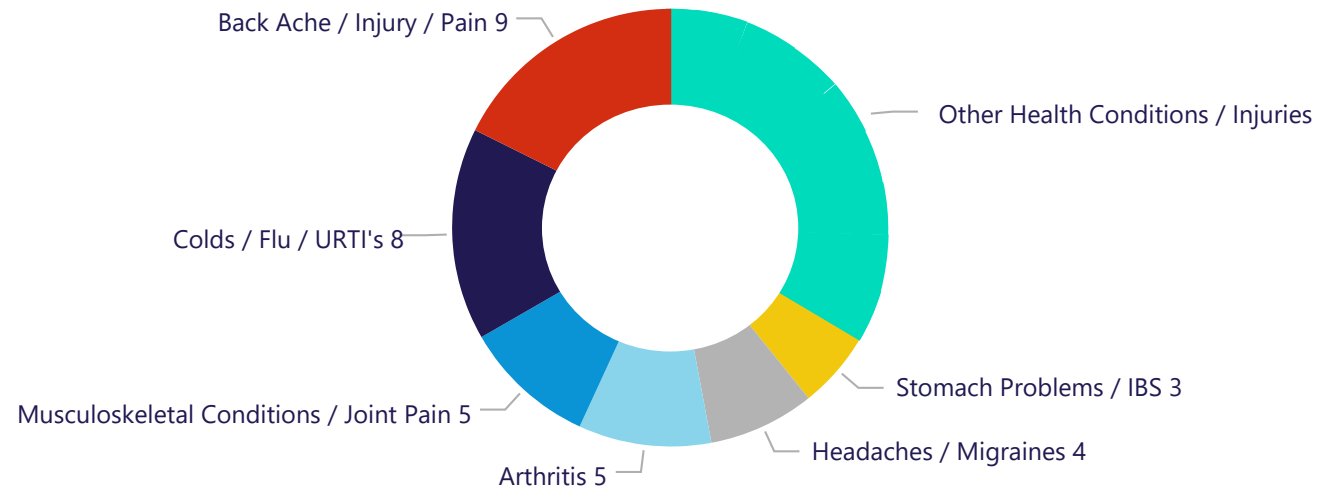


Percentage of staff that have gone to work despite feeling that they should have taken the day off sick

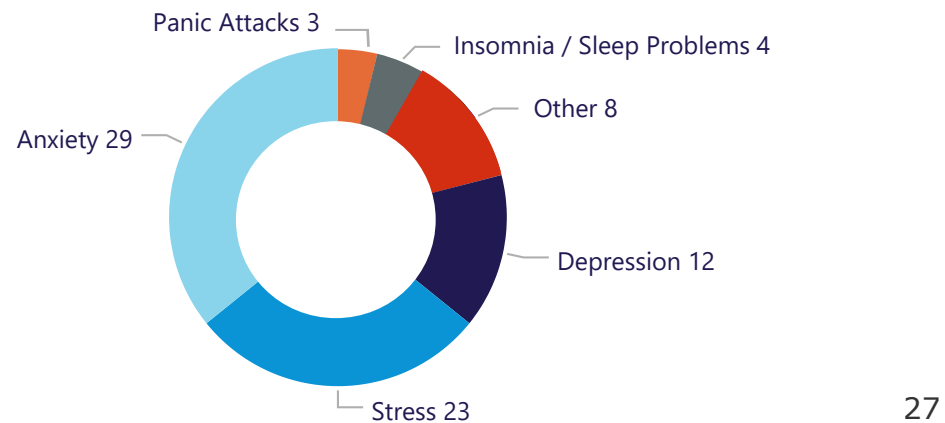


# Reported Workplace Illness

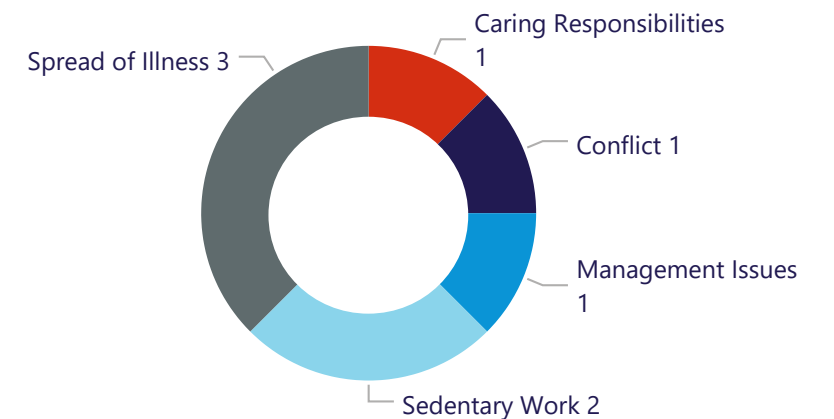
## Physical Health



## Mental Health



## Work-Related Issues



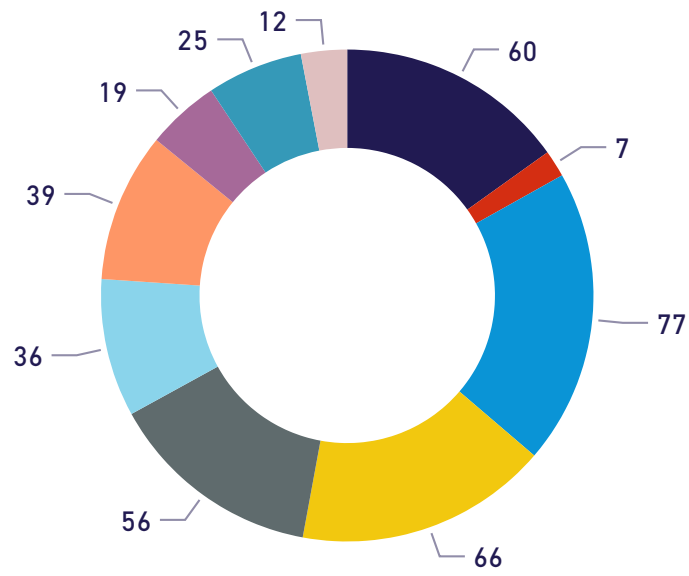
## Recommendations to reduce presenteeism

- Develop and promote an absence management policy which encourages employees to take sick leave when they are ill rather than attending work. Presenteeism should be strongly discouraged.
- Ensure the organisation undertakes regular workplace health and safety assessments and train staff on manual handling where appropriate.
- Encourage a culture which promotes staff health and wellbeing and enables discussions about health to be open and supportive. Provide training and support for line managers with this.
- Ensure appropriate and adjustable work equipment such as office chairs and desks. Visit the Health and Safety Executive website for details on workstation assessments.

Line managers have a key role in promoting health and wellbeing in the workplace and in supporting workplace health initiatives. This section aims to examine the level of competency and confidence amongst line managers in promoting good health and wellbeing practices.

By identifying the barriers faced by line managers to promoting health and wellbeing in the workplace, adequate training and systems can be put in place to encourage them to take a more proactive approach.

## Barriers that are preventing your line managers from being able to promote and encourage good health and wellbeing practices

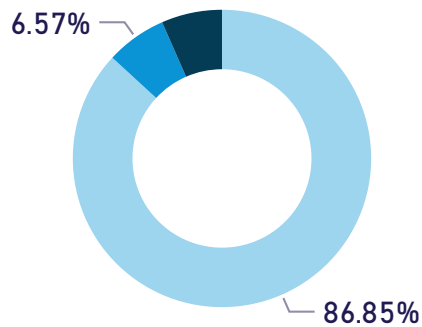


● Already promote ● Don't see the point ● Lack of knowledge ● Lack of time ● Lack of training ● No barriers ● Not part of the job ● Not priority ● Other ● Resistant to change

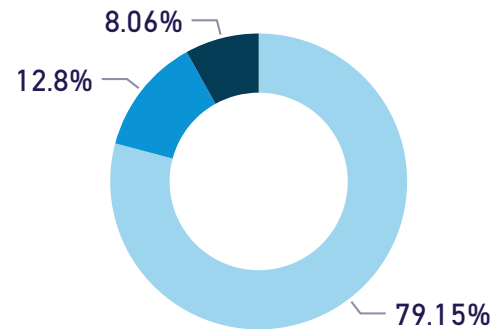
**Note:** Due to the number of questions in this section, the report will show the areas of highest and lowest confidence. This will identify areas where line managers need additional support/further knowledge to support their staff. Full scores can be found in the Appendix section.

## Confidence levels of line managers discussing health and wellbeing issues with their staff

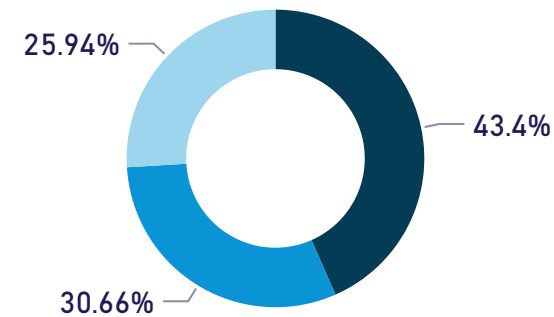
### Discussing sickness absence



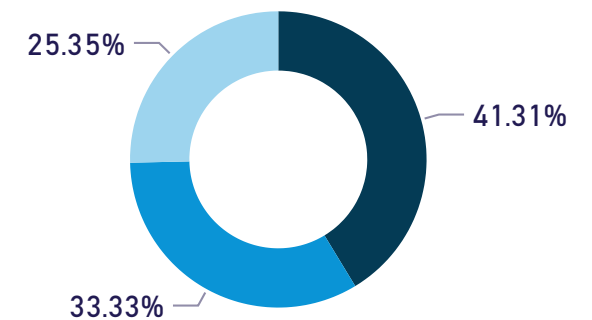
### Delivering return to work interviews



### Discussing alcohol and drugs



### Discussing stopping smoking



### Key



Confident



Neither confident nor not confident



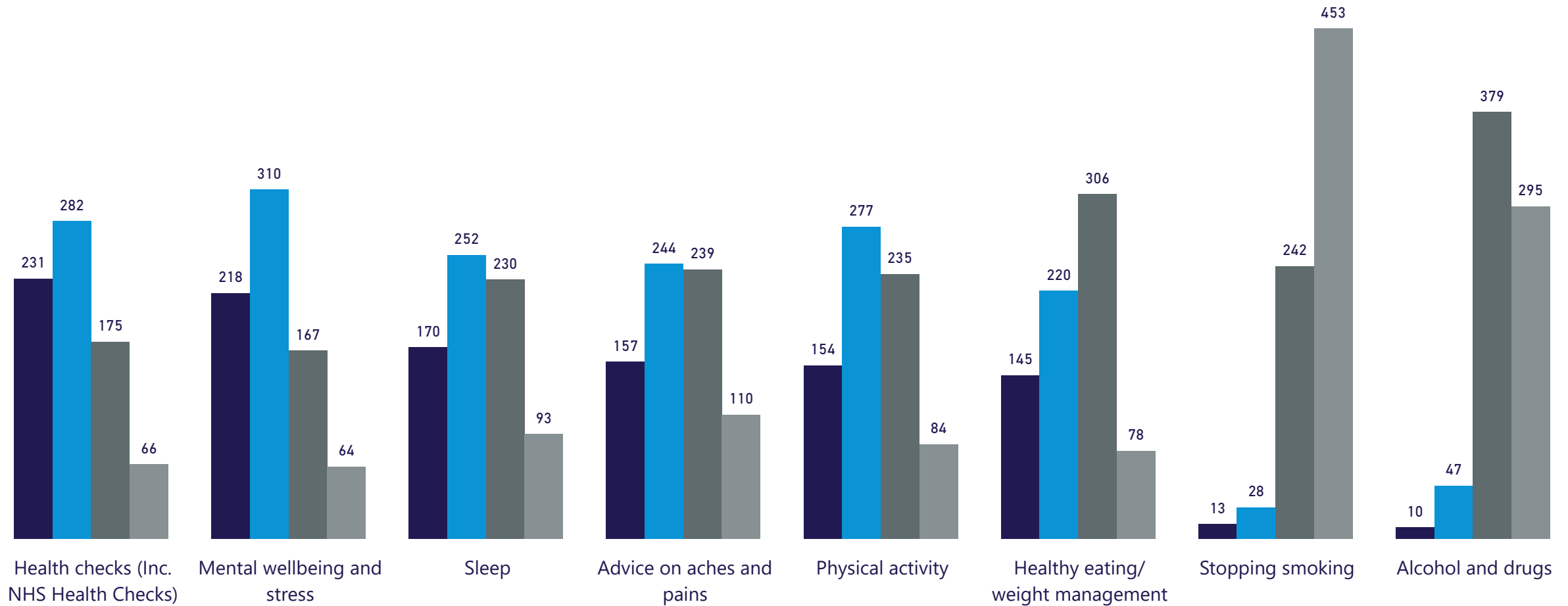
Not confident

### Recommendations to support line managers

- Lack of knowledge or training can be addressed through accessing support. For example, ACAS provide a range of line manager training including mental health awareness for managers.
- Contact local authority public health team for information on accessing support to promote healthy lifestyles.
- Where scores linking to workplace culture e.g. 'resistance to change' or 'I don't see the point' then consider what leadership could be put into place to support staff. This could include more staff/leadership consultation, opportunities for regular meetings and discussions on health and wellbeing.
- Provide opportunities for staff skill development, for example, supporting them to lead health and wellbeing activities and interventions. Consider supporting a member of staff to become a workplace health champion (contact Leicester-Shire and Rutland Sport for more details).

## Total interest in health and wellbeing support by staff

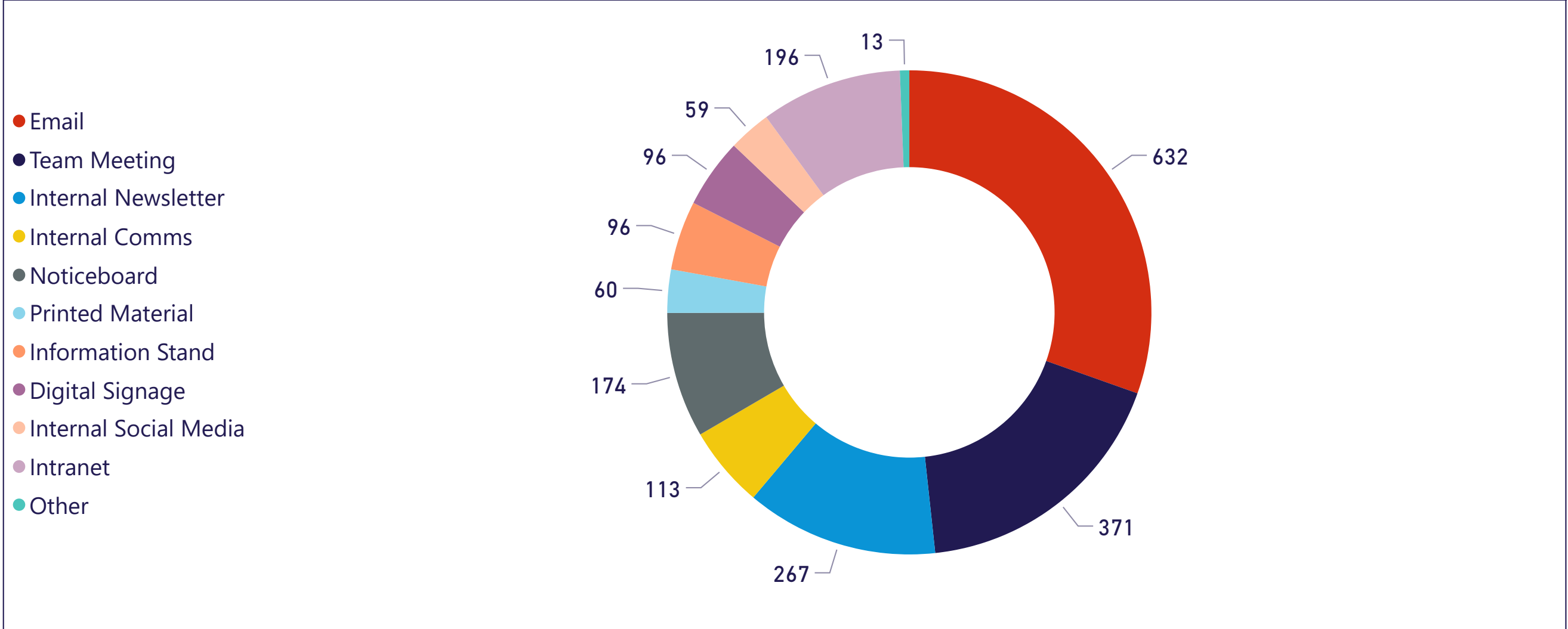
● Extremely interested ● Fairly Interested ● Not Interested ● Undecided/ not applicable





# Promotion

## Methods of communication preferred by staff to find out about health and wellbeing support offered in the workplace



# Additional Recommendations



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PHYSICAL ACTIVITY & WELLBEING

- From the recommendations given in each section, think about the types of interventions the organisation would be willing to implement. Consider what is available locally, either free or at low cost, but also what the organisation/employees could potentially pay for.
- Most organisations undertake some form of absence management. Consider having a target in place for reducing employee absenteeism which will help to measure impact. Saving just one day of sickness absence each year could save £175 per employee. For example, an organisation of 500 staff could save £87,500 per year.
- To measure return on investment, employers should track key metrics and implement a consistent evaluation tool across all activities to monitor the effectiveness and impact of each initiative.
- After 12 months, carry out the WHNA again to allow the organisation to compare their results from the start of the programme. This will show the impact of the initiatives in terms of improving health and wellbeing of employees. This is important as it can take 2 years to see a financial return to the organisation so is crucial to see the evidence of health and wellbeing being improved.

## **Toolkits**

Mental health:

<https://wellbeing.bitc.org.uk/all-resources/toolkits/mental-health-employers>

Musculoskeletal health:

<https://wellbeing.bitc.org.uk/all-resources/toolkits/musculoskeletal-health-toolkit-employers>

Physical activity, healthy eating and healthy weight:

<https://wellbeing.bitc.org.uk/all-resources/toolkits/physical-activity-healthy-eating-and-healthier-weight-toolkit-employers>

Sleep and recovery:

<https://wellbeing.bitc.org.uk/all-resources/toolkits/sleep-and-recovery-toolkit>

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**LEICESTER-SHIRE  
& RUTLAND SPORT**  
PHYSICAL ACTIVITY & WELLBEING

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- (19) [www.nhs.uk/news/obesity.sleep-affects-weight-loss/](http://www.nhs.uk/news/obesity.sleep-affects-weight-loss/)
- (20) McDaid, D, King, D and Parsonage, M – Mental health promotion and mental health illness prevention. Department of Health (2011)
- (21) ENWHP – A guide to the business case for mental health, London (2009)
- (22) NICE guidance mental wellbeing at work, (November, 2009)
- (23) BUPA – Workplace Health: A worthwhile investment (2010)

*The Workplace Health Needs Assessment is sourced from Public Health England & Healthy Working Futures (2017) 'Workplace Health Needs Assessment'.*

# Appendix

The maximum score for workplace culture is 7

## Workplace Culture



Role	Office Culture				
<p><b>5.07</b></p> <p>Average agreement that job roles can be adapted</p>	<p><b>5.36</b></p> <p>Average agreement that staff can use personal initiative or judgement</p>	<p><b>4.35</b></p> <p>Average agreement that communication is good</p>	<p><b>5.12</b></p> <p>Average agreement that people are open to sharing ideas</p>	<p><b>5.13</b></p> <p>Average agreement that there is support if we need to provide informal care</p>	
Key	<p><b>5.55</b></p> <p>Average agreement that staff can decide order in which they do things</p>	<p><b>5.06</b></p> <p>Average agreement that there is good cooperation between colleagues</p>	<p><b>5.49</b></p> <p>Average agreement that it is possible to learn new things</p>	<p><b>5.36</b></p> <p>Average agreement that there are opportunities to develop friendships</p>	
<b>Management</b>					
<p> Lowest 3 scores</p> <p> Middle scores</p> <p> Highest 2 scores</p>	<p><b>4.72</b></p> <p>Average agreement staff comfortable discussing concerns with managers</p>	<p><b>4.74</b></p> <p>Average agreement management show confidence in staff</p>	<p><b>5.77</b></p> <p>Average agreement that 1:1 meetings take place</p>	<p><b>4.24</b></p> <p>Average agreement that staff feel listened to</p>	<p><b>4.54</b></p> <p>Average agreement that negative feedback is provided constructively</p>

The maximum score for line managers is 5

# Line Managers



## Work based

## Health based

**3.76**

Average confidence discussing bullying & harassment

**3.82**

Average confidence having difficult conversations

**3.31**

Average confidence discussing healthy eating

**3.73**

Average confidence discussing mental health

**4.10**

Average confidence delivering return to work interviews

**4.25**

Average confidence discussing sickness absence

**2.92**

Average confidence discussing sleep

**2.73**

Average confidence discussing stopping smoking

## Key



Lowest 2 scores



Middle scores



Highest 2 scores

**4.02**

Average confidence discussing workplace adjustments

**2.73**

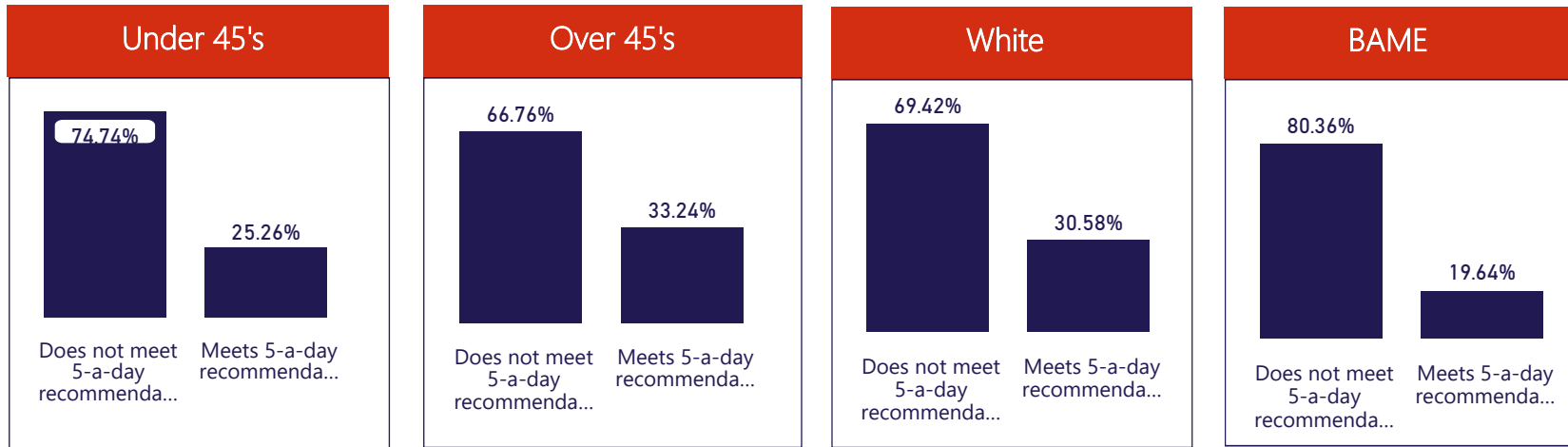
Average confidence discussing alcohol and drugs

**3.46**

Average confidence discussing physical activity

# Demographic Analysis (1)

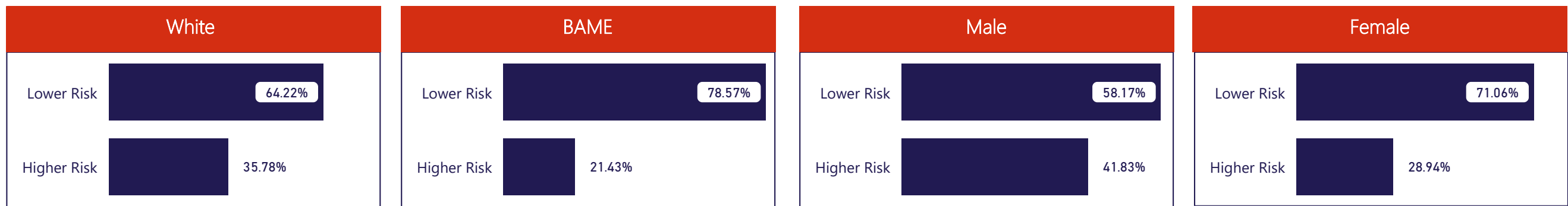
## Percentage that meet 5-a-day recommendation



### Demographic analysis for healthy eating:

- 25% of employees under the age of 45 meet the 5-a-day recommendation compared to 33% of employees over the age of 45.
- 31% of employees from a white ethnic background meet the 5-a-day recommendation compared to 20% of BAME employees.

## Percentage of staff seen as at a higher or lower alcohol risk

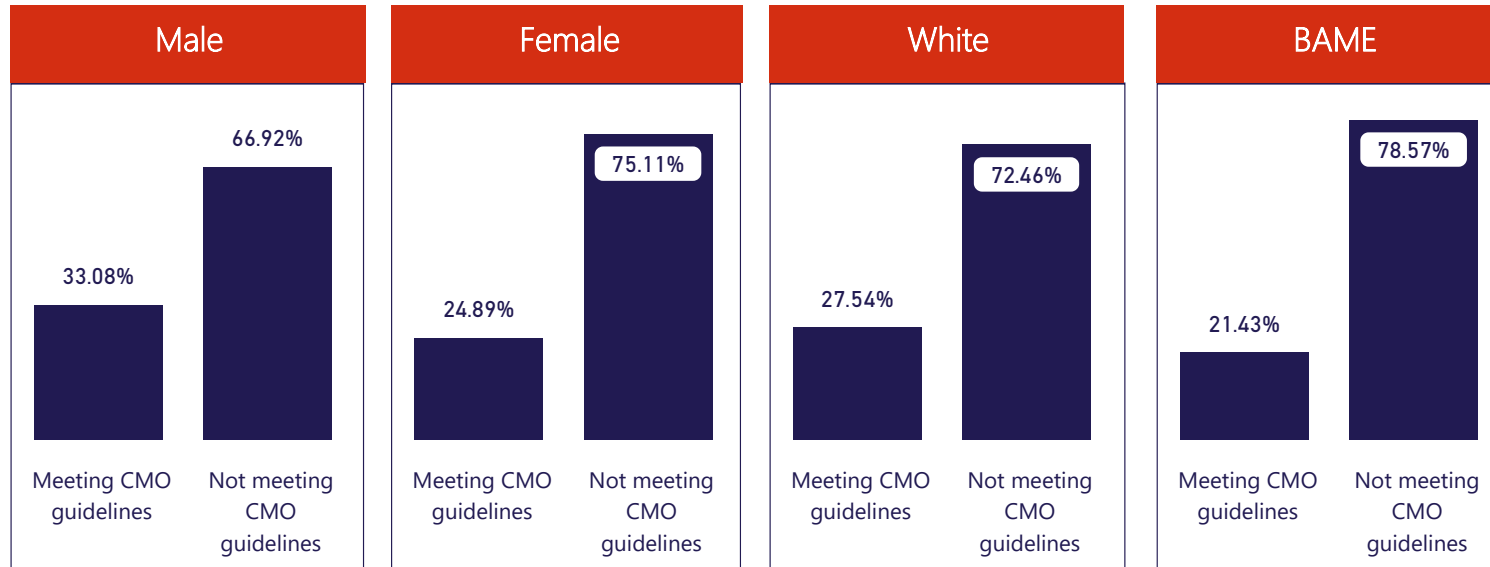


### Demographic analysis for alcohol:

- 42% of male employees are at a higher alcohol risk compared to 29% of female employees.
- 36% of employees from a white ethnic background are at a higher alcohol risk compared to 21% of BAME employees.

# Demographic Analysis (2)

Percentage of staff meeting CMO 150mins a week guidelines



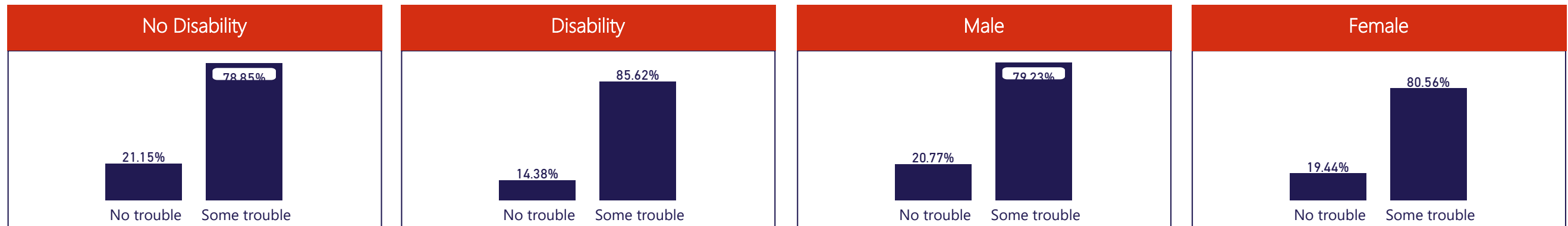
## Demographic analysis for physical activity:

- 33% of male employees are meeting the 150 minute physical activity guidelines compared to 25% of female employees.
- 28% of employees from a white ethnic background are meeting the 150 minute physical activity guidelines compared to 21% of BAME employees.

## Demographic analysis for sleep:

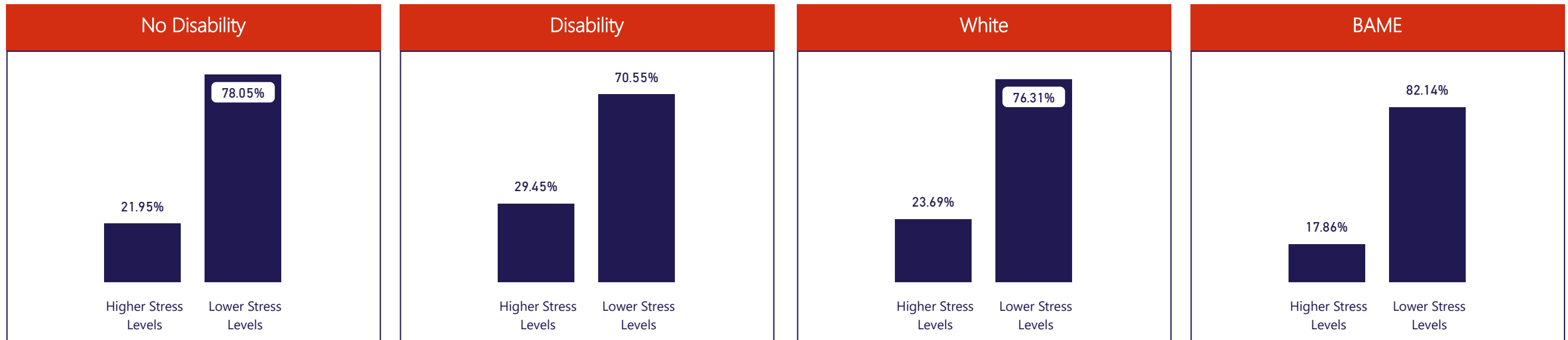
- 86% of employees who report having a type of disability experience some trouble sleeping compared to 79% of employees without a disability.
- 79% of male employees have some trouble sleeping compared to 81% of female employees.

Percentage of staff that have trouble sleeping



# Demographic Analysis (3)

Percentage of staff that find their job stressful



### Demographic analysis for job stress:

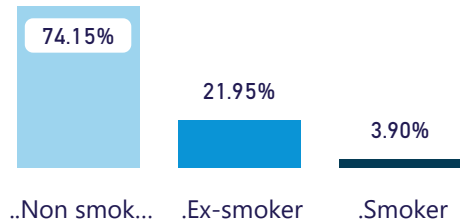
- 29% of employees who report having a type of disability experience higher stress levels, compared to 22% of employees without a disability.
- 24% of employees from a white ethnic background experience higher stress levels compared to 18% of BAME employees.



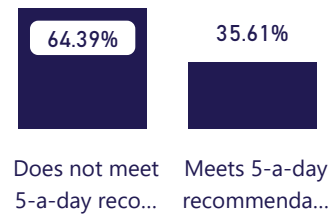
# Analysis by Area (1)

## Academic Staff (n=205)

### Smoking

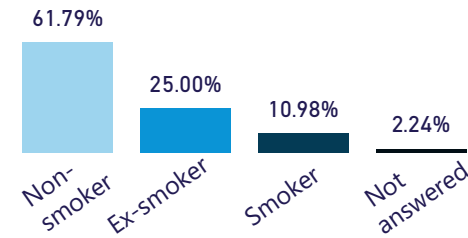


### Healthy Eating

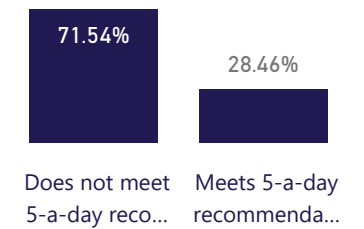


## Professional Services (n=492)

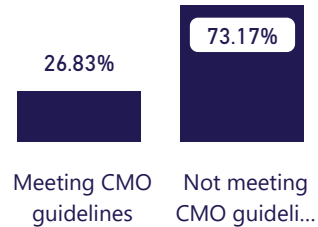
### Smoking



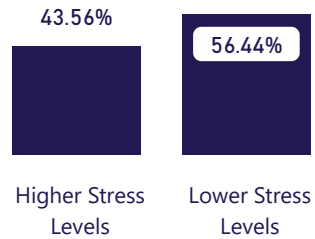
### Healthy Eating



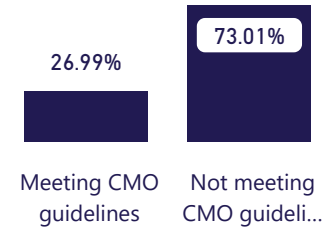
### Physical Activity



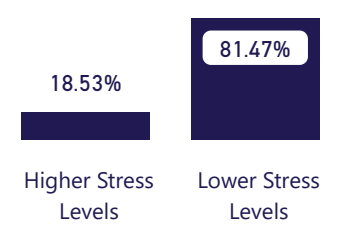
### Stress



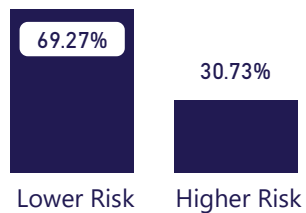
### Physical Activity



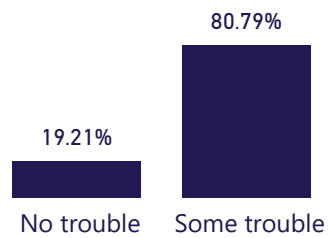
### Stress



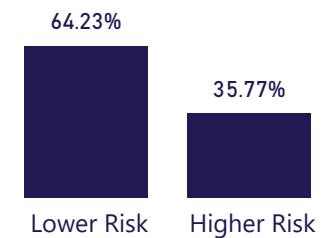
### Alcohol



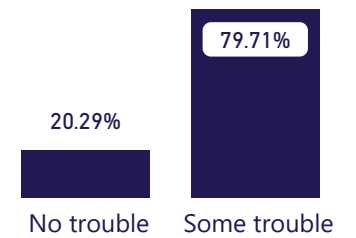
### Sleep



### Alcohol



### Sleep

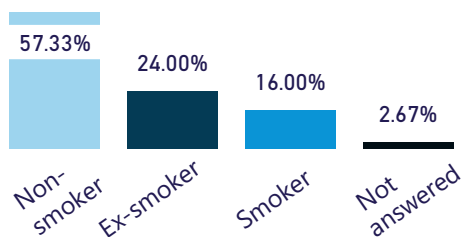


# Analysis by Area (2)

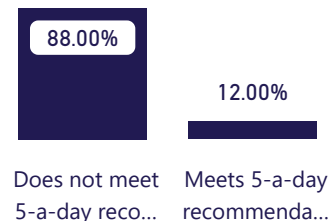


Imago (n=75)

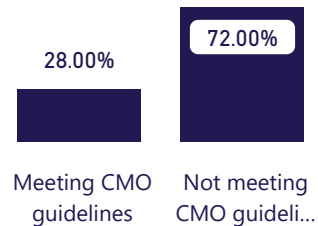
## Smoking



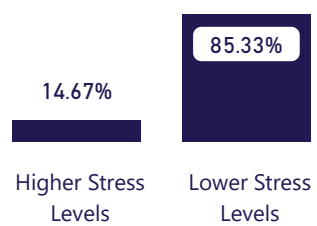
## Healthy Eating



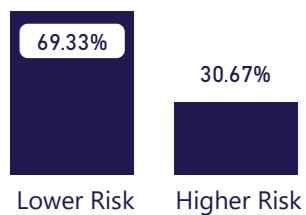
## Physical Activity



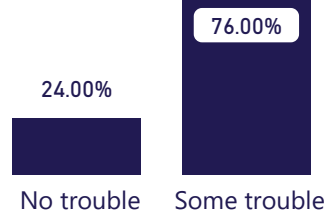
## Stress



## Alcohol



## Sleep





**LEICESTER-SHIRE  
& RUTLAND SPORT**  
PHYSICAL ACTIVITY & WELLBEING

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