Health, work and well-being toolkit
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Foreword

Working with trade unions, unionlearn SERTUC has made great strides in workplace learning and helping workers develop their skills and knowledge. However, trade unions have always been involved in health and safety issues in the workplace. That’s why we’ve teamed up with the regional public health groups within the TUC Southern & Eastern Region to produce this toolkit.

It is right that we should also be looking at problems such as stress, general health and well-being. We should be negotiating on unsociable work patterns and unfair performance management systems that put stress on staff and are detrimental to the long-term interests of workers and employers.

This toolkit is a resource for all reps, but especially union learning reps. It will help union learning reps provide employers, fellow workers and the community with relevant information about ill health and poor work, and has three aims:

- to help reps raise awareness among workers of what they can do to improve their health and well-being
- to help reps raise workplace issues around health and well-being with their employers
- to help reps find out where they can access further information and resources.

Obviously, improving the health and well-being of working people is desirable for its own sake, but there is a sound economic reason to do so as well. Improving workers’ health and well-being can result in productivity increases – a gain for employers – and can improve pay and the quality of working life.

Barry Francis
Regional Manager
unionlearn Southern & Eastern

“I encourage use of the toolkit and much hope that it will help in improving the way we support working people in maintaining their physical and mental health and well-being.”

Introduction

One of the most important roles a trade union can play is to ensure the welfare, health and safety of its members. For nearly two hundred years this has been one of the ‘added values’ of trade union organisation. Independent academic evidence shows that trade union safety representatives can make the workplace twice as safe as those workplaces that don’t recognise a union.

Trade unions are now building upon the work undertaken by safety representatives in preventing accidents and injury, and in so doing improving the effectiveness of their organisations, by promoting and developing better health and greater well-being. By developing a proactive approach as champions of good health, trade unions can and do make a real difference to the quality of life of working people – the principal objective of trade unions.

Evidence of trade union contribution to improved health and well-being for individuals is clear and compelling, employers benefit from dramatically lower levels of absenteeism, and increased productivity – there are few more apparent ‘win-win’ situations. As trade unions and employers step up their partnership work in this area, with the support and encouragement of the health service, these benefits will grow.

A poor approach to health and well-being at work is bad news for workers and employers and places an unnecessary, avoidable pressure on the health service. Additionally, improving health and well-being in the workplace will also result in improvements in the health of workers’ families and friends. This guide will assist trade union representatives in developing knowledge of this agenda and engaging with employers to improve health and well-being in Britain’s workplaces.

On the following pages we discuss strategies and initiatives to identify and overcome ill health issues at work.
The business case for well-being

Introduction

A business case is often the justification for initiating a task or project. In terms of workplace health it can reference cost savings to an organisation (for example a reduction in sickness absence) or the benefits to an organisation of a health promotion initiative (for example enhanced team working leading to greater productivity). Many business cases have already been made that justify investment in workplace health and these can help you make yours.

The introduction to the Workplace Wellbeing Charter www.wellbeingcharter.org.uk also gives the business case to take action on workplace health and well-being. The self-assessment standards provide a clear step-by-step guide of what to do.

Key facts

- It is estimated that ill health among the UK’s working-age population costs the economy £100bn each year – equivalent to the annual cost of running the NHS and the GDP of Portugal.
- Ford Plant saw a 33 per cent increase in production volume following implementation of its skills for life strategy.
- Lost output due to mental ill health is estimated to be £6.2bn per year.
- After introducing a ‘Shape-up’ programme to improve the health of staff, a manufacturing company in Brighton reported substantial improvements in productivity as employee absence levels as a proportion of production hours fell from 2.11 per cent in 2008 to 1.94 per cent in 2010 – an estimated cost saving of £20,000.

Considerations for you and your employer

- Is the business case for investing in workplace health understood and acted on by staff and management?
- Is there a mechanism for knowing if the work people are doing now will affect their health in the future? If not, is this being addressed?
- If say 20 per cent of workers are underperforming because of ill health, does your organisation have ways for finding out how this impacts on the organisation, for example patient care or productivity (for example, staff survey, return-to-work interview, production figures)?
- Is a skills audit required?
- Are managers competent and confident – i.e. is this a well-managed organisation that enables staff engagement and promotes resilience?
- What will be the impact of any proposed change in the way of working on the mental/physical well-being of staff involved? Do changes to management procedures your company make include impact assessment on mental well-being and staff engagement?

Tools and resources

Advisory, Conciliation and Arbitration Service (ACAS)
Advisory booklets and tools can be downloaded free of charge from www.acas.org.uk.
- Health, Work and Wellbeing
- How to Manage Change
- Staff Engagement Survey

Department for Work and Pensions (DWP)
The Health, Work and Well-being website www.dwp.gov.uk/health-work-and-well-being includes the following documents in its resources section:
- Working for a Healthier Tomorrow (Dame Carol Black’s review, 2009)
- Building the Case for Wellness (PricewaterhouseCoopers, 2008)
- Is work good for your health? (Waddell and Burton, 2006)
- Is work good for your mental health? (Stepaniuk and Stansfeld, 2010)
- How to Manage Change
- Is work good for your health? (Stephen Beven, The Work Foundation, 2010) outlines the reasons why businesses should invest in workplace health and well-being.

“The business case for well-being...”

Good Jobs, Good for Health and Good for Business Campaign
A collection of case studies of businesses that have invested in health at work and seen the benefits. The Royal Mail, BT, Transport for London and Tate & Lyle studies have all measured the impact of investing in health at work www.london.gov.uk/lhc/goodjobs/case-studies/index.jsp

Centre for Mental Health
The Mental Health at Work: Developing the business case briefing paper focuses specifically on the costs of poor mental health to the workplace www.centreformentalhealth.org.uk/pdfs/mental_health_at_work.pdf

Useful reports for the evidence to build the business case
- Healthy Work: Evidence into action (Bupa, 2010) gives examples of what has worked in improving health and well-being in the workplace.
- Healthy Work: Challenges and opportunities to 2010 (Bupa, 2009) details some of the health challenges that face employers in the future such as an ageing workforce and the rise in long-term conditions and chronic illnesses, building the case for ‘why do it’.

The Business Case for Employee Health and Well-being
(Stephen Beven, The Work Foundation, 2010) outlines the reasons why businesses should invest in workplace health and well-being.
Health needs assessment

Introduction

A health needs assessment (HNA) is a survey of the health and well-being of staff in an organisation. It will often ask questions about people’s current behaviours around exercise, eating, smoking, sleep, drugs, alcohol, stress and bullying. The data collected informs what needs to be done and helps prioritise activities. It can also be a benchmark to measure progress over time and evaluate the effectiveness of workplace health activities. It is important that the information collected is confidential and data protected.

Key facts

- A validated health needs questionnaire is the most useful (i.e. the questions have been proven to get the best information available) but it needs to be relatively short and punchy or people may get bored and not complete it.
- The union should be consulted and involved in undertaking the health needs assessment. Most importantly, union reps should be involved in the evaluation of results and action planning going forward.
- Expect people to under-report how much they drink and overestimate how much they exercise!
- If a health needs assessment survey is run in your organisation, do something with the information. Just running a survey will not in itself improve the workplace environment on physical and/or mental health.

Considerations for you and your employer

- Is it useful to run a health needs assessment alongside a union learning rep (ULR) learning needs or staff engagement survey?
- For best results, the approach to the survey should be agreed jointly between the union and managers.
- Have you sought occupational health support (if appropriate) for its input in drafting the survey, evaluating the results and designing the action plan to improve the health and well-being of staff?

Tools and resources

National Institute for Health and Clinical Excellence (NICE)
The report Building Blocks for a Healthier Workplace: Health needs assessment guidance www.nice.org.uk/nicemedia/documents/buildingblockshealthierworkplace.pdf provides practical advice and a model questionnaire. Although it was specifically designed for use within the NHS, it could be adapted for use within different types of organisations. The guidance includes a question asking for views of the possible risk of a number of aspects of the workplace environment on physical and/or mental health.

British Heart Foundation
The British Heart Foundation has a number of questionnaires, along with a sample mental health policy and useful factsheets: www.bhf.org.uk/healthatwork/wellbeing/downloads/download_now.aspx

Data Protection Personal Records
For guidance on the regulations on personal health data, go to: www.dh.gov.uk/en/managingyourorganisation/informationpolicy/recordsmanagement/DH_4000489

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East Midlands Public Health Observatory
The report Health, Work and Well-being: Employee health needs assessment methods and tools www.empho.org.uk/viewresource.aspx?id=12479 provides information on:
- health needs assessments and surveys, including a model health needs assessment questionnaire
- recommended questions and topics for different health subjects
- detailed appendices of other useful sources of information.

The report itself is long, but the annexes are very useful and it gives the rationale for why the questions are asked in such a way.

Happy Ltd
Happy Ltd is a training company providing courses across a range of subjects. One area of expertise is how to make your organisation a better place to work and improve its potential. To assist with this, it provides a free survey to help measure the happiness of your staff at www.happy.co.uk/happy-people/services/free-online-survey

Investors in People (IIP)
The Investors in People website includes details of the Health and Wellbeing Good Practice Award and with a free diagnostic tool to measure current performance. There are also more than 60 downloads to help improve health and well-being in your organisation at www.investorsinpeople.co.uk/interactives/awards/hwaward/pages/gettingstarted.aspx

Department for Work and Pensions (DWP)
For the DWP research reports examining GP, employer and employee attitudes and behaviours towards health and well-being at work go to www.dwp.gov.uk/health-work-and-well-being/news/#research
Introduction

Most sickness absence is genuine and most unauthorised absence is due to family commitments or stress. However, long periods or regular sickness absence can indicate a workplace health issue that needs to be addressed.

The term ‘managing attendance’ describes a proactive approach to collecting, analysing and evaluating the reasons for absence and taking steps to reduce lost days. At its best, it is a strategic and holistic approach to:

- help keep all employees healthy and accident free
- support those who are unwell get better and return to work
- support those with long-term conditions or caring roles to remain in work
- allowing those who are no longer able to work to exit with dignity.

Key facts

- It is estimated that about 2.2 per cent of working time or 4.9 days per worker per year are lost to sickness absence.4
- Fewer than half of the organisations in the CIPD 2011 absence survey monitored the cost of absence in their organisation.
- The median cost of absence per employee in the CIPD 2011 survey was £673 per employee – up from £600 in 2010.
- After minor illnesses (colds, flu, sickness and diarrhoea), stress, back pain and musculoskeletal injuries are the next most common causes of short-term absence.
- According to the CIPD 2011 survey, home/family responsibilities are in the top five most common causes for absence in two-fifths of organisations.
- The CIPD 2011 survey also revealed that two-fifths of organisations reported an increase in stress-related absences over the past year.

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Considerations for you and your employer

- Is absence data collected, analysed, evaluated and subsequently acted upon? Are there training needs for managers, supervisors or HR to enable them to do this?
- Is the absence data shared with the union reps and are they given adequate training to help them analyse and evaluate the data?
- A return to work discussion/interview is one of the most effective methods for managing sickness absence. Are your managers/supervisors confident and competent in conducting return to work interviews? Have they received training?
- Are union reps trained to be able to support workers returning to work?
- Some people need adjustments to their work or environment to be able to remain in work. Are the union, staff and managers aware of services, information and guidance that can support people who are ill or have a long-term health condition or a disability to remain at work?
- Do the union reps and managers clearly understand the difference between ‘can’t do’ (i.e. capability) and ‘won’t do’ (i.e. disciplinary)? Have they been trained in using capability/disciplinary procedures?

Tools and resources

- Advisory, Conciliation and Arbitration Service (ACAS) www.acas.org.uk
  - Managing Attendance and Staff Turnover booklet download (see Advice A–Z, then ‘Absence’).
  - Free e-learning module on managing attendance available under ‘Training and Business Solutions’.
  - Information and guidance on use of the fit note, advice on the fit note for employers and employees at www.dwp.gov.uk

Chartered Institute for Personnel and Development (CIPD)

CIPD, the professional body for HR, has produced factsheets and practical tools for developing policy and managing absence, managing back pain, managing cancer and much more at www.cipd.co.uk

- “Sickness Absence Survey 2011” report.

Health and Safety Executive

The HSE website www.hse.gov.uk/guidance/topics.htm has guidance and advice on a wide range of occupational health-related conditions and illnesses, return to work and managing absence.

Institution of Occupational Health and Safety (IOSSH), the chartered body for health and safety professionals, has a range of guidance and tools at www.iosh.co.uk/information_and_resources/guidance_and_tools.aspx

- “A Healthy Return: Good practice guide to rehabilitating people at work”
- “Working Well: Guidance on promoting health and wellbeing at work”
- “Occupational Health Toolkit”

NHS Choices

Information on a wide range of workplace health topics and tools at www.nhs.uk/livewell/workplacehealth/pages/workplacehome.aspx

Your Work Health

Advice and help at www.yourworkhealth.com for employees with fluctuating and chronic conditions. Information and support for employers, managers and employees about retaining those with such conditions in work and links to Diabetes UK, Macmillan, Parkinson UK, the Tenance Higgins Trust and the MS Society.

Department of Work and Pensions

Health at Work: An independent review of sickness absence, Dame Carol Black and David Frost, Nov 2011 www.dwp.gov.uk/docs/health-at-work.pdf

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“IT IS ESTIMATED THAT ABOUT 2.2 PER CENT OF WORKING TIME OR 4.9 DAYS PER WORKER PER YEAR ARE LOST TO SICKNESS ABSENCE.”
Alcohol and drugs

Introduction

Drink- and drug-related problems are one of the commonest causes of sickness absence. The HSE estimates that alcohol causes 3–5 per cent of all absences from work (8–14 million lost working days each year), yet a large number of organisations do not have a drug and alcohol policy.

Key facts

- 20–25% of accidents at work involve intoxicated people injuring themselves and innocent victims.⁴
- Work problems resulting from hangovers or being drunk at work include: difficulty concentrating, reduced productivity, tiredness and mistakes.⁷
- 77% of employers interviewed identified alcohol as a major threat to employee well-being and a factor encouraging sickness absence.⁸
- The total alcohol-related output loss to the UK economy is £6.4bn.⁹
- There were 2,747 drug poisoning deaths in 2010.¹⁰

Considerations for you and your employer

- Workplaces can break down the ‘myths’ associated with harmful drinking and addiction by carrying out staff awareness campaigns (Alcohol Awareness Week is in November).
- Do staff have confidential access to or information about effective support (for example, employee assistance programme, debt counselling)? Is the referral process to support clear, effective and known?
- Are union reps trained to be able to advise members of where to get help and advice?
- Are managers aware of the possible indicators of drug or alcohol misuse (for example, patterns of depression or fatigue, absenteeism – short-term/frequent patterns, erratic performance or underperformance)?
- Does your organisation have a drugs and alcohol policy?
- Is it reviewed and consulted on? Do union reps, managers and staff know about it? Are managers and union representatives trained and confident in recognising and handling appropriately drug and alcohol issues?

Tools and resources

Adfam
Adfam provides support to people working with family members who are affected by alcohol and drugs. www.adfam.org.uk

Alcohol Learning Centre
Clear identification of support available for managers attempting to support staff experiencing problems. www.alcohollearningcentre.org.uk

Chartered Institute of Personal and Development (CPD)
CPD has produced Managing Drugs and Alcohol Misuse in the Workplace: A guide for people management professionals. www.cipd.co.uk

City of London
Tackling Alcohol and Drugs in the Workplace: A toolkit for businesses. www.cityoflondon.gov.uk

Don’t Mix It!
Don’t Mix It! A guide for employers on alcohol and substance abuse at work and advice for employers concerning the actions that should be taken when developing an alcohol and substance policy. www.don-tmix-it.co.uk

Health and Safety Executive (HSE)
Government policy regarding alcohol and substance abuse at work and advice for employers concerning the actions that should be taken when developing an alcohol and substance policy. www.hse.gov.uk

Institute of Alcohol Studies
A charity aimed at improving education about alcohol in the UK. Its website www.ias.org.uk contains downloadable factsheets complete with facts and figures.

Talk to Frank
www.talktofrank.com
Talk to Frank’s national helpline offers free confidential help and information about drugs 24 hours a day (+44)0300 77 66 00. Also identification of local support and information services via postcode and the availability of provision from local services.

Trade Union Congress (TUC)
www.tuc.org.uk
The TUC guide Drunk or disordered presents proper policies to deal with the effects of substance misuse, and constructive procedures for supporting employees.

“The total alcohol-related output loss to the UK economy is £6.4bn”
Healthy eating

Introduction

A balanced diet is recommended as one based on starchy foods such as rice and pasta, plenty of fruit and vegetables, some protein-rich foods such as meat, fish and lentils, and some milk and dairy foods – and not too much fat, salt or sugar.11

Key facts

- If current obesity patterns continue, by 2050 about 60 per cent of men, 50 per cent of women and 25 per cent of children in the UK will be obese.22
- Healthy eating reduces the risk of cardiovascular disease, diabetes and certain cancers.
- Workplaces can encourage healthy eating in a number of ways, for example by making it easier for employees to access healthy food options through canteen provision, making fruit and water easily available to staff and promoting health information.
- Poor eating habits, such as skipping breakfast or lunch, is believed to cost employers £16.85 billion a year, equivalent to a loss in productivity of almost 97 million working days.13
- As we spend up to 60 per cent of our waking hours and consume at least a third of our daily calorie intake at work it makes an ideal environment to positively influence eating habits.44
- Provision of healthier foods can contribute to better attainment, less disruptive behaviour and higher productivity. In the longer term it can contribute to a reduction in sick pay and treatment costs.45

Considerations for you and your employer

- Has the workplace linked to any initiatives to promote healthy eating (for example, the Change4Life employer campaign or Responsibility Deal pledge on healthy eating)?
- Does the current catering provision promote healthy options, and are these reasonably priced?
- Has there been a staff survey that included questions about healthy eating? Have staff been asked whether they would like the workplace to promote healthier food choices?
- How many parents are there in the organisation that may be concerned about the eating habits of their children? Is this something that the skills budget can help address (for example, an ‘eat well’ lunchtime class)?

Tools and resources

Let’s Get Cooking
Provides training, resources and support to help people train others in healthy cooking at www.letsgetcooking.org.uk/Workwithus/Demonstrator/Training

Sustain
The Good Food Training project, which took place with caterers and buyers in public sector institutions in London, provides information and food training www.sustainweb.org/goodfoodtraining

Business in the Community
BITC practical guidance in promoting healthy eating in companies as part of an integrated health and well being programme www.bitc.org.uk/resources/publications/healthy-eating.html

British Heart Foundation
Free resources on physical activity, healthy eating and mental wellbeing from www.bhf.org/uk/healthatwork

Change for Life
The Change for Life employer pack helps to encourage healthier workspaces. It includes posters, challenge guides and tray liners www.nhs.uk/change4life/employer公立spaces/gutmentools.acms

Responsibility Deal
The government’s Responsibility Deal has been established to tap into the potential for businesses and other organisations to improve public health and tackle health inequalities through their influence over food, alcohol, physical activity and health in the workplace. The Health at Work pledges include ensuring the availability of healthier foods and beverages in all available channels to employees. Encourage your employer to make a pledge at www.dh.gov.uk/en/publichealth/publications/theresponsibilitydeal/index.htm

Further reading

Well London Eat Well Project
www.london.gov.uk/welllondon/projects/eatwell

Guidance on food served to adults in major institutions www.food.gov.uk/multimedia/pdfs/institutionguide.pdf

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If current obesity patterns continue, by 2050 about 60 per cent of men, 50 per cent of women and 25 per cent of children in the UK will be obese”
**Mental health and stress**

### Introduction

Mental health refers to how we think, feel and behave. According to the World Health Organisation (WHO), mental health is “a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community”. Our mental well-being is about our ability to manage life’s problems and make the most of opportunities. Both affect our daily life, relationships and our physical health.

The Health and Safety Executive (HSE) defines stress as “the adverse reaction people have to excessive pressures or other types of demand placed on them at work”. It is a natural reaction to too much pressure, which if ongoing can affect both mental and physical health.

### Key facts

- At any one time one worker in six will be experiencing depression, anxiety or problems relating to stress.
- Being in employment and maintaining social contacts improves mental health, prevents suicide and reduces reliance on health services.
- Employers have legal duties under the Equality Act 2010 not to discriminate against disabled employees and job applicants, including people whose mental health problems result in them being disabled. It places a duty on employers and service providers to make ‘reasonable adjustments’ to enable disabled people to work and access services.
- British business could save up to £8 billion a year if it managed mental health at work more effectively.
- BT has reported that its mental well-being strategy has led to a reduction of 30 per cent in mental health-related sickness absence, and a return to work rate of 75 per cent for people absent for more than six months.

### Considerations for you and your employer

- Is information about mental health and well-being readily available to employees?
- Has your workplace done a workplace stress audit/organisational stress risk assessment? See HSE below for explanation and guidance.
- Review current training in place to support managers in understanding how to effectively manage staff experiencing mental health problems.
- Ask human resources to look at its occupational health contract. Is it meeting current needs? Is the provider working towards the Occupational Health Service Standards?

### Tools and resources

#### Advisory, Conciliation and Arbitration Service (ACAS)

- Advisory booklet Managing Stress in the Workplace.
- Guidance for employers and employees through the advice leaflet Bullying and Harassment at Work.
- Free e-learning package on bullying and harassment.

#### CIPD and Mind

- Managing and Supporting Mental Health at Work: Disclosure tools for managers www.mind.org.uk.
- Useful guidance and practical tools for managing and supporting mental health at work. The Prevention, Early Intervention, and Rehabilitation section may be of particular use in terms of providing practical advice or tools for employers.

#### Health and Safety Executive (HSE)

- Management Standards for Work Related Stress www.hse.gov.uk/stress/standards. The Management Standards define the characteristics of an organisation where the risks from work-related stress are being effectively managed and controlled. Managers can also access a ‘stress management competency indicator tool’ to assess their effectiveness at preventing and reducing stress in staff. This is available at preventingstress.hse.gov.uk/content/OnlineTools.aspx.

#### Mindful Employer

- Information on mental health and employment, including:
  - A guide for employers about how to get the most out of staff by caring for their mental well-being.
  - How you can look after yourself at work and stay healthy.
  - The latest news about mental health and employment from across the web.
- An interactive map (for London only) locating your nearest psychological therapies support service.

### “British business could save up to £8 billion a year if it managed mental health at work more effectively.”

- A work culture that supports people to talk openly about their mental health is also recommended. Is this happening? Contact Mindful Employer (see below) for ideas and help in achieving this.
- How well does the current sickness absence management system record mental health as a reason for absence? Is well-being being discussed in performance management appraisals?
- Does your staff survey effectively get a picture of mental well-being among staff?
- Are relationship breakdowns or bullying effectively handled? Has bullying and harassment awareness training been given to union reps, staff and managers?
- Is there a mental health and well-being policy in place?
**Physical activity**

**Introduction**

Physical activity is any activity that enhances overall fitness through using energy. There is much evidence that supports how physical activity promotes health and well-being – from reducing risk of cardiovascular disease, certain cancers and diabetes to improving mental well-being. Evidence also shows the workplace can play a key role in promoting physical activity and building physical activity into people’s daily lives.

**Key facts**

- Physical activity programmes at work have been found to reduce absenteeism by up to 20 per cent and physically active workers take 27 per cent fewer sick days.
- People who exercise regularly are up to 50 per cent less likely to be at risk of major chronic diseases such as coronary heart diseases, stroke, diabetes and cancer.
- People exercise regularly are up to 50 per cent less likely to be at risk of major chronic diseases such as coronary heart diseases, stroke, diabetes and cancer.
- Less than 30 per cent of the UK population exercises regularly.
- Physical activity improves self esteem, helps individuals sleep better, lowers risk of stress, musculoskeletal injuries and back pain and makes individuals feel happier, more engaged and more productive.
- Starting moderate exercise from no exercise halves the risk of a heart attack and stroke. Regular exercise helps prevent high blood pressure or reduce it if it is high.

**Considerations for you and your employer**

- Does the work environment support physical activity (for example, an attractive stairwell to make taking the stairs rather than the lift more appealing, or secure bike facilities)?
- Are local physical activity opportunities advertised in the workplace (for example, on noticeboards or in internal newsletters)?
- Has the union rep or your employer negotiated corporate discounts or ‘laster’ sessions at reduced rates with local providers (for example, the local swimming pool, gym or leisure centre)? Can local providers help in promoting activities by doing demonstrations at lunchtimes or organising health and well-being days?
- Do senior managers lead by example (for example, joining in work lunchtime walk groups, using the stairs instead of the lifts)?
- Are staff allowed and encouraged to organise lunchtime or after-work physical activities (for example, walking groups, yoga, five-a-side football)?
- Are sedentary workers encouraged to stretch, and to get away from their desk or bench (for example, to walk to the printer or other equipment)?

**Tools and resources**

- **British Heart Foundation**
  Health at Work. A range of resources is available, including a free Think Fit pack at [www.bhf.org.uk/healthatwork](http://www.bhf.org.uk/healthatwork).
- **National Institute for Health and Clinical Excellence (NICE)**
  Providing guidance on physical activity in the workplace and a business case to help calculate the potential benefits and costs of developing a workplace physical activity scheme.
  - [www.nice.org.uk](http://www.nice.org.uk)
- **Sport England**
  Contacts for local authority leisure services and county sports partnerships.
  - [www.sportengland.org](http://www.sportengland.org)
- **Sustrans**
  A UK charity that encourages the promotion of travel by alternative means, such as by foot or by bicycle, including travel to and from work. It provides advice on how to change common travel methods, such as the implementation and maintenance of developing a workplace physical activity scheme.
  - [www.sustrans.org.uk](http://www.sustrans.org.uk)
- **Walking Works**
  Offer free resources to employers who would like to encourage their employees to walk more.
  - [www.walkingworks.org.uk](http://www.walkingworks.org.uk)
- **Transport for London (TfL) Cycling workplace package**
  If your London business is 15 km from a cycle superhighway, you can sign up to the TfL cycling workplace package. This can include free support for cycle stands, cycle training and cycle maintenance sessions, as well as promotional materials for display. Businesses need to have more than 50 employees on site to qualify.
  - [www.tfl.gov.uk/roadusers/cycling/14120.aspx#section-2](http://www.tfl.gov.uk/roadusers/cycling/14120.aspx#section-2)
- **Walking for Health**
  The Walking for Health website at [www.wfh.naturalengland.org.uk](http://www.wfh.naturalengland.org.uk) supplies information on existing walks to satisfy every interest. Log on to access local walk groups and discover the unknown benefits of walking.
  - [www.walkingforhealth.org.uk](http://www.walkingforhealth.org.uk)
- **Walking for Health**
  Free resources to employers who would like to encourage their employees to walk more.
  - [www.walkit.com](http://www.walkit.com)
- **Walking for Health**
  Web resource How can I fit health and fitness around the demands of my working life? at [www.worksmart.org.uk/career/how_can_i_fit_health_and_fitness](http://www.worksmart.org.uk/career/how_can_i_fit_health_and_fitness).
Strategies and initiatives

Smoking and tobacco-related ill health

Introduction

Smoking is a significant cause of preventable ill health and early death. Following surgery, it also contributes to lower survival rates, post-operative respiratory complications and poor healing.22

Key facts

- Around 8 million people in England smoke, resulting in 80,000 smoking-related deaths every year in London and the south-east.23
- In the last 10 years, NHS Stop Smoking Services in the south-east have helped 4 million people set quit dates, with more than 2 million successfully quitting – around 70,000 lives saved.24
- The prevalence of smoking among all adults in the east of England, south-east and London is currently 20 per cent (NHS Information Centre 2010).25
- Smoking in routine and manual worker groups is much higher than in managerial professions is much higher than in managerial professions.26
- There are currently around 1.2 million smokers in the south-east region, and nearly 20,000 smoking-related deaths every year.21
- Around 8 million people in England smoke, resulting in 80,000 smoking-related deaths per year.26
- In the last 10 years, NHS Stop Smoking Services in the south-east have helped 4 million people set quit dates, with more than 2 million successfully quitting – around 70,000 lives saved.24
- Two out of three smokers say they would like to quit.27
- Around 8 million people in England smoke, resulting in 80,000 smoking-related deaths per year.26

Considerations for you and your employer

- Is information on local Stop Smoking services available to all staff (for example, on posters, pay slips, information in communal areas and staff newsletters, and links via the internet to local NHS Stop Smoking services)?
- Are employers, managers and union representatives proactive in promoting and championing a smoke-free environment, liaising with Stop Smoking services where appropriate? Are there any information or training needs?
- Are employers, managers and union representatives supportive of those who wish to quit or extend their smoke-free time, making use of any training offered by local Stop Smoking services?
- Are Stop Smoking sessions promoted to and accessible for all employees regardless of shift patterns and hours of work?

“Around 8 million people in England smoke, resulting in 80,000 smoking related deaths per year.”26

Where possible, Stop Smoking groups should be accommodated in the place of work, or nearby, and staff given paid time to attend support sessions.

The cost of prescriptions for medications to assist with stopping smoking could be refunded by the employer.

Stop Smoking initiatives could be co-ordinated with other health improvement activities such as diet and nutrition classes, increasing take-up of physical activity (for example, cycling to work, in-company exercise activities).

Tools and resources

NHS
NHS Smokefree www.smokefree.nhs.uk provides advice and information on methods to help quit smoking, including tools such as cost calculators, addiction tests, phone apps, stress-busting MP3 downloads and much more, and also where to find your local NHS Stop Smoking Service.

National Institute for Health and Clinical Excellence (NICE)
www.nice.org.uk

Further reading


Health inequalities

Introduction

Equality is about ‘creating a fairer society, where everyone can participate and has the opportunity to fulfil their potential’.26 Where people live, their age, gender, ethnicity, educational attainment and whether or not they have a disability impact on a person’s health and well-being, how long they live, the types of diseases and long-term conditions they may experience and for how long, their access to health care, rehabilitation and support services. Put simply, the lower one’s social and economic status, the poorer one’s health is likely to be.

“Reducing health inequalities is a matter of fairness and social justice” (Chair of the Independent Review of Health Inequalities “Reducing health inequalities is a matter of fairness and social justice” (Chair of the Independent Review of Health Inequalities (The Marmot Review), 2010).

Key facts

- People living in the poorest neighbourhoods in England will on average die seven years earlier than people living in the richest neighbourhoods, 10
- People living in poorer areas not only die sooner, but also spend more of their lives with disability – an average total difference of 17 years.28
- Jobs that are insecure, low paid and that fail to protect employees from stress and danger make people ill.29
- Men develop many serious illnesses earlier than women — 10–15 years earlier in the case of heart disease.30
- Disabled people and people with long-term illnesses experience greater negative treatment in the workplace compared to their non-disabled counterparts 31
- Disabled people and people with long-term illnesses experience greater negative treatment in the workplace compared to their non-disabled counterparts.31
- Men develop many serious illnesses earlier than women — 10–15 years earlier in the case of heart disease.29
- Jobs that are insecure, low paid and that fail to protect employees from stress and danger make people ill.29
- Considerations for you and your employer

- Has your branch looked at attendance/sickness absence data by trends or specific categories (for example, pay grade or disability)?
- Are vocational rehabilitation services such as physiotherapy, occupational health and CBT therapy available for all staff?
- Are equality impact assessments carried out before major changes such as restructuring?
- Are the needs of all staff groups being considered in learning and development plans?
- How recently has the recruitment policy been reviewed to ensure it complies entirely with current diversity and discrimination legislation? Is equality and diversity training carried out for managers and others involved in recruitment?

Tools and resources

Advisory, Conciliation and Arbitration Service (ACAS) 

M/A/C delivering diversity and equality guide, including information about monitoring, training and taking action: www.acas.org.uk/chttp?handler=ashx?id=1648

Diversity Works for London

Diversity Works for London is a Mayoral programme that encourages and supports businesses to realise the benefits of London’s diversity. By providing a range of business support the programme enables companies to improve their diversity proficiency: www.diversityworksforlondon.com

Equality and Human Rights Commission

Guidance and statutory Codes of Practice on the Equality Act 2010 as well as research, advice for individuals and good practice guidance for employers on equality, diversity and human rights: www.equalityhumanrights.com

Careers UK

Advice, guidance, an advice line and support for financial concerns. A site that might be useful to signpost employees to: www.careersuk.org

Trades Union Congress (TUC)

Equality guidance and materials produced by the TUC include:

- Representing and Supporting Members with Mental Health Problems www.tuc.org.uk/extras/mentalhealth.pdf
- Sickness Absence and Disability Discrimination www.tuc.org.uk/equality/tposg6n6-to.pdf
- Disability at Work: A trade union guide to the law and good practice www.tuc.org.uk/extras/disabilityandwork.pdf

Further reading


“People living in the poorest neighbourhoods in England will on average die seven years earlier than people living in the richest neighbourhoods”
Evaluating health and well-being activities

Introduction

Evaluation is the systematic collection, analysis, and reporting of information about a programme in a way that enables organisations to learn from their experience. Evaluation needs to be built in for any workplace health and well-being strategy, from learning and skills development to promoting physical activity. This includes initial collection of baseline data, evaluation methods that identify different groups of the workforce and an agreed range of indicators that will help you know if you are meeting your intended outcomes.

Key facts and tips

- A successful workplace health strategy will be founded in a thorough employee needs assessment, identifying the needs of all employees.
- Performance indicators need to be agreed at the beginning of the project to measure process, outcomes and impact.
- Develop simple and confidential monitoring processes. Using an independent (external) service provider for employee health checks may be advisable.
- Gather cost benefit data (for example, by using the Workplace Well-being Tool or averaging daily wage rate of a staff member) to further build the case for investment in health at work.

Considerations for you and your employer

- Is your workplace analysing workplace health indicators on an annual basis? If so, what happens as a result of this analysis?
- Is the uptake of the learning and skills programme being evaluated? Are employees from all groups in the workforce benefitting from the learning and development programme being rolled out? Could the learning and development budget be better spent?
- Are the union reps trained to analyse and evaluate the information?

Tools and resources

Investors in People
View the Investors in People evaluation sheet at: www.investorsinpeople.co.uk/interactive/awards/haward/documents/evaluating%20health%20and%20wellbeing%20programmes.pdf

Notes

2. www.bitc.org.uk/resources/case_studies/ford_skills_for.html
3. Centre for Mental Health.
5. CPD/ACAS.
7. Ibid.
8. Ibid.
9. Ibid.
11. NHS Livewell website.
17. SEU 2004; Black 2008.
## Annual health events

<table>
<thead>
<tr>
<th>Month</th>
<th>Health theme</th>
<th>Description</th>
<th>Link</th>
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<tbody>
<tr>
<td></td>
<td>awareness campaign</td>
<td>for eight weeks from the end of January 2012. This follows a pilot campaign</td>
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<td>carried out in the South West and East of England in 2011, which encouraged</td>
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<td>people with persistent symptoms to see their GP? The campaign will use radio,</td>
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<td>press and television adverts as well as associated events and activities.</td>
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<tr>
<td>February</td>
<td>National Heart Month</td>
<td>Find out how the British Heart Foundation can help you, and how you can</td>
<td><a href="http://www.bhf.org.uk">www.bhf.org.uk</a></td>
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<td></td>
<td></td>
<td>help fight heart disease. For your free Heart Information Pack visit bhf.org.uk</td>
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<td>March</td>
<td>No Smoking Day</td>
<td>The No Smoking Day campaign helps smokers who want to quit by creating</td>
<td><a href="http://www.nosmokingday.org.uk">www.nosmokingday.org.uk</a></td>
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<td>a supportive environment for them, and by highlighting the many sources of</td>
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<td>help and advice available.</td>
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<td>April</td>
<td>World Day for Safety and Health at work</td>
<td>Celebrate World Day for Safety and Health at Work in April to promote</td>
<td><a href="http://www.lfs.org/safework/events/safeday/lang-en/index.htm">www.lfs.org/safework/events/safeday/lang-en/index.htm</a></td>
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<td>the prevention of occupational accidents and diseases globally.</td>
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<td>Walk to Work Week</td>
<td>Walk to Work Week is a fun, national challenge which motivates staff to</td>
<td><a href="http://www.livingstreets.org.uk/our-projects/walking-works">www.livingstreets.org.uk/our-projects/walking-works</a></td>
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<td></td>
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<td>get fit, be active and enjoy their commute. The Week is promoted by the</td>
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<td>national charity Living Streets’ Walking Works campaign and participants</td>
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<td>are encouraged to register online and organise activities in their</td>
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<td>workplace. Walking Works provides a free online tool to record your</td>
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<td></td>
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<td>participation and see who can walk the most.</td>
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<td>May</td>
<td>Cancer Prevention Week</td>
<td>Cancer Prevention Week promotes healthy lifestyle choices that can prevent</td>
<td><a href="http://www.wcrf-uk.org">www.wcrf-uk.org</a></td>
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<td>up to a third of all cancers, including healthy eating, physical activity</td>
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<td>and maintaining a healthy weight.</td>
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<td></td>
<td>World No Tobacco Day</td>
<td>People, non-governmental organizations and governments unite on World No</td>
<td><a href="http://www.timeanddate.com/holidays/un/world-no-tobacco-day">www.timeanddate.com/holidays/un/world-no-tobacco-day</a></td>
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<td>Tobacco Day to draw attention to the health problems that tobacco use can</td>
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<td></td>
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<td>cause. It is held on 31 May each year.</td>
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<td>Fruity Friday</td>
<td></td>
<td>Fruity Friday is the World Cancer Research Fund’s (WCRF) annual UK</td>
<td><a href="http://www.fruityfriday.org">www.fruityfriday.org</a></td>
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<td>fundraising and awareness campaign with a twist. It’s a great way to</td>
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<td>get companies, schools, health professionals, and your local community</td>
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<td>involved. Fruity Friday aims to increase public awareness of the links</td>
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<td>between diet, nutrition and cancer prevention, and to raise valuable</td>
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<td></td>
<td></td>
<td>funds.</td>
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<tr>
<td>June</td>
<td>Adult Learners’ Week</td>
<td>The Adult Learners’ Week Awards recognise outstanding adult learners and</td>
<td><a href="http://www.alw.org.uk">www.alw.org.uk</a></td>
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<td></td>
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<td>inspiring learning projects. These awards are a great way to celebrate</td>
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<td></td>
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<td>your students, colleagues, family or friends.</td>
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<tr>
<td>Diabetes</td>
<td>Diabetes Week</td>
<td>Diabetes Week aims at dispelling some of the myths around diabetes and</td>
<td><a href="http://www.diabetes.org.uk">www.diabetes.org.uk</a></td>
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<td>raising awareness of healthy lifestyle.</td>
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<tr>
<td>Carers</td>
<td>Carers Week</td>
<td>Organised by 10 national charities: Carers UK, Counsel &amp; Care, Crossroads</td>
<td><a href="http://www.carersweek.org">www.carersweek.org</a></td>
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<td>Caring for Carers, Help the Hospices, Macmillan Cancer Support, MS Society,</td>
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<td>Parkinson’s Disease Society, The Princess Royal Trust for Carers, Vitalise</td>
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<td></td>
<td></td>
<td>and WRVS.</td>
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<tr>
<td>June</td>
<td>National Bike Week</td>
<td>Team Green Britain Bike Week is the UK’s biggest mass participation</td>
<td><a href="http://www.bikeweek.org.uk">www.bikeweek.org.uk</a></td>
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<td>cycling event – with almost half a million people participating at events</td>
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<td>across the country. The aim is to get more people cycling, more often, and</td>
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<td>the event offers something for everyone – from families, schools and</td>
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<td>companies, to seasoned cyclists and those who have never cycled before.</td>
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<td>Men’s Health</td>
<td>National Men’s Health Week</td>
<td>National Men’s Health Week provides a focal point for individuals and</td>
<td><a href="http://www.menshealthforum.org.uk">www.menshealthforum.org.uk</a></td>
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<td>organisations with an interest in improving men’s health. Each year the</td>
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<td>campaign focuses on a different area of men’s health.</td>
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<td>July</td>
<td>Dementia Awareness Week</td>
<td>Dementia Awareness Week takes place in England, Northern Ireland and Wales.</td>
<td><a href="http://www.alzheimers.org.uk">www.alzheimers.org.uk</a></td>
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<tr>
<td>Love Parks</td>
<td>Love Parks Week</td>
<td>Love Parks Week is an annual awareness raising campaign, organised by</td>
<td><a href="http://www.loveyourparksworld.com">www.loveyourparksworld.com</a></td>
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<td>parks charity GreenSpace.</td>
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<tr>
<td>August</td>
<td>Gut Week</td>
<td>Awareness raising events across the UK. Visit the website for more</td>
<td><a href="http://www.loveyourgut.com">www.loveyourgut.com</a></td>
</tr>
<tr>
<td>September</td>
<td>World Alzheimer’s Day</td>
<td>Every year on 21st September, Alzheimer associations across the globe</td>
<td><a href="http://www.alz.co.uk/world-alzheimers-day">www.alz.co.uk/world-alzheimers-day</a></td>
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<td></td>
<td></td>
<td>unite to recognise World Alzheimer’s Day. Raising awareness events across</td>
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<tr>
<td>October</td>
<td>Breast Cancer Awareness Month</td>
<td>Awareness raising events across the UK.</td>
<td><a href="http://www.breastcancer-care.org">www.breastcancer-care.org</a></td>
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<tr>
<td>World Mental</td>
<td>World Mental Health Day</td>
<td>World Mental Health Day is a global and unified effort to promote</td>
<td><a href="http://www.wmhday.org/soi/WorldMentalHealthDay.htm">www.wmhday.org/soi/WorldMentalHealthDay.htm</a></td>
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<td>greater public awareness and understanding of mental health and mental</td>
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<td>illness.</td>
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<tr>
<td>Back Care</td>
<td>Back Care Awareness Week</td>
<td>Awareness raising events across the UK.</td>
<td><a href="http://www.backcare.org">www.backcare.org</a></td>
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<tr>
<td>Make a</td>
<td>Make a Difference Day</td>
<td>The UK’s largest single day of volunteering. Every year tens of</td>
<td><a href="http://www.csv.org.uk/campaigns/csv-make-difference-day">www.csv.org.uk/campaigns/csv-make-difference-day</a></td>
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<tr>
<td>November</td>
<td>National Stress Awareness Day</td>
<td>International Stress Management Association’s (ISMA) UK National Stress</td>
<td><a href="http://www.isma.org.uk">www.isma.org.uk</a></td>
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<tr>
<td>Anti-Bullying</td>
<td>Anti-Bullying Week</td>
<td>Awareness raising events across the UK.</td>
<td><a href="http://www.antibullyingalliance.org.uk">www.antibullyingalliance.org.uk</a></td>
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<td></td>
<td>Alcohol Awareness week</td>
<td>Carried out by local and regional groups and organisations to raise the</td>
<td><a href="http://www.alcoholconcern.org">www.alcoholconcern.org</a></td>
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<td>awareness of the public to social and health issues surrounding alcohol.</td>
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<td>World AIDS</td>
<td>World AIDS Day</td>
<td>World AIDS Day is held on 1 December each year and is an opportunity for</td>
<td><a href="http://www.worldaidsday.org">www.worldaidsday.org</a></td>
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<td></td>
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<td>people worldwide to unite in the fight against HIV, show their support</td>
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<td>for people living with HIV and to commemorate people who have died.</td>
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<td>December</td>
<td>International Day of Persons with</td>
<td>Awareness raising events across the UK. Ambassadors are awarded to</td>
<td><a href="http://www.un.org/esac/scrollbar/enable">www.un.org/esac/scrollbar/enable</a></td>
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<td>Disabilities</td>
<td>Disabilities</td>
<td>individuals who have achieved exceptional success in promoting the</td>
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<td>rights of people with disabilities in the workplace. Each year, a</td>
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<td>Judging panel of experts will review applications and make the final</td>
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<td>decision to award the Ambassador status.</td>
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South Tyneside Homes

Background
South Tyneside Homes is an Arm’s Length Management Organisation (ALMO) set up in April 2006 and is responsible for managing, maintaining and delivering improvements to more than 20,000 homes across South Tyneside. The organisation has more than 650 employees across three Directorates.

Why was workplace health addressed?
In its 2007–2009 People Strategy, South Tyneside Homes set out to “improve the health, safety and well-being of employees through health promotion and positive support arrangements”. The strategy also recognised the need to reduce sickness absence levels and better manage employee ill health.

What was done and who was involved?
An employee Health Care Plan was introduced in direct response to feedback from staff in the 2007–2008 staff attitude survey. A more structured approach to employee involvement in health and well-being issues was then developed and now employees from all levels and areas of the organisation and union representatives work together to develop health and well-being initiatives in four key areas:

- physical well-being
- sickness absence analysis
- positive/emotional well-being
- lifestyle behaviours.

What was achieved?
To date 355 staff have been provided with a mini health MOT through South Tyneside Primary Care Trust’s Health Trainer Service. Referrals for further advice and support, making the best possible use of local initiatives, have included:

- exercise schemes (122)
- weight management programmes (109)
- self-care programmes (15)
- smoking cessation support (31)
- guided health walks (39).

The mini health MOTs, health and well-being campaigns and the Health Care Plan have all contributed to a dramatic drop in sickness levels. So far this has resulted in cost savings of over £166,000 that will be reinvested in the company to further improve services.

Warburtons, Enfield

Background
Warburtons Enfield bakery supplies bread to 100 supermarkets and grocers to the north of the M25. It has more than 400 employees.

Why was workplace health addressed?
Prior to the unionlearn project, Warburtons had already invested in the health of its staff by offering health checks to all its employees, as well as offering advice on nutrition and fitness.

What was done and who was involved?
The Enfield union learning reps, in partnership with the site HR lead and the Hygiene and Store Manager, decided to add to Warburtons Enfield’s existing healthy living theme by holding a ‘Healthy Living’ campaign over a two-day period. This included:

- cooking two healthy meals for everyone to try free of charge at the canteen facility
- goodie bags given out with healthy recipe cards and wholemeal pasta, plus a letter promoting a variety of learning courses available through the learning centre
- promotion of ‘five-a-day’ through large bowls of fruit and a large selection of exotic fruit cut into chunks and presented on platters
- a raffle with healthy living theme, with prizes including recipe books and leisure centre vouchers.

What was achieved?
The campaign was organised so that employees in all the four shifts on site could take part. It was advertised through email, posters and on-site communication screens, as well as announcements on the day.

The event was very successful, with 150 raffle tickets given out and around 150 meals served over the two days. Employees enjoyed the opportunity to learn more about healthy living in a fun environment. It also provided a forum to promote the learning centre and the Bakers, Food and Allied Workers’ Union.