Thomas Ashton Institute

Annual Lecture

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Work, Health and Wellbeing Post-pandemic

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The Thomas Ashton Institute for Risk and Regulatory Research (TAI) is a unique strategic partnership spanning faculties within The University of Manchester and the Science Hubs of HSE.

The partnership between The University of Manchester (UoM) and the Health and Safety Executive (HSE) enables the co-production of world-leading research in regulatory science by encouraging genuinely cross-disciplinary research. We tackle complex research questions that lie at the intersections of the physical, engineering, medical and social sciences and use our technical strengths, expertise and reputation to support transformational change in policy making through active engagement across our networks in government, industry, and academia.

Working with the TAI gives you access to a unique combination of skills, knowledge, and talent with a wide range of experiences (including Great Britain's national regulator), enabling us to see across the whole occupational health and safety landscape and bringing our combined expertise and lived experience to bear when delivering our work. All of this is based on a fundamental ambition to help you frame questions that will identify and fix real-world occupational safety and health problems and challenges.

Gov't Health & Work Vision 2005
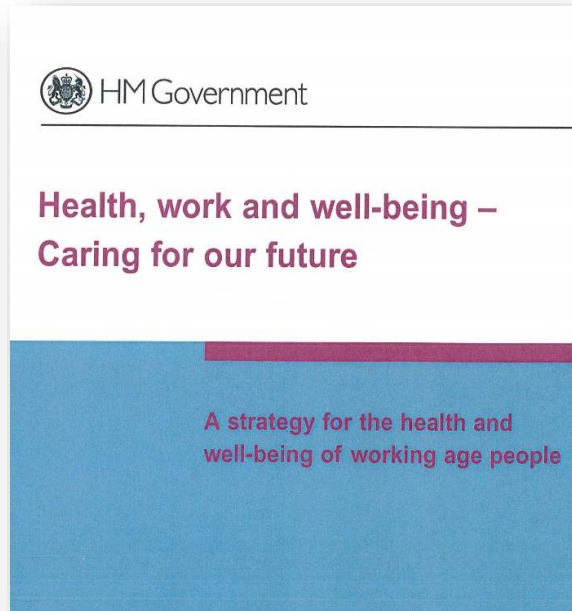
Our Vision   Achieve a society where :

- Health and Wellbeing at working age is given the attention it deserves

- Work is recognised as beneficial, and barriers to work are removed

- Healthcare promotes return to work

- Health is not adversely affected by work

- Work promotes individual and overall health and wellbeing

- People with health conditions and disabilities can work

- People make the right lifestyle choices from an early age.

Enabling a successful strategy

"**The Government, at both national and local levels, will work together with employers, trade unions, individuals, professional and voluntary bodies and other stakeholders to deliver this with determination and long-term commitment".**

A National Director for Health and Work to be appointed.

Success should lead to:

- Improvement in Health and Wellbeing at working age

- Increased employment – more people able to work, and to greater age

- Optimal attendance and performance

- Increased productivity – people more effective at work

- Reduction in health inequalities and social exclusion

- People with health problems or disabilities can optimise work opportunities.
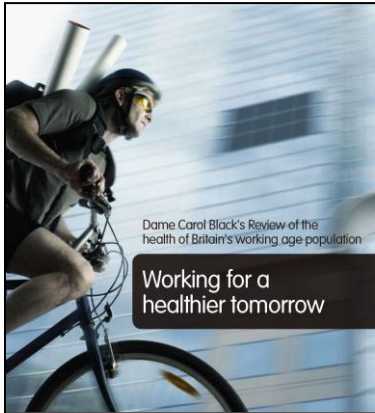
The Review set out the **first-ever baseline for the health of Britain's working-age population**, showing that we were living longer but not in good health.

"At the heart of this Review is recognition of, and concern to remedy, the human, social and economic costs of impaired health and wellbeing in relation to working life in Britain."

"The aim of the Review is to identify the factors that stand in the way of good health, and to elicit interventions, including changes in attitudes, behaviours and practice – as well as services – that can help overcome them."

Working for a Healthier Tomorrow 2008

- " Employment rate of those with a health condition is rising."

- " Many common diseases are directly linked to lifestyle factors, but these are not generally the conditions that keep people out of work. Instead common **mental health** problems and **musculoskeletal disorders** are the main concerns."

- " Securing the future health of the working-age population must start with those not yet of working age.   We should encourage young people to understand the benefits of a life in work, and what a healthy workplace offers."

  NB Things have much changed post-Covid.

2005 to 2020
No lack of evidence or strategy

- **2005** Gov't's Health and Wellbeing Strategy

- Wardell & Burton, *Is work good for your health?*   2006

- Black Review, *Working for a Healthier Tomorrow* 2008

- Boorman Review of H&WB of NHS Staff 2009

- Black/Frost Review 2012: Sickness absence

- Black Review, *Impact on Employment Outcomes of Drug or Alcohol Addiction,* 2016

- Farmer/Stevenson Report *Thriving at Work* 2017

- Taylor Report *Good Work* 2017

- Marmot *Health Equity in England* 2010 and **2020** …..

2008 – 2020: The Positives

- Gov't accepted findings of reviews, initiated programmes, etc.

- Good stakeholder engagement

- Understanding that H&WB affects absence, presenteeism, productivity

- Increased attention to MH, MSKs, chronic conditions and wellbeing.

- Workplace culture: 'good work' and healthy jobs important

- Association evident between poverty, poor education, ill-health & work.

- More disable people in work.

- Increased amount of good toolkits, guidance, and training.

- Government Health and Work Unit established.

Overall participation in the workforce rose by 3 million from 2006-2019, much due to those 50+, while participation by the young reduced.

2008 – 2020: The Challenges

- Politics, changes in government, austerity

- Sustainability of initiatives

- Consistency of delivery

- Resistance to change

- Lack of research, and workplace data.

- Lack of evaluation of ever-increasing interventions

- Training e.g. of GPs and line managers

- Chronic illnesses, Mental Health problems

- Rise of a Wellbeing/Wellness industry without evidence

- Poor, ever-decreasing, productivity

Human Productivity: last 15 years

- Despite technological advances and upskilling of the workforce, productivity per worker has stagnated.

- A factor often overlooked is the link between Health and Wellbeing of employees and their productivity.

- Economists gave health little attention.

  YET

- Workplace surveys (Vitality, RAND Europe) suggest that from 2014-19 **health-related productivity loss** increased from 16 to 33 days per worker, main cause presenteeism **mainly driven by poor Mental Health**, lack of sleep, and financial concerns.

Prophetic publication

Richard Donkin's ***The Future of Work*** 2010 :

"The history of the way we live and work is more evolutionary than revolutionary in nature."

He described trends or **migrations of practice** and habits, shifting from one norm to the next, e.g. :

- Industry to knowledge services
- Office to home
- Collective to individual
- Process to project
- Formal working hours to discretionary time
- Work across boundaries
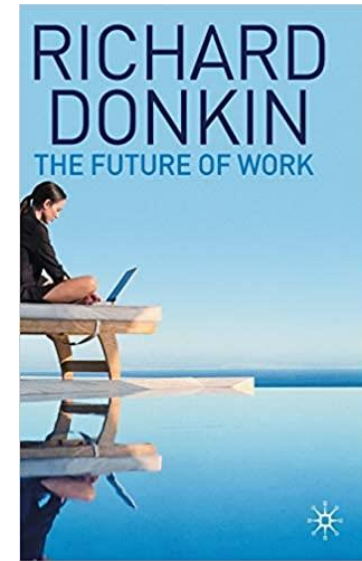
Each migration was experienced in different strengths across different sectors, industries and workplaces.

Donkin's Policy Agenda for Future Work

2010

- Understand that home is interchangeable with office. Home workers need support, trust, measurement by results.

- Give people discretion and autonomy to choose how they spend more of their time.

- Insist on relationship experience and empathy (emotional intelligence) in management, plus technical mastery.

- Promote employee health and well-being with well-designed interventions, and monitoring of outcomes.

- Retire the concept of retirement, and remove default retirement ages for all.

COVID-19 and its Effects

- a hastening of many of Donkin's predictions, some of them positive

- profound societal changes in the wrong direction

" Clear evidence, the first time since the industrial revolution, of **poor health detracting from both growth and wellbeing**."

A. Haldane, Nov 2022

Post-COVID Workplace changes

- Health and Wellbeing elevated in workplace
- Mental Health vital. Psychological safety important
- Occupational Health to the forefront
- Hybrid Working – its pros and cons
- Investment in digital structure
- Staff shortages, record unfilled vacancies.
- Leaders re-imagining how they lead
- Line managers in the spotlight
- Need for better employee experience.
- Employee voice is stronger.

Both negative and positive things have emerged.

Some of these changes were very rapid – Donkin's predictions have accelerated !

Trend: OH to the forefront

- The pandemic/post-pandemic period, showed the need for, and value of, **quality Occupational Health services.**

- For the future, we require better central understanding of, and commitment to, the need for Occupational input to strategic decision-making, both nationally and locally.

- The voice of OH should be heard at the boardroom table, to bring great depth and breadth of knowledge to support a healthy, engaged, high-performing workforce.

- SMEs need much better access to OH.

NHS Health and Wellbeing of Staff …

… of crucial importance.   **Also:**
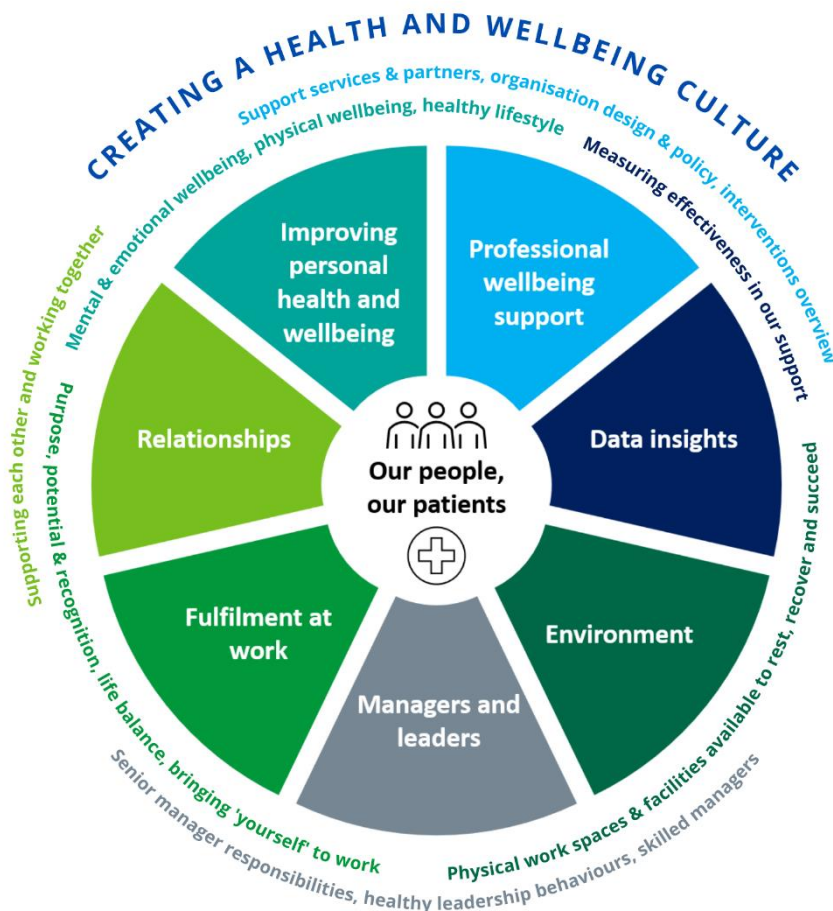
An inclusive framework

- ***Growing OH* programme:**

- developing a highly-professional, progressive, proactive, service

- Mental Health Hubs

- Health and Wellbeing Guardians, etc.

- 2023 Devolution to ICSs ?Capacity

https://www.england.nhs.uk/publication/nhs-health-and-wellbeing-framework/

Trend: Mental Health support vital

- More investment in MH training : 87% said important or above

- Wellbeing champions : 80% said a strategic priority

- Digital becomes key : 85%, digital/online MH tools important

- Proactive MH support : 98% said a business priority

- Smash stigma   :   50% said stigma stops uptake of services

- Leadership: 32% said seniors need greater awareness of MH

- Health and Safety: ISO 45003 a global-standard framework
       outlining how to manage and protect MH at Work.

Working Minds Campaign
Health and Safety Executive (HSE), Nov 2021

- Work-related stress and poor mental health risk becoming a health and safety crisis for UK workplaces.

- Last year more than 17 million working days were lost due to stress, anxiety, or depression. The charity Mind suggests that MH of 40% of employees worsened in the pandemic.

- The campaign aims to help businesses recognise the signs of work-related stress, & make tackling issues routine.

- HSE calls for culture change across UK workplaces, to treat psychological risks as well as physical ones.

- Employers should assess all workplace risks, not just physical safety, promoting an open environment.

HSE Strategy 2022-32
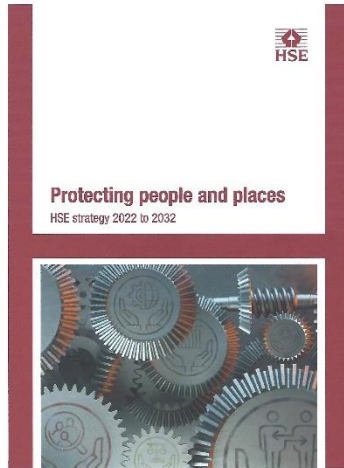
" Reduce work-related ill health, with a specific focus on mental health and stress."

Great Britain has one of the lowest rates across Europe of fatal and non-fatal work-related **injury**."

" This isn't the same for work-related **ill health**, as current trends show this is increasing.   The most commonly reported causes in Great Britain are now stress, depression, or anxiety.

We will work to reduce this trend.   Using our collective resource to focus on this problem, we will deliver interventions that make a real difference. To have a greater impact on workers' health, society and economy, wider industry and business will need to help too."

Trend: Improved Healthy Workplace Culture

Healthy Work culture is based upon:

- empowering leadership,

- capable middle managers,

- Boards engaged in promoting employees' Health and Wellbeing.

Don't just paper over the cracks !

This will not succeed in today's world.

Not just an 'add-on', embed good workplace culture in the organisation on a firm base.

Pivotal Role of the Line Manager

" Working from home has exposed managers who lack empathy, have limited interpersonal skills, or are not suited to the complex demands of people management."

" Organisational stability and future growth will be assisted by reviewing managers' suitability for the task, and by developing training curricula that strengthen the new people-management competencies that the future shape of work demands."

Working from home under COVID-19 lockdown: Transitions and Tensions.   **IES**

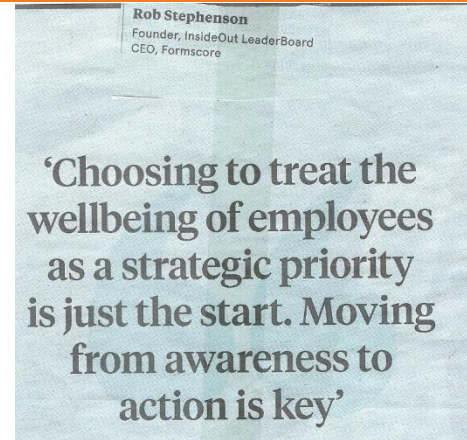# Healthier Managers don't have ill Employees
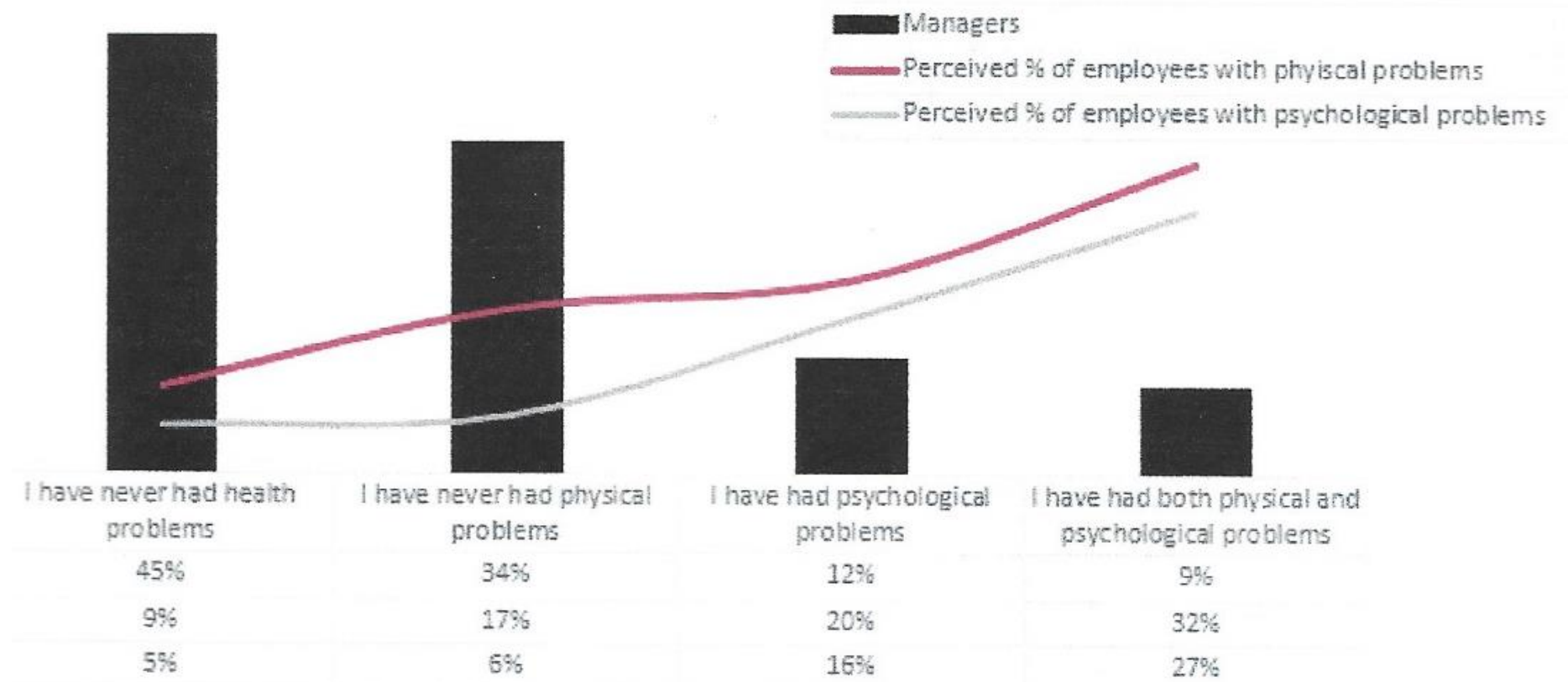
Data from a 2017 survey of 1,540 managers of small or medium-sized enterprises in German-speaking part Switzerland.

Trend: Health and Wellbeing: what works?

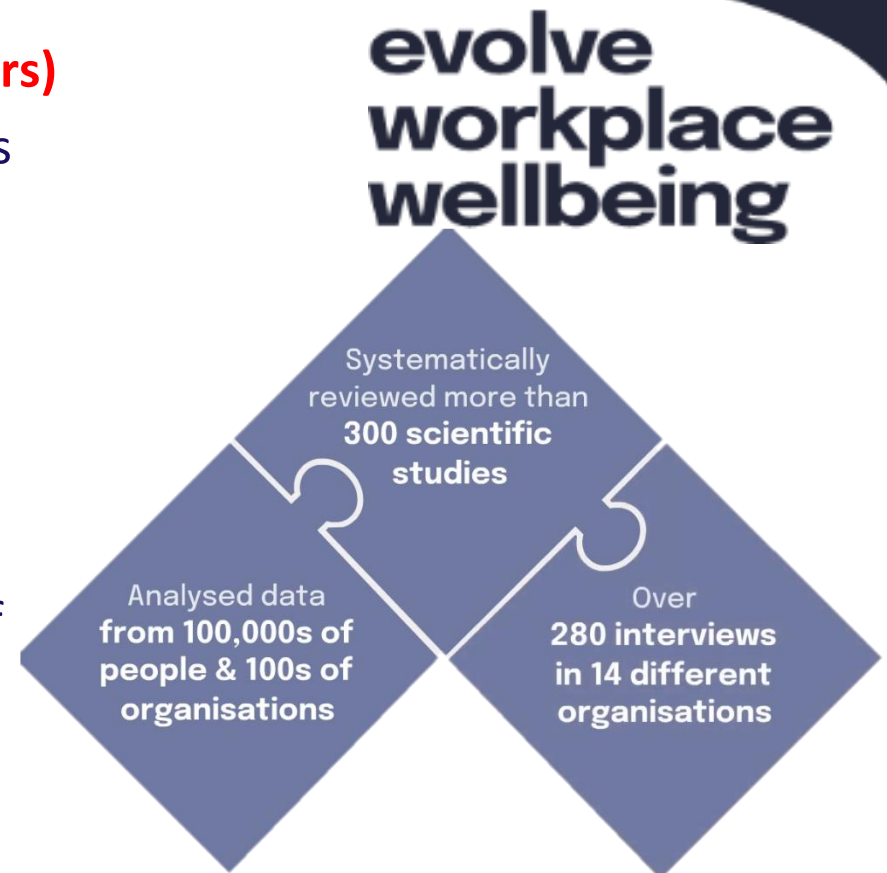Even more than before, organisations are asking:

- what works?

- how do I make it work?

- how do I establish the business case?

- where are the toolkits?

Investment in Health and Wellbeing is becoming necessary for the individual and society.

Rob Stephenson
Founder, InsideOut LeaderBoard
CEO, Formscore

'Choosing to treat the wellbeing of employees as a strategic priority is just the start. Moving from awareness to action is key'

'Our health is our wealth'

It's time to start seeing health and wellbeing as a critical business investment rather than an expense

Westfield Health

Chris Cummings
CEO
Wellbeing @ Work Global
Summit Series
www.fowinsights.com

'Now is the time to truly make health a strategic boardroom priority'

Evidence-based Wellbeing toolkit

- **Findings from ESRC-funded project (7 years)**
  - Practices and Combinations of Practices for Health and Wellbeing at Work

- The Workplace Wellbeing Research Team involves researchers from the **University of East Anglia** and **RAND Europe**, as well as affiliated researchers from the Universities of Kent, Swansea, Essex, Reading and Sheffield.


evolve workplace wellbeing

Systematically reviewed more than **300 scientific studies**

Analysed data **from 100,000s of people & 100s of organisations**

Over **280 interviews in 14 different organisations**

www.evolveworkplacewellbeing.org

University of East Anglia · RAND EUROPE · PrOPEL Hub · UKRI Economic and Social Research Council

What is the Evolve toolkit?

A toolkit of free, evidence-informed workplace wellbeing resources that draws upon cutting-edge research, and insider insights, so that you can take action to help your business evolve and thrive.

www.evolveworkplacewellbeing.org
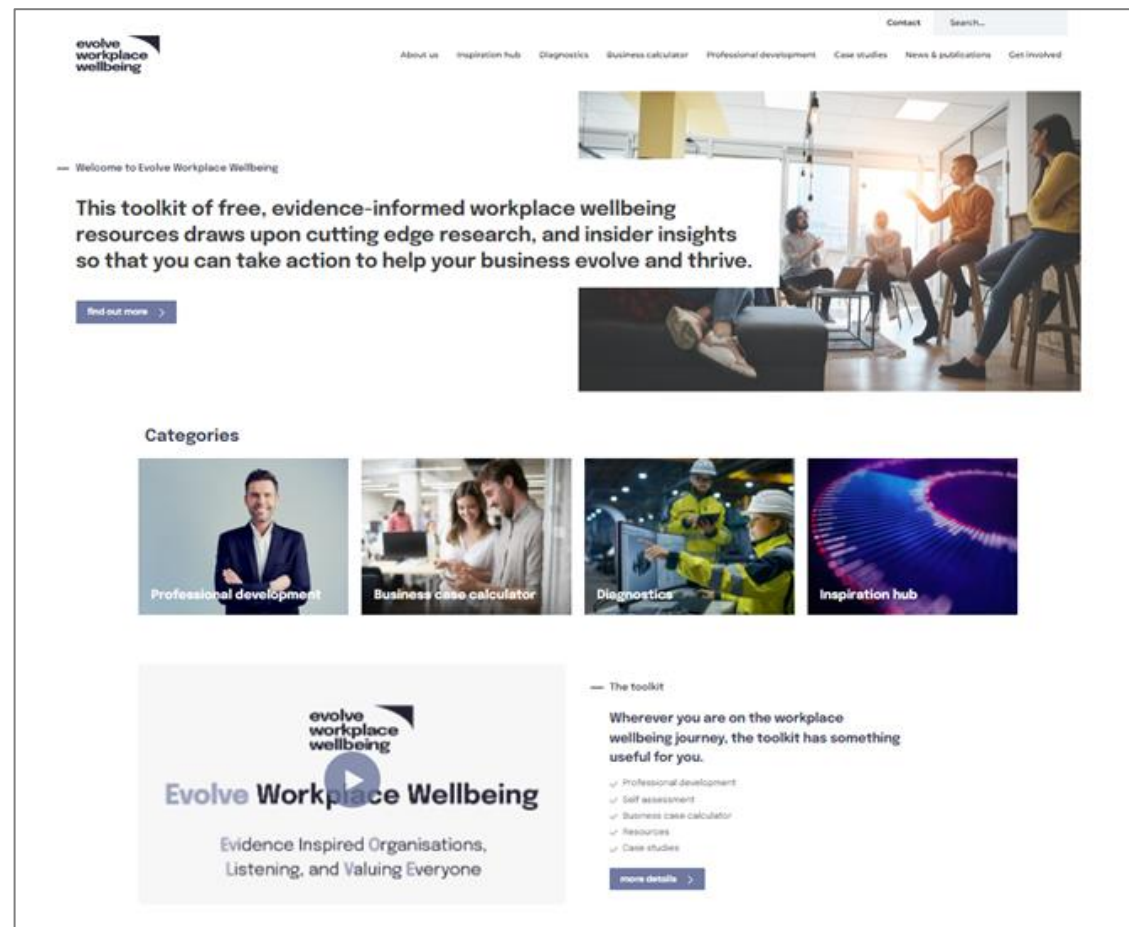
Measurement : Chris Whitty, CMO England

"

Safety and occupational diseases have been transformed by combined science-led industrial practice and legislation.

Taking the same scientific approach to testing interventions to promote health at work could be the key to advances in the next decade.

Many organisations that are systematic and evidence–led about efficiency, productivity and investment are unsystematic on health improvement.

Health gains are largely measurable, and methods such as randomised control trials should allow us to test rigorously which interventions work. "

FT Supplement Health at Work, Nov 2019

IES Trials Unit

- Brings together expertise from different research perspectives and subject disciplines, to share best practice and use the most robust counter-factual designs to get to the heart of understanding and evaluating interventions.

- May 2023 a growing order-book of trials and studies, with FTSE 100 firms, Early Education Foundation, Government funding, etc.

- Methodology from Randomised Control Trials through to quasi-experimental designs

Work from home or return to the office?

2023

BBC NEWS

Amazon calls staff back to office three days a week

⏱ 17 February

By Natalie Sherman
Business reporter, New York
———

Amazon will require all office staff to work in-person at least three days a week, ending a policy that left remote work decisions up to team directors.

Boss Andy Jassy informed staff of the change on Friday, saying it would take effect on 1 May.

The company is joining others such as Disney and Starbucks that have tightened remote work rules this year.

The Guardian
News website of the year

Most bosses secretly want all staff back in offices, says head of CBI

Since Covid pandemic, 'whole world of work has gone crazy,' says Tony Danker
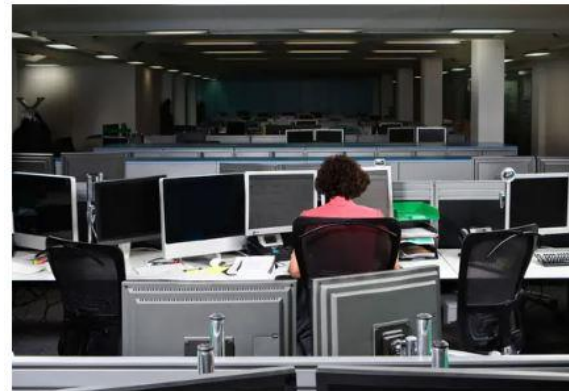
📷 Some industries were quick to call staff back to offices when Covid restrictions were others have maintained flexible working policies. Photograph: Alamy

Most bosses secretly want to get all staff back to working in the offic according to the head of Britain's leading business lobby group.

FORTUNE

COMMENTARY · RETURN TO OFFICE

The return to the office could be the real reason for the slump in productivity. Here's the data to prove it

BY GLEB TSIPURSKY
February 18, 2023 at 10:46 AM GMT

BY GLEB TSIPURSKY
February 18, 2023 at 10:46 AM GMT

(2012 = 100), 4th quarter 2022

Productivity hasn't recovered to its post-pandemic peak.
U.S. BUREAU OF STATISTICS

The return to office looks like it's going backward. After office occupancy rose to over 50.4% in late January, it dropped to 45.6% by early February before recovering slightly to 48.6%. That's despite many business leaders trying to get their employees back to the office in an effort to prevent "quiet quitting."

No simple answer, lively debate, one size does not fit all.

Trend: Investment in Digital Structure

Ipsos Mori, 2021 Survey of Captains of Industry.

- 69% of respondents had already invested in machine learning and AI technologies, and 51% in the Internet of Things.

- 83% think digital infrastructure (e.g.high-speed broadband) should be priority investment for UK.

- Cyber security is reportedly an important challenge.

FT Feb 2023, *Future of work :*
  Growing concern that we do not
    have a workforce savvy-enough
    digitally.   Learning/development
    opportunities are crucial.

Donkin did not predict this!

COVID, Health and Healthcare

- **COVID-19 fully exposed the vital relationship between the economy and health.**

- COVID found a fertile soil, a population of insufficiently-healthy persons, high obesity rates, low physical activity, poor mental health, deprivation and poverty.

- This poor soil and COVID met a fragile NHS.

- 600,000 dropped out of work, two-thirds aged 50 to 64.

- Mental Health diminished in almost all aspects.

- **A tipping point: longstanding health issues, COVID, and a weakened NHS.**

Our Health as a societal asset

- History suggests health to be a crucial factor in driving growth, a societal asset like other capital, human, social, etc.

BUT :

- Marmot suggests a slowing of UK life expectancy between 2012 and 2022, with an

- accompanying rise in long-term sickness in the workforce, from 5.2 to 7m since 2010, now 17% of working-age,

- greatest sickness rise among 16 to 24 year-olds, 50% since 2006, with mental ill-health a large contributor, with

- accompanying rise in economic inactivity in that age group.

Britain's Healthiest Workplace Survey

The largest UK workforce wellbeing survey; 800 organisations covering 190k employees, with over 60m data points.

" We have seen significant increases in the following areas since the survey started in 2013:

+51% increase in the proportion of employees describing themselves as in **poor physical health**

+263% increase in the proportion of employees describing themselves as in **poor mental health**"

Ill-health a major negative factor !

BRITAIN'S
HEALTHIEST
WORKPLACE | Vitality

Unwanted Labour-Market Change

- Big increase in **economic inactivity**

  - concentrated in younger and older workers

- Unlike in other developed countries, economic inactivity kept rising - suggesting a UK-specific factor

- Driven largely by increased long-term sickness

  - from even before the pandemic

- Cannot all be explained by long-covid

  - that figure is about 100k, out of 500k more inactive

- Neither can it all be explained by caring or 'retirement'

- Home-working will not close the participation gap.
  Long-term sickness is concentrated in low-paid 'on-site' jobs.

Number of long-term sick in the working-age population has been increasing over time
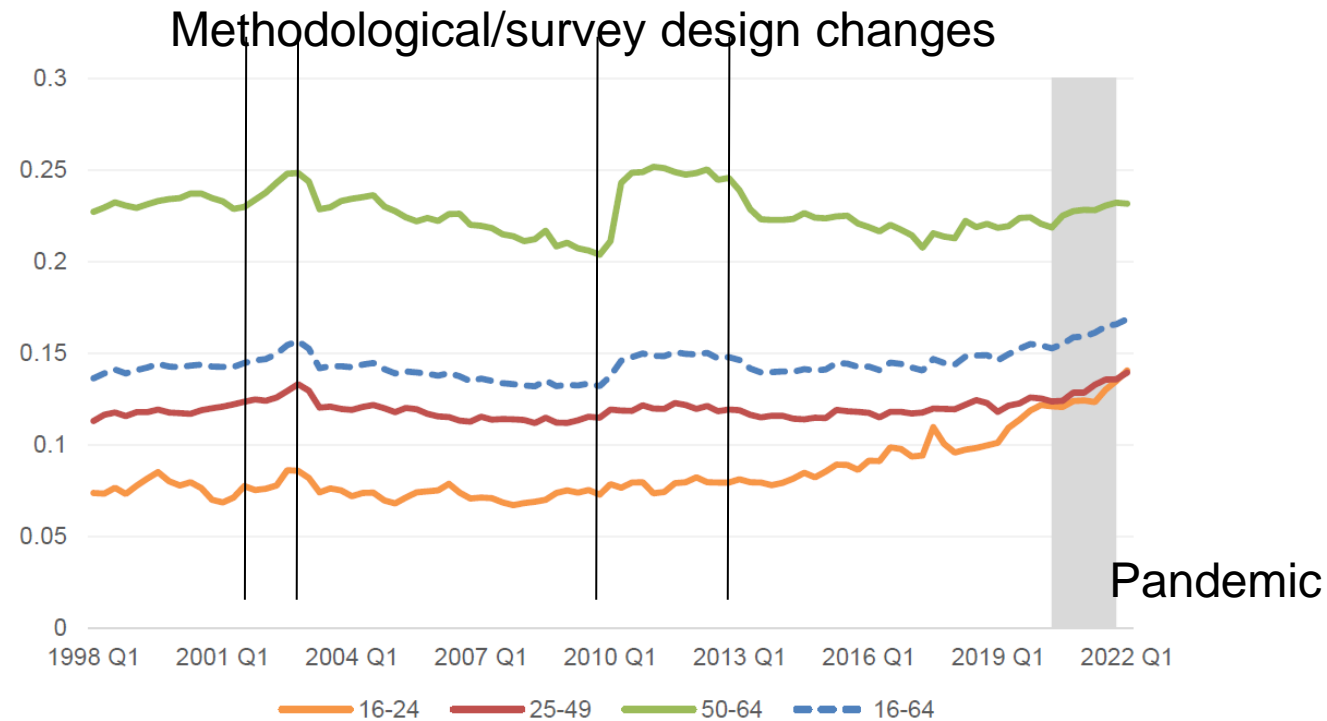
Number and proportion of working-age population that are long-term sick, NSA, UK
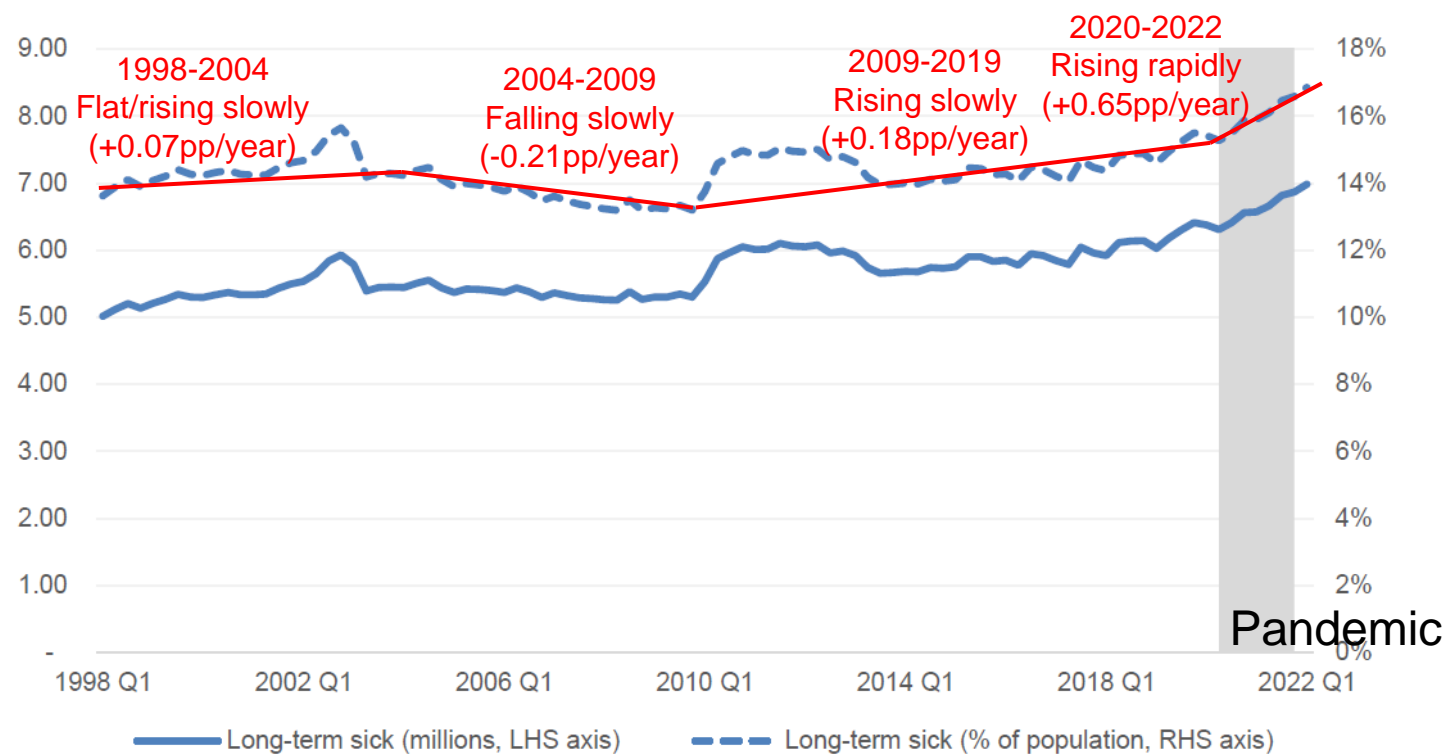
Source: Haskel and Martin (2022)

The increase pre-pandemic was mostly in young workers, but during the pandemic mostly in prime-aged workers

Proportion of long-term sick in working-age population by age group, NSA, UK

Source: Haskel and Martin (2022)

And to add to the COVID effect

- **Inflation**

- **War**

- **Energy crisis**

- **Cost-of-living crisis**

Working for a Healthier Tomorrow, CMB 2008

Executive summary: Chapter 1 Introduction, p.9

" Improving the health of the working age population is critically important for everyone, in order to secure both higher economic growth and increased social justice."

" This Review has sought to establish the foundations for a broad consensus around a new vision for health and work in Britain. At the heart of this vision are three principal objectives:

- prevention of illness and promotion of health and wellbeing;

- early intervention for those who develop a health condition; and

- an improvement in the health of those out of work – so that everyone with the potential to work has the support they need to do so."

What does all this add up to ?

- We have not fulfilled the vision of 2005, BUT employers have increasingly responded to the challenge.

- Government has over the years made many attempts to respond, but without sufficient funds, delivery capacity, or perseverance.

THUS

- We have a smaller, less-productive, workforce.

- Very large rise in the number of people **out of work** due to long-term ill-health, which has hit a new record at **2.53 m**; and more young people in neither full-time education nor employment, now over **1 m**.

" Army of long-term sick pushing up benefits bill "

The Times, 6 May 2023

" Welfare claimants will receive more than £100 bn this year from the state, **52% more** than before the pandemic…."

…. with further increases expected in the next few years,

" the rise largely explained by increases in universal credit and personal independence payments to cover expenses for the long-term sick."

Why ?   Is it because … ?

- We are a nation in poor health, obese, insufficiently active, and with poor mental health ?

- Ill-health starts early and in poverty. UK levels of childhood poverty are high by international standards. Being born into a lower-income household can double the risk of obesity later.

- Increasing economic and financial fragilities facing poorer and younger people has fuelled poor mental health ?

- An increasingly fragile health and healthcare system ?

Thomas Ashton

What would TA have thought of all this?   He was of a family
dynasty that valued the wellbeing and safety of their
workforce. He saw education as a means to develop
not only his workers' but also the nation's prosperity.

Jane Bedford in her biography of the Ashton family referred
to their mills as the best in their class in the country,
suitably equipped with workforce wellbeing paramount.

Thomas Ashton challenged the norm, providing a safer and
more socially just world for people he valued so much.

I suspect that he would have been dismayed, and would
certainly have wanted to end child poverty.

Solutions ?

Is it to put the 'Health' into everything?

Andy Haldane, previous Chief Economist at the Bank of
England, said:

"Healthcare fragilities are adding weakness to an already-
weak, societal immune system, constraining growth,
amplifying the cost-of-living crisis, and reducing
resilience against shocks."

He suggests, with many question marks ....

Strengthening the Resilience of UK Healthcare Systems

- **Measurement and Health**
  National Accounts of Wealth, Health and Happiness
- **Stress-testing and Health**
  Comprehensive, systematic assessment of resilience

- **Devolution and Health**
  Greater Manchester: success of local solutions to local health problems
- **Policy Integration and Health**
  Comprehensive social prescribing. Marmot towns and cities everywhere!
- **Food standards and Health**
  Full implementation of Dimbleby Report

- **Education and Health**
  'A nurse in every school' campaign
- **Business and Health**
  Putting the H into ESG

- **Fiscal finances and Health**
  Reclassifying current and capital spending, to reflect health endowmen
- **Social Safety Net and Health**
  How best to protect the financially insecure?

McKinsey Health Institute

The Secret to Great Health, Lars Hartenstein and Tom Latkovic, 2022

" We believe that every institution on earth has a role to play in improving health literacy and adopting strategies, policies and resources to optimize health."

They list 23 drivers of Health, 19 of them outside our conventional healthcare matrix.

"Once they escape the healthcare matrix, all businesses realise that they are in the business of health."

McKinsey: *The Secret to Great Health*

" **Every business** realises that it is in the business of health: most (if not all) of the products and services they offer do (or could) affect one of the modifiable drivers of health. They recognise that helping people optimise their health could be an attractive economic activity and affect society positively."

" **Every employer** recognises the profound impact that an employee's experience has on their health.   The extent to which an employee finds meaning in their work, their physical experience, their interpersonal interactions, the way in which they are developed (or not), the degree and stability of benefits, and an employer's policies, materially affect modifiable drivers of health."

" **Employers realise** that adapting to improve the health of their employees is both just and economically attractive."

In Conclusion

- We know the problems.

- Many of the solutions are visible,
  albeit complex and difficult.

- We need to build sustainably across economic, financial,
  social and healthcare systems, ….

- … in a multi-pronged, multi-year, strategy.