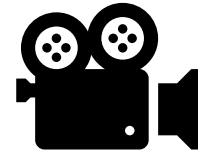# Organisational Interventions to Support Staff Wellbeing in the NHS

Housekeeping

Structure

- Welcome and background

- This project
    - Intervention Highlights 1 - Andrew Cooper
    - Intervention Highlights 2 - Rachel Stewart
    - Q&A with Guest Speakers
    - Summary of other interventions

- Our findings

- Implications

- General discussion and questions

The Research Team

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Introduction...
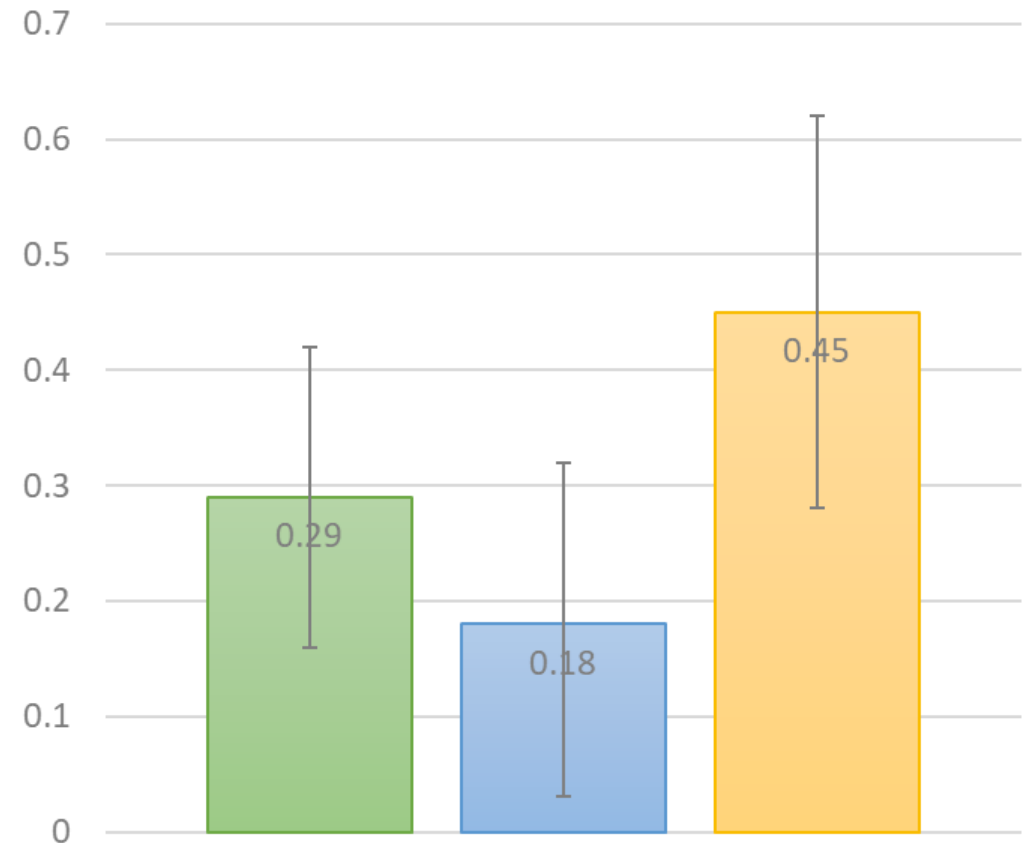
Kevin Teoh
Birkbeck, University of London

Background

NHS Staff Survey 2022:

- 44.8% work-related stress in the past year

- 56.6% presenteeism in the last three months

- 30.2% musculoskeletal problems due to work in the past year

- 34% reported feeling burned out "often" or "always"
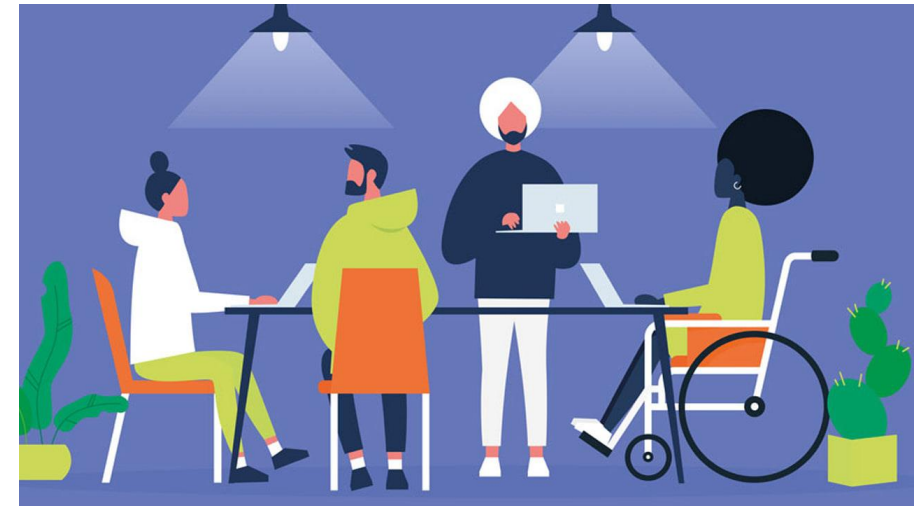
Interventions

- Meta-analysis of 19 studies (n = 1,550 doctors)
- Individual-directed interventions:
  - Mindfulness-based stress reduction techniques
  - Educational interventions on self-confidence and communication skills
  - Exercise
- Organisation-directed interventions:
  - Rescheduling hourly shifts and reducing workload (n = 5)
  - Discussion meetings to enhance teamwork and leadership, structural changes, and elements of individual-interventions (n = 3)

Panagioti, M., Panagopoulou, E., Bower, P., Lewith, G., Kontopantelis, E., Chew-Graham, C., ... & Esmail, A. (2017). Controlled interventions to reduce burnout in physicians: a systematic review and meta-analysis. *JAMA Internal Medicine, 177*(2), 195-205.

Healthy Workplaces

WHO defines a healthy workplace as:

"one in which workers and managers collaborate to use a continual improvement process to protect and to promote the health, safety and wellbeing of workers and the sustainability of the workplace" (Burton, 2010, p. 23).

#NHSinterventions

Burton, J. (2010). *WHO Healthy workplace framework and model: Background and supporting literature and practices. Geneva: WHO.*

Theoretical Background...

Marit Christensen
Norwegian University of Science and Technology (NTNU)

Healthy Workplaces

- There is comprehensive knowledge on how demands and resources affect health, wellbeing and motivation among employees.

- However, knowledge about what works, for whom, under which circumstances, and why regarding interventions for improving the psychosocial working environment are scarce.

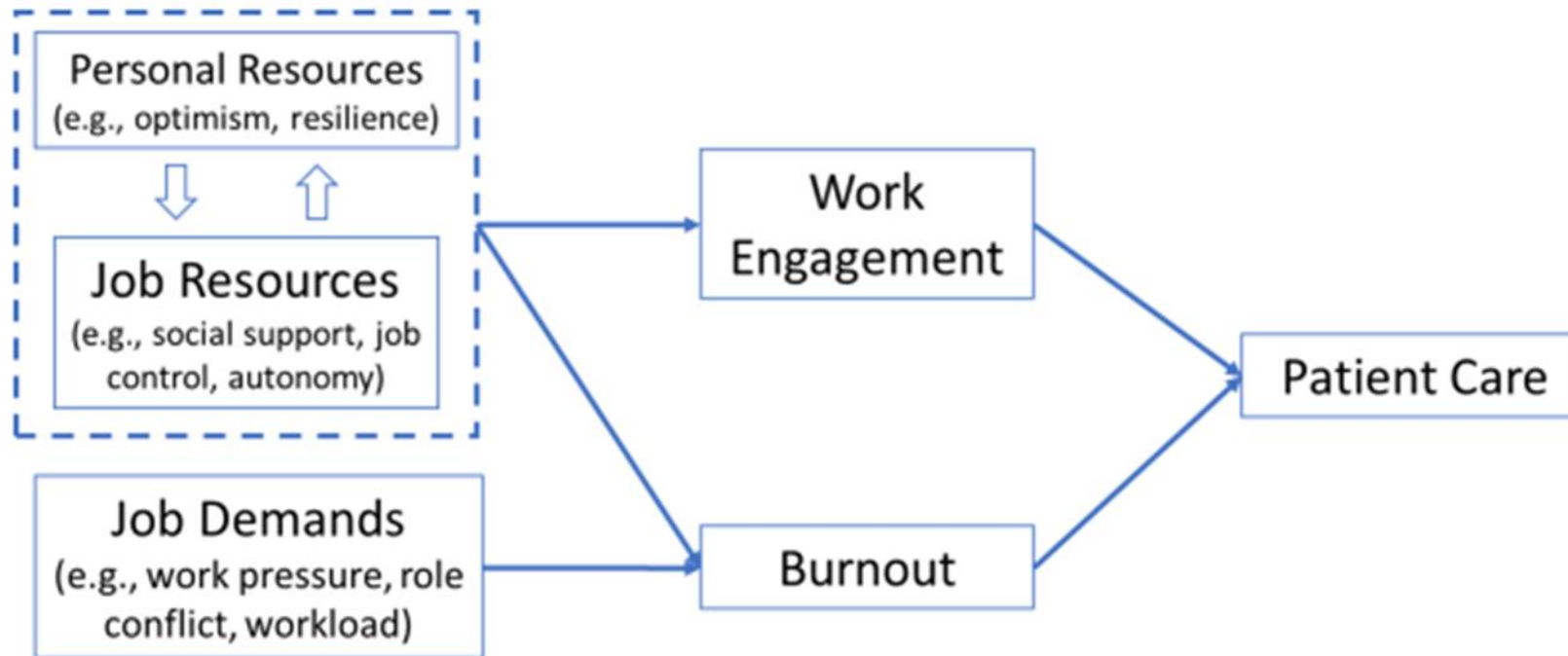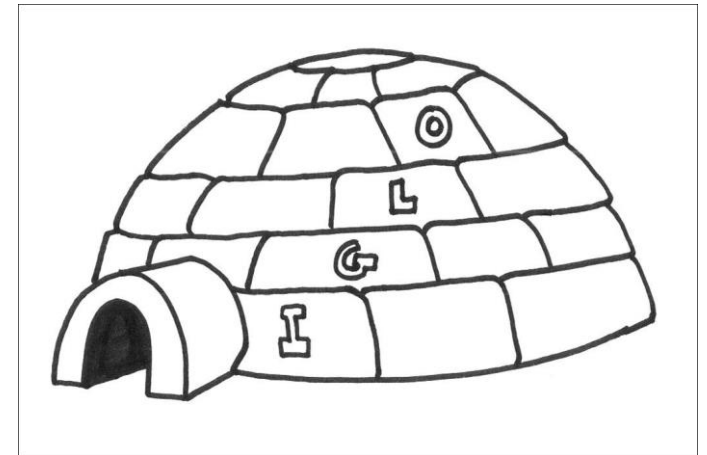# Job Demands & Resources
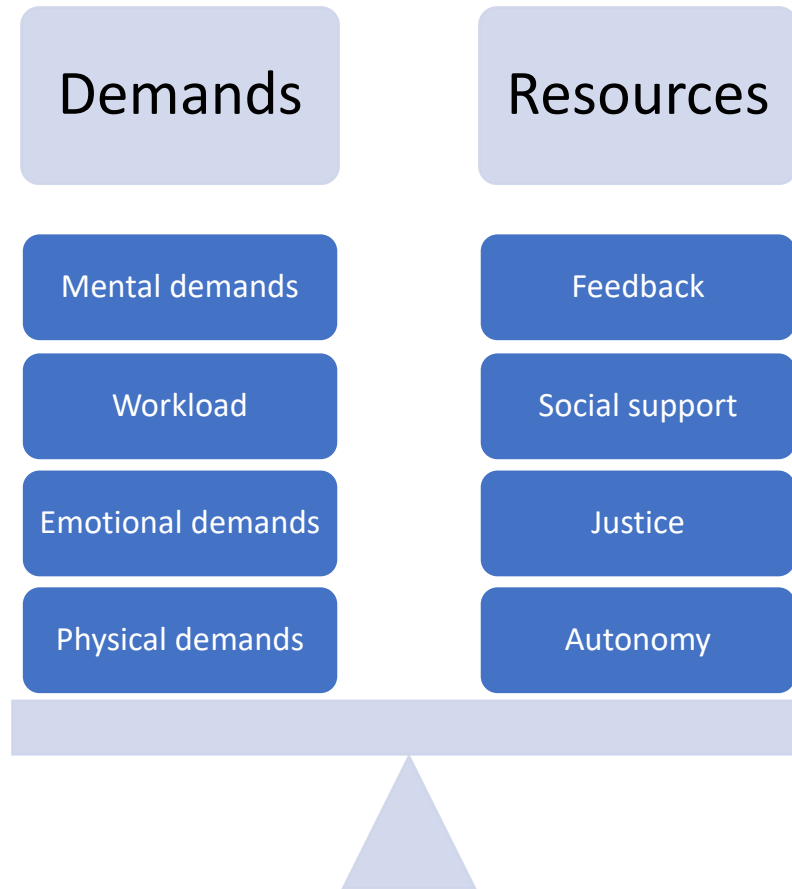
The Job Demands-Resources Model

Figure 1: The Job-Demands Resources Model

The IGLOO-Model

- Job demands and job resources can be found at different levels
  - Individual
  - Group
  - Leader
  - Organisation
  - Overarching context

  - The intervention must fit the right level(s)

Nielsen, K., Yarker, J., Munir, F., & Bültmann, U. (2018). IGLOO: An integrated framework for sustainable return to work in workers with common mental disorders. Work & Stress, 32(4), 400-417.

How can we influence motivation and health through participation?

- The participatory process is key to building organizational resilience, i.e., developing the organization's ability to meet high and hindering job demands, as well as building resources

- We can help provide input on how we perform our own work tasks and influence decisions that are important in the work

Participation in the intervention processes

Improvement of the working environment and employee motivation and health occurs through the change of work policies, practices and procedures.

- Participation creates buy-in and ownership

- Better and more informed decisions are made

- Creates motivation, readiness for change and common understanding

- Employees have expertise in the demands and resources that need to be changed

- Increased integrity and value balance

- Strengthened loyalty and connection to the organization

- Adaptable to the local context

Current project...

Ella Hatton
University of Sheffield & Arden University

Project Aim

1. Identify examples organisational interventions to improve NHS staff wellbeing

2. Understand how they attempt to reduce demands and increase resources at the individual, group, leader, organizational and overarching levels

3. Identify barriers and facilitators of success

4. Summarise key recommendations regarding organizational level staff wellbeing interventions

Our Approach

- Identified interventions through open call

- Interviewed 17 leads of 13 interventions

- Gathered data pertaining to aspects of intervention including rationale, barriers and facilitators of success, results from evaluation, and sustainability

- Where available, integrated material from additional resources (e.g., reports, articles, videos)

Overview of Interventions

Interventions from acute medical, community health, mental health settings, and integrated care system

- Co-designing fatigue risk management strategy
- Improving employee investigations to reduce avoidable employee harm
- Self-rostering
- Bespoke rostering
- eRostering and team rostering
- Changing mindsets to flexible working

- Team huddles to support teaming
- Reducing the length of MDT meetings
- Redesigning the structure of dietitians' clinics
- Quality improvement huddles
- Mental Health Productivity Pilot
- Using the Health and Wellbeing Framework

Intervention Highlight #1

Reducing 'avoidable employee harm' by improving employee investigations

Aneurin Bevan University Health Board
Andrew Cooper

Intervention Highlight #2

Bespoke rostering for registrars in emergency medicine

Emergency Medicine
Rachel Stewart

Intervention Highlights

Questions for our guest speakers

Intervention Highlight #3

**Reducing the length of multidisciplinary team meetings**
Kent Community Health NHS Trust

- Reducing the length of monthly multidisciplinary meetings from around six hours to three hours

- Approach included setting boundaries about what cases should be discussed, stopping collection of redundant data, and outlining clear roles for meeting participants

- Staff had more time for other work tasks, felt more supported, and felt a stronger sense of community within the team
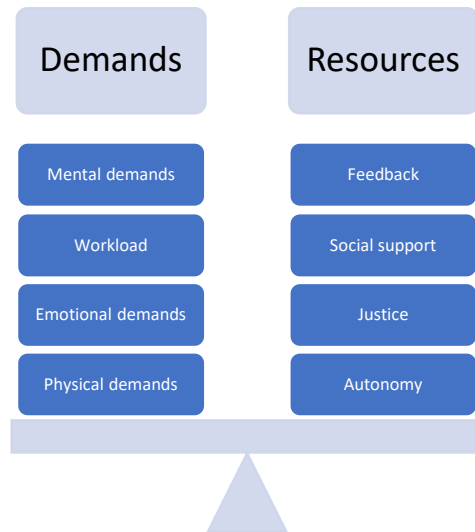
Findings...

Rashi Dhensa-Kahlon
Birkbeck, University of London
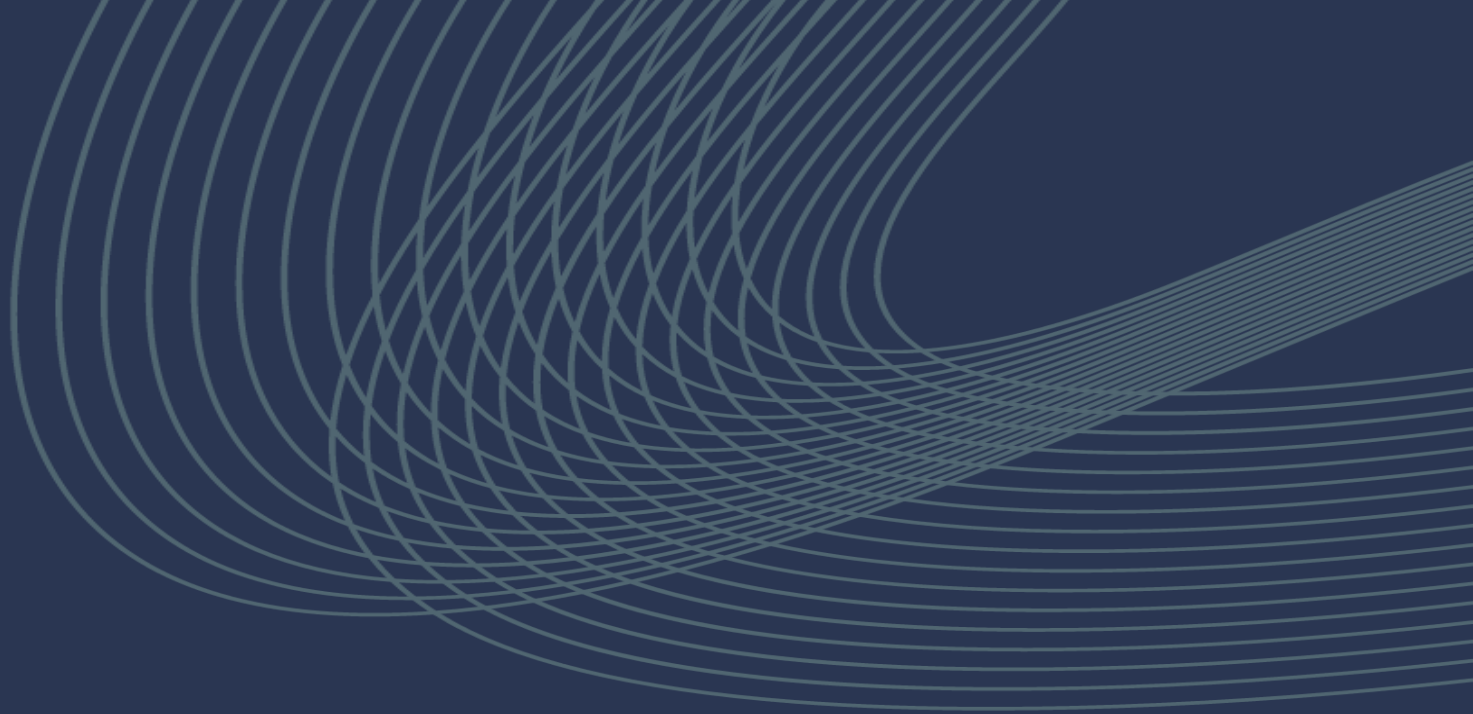
Mapping the findings

We mapped activities across interventions against two frameworks: demands/resources and the IGLOO model

Demands	Resources
Mental demands	Feedback
Workload	Social support
Emotional demands	Justice
Physical demands	Autonomy

Job demands and resources

The IGLOO framework

Overarching Context
Organisation
Leader
Group
Individual

Findings: An overview

- Interventions did not typically set out the demands and/or resources they sought to address

- We extracted these by focusing in on the aims of each intervention

- We identified **8 demands**: workload, emotional demands, stigma, conflict, manager expectations, manager demands, physical demands, and work-life conflict
  - Demands were evident at the group, leader and organisational levels of the IGLOO model only

- We identified **more resources**, including: awareness of wellbeing, technical and career competence, psychological skills, self-efficacy, team climate and support, empowering teams and autonomy, role clarity, line manager competence, leader motivation, staffing levels, collaboration, learning and development, organisational support, staff voice, funding, and national guidance, legislation, and policies
  - Resources were evident across all 5 levels of the IGLOO model

Individual-level Activities

Reducing Demands
- None observed
- Includes changes to inherent demands, i.e., pressure for perfectionism

Increasing Resources
- Awareness of wellbeing
- Technical and career competence
- Psychological skills
- Self-efficacy
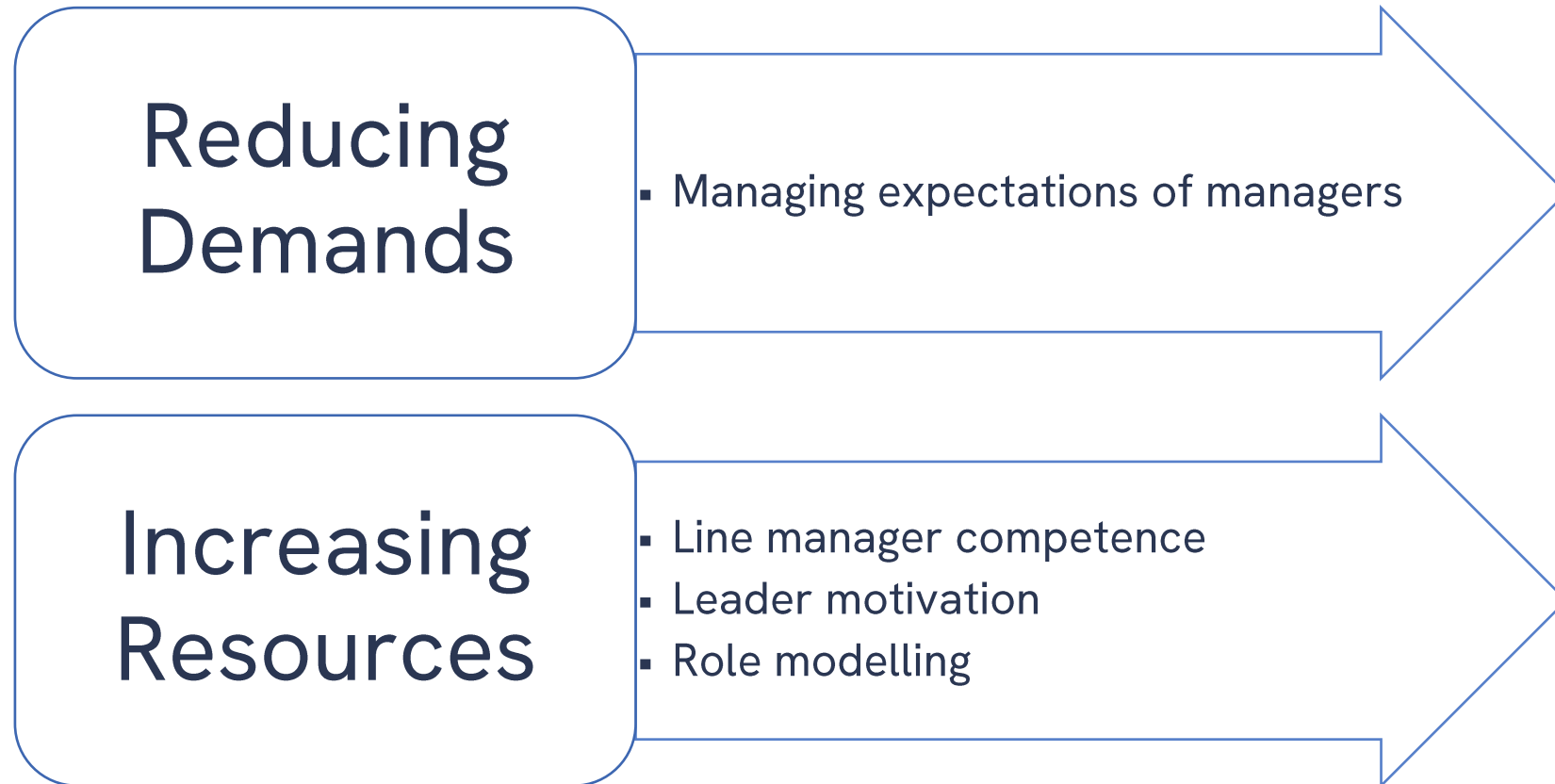
Group-level Activities

Reducing Demands
- Workload
- Emotional demands
- Reduce stigma
- Interpersonal conflicts

Increasing Resources
- Positive team climate
- Empowering teams
- Empowering autonomy
- Role clarity

Leader-level Activities

Reducing Demands
- Managing expectations of managers

Increasing Resources
- Line manager competence
- Leader motivation
- Role modelling

Organisational-level Activities
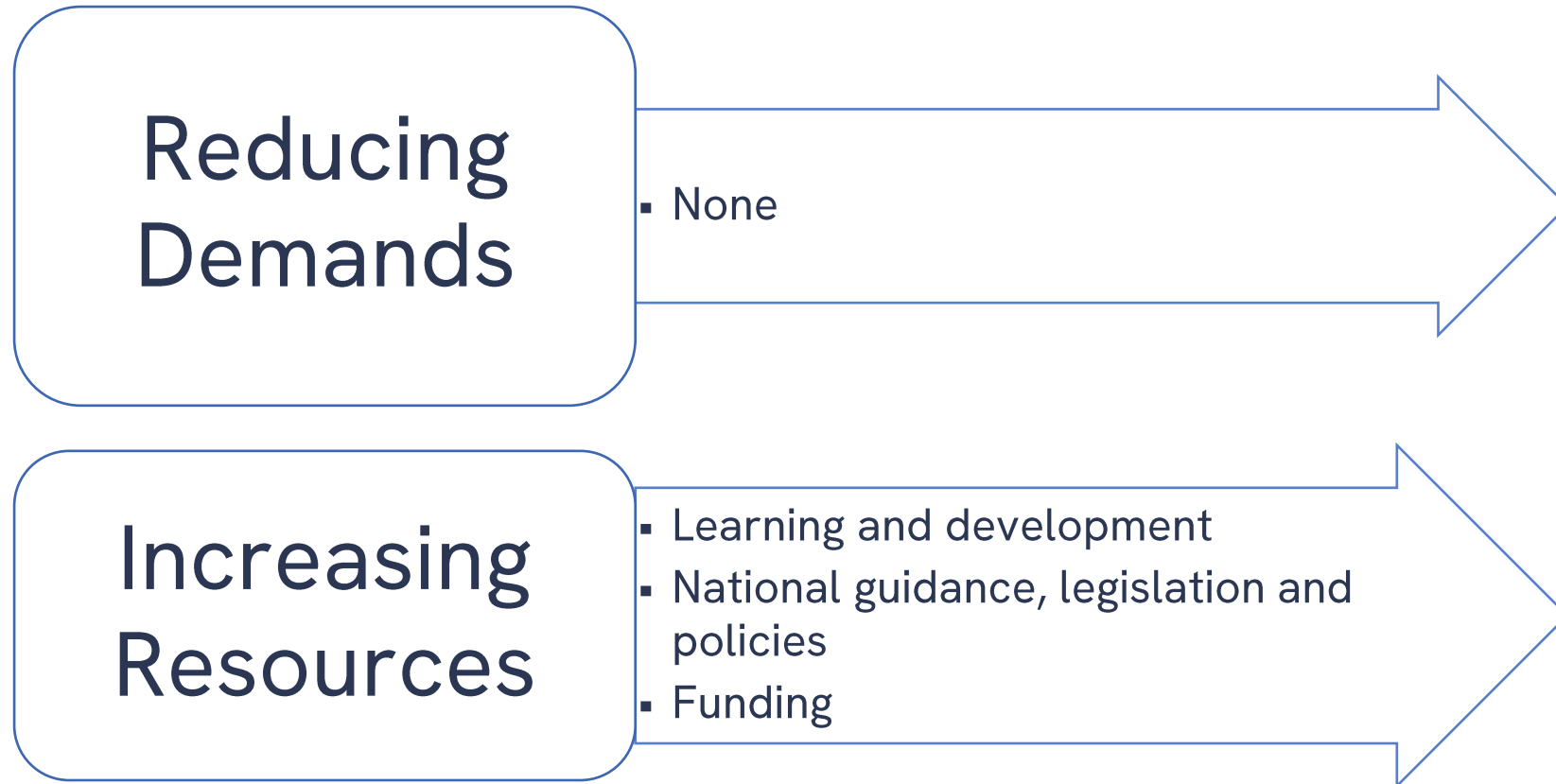
Reducing Demands
- Workload
- Emotional demands
- Physical demands

Increasing Resources
- Staffing levels
- Collaboration
- Learning and development
- Staff voice
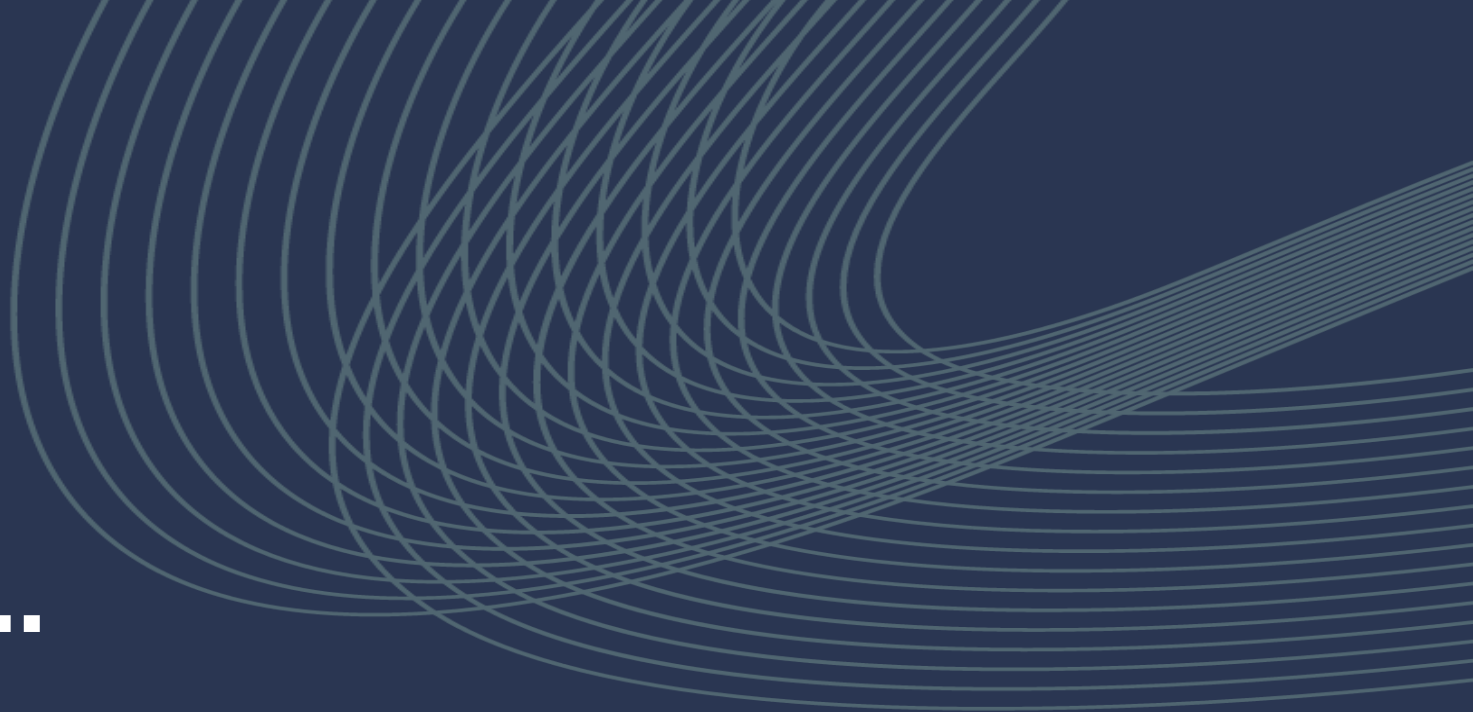- Organisational support

Overarching Context Activities

Reducing Demands

- None

Increasing Resources

- Learning and development
- National guidance, legislation and policies
- Funding

Implications...

Kevin Teoh
Birkbeck, University of London

Six Principles for Organisational Interventions

1. Staff wellbeing is a systems issue.
2. Tailor the intervention to the context.
3. Involve staff in the process.
4. Get support from leaders.
5. Interventions are iterative.
6. Plan for the long haul.

Six Principles for Organisational Interventions

1. **Staff wellbeing is a systems issue**.

   Activities not only have to support the individual, but need to include activities aimed at the group, leader, organisation, and the overarching context.

Six Principles for Organisational Interventions

2. **Tailor the intervention to the context**.

If an intervention worked in one context it does not mean that it will work in another. Local issues, processes, work structure, culture, systems, and dynamics are all essential factors that require consideration when tailoring an intervention to a specific context.

Six Principles for Organisational Interventions

3. **Involve staff in the process**.

Staff involvement is key to help identify issues and develop solutions. This not only facilitates ownership, but the process is useful for collective sensemaking, community building, and enhancing feelings of control for all those affected by an intervention.

Six Principles for Organisational Interventions

4. Get support from leaders.

They provide access to resources and support for the intervention process. Moreover, they serve as role models when engaging with intervention activities.

Six Principles for Organisational Interventions

5. Interventions are iterative.

Contexts are dynamic, so there is a need to continually monitor and adjust the intervention. Evaluation is needed to assess the intervention against the intended outcomes. It is also key to evaluate the process of each intervention's implementation to understand how and why it worked (or not).

Six Principles for Organisational Interventions

6. **Plan for the long haul**. Interventions must be sustainable and planning should consider how processes and learning are embedded into existing practices and across the organisation, as well as accounting for the departure of key personnel.

Conclusion

- The NHS continues to change and adapt.

- Different demands and resources at all levels.

- Organisational interventions may appear complex and overwhelming.

- Examples where even slight changes made a substantial improvement in the working experiences of staff.

- Change is possible.

Questions and Discussions...

Fiona Frost
University of Nottingham

Thank you!

Slides, report, and recording of webinar to follow

For more information contact:
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*   Rashi Dhensa-Kahlon (r.dhensa-kahlon@bbk.ac.uk)