

**Health and
Wellbeing Strategy**
2015

What is a health & wellbeing strategy?

Our second Health & Wellbeing strategy for Gloucestershire Hospitals NHS Foundation Trust has been developed by our Health & Wellbeing Group which provides a focus for this area of activity.

We aim to show our continuing commitment to contributing with others to the wider health and wellbeing agenda for the county. We describe our ambitions and broad plans for the future, building on the progress we have made in recent years.



Foreword

Welcome to our second Health and Wellbeing Strategy for Gloucestershire Hospitals NHS Foundation Trust. The strategy has been developed by our Trust's Health and Wellbeing Group which provides a focus for this area of our activities.

Our Trust is one of the largest in the country, with well in excess of one million patient contacts each year, and over 7,250 staff. We are the main local provider of specialist acute health services to the people of Gloucestershire and others in the surrounding areas. Although this remains our core role, we recognise that we have the potential and the responsibility to influence and improve the health and wellbeing of the people of Gloucestershire in other ways – not just as part of the wider health and social care system, but also as one of the county's largest organisations and employers.

We recognise that it is important for our strategy to be set in the context of national and local policy and priorities.

We welcome the recently published 'Five Year Forward View' (NHSE, 2014) which identifies the need to "get serious about prevention"; for action on obesity, smoking, alcohol and other health risks; for supporting people to choose healthier lifestyles and encouraging self-care.

It re-frames the relationship between patients, local people, the NHS and other service providers. Its vision is of the 'NHS as a social movement', where power is shifted to patients and citizens, communities are strengthened, health and wellbeing is improved and - as a by-product - the rising demands on the NHS are moderated. This will have implications, in future years, for the Trust and the way we interact with our patients and our partners.

The Forward View also highlights the importance of workplace health and the opportunity for the NHS to set a national example - supporting its staff to remaining healthy and to serve as 'health ambassadors' in their local communities.

We have started to take early steps along this road. In this Strategy we show our continuing commitment to play our part in improving the health and wellbeing of the people living in our county.

We will do this alongside our local authority partners (with their extended responsibilities for health and wellbeing and public health), our NHS commissioners and the community of Gloucestershire.

Here we describe our ambitions and broad plans for the future, recognising that this Strategy will evolve over time. We focus on three key groups:

- Our staff
- Our patients
- Our wider community

Sally Pearson
Director Clinical
Strategy

Dave Smith
Director Human
Resources &
Organisational
Development



Introduction

Our vision

To be recognised as a health-promoting Trust, one that makes an active contribution to promoting and improving the wider health and wellbeing of those with whom we come into contact.

Our ambitions

We have identified three broad ambitions, reflecting the three groups of people with which we come into contact – our staff, our patients and the wider community. These ambitions will underpin our vision and be reflected in our annual work programmes.

- Every employee will be supported to maintain and improve their health and wellbeing and every employee will be expected to take reasonable steps to improve their health and wellbeing
- Every patient contact will count for promoting health and wellbeing
- The wider community will also benefit through our involvement in the broader countywide health and wellbeing agenda



Health and wellbeing at our Trust

Links with our Trust Values and Objectives

Our Trust's mission is to improve health by putting patients at the centre of excellent specialist care.

By using each contact which we have with patients to promote healthier lifestyles and opportunities for preventive approaches, we can contribute to their wider personal health and wellbeing.

In relation to staff, the over-arching objective for the Trust is to 'further develop a highly skilled, motivated, and engaged workforce which continually strives to improve patient care and Trust performance'.

More detailed objectives relate to staff engagement, improving the health and wellbeing of staff to enable staff sickness levels to reduce to below 3%.

Our staff health and wellbeing strategy and its associated action plans will make a contribution to the achievement of these objectives – with benefits for both staff and patients. For patients the benefits of lower levels of staff sickness absence are associated in particular with improved continuity of care.

Our 'Go on, it's Better for You' strapline for staff health and wellbeing initiatives, links staff health with the Trust values which are captured in the phrase 'Better for You'.

The strategy will also bring benefits to us as a provider of NHS specialist services, and contribute to a range of our wider organisational objectives; to

- reduce length of stay
- reduce readmission rates

- reduce demand for services
- reduce sickness absence
- enhance our reputation

Over time, we will need to consider how we will reflect the Five Year Forward View in our Trust's future objectives. This will include how we deliver services, our relationship with our patients and others, and how we can improve the health and wellbeing of our staff and develop their role as 'ambassadors for health'.

Links with other Trust strategies

This strategy does not stand alone. The Health and Wellbeing Strategy is closely linked to our Sustainability Strategy, which demonstrates our wider commitment to Corporate Social Responsibility.

Our Sustainability Strategy encompasses areas such as carbon reduction, recycling, responsible purchasing and sustainable building design. Whilst the importance of these activities to the broader health and wellbeing of the population is acknowledged, these aspects are not explored in detail here.

There are also close links with Health and Safety - one of the core responsibilities of any organisation and one which we take very seriously. Our health and safety strategies and policies also underpin this strategy but are not covered here.

A more comprehensive staff health and wellbeing strategy, developed in partnership with staff, will complement and expand upon the workforce section of this over-arching health and wellbeing strategy.

What is a health promoting hospital?

"A health promoting hospital does not only provide high quality comprehensive medical and nursing services, but also develops a corporate identity that embraces the aims of health promotion, develops a health promoting organisational structure and culture, including active, participatory roles for patients and all members of staff, develops itself into a health promoting physical environment, and actively cooperates with its community."

World Health Organisation (WHO)

The national context – an overview

“If the nation fails to get serious about prevention, then recent progress in healthy life expectancies will stall, health inequalities will widen and our ability to fund beneficial treatments will be crowded-out by the need to spend billions of pounds on wholly avoidable illness.”

This is one of the powerful messages in the recently published ‘Five Year Forward View’ (NHSE, 2015). This sets out a clear direction for the NHS – showing why change is needed, what it might look like. It re-frames the relationship between patients, local people, the NHS and other service providers. Through new partnerships, initiatives and models of care the Forward View talks about the ‘NHS as a social movement’ where power is shifted to patients and citizens, communities are strengthened, health and wellbeing is improved and - as a by-product - the rising demands on the NHS are moderated.

The messages in the Forward View are not new. Although enormous advances in medicine and healthcare have been achieved since the NHS was set up in 1948, some very major challenges now threaten the sustainability of our current health and social care system. The NHS Call to Action (NHSE 2013a) identified some of these:

- an ageing society with ever growing health and social care needs
- more people living with more complex illness, long term conditions and disability
- lifestyle risk factors which contribute to ill health
- premature deaths
- continuing inequalities and variation across different groups and communities
- increasing public expectations
- the rising cost of drugs and new medical technology
- ever-growing demand for NHS hospital resources.

We know that lifestyle behaviours are important contributors to many preventable diseases and collectively impact on many long term illnesses – including coronary heart disease, cancers,

Five Year Forward View

Some of the proposals of relevance to this strategy:

- ‘getting serious about prevention’
- hard hitting national action on obesity, smoking, alcohol and other major health risks
- incentivising and supporting healthier behaviours
- targeted prevention – primary and secondary
- empowering patients and supporting people and communities to be actively involved in their own health – to stay healthy, assist in managing long-term and other conditions and avoid complications
- supporting NHS staff to stay healthy and serve as ‘ambassadors for health’ in their communities
- new models of care dissolving traditional boundaries, working in partnership and engaging the whole community.

stroke, respiratory disease and diabetes. Together factors such as smoking, poor diet and high risk alcohol consumption constitute some of the most important direct causes of early death and disability in England and drivers for health inequalities.

In the major review of health inequalities ‘Fair Society, Healthy Lives’ (The Marmot Review 2010), we are reminded that lifestyle risk factors are heavily influenced by cultural and social factors and not simply by individual choice. Both this report and an earlier one ‘Securing our Future Health – Taking the long term view’ (Wanless 2002), suggested that a substantial reduction in costs as well as an increase in health and wellbeing could be achieved by an increased emphasis on prevention and greater

engagement of people in their own health.

More recently, 'A Call to Action: Commissioning for prevention' (NHSE 2013b) reiterated the need for change and the potential for prevention in reducing premature deaths, chronic disability and in addressing inequalities: "Commissioning for prevention is one potentially transformative change that CCGs can make, together with Health and Wellbeing Boards and their other local partners."

The Outcomes Frameworks for the NHS, Social Care and Public Health (DOH 2013a, DOH 2012a, DOH 2013b) reflect the shared and complementary contributions which each can make to this agenda. Partnership working is at the heart of reducing the burden of disease in society.

National facts

- Smoking remains the single biggest cause of preventable ill-health in the UK
- The average consumption of alcohol by adults in the UK is 10% higher than the EU average. In 2010 alcohol use was the third leading risk factor contributing to the global burden of disease after high blood pressure and tobacco smoking
- There has been a marked increase in rates of obesity over the last ten years - around a quarter of both men and women nationally are classed as obese and almost half of these have high blood pressure
- Mental and behavioural disorders (22%) and muscular skeletal (MSK) disorders (31%) account for over half of all years lived with disability in the UK
- Long term health conditions now consume 70% of the NHS budget



The national context – NHS staff

NHS staff health is a key element of the 'Five Year Forward View' and as in other reports, it recognises the significant costs of staff ill health in the NHS and the opportunity for the NHS to lead by example.

In *Working for a Healthier Tomorrow* (Black, 2008) Dame Carol Black reports that evidence shows that work is generally good for people's mental health and wellbeing (Waddell G, Burton AK, 2006).

However, this should be 'good work'. This means work which is healthy and safe and offers the individual some influence over how the work is done and a sense of self-worth. 'Good work' is about going beyond a core health and safety perspective, to positive promotion of health and wellbeing.

For NHS staff, this commitment is enshrined in the NHS Constitution (2012b), with the pledge to staff that organisations would "provide support and opportunities for staff to maintain their health, wellbeing and safety".

Overall, the beneficial effects of work are shown to be much greater than the harmful effects of long-term 'worklessness' or prolonged sickness absence. As well as being better for the employees themselves, good staff health and wellbeing also brings organisational benefits.

In the context of the NHS, staff wellbeing also contributes to better levels of patient care (Darzi, 2009, Boorman, 2009), particularly through improved continuity of care.

NHS Employers calculated that the cost of sickness absence to the NHS in 2012/2013 was £1.55 billion, which is equivalent to 13.7 million days lost and 60,698 full-time equivalent staff. Reducing this figure by a third would bring substantial gains to the NHS.

The Department of Health has set all NHS organisations the goal of reducing their sickness absence levels to less than 3%.

Sickness absence

Sickness Absence in the Labour Market (2014, ONS), gives some key facts about sickness absence in the UK as a whole, which highlight particular challenges for the NHS.

- Sickness absence rates are lower in the private sector, although the gap with the public sector has narrowed over the past 20 years
- Of the larger public sector organisations, sickness rates are highest for those working in the health sector
- Largest organisations report highest sickness levels
- Nationally, the highest number of days lost through sickness are attributable to musculoskeletal conditions, minor illnesses and stress/anxiety/depression



The population of Gloucestershire

In order to understand how we can contribute to the local health and wellbeing agenda and the priorities for the county, we have drawn on a number of key local documents and strategies, including:

- Joint Strategic Needs Assessment (GCC, 2014a)
- Improving Health in Gloucestershire, Director of PH report 2012-2013 (GCC, 2013a)
- Fit for the Future – Gloucestershire’s Health & Wellbeing Strategy 2012–2032 (GCC, 2013b)
- Joining up your Care 2014-2019 (Gloucestershire Clinical Commissioning Group, 2014)

Some of the facts

Overall Gloucestershire is a healthy county, with average life expectancy above the national level, at 80 years for men and 84 years for women

In 2012 the population was 602,000, but is expected to reach 644,000 by 2021 (GCC 2014b), when over 20% of the population will be over 65.

By 2035 this figure will be 35%.

4.6% of the population is from a black and minority ethnic (BME) group.

As life expectancy increases, so will the number of people who will live with a long term condition (LTC), such as diabetes, coronary heart disease and dementia. The number of people over 65 living with a LTC is increasing with an expected increase of over 60% by 2030

The three main causes of death and serious illness are:

- circulatory diseases (heart disease and stroke)
- cancers
- respiratory disease, such as chronic obstructive pulmonary disease (COPD)

In comparison with similar areas of the country, early deaths from liver disease, lung disease, heart disease, and stroke are higher than expected

While Gloucestershire is a relatively prosperous county, there are significant pockets of deprivation, which are linked to poorer health and reduced life expectancy.

- Overall levels of smoking, increasing and high risk drinking, obesity and physical activity are similar or better than the national average, but levels are higher in some localities and population groups
- 17.5% of adults overall smoke in the county, but with rates of 36% in some groups. 900 people die each year from smoking-related disease
- 27.4% of adults are obese
- Only 14% of adults are physically active
- 24.6% of children have excess weight – higher than the national average
- 23.6% people are drinking above recommended levels – and alcohol attributable admissions to hospital increased by 69% between 2002/3 and 2009/10
- 9.4% of people registered with a GP have been clinically diagnosed with depression – however, 20.2% of people categorise themselves as having high anxiety score and 12% a low level of happiness.

Working together in the county to improve health and wellbeing

Last year, in line with national changes for local authorities, Gloucestershire County Council assumed a wider responsibility for public health and health and wellbeing. One of the early tasks of Gloucestershire’s new Health and Wellbeing Board was to publish Fit for the Future – Gloucestershire’s Health and Wellbeing Strategy 2012 – 2032. (GCC, 2013b). Prevention is a key theme in the strategy and a number of important risk factors and five priorities have been identified:

- Reducing obesity
- Reducing harm caused by alcohol
- Improving mental health

- Improving health and wellbeing into old age
- Tackling health inequalities

Joint working and partnership across the NHS, Local Authority and the voluntary sector and with communities is identified as key to improving the health and wellbeing of local people. This is captured in the Health and Wellbeing Board's vision – "Working together to Live Well and Stay Well".

Making Every Contact Count (MECC) is an important initiative included within the county health and wellbeing delivery plan. This involves a workforce learning and development programme which is aimed at providing front line staff across the public sector and the voluntary and community sectors with skills to support clients and service users to make healthy lifestyle choices.

The new organisational arrangements for Public Health and Local Authorities have, in their early days, disrupted some of the previous long-standing partnerships which existed in the county. However, there is a strong tradition of joint working in Gloucestershire. We will continue to explore with our partners in the county how, as an acute provider, we can contribute directly to the new structure.

Joining up your care

In their 5-year strategy *Joining up Your Care*, our local Clinical Commissioning Group (CCG), highlight a number of points of relevance to our own health and wellbeing strategy.

- working in partnership to make the best possible use of the resources available
- an increased focus on self-care and prevention – reinforcing prevention at all stages, with a view to people requiring less acute-based care
- a Clinical Programme approach which will address specific conditions – reviewing the whole clinical and care pathway from prevention to end of life
- as part of this approach, a "Healthy Individuals" Programme Group will be established and will involve health and wellbeing partners
- local people indicate they are supportive of action to encourage and enable people to take increased responsibility for their own health and to adopt healthier lifestyles
- as resources are developed in the community, an expectation that GPs and other healthcare professionals will increase referrals to different types of support promoting health and wellbeing
- a continuing commitment to reducing inequalities.



Our staff:

Every employee will be supported to maintain and improve their health and wellbeing and every employee will be expected to take reasonable steps to improve their health and wellbeing

Our Trust employs over 7,250 staff. A number of volunteers and contractors also work with us on our sites.

We recognise that our responsibility for the health and wellbeing of staff extends far beyond a core responsibility to provide a safe working environment. We seek to be an excellent employer, an employer of choice within the NHS and our local community and we recognise the concept of “good work” - work which is healthy and safe and offers the individual some influence over how the work is done and a sense of self-worth.

We understand that this brings benefits not just to staff, but also enhances the care which we offer our patients - particularly through improved continuity of care - and helps us to make the best use of our resources. Improving health and wellbeing of staff is a shared responsibility of managers and of individual staff members.

The Trust has for many years taken a proactive approach to staff health and wellbeing and a number of examples are shown here.

At the same time we recognise we need to do more and have developed a Staff Health and Wellbeing Strategy which will sit alongside this broader strategy.

We are using the five key strategies set out in “NHS Health and Wellbeing” (Boorman, 2009) to underpin our approach.

- Ensuring senior level ownership of health and wellbeing
- Investigate and understand and target local needs and underlying influences
- Map all health and wellbeing services

- Involve staff in identifying and designing appropriate interventions

- Learn from good practice.

Sickness absence, and also “presenteeism” (attending work when not fit to do so) is a challenge for the NHS overall. One of our key organisational objectives is to improve the health and wellbeing of staff to enable sickness levels to reduce to below 3%.

Although our current level of sickness absence – 3.79% – compares favourably with the local healthcare community as well as regionally and nationally, it has a significant impact on the individuals themselves, our services and our use of resources:

91,800 full-time equivalent working days are lost to the Trust annually

- Equivalent to 383 full-time staff

- Indirect costs of £6.5m and estimated backfill costs of £3.5m

We are working closely with our Staff side colleagues to understand better the reasons for staff sickness and to identify actions which we can take to improve staff health and wellbeing overall. The four top most common reasons stated by our staff for absence, are:

- Anxiety/stress/depression and psychiatric illness (13.59%)
- Back and musculoskeletal problems (12.04%)
- Cough, cold, flu (9.26%)
- Gastro-intestinal problems (7.48%)



Some of our achievements to date

We have developed an umbrella campaign for staff health and wellbeing, with the strapline 'It's Better for You' – used in printed and electronic media. This is designed to promote activities more effectively and to link staff wellbeing more explicitly to our Trust values. Examples of current activities, include:

- Family friendly policies and flexible working arrangements
- Generous and flexible annual leave entitlement
- Childcare vouchers and on-site nurseries
- Personal development opportunities
- Annual staff health days linked to the "Workout@work" initiative
- Active support for staff for smoking cessation
- Stress Audits and Risk Assessments
- Resilience Training
- Occupational health service
- Internal 'Staff Support' counselling service
- Annual sun-awareness sessions for staff
- A range of both sporting and non-sporting clubs and activities to encourage staff to share hobbies and common interests
- 'Caring Chorus' community choir
- Family social events and outings
- Improving access to meals and healthier options for staff who work evenings and weekends.
- Staff awards and recognition
- Free 'Money Advisory Services' and pre-retirement advice.
- Cycle to work schemes and cycling facilities
- Free flu vaccinations

Our future objectives are to:

- Develop a compelling action plan each year to improve the health and wellbeing of our staff, including our responsibilities under the Public Health Responsibility Deal at work and the Time to Change campaign
- De-stigmatise issues surrounding mental health by providing training to staff which helps them identify issues in themselves and others and signposts to appropriate services
- Develop further a sense of community amongst those working in the Trust
- Use all of our data sources including reasons for sickness and our Staff Survey to design interventions to improve the health and wellbeing of our staff
- Ensure our staff are able to access appropriate clinical care which will enable them to return to their duties at the earliest opportunity
- Promote and publicise the It's Better For You campaign, ensuring that staff are aware of all of the opportunities to maintain and improve their health and are encouraged to act as role models to their colleagues and to the broader community

Our patients:

Every patient contact will count for promoting health and wellbeing

Every year we come into contact with a significant proportion of the local population.

We are well placed to influence our patients. We often have access to groups which are more likely to be suffering from preventable illnesses, so health promoting initiatives aimed at these groups can contribute to wider initiatives designed to reduce inequalities.

People in hospital may be more receptive to messages about promoting health and to information from healthcare professionals. There is evidence that the majority of hospital patients think that it is appropriate for hospitals to take a role in promoting health.

Health promoting initiatives – for example, smoking cessation - can lead to quicker healing and recovery, fewer complications, reductions in length of stay following medical and surgical procedures - contributing also to improved use of increasingly pressurised NHS and social care resources.

The NHS, our Trust, and its staff – we all have a responsibility to lead by example.

Some of our achievements to date

- Smoking cessation was one of our early priorities and we were one of the pilot hospitals in the South West involved in the smokefree hospitals initiative.
- We have worked closely with Gloucestershire NHS Stop Smoking Service (GSSS) on a range of joint initiatives. GSSS specialist advisors are based in our hospitals. They have trained our Smoking Cessation Champions, and established good mechanisms for referring people to specialist advisors. Together, we have developed an eLearning module for staff.
- We provide NRT for in-patients who smoke. Women who smoke in pregnancy have been a particular priority and we have introduced an opt-out policy for referral to smoking cessation advice.
- We have also developed an eLearning module for staff on obesity and overweight – to give them confidence in raising lifestyle issues with their patients. We are involved in an initiative to ensure obesity and related lifestyle factors are addressed more explicitly with pregnant women.
- We deliver specialist tier three and tier four obesity services as part of the countywide services.
- Our catering staff have introduced a series of measures to reduce the level of salt in food, and to use healthier cooking processes – healthy options are available in our canteens. We have introduced protected mealtimes and support to some of our elderly patients who have difficulties in eating. We have recently updated our Trust hydration policies.
- We have included a section on lifestyle factors in our in-patient records and include these in a range of patient pathways. Where possible we try to signpost our patients to information and support, for example, the network of community trainers
- Our maternity staff have gained Baby Friendly accreditation for promoting and supporting breastfeeding.
- We recognise that some groups require specialist support – we have set up support for teenagers who are pregnant and have a midwife who works with pregnant substance misusers.
- We support a range of national and local awareness campaigns through local events, on our website and through social media channels.
- We have a specialist falls prevention team.
- We review NICE public health guidance eg. regarding alcohol.

**Every year
we see:**

Our future objectives are to:

- Contribute to the “Making Every Contact Count” (MECC) workforce training and development programme, as part of the wider countywide initiative
- Capture and map the range of health promoting initiatives and ensure consistency of message
- Engage more closely with divisions and departments to encourage them to recognise the opportunity for raising health promoting and wellbeing issues with their patients - to build health promoting elements into relevant patient pathways and enhanced recovery programmes
- Update our health and wellbeing webpages
- Use the introduction of the electronic clinical record to capture lifestyle-related data, to prompt clinicians to raise these issues with their patients, enable easy referral and signposting of support, and to help us develop appropriate metrics for this area of our activity
- Work with partner organisations to implement NICE Public Health Guidance

65,600
day cases

6,300
hospital births

65,200
emergency
admissions

13,000
planned
inpatients

675,000
consultant
outpatient
appointments

The wider community:

The wider community will also benefit through our involvement in the broader countywide health and wellbeing agenda

Our contribution to the wider community is made in two ways.

Firstly, in our capacity as an NHS provider and an employer of over 7,000 staff, and secondly as a large organisation and consumer of resources.

We focus here on the first role. Our Sustainability Strategy encompasses other areas of importance with benefits for wider health and wellbeing - carbon reduction and recycling, responsible purchasing and sustainable building design.

Some of our achievements

- A tradition of collaboration and close working with health and social care partners and contributing to strategy development and planning groups, partnership groups, such as the Children and Young People's Partnership, and through our involvement in the important area of safeguarding vulnerable people.
 - Supporting a range of local and national awareness raising events and using our communication channels to contribute to the wider dissemination of these messages.
 - Working with the media, and through them, enabling local people to understand more about the health issues which we face – for example, a journalist shadowed our specialist liver nurse and through her we were able to raise awareness about excessive drinking.
 - A health information room – providing a wide range of materials for patients, staff and the public; setting up benefits clinics for patients and for our staff.
- Offering opportunities to local people to volunteer with us, to gain work experience and to undertake apprenticeships with us
 - Our own staff also volunteer and support many organisations and charities – locally and further afield.
 - Involvement in careers activities across the county and encouraging young people to become interested in working in the NHS – for example through our Extraordinary Everyday events.
 - Through our partnership with the local bus company, we have set up a shuttle bus for staff and the public – which links the hospital sites and the local park and ride facilities.

Our future objectives are to:

- Increase our advocacy role for public health priorities
- Support joint working and consolidate links with other organisations in the county in the light of recent changes to the NHS and the Local Authority's new responsibilities for Public Health
- Lobby for direct engagement with the Gloucestershire Health & Wellbeing Board
- Ensure a consistent approach to prevention and patient self-management by working closely with the countywide Healthy Individuals Programme Group and other Clinical programme Groups
- Support partner organisations in accessing people who find it hard to access services in the community
- Make greater use of social media in promoting health messages more widely
- Identify further opportunities to lead by example.



Delivering the strategy

Roles and responsibilities

Trust Health and Wellbeing Group

This group provides the focus for health and wellbeing in the Trust. It has overseen the development of this strategy and will review this at regular intervals. It is responsible for agreeing an annual work programme and monitoring progress. Its membership includes representation from all areas of the Trust - from all the Clinical and Corporate Divisions, Occupational Health, staff side and a Trust Governor. Members of partner organisations have also been co-opted. The Trust's Smokefree Group, the Staff Health and Wellbeing Group and the Stress and Wellbeing Group all report to the Health and Wellbeing Group. The Group itself reports to the Trust's Board level Sustainability Committee.

Board level leadership

The Leadership for the development and implementation of the Strategy and the associated Staff Health and Wellbeing Strategy will rest with the Director of Clinical Strategy, and the Director of Human Resources and Organisational Development.

Divisions

Each Division is represented on the Health and Wellbeing Group. Their role is to contribute to the development and delivery of an agreed annual work programme, on behalf of their areas.

Staff

Staff should recognise the contribution which they can make to promoting health and wellbeing in their work and amongst those with whom they come into contact. They should lead by example. The Trust will work collaboratively with staff and their representatives to seek ways of improving the health and wellbeing of the workforce. Staff also have a joint responsibility to maintain their own health and wellbeing.

Patients and the public

The NHS Constitution identified a responsibility for patients and the public "you should recognise that you can make a significant contribution to your own, and your family's, good health and wellbeing, and take some personal responsibility for it".

Annual work plan

Each year the Health and Wellbeing Group will agree a work programme. Progress will be monitored by the group on a quarterly basis. Over time, we aim to develop a range of metrics which will better reflect the progress which we are making through our health and wellbeing activities.

Risks

- Many of the benefits associated with health and wellbeing and public health activities are only seen in the longer term - these activities may therefore be less attractive in the context of shorter-term delivery objectives.
- Insufficient financial and staffing resources for health and wellbeing activities – countywide and within the Trust.
- Not joining up health and wellbeing activities – with the Trust and more widely across the county.

Reviewing the strategy

The Strategy will be reviewed every two years or more frequently if indicated.

Equality Impact Assessment

An equality impact assessment has been undertaken.

Glossary of terms

Term	Definition
Commissioning/ Commissioners	From April 1, 2013, our commissioners became the Gloucestershire Clinical Commissioning Group. Commissioning is the process of assessing the needs of a local population and putting in place services to meet those needs. Commissioners are those who do this and who agree service level agreements with service providers for a range of services
Disadvantaged groups	Sometimes called 'marginalised', 'hard-to-reach' or 'seldom-heard' groups, these are people who experience inequalities in health, healthcare and employment, but who are not specifically protected by the Equality Act. They can include homeless people, sex workers, people who misuse substances, people with low socioeconomic status, and people living in rural isolation
Equality Impact Assessments	Process used to ensure the impact upon all protected characteristics has been considered prior to any service changes being introduced.
Foundation Trust	NHS providers who achieve foundation trust status have greater freedoms and are subject to less central control. Foundation Trusts are part of the NHS and have to meet the same national targets and standards
Foundation Trust Governors	The Board of Governors are elected by Foundation Trust members. Over half are local people or service users, other membership includes staff members and local partner organisations. Governors advise a Foundation Trust on how it carries out its work so that this is consistent with the needs of members and the wider community
GCC	Gloucestershire County Council
Gloucestershire Health & Wellbeing Board	The Board is a partnership between local council representatives, the NHS and the wider community to improve the health of everyone in the county
Health	A complete state of physical and mental health and wellbeing and not merely the absence of disease and infirmity
Health promotion	The process of enabling people to increase control over, and to improve, their health
Healthwatch	Healthwatch was established in April 2013 and is the new consumer champion of the health and social care in England, giving children, young people and adults a powerful voice
Internal stakeholders	Our staff are the Hospital Trust's internal stakeholders
Long term conditions (LTC)	Chronic health conditions which cannot at present be cured, but which can be controlled by medication, and other therapies and action. Among the most common LTC's are: diabetes, coronary heart disease, stroke, heart failure, respiratory diseases and asthma, severe mental health conditions and epilepsy.
NHS Constitution	A national document which describes the principles and values of the NHS in England, and the rights and responsibilities of patients, the public and staff
NICE	The National Institute for Health and Care Excellence (NICE) provides national guidance and advice to improve health and social care
Public Health	The science and art of promoting and protecting health and wellbeing, preventing ill-health and prolonging life through the organised efforts of society
Service users	Those who use services or those who may use them. Service user involvement can be directly or through representatives
Stakeholder engagement	A process by which an organisation or Local Health Community learns about the perceptions, issues and expectations of its stakeholders and uses these views to assist in managing, supporting and influencing any planned changes/improvements in service delivery
Stakeholders	Any person or group of people who have a significant interest in services provided, or will be affected by, any planned changes in an organisation or Local Health Community
Wellbeing	Wellbeing is a subjective concept, often associated with people feeling comfortable, secure and fulfilled in their lives, or with improving economic, social and environmental factors.

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Current areas of focus

Healthy start

- Breast feeding promotion and support, including UNICEF Baby Friendly initiative
- Smoking cessation referrals
- Substance abuse midwife
- Specialist midwives for teenage pregnancies
- Harpist in neonatal unit
- Aromatherapy in labour
- Baby massage & yoga



Keeping active

- Workout @ work
- Charity challenges
- Community health trainer referrals
- Falls prevention
- Cycle to work
- Sun awareness sessions
- Active & sustainable travel
- Take the stairs and StepJockey



Mental wellbeing

- Creating a sense of community:
 - Caring Chorus, We bake the difference, Artworks
- Staff support services
- Moodometer – 2gether Trust
- World Book Night, 6 Book Challenge and reading for relaxation
- Time to Talk - mental health awareness
- Stress audit and action plans
- Training for violence & aggression and conflict resolution
- Actions to address findings of staff survey
- Emotional support for Oncology patients - referrals to Maggie's centre

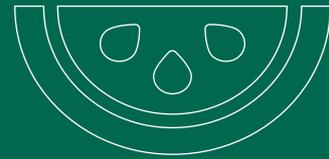
Drugs and Alcohol

- Seasonal reminders – keep safe
- Change 4 Life drinks tracker and campaigns
- Dry January (social media)
- Alcohol awareness in media: shadowing liver specialist nurse, contributing to debates about 'how much is too much'



Social responsibility

- Seeing is Believing charity - using innovative training methods to train health workers in Indonesia, Botswana and Bangladesh
- Kambia - a formal link with a charity that supports the medical district of Kambia in Sierra Leone
- Our Extraordinary Everyday weekend and careers events
- Safeguarding, multi-agency working:
 - Learning disabilities
 - Patients with dementia
 - Hearing and visually impaired
- Apprenticeship schemes
- Volunteering
- Raising profile of homelessness and its effect on health
- Equality & diversity (eLearning, working with different communities)



Healthy eating

- Locally sourced produce
- Healthy options
- Nutrition & hydration week – promoting events
- Involvement of Dieticians in all menus for patients
- Coloured crockery to assist those with cognitive impairment
- Training hospital volunteers to help patients at mealtimes



- Working with partners – GSSS
- Champions & training
- Smokefree site
- Get Well Sooner campaign
- Social media and other media opportunities
- Supporting national campaigns – Stoptober and No Smoking Day
- Quitmanager and prescribing NRT

Smoking

