

NATIONAL FORUM FOR HEALTH AND WELLBEING AT WORK

What do we know about promising practices for health and wellbeing at work in the UK?

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Link to report: https://www.rand.org/pubs/research_reports/RR2409.html

Health and wellbeing at work can have a profound impact on individuals, organisations and societies. Emerging research indicates that a healthier workforce is a more productive workforce, with fewer sick days taken and higher productivity when at work. As a result of this, more and more organisations are introducing initiatives to help protect and promote staff health and wellbeing. With growing activity in workplace wellbeing, there is a crucial question that needs answering: how do interventions in workplace wellbeing support positive health outcomes for staff and employees?

RAND Europe was commissioned by Public Health England (PHE) to review the current landscape of health and wellbeing interventions available to employers. In this project, we asked for submissions on promising practices from commercial and non-profit providers, employers (in-house wellbeing interventions) and commissioners. The submissions covered a wide range of areas from sleep to physical activity and many others. The majority of case studies were submitted by providers of wellbeing interventions rather than employers. No wellbeing interventions were reported for smoking or financial resilience. Applying the Nesta standards of evidence (<https://www.nesta.org.uk/report/nesta-standards-of-evidence/>), RAND Europe designed a case study data capture questionnaire. The submissions collected were categorised according to workplace health topic and graded against the five Nesta levels. The process was supported and moderated by an academic and expert review panel.

The submissions provided an encouraging and diverse view of the landscape. However, the evidence base remains limited. Only a small group showed high levels of evidence, when graded against Nesta standards. A small group of interventions were graded as Nesta level 2 or above. It suggests that academically rigorous methods of data collection are not widely in use. Organisations collected a variety of data types to explore the impact of their interventions. Some collected data on direct changes to wellbeing while others focused more on building confidence. However, most organisations struggled to show an evidence base for how the intervention had impacted the health and wellbeing of participants. The most promising practices identified were interventions related to mental health, sleep, menopause and musculoskeletal health. No wellbeing interventions were reported for smoking or financial resilience. Overall, the evidence base is patchy and does not provide sufficient guidance to those procuring effective health and wellbeing interventions. As a consequence, many interventions are provided without a sense of what the possible effect is likely to be.

There are a number of lessons. Many organisations are interested in evaluation but feel that they have insufficient capacity to undertake evaluations. Our research found that there is no 'one size fits all' and organisations should not put off using basic evaluation tools. There is no perfect evaluation approach and to use an old cliché, 'what gets measured gets done'. Our research identified a range of qualitative and subjective evaluation methods of feedback as well as quantitative and objective

data sets that may support a better understanding of employee experiences of workplace wellbeing. Capacity issues are often mentioned for small and medium sized organisations. Here our research found that these enterprises can learn from their peers to find approaches that match their size and aspirations. One of the main problems seems to be that evaluations are not considered at the outset when interventions are designed and implemented. This means that interventions are often not set up for evidence gathering. Ex post design of an evaluation framework when the intervention is in progress is typically difficult.

Within all of this we offer a word of caution. Many organisations are still looking for a silver bullet, the most effective single intervention that will improve the health and wellbeing of employees. In the end the increasing focus on workplace wellbeing provision should not come at the expense of effective workplace management culture. Workplace culture and wider workplace practices are likely more significant determinants of workplace health and wellbeing.