

Staff Health and Wellbeing A Best Practice Guide
for NHS Wales

Making work, work

Interventions

Relationships

Optimal Experience Meeting Making Work Work

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Optimal Experience Meeting Making Work Work

Work Work

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1. Making work, work

It's been evidenced that the following key factors impact on staff health and wellbeing, empowering staff to meet their potential.

2. Safe and excellent quality resources

Have agreed minimum standards for facilities, working conditions and work schedules.

Ensure staff have access to welfare provisions:

- water
- toilets and changing facilities
- areas to store and heat food
- nutritious food and drink, including during night shifts
- break times and comfortable locations to take breaks
- lockers to secure belongings.

Ensure staff have:

- adequate protective equipment to do their jobs safely
- are provided with effective IT systems and support with using them
- regular and constructive feedback such as supervision, 1-1s, 360 diagnostics, coaching and mentoring (where required) and time for reflective practice.

Best practice examples would also include:

- reviewing car parking provision for staff working overnight
- improving access to emergency accommodation when staff are too tired at the end of their shift to commute.

3. Education, Learning and Development

There should be clear strategies for Continuing Professional Development (CPD) across professional and occupational groups to increase interprofessional learning and the specific needs of different roles.

All staff should have meaningful objectives and personal development plans which includes health and wellbeing and compassionate leadership objectives.

Ensure that those trained in reflective practice are provided with protected time to use their training to support others.

Enable and encourage staff to take their study leave.

Education programmes should be developed that positively impact on the health and wellbeing of the learner and teacher.

All education programmes should ensure that access is equitable, diverse, and inclusive.

Supervisors, assessors, mentors, preceptors, and coaches (as required) should have access to personal development planning and career coaching so that they are able to fully support their staff/students.

Education programmes and experiential learning opportunities should include stretch assignments, shadowing, secondments, rotational opportunities, fellowships, scholarships, legacy roles, and mentors.

In collaboration with Health Education Institutions, organisations providing health education and placement providers should:

- establish key performance indicators for student health and wellbeing across all learning environments and review feedback to assess performance. This must include effective feedback for students to speak up about concerns such as bullying either in placements or in education institutions.
- work collaboratively with students to gather feedback to better meet their specific needs in both clinical placements and their studies. This must include measuring and improving student wellbeing and making rapid progress in reducing the high dropout rate among student nurses and midwives.
- undertake assessments to ensure equity of learning for minority groups.
- ensure a culture of interdisciplinary learning within the faculty and integrate wellbeing, compassion, compassionate leadership, MDT working and team leadership into education programmes.
- work in close partnership with placement providers to ensure that they are well prepared to receive students.

All newly appointment staff should attend an induction programme which includes the values and behaviours of the organisation.

There should be targeted support for staff at the beginning of their careers such as preceptorship, and pastoral from peers or legacy mentors.

Internationally recruited students and staff require targeted support, with their integration into the UK, including financial education, practical support and language skills.

4. Healthy Conflict

Promote a culture of positive behaviours at work to enable and encourage healthy conflict and fairness.

Have agreed policies and procedures to prevent or resolve unacceptable behaviour, guidance available from the <u>NHS Wales Respect and Resolution Policy</u> and <u>Healthy Working Relationships</u>.

There is also a All Wales Mediation Network for support.

5. Compassionate People Practices

Operational processes and policies should be human focused and <u>reduce</u> avoidable harm.

6. Change

Change is constant and can be rewarding and bring about opportunities for career development and quality, however, if it is handled badly, it can have a negative impact of staff health and wellbeing.

Increase support for managers during times of organisational change, giving them influence over decision making.

The Change Ambassador course is designed to support the NHS in Wales by creating Change Ambassadors who will promote a culture of embracing and supporting change through staff engagement and facilitate continuous improvement. There are many resources to enable effective change.

During change, work in partnership with staff, ensuring transparency, accountability, and consultation.

Involve those affected by the change and provide opportunities for input and influence on team, job or working conditions, including changes to rosters or schedules.

Discuss and consider the impact of the change including training needs, support, and resources for staff.

Staff should be enabled and encouraged to develop new skills to undertake new roles and take on any new and challenging work.

7. Workload demand and pace

Ensure that there are infrastructures that support staff to practice with a high level of autonomy and to be fully engaged in organisational decision making through facilitating locally driven improvement in care outcomes through promoting and enabling leadership at all levels.

Enable compassionate roster management and work scheduling to enable staff to plan their working time in advance and have control over their work life. Where possible implement staff self-rostering and or peer led rostering.

Adequate and achievable demands, skills and abilities need to be matched to the job demands.

Tackle excessive workload, monitor workload regularly of individuals and teams. Role model this behaviour at every level.

Staff need to experience effectiveness in work and deliver valued outcomes.

Staff are encouraged to use their skills and initiative to do their work.

Jobs are designed to be within staff capabilities.

Ensure that, as far as possible the different requirements that are placed on staff are compatible.

Provide staff with the information they need to understand their role and responsibilities.

Be clear of the responsibilities placed on staff.

Have programmes to deploy and develop alternative roles, such as administrative support staff to enable staff to work at the top of their competency, supported by effective multidisciplinary teamworking.

Review tasks, activities and processes that do not add significant value either to patient care or staff wellbeing.

Discuss with staff workload, job demand and pace, job design including skills, abilities and initiative, and resources needed to do the job.

Provide space for team and peer reflection and support.

Tackle chronic excessive work demands.

Have mechanisms for staff to shape the cultures and processes and influence decisions about how work is structured and delivered.

Review and benchmark against new technologies being used to increase efficiency and reduce workload.

Have clear competence/capabilities for each role including digital literacy.

<u>The Digital Capability Framework</u> is a practical, interactive tool to better understand the skills, behaviours and attitudes needed for staff to thrive in a digital world.

8. Concerns and Speaking Up

Ensure systems are in place to enable and encourage staff to raise concerns about their work environment, any uncertainties or conflicts they have in their role and responsibilities and unacceptable behaviour.

Teams should be encouraged to have speaking up systems in their team meetings.

Enable and encourage listening events and ensure that there are means to evaluate the response to concerns raised with a focus on listening, learning and compassion, and not on blame.

The Speaking up Safely: A Framework for the NHS states that "having effective arrangements which enable staff to speak up helps to protect patients, the public and the NHS workforce". It sets outs expectations in relation to speaking up on staff in NHS Wales.

9. Voice and Feedback

All staff should be provided with regular and constructive feedback such as supervision, 1-1s, 360 diagnostics and coaching and mentoring (where appropriate).

Establish key performance indicators for voice and influence and review feedback to assess performance.

10. Career Conversations

There should be targeted support for staff at the beginning of their careers. Staff should be encouraged to develop their skills and new skills to help them undertake new and challenging pieces of work.

Protected time and support should be given to staff for essential tasks such as preparing for Personal Appraisal and Development Reviews (PADRs) and revalidation. Ensure that this is a meaningful conversation where clear objectives are set including wellbeing. Enable and encourage staff to plan for the later stages of their career, providing opportunities and alternatives to retirement for staff who wish to continue working.

Reasons for staff staying in NHS Wales should be explored and learnings actioned.