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**Sickness and absence-related costs in the UK are high –
annually costing
£22 billion**
NHS five year forward view. London: NHS England, 2014. ohaw.co/NHS5year2014

Mental health problems; including depression and anxiety are responsible for the loss of 15.8 million working days or 11.5% of the total working time each year.

Mental ill health prevalence
1 in 4 experience a mental health issue at some point in their life.

- Staying well and looking after our mental health in the workplace is a priority both to individuals and organisations
- Presenteism: going to work when ill, resulting in decreased productivity.
- Symptoms associated with CMHP's such as sleep problems, fatigue, irritability and worry, affect one-sixth of the working age population and impact ability to function at work.

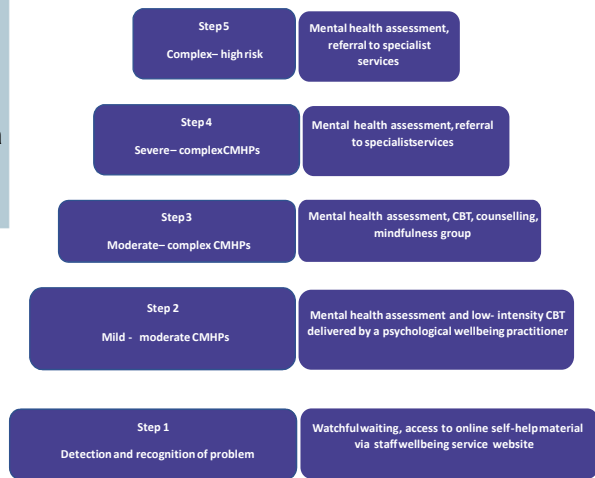
Psychological wellbeing practitioners

- Following NICE guidelines for depression and anxiety and within a stepped care framework, PWP's could play an important and strategic role in the identification and management of CMHP's within the workplace.

Pennine Care Staff Wellbeing Service

- Employs over 5500 staff across Greater Manchester
- In 2013/14 had the 18th highest sickness absence rate for all NHS organisations in England.
- Psychological difficulties; stress, depression and anxiety were the main reason for referral to OH health.
- 2014 the Staff Wellbeing Service was launched.
- Running parallel to OH, the SWS provides psychological support for trust employees experiencing CMHP's.
- The SWS offers NICE recommended treatments using a stepped care model, mirroring primary care services.
- The service employs a multidisciplinary team including PWP's, CBT therapist, counsellors and mindfulness practitioner.
- The SWS prides itself on being accessible and offering treatment flexibly. Referrals can be self referral or by a manager. Treatment is delivered either face to face, by telephone or in a group.
- PWP's play an integral role in the staff wellbeing service; they offer treatment sessions over the telephone at times convenient for staff throughout the day.
- The majority of individuals are seen by PWP's, more than any other discipline and waiting times to see a PWP are the lowest in the service echoing the importance of this role within service provision.
- PWP's are well placed to have a preventative role within workplace settings, echoing proposals made in the NHS 5-year forward view.

The relationship between the stepped-care model and the role of PWP's within an OH setting.



Conclusion

- Sickness absence related costs are high in the UK, with CMHP's among the main causes of absence.
- NICE guidelines advocate a stepped-care model for the identification and management of depression and anxiety.
- PWP's are a vital component within the stepped-care model in the assessment and treatment of individuals experiencing CMHP's.
- PWP's could play a crucial role in OH services by using their knowledge and skills to help individuals better manage their symptoms.
- The Pennine Care SWS model could be adopted by other organisations' OH services, both within and outside the NHS.

Evaluation

- ✓ Most people entering the service are currently in work (not off sick) and remain in work at the end of treatment.
- ✓ High percentage return to work after a period of absence.
- ✓ Majority of individuals are seen by PWP's more than any other discipline.
- ✓ Waiting times for PWP's are the lowest in the service, averaging 4-6 weeks.
- ✓ The SWS uses the Warwick - Edinburgh Mental Well-being Scale (WEMWBS) to measure outcomes. Further service evaluation is needed