

“Doctors and nurses can’t be broken”

Senior community nurse

A rapid insight evaluation of the roll-out of national wellbeing initiatives for NHS staff during COVID-19: executive summary

Introduction

The covid pandemic has seen a renewed focus on the health and wellbeing of health and care staff. NHS England and Improvement commissioned Oxford Academic Health Science Network (AHSN) to undertake a rapid evaluation of the roll-out of national health and wellbeing offers. Working with two other AHSNs – the Health Innovation Network in South London and North East and North Cumbria AHSN - this evaluation was undertaken over the summer and early autumn of 2020.

Methods

The evaluation focused on staff in NHS trusts; primary care, CCG and ICS staff were not included. In each of the three AHSN areas acute, mental health and community trusts were identified in discussion with regional health and well-being leads. The views of staff were captured using:

- An on-line survey that covered: what health and well-being interventions staff had accessed, what they would have found beneficial and questions on recent physical and mental wellbeing. A total of 999 staff responded to the survey.
- Semi-structured interviews: twenty-five members of staff, ranging from ward clerks to senior managers, were interviewed to understand their experience of health and wellbeing during the first months of the pandemic.

Findings

Despite the variety of communication channels used to let staff know about health and wellbeing offers, a significant number of staff were unaware of, and therefore unable to access, resources. Other things mentioned as preventing uptake included lack of time and things not being “bad enough”.

Half of staff who did access health and wellbeing offers did so for a specific need (figure 1). These needs included anxiety, mindfulness, wellbeing sleep, and the need to support others (figure 2).

Reasons why staff accessed health and wellbeing offers

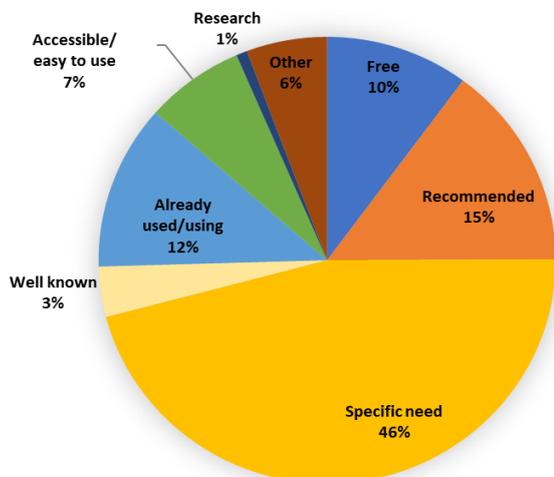


Figure one

Specific need which prompted staff to take up health and wellbeing offers

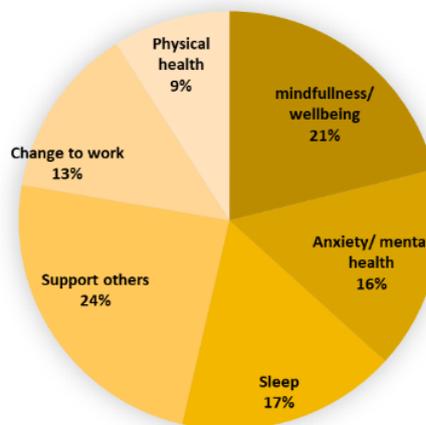


Figure two

Seven hundred staff responded to survey questions about awareness of specific interventions. Most (over 95%) had heard of Headspace and a significant majority had heard of the Samaritan’s Helpline. Practical guides such as the remote working and the shielding guide were well received by those that used them.

Whilst multiple offers were available to staff, they commented throughout the survey and interviews of what could have been provided including greater access to physical health support as well as mental. There were a variety of suggestions from the need of better changing facilities at work to better access to on-line gym classes. The Musculo- skeletal and eyesight challenge of hours of home desk working were brought-up as areas for which help could be provided: ergometric equipment, headsets, videos on neck stretches, advice about eye protection. More general advice on working from home was also requested.

Spiritual well-being featured too, access to services or meetings as places of worship were closed.

Key themes

Thematic analysis of both survey and interview data suggested that the following areas were particularly important to staff.

- **Keep it simple:** the need to keep the offer simple as staff felt bombarded and offers blurred when under stress
- **Give permission:** staff noted that asking for help can be perceived as “weakness” within a culture of “soldiering through”. The importance of supportive managers who gave time to ask staff how they were and how they could be supported.
- **Create space:** this was broken down into the need for physical, relational, and personal space. There was a need for staff to have a safe space to go to, somewhere they could rest and relax. Staff talked about the importance of knowing that you are not alone whether working from home or in a deserted office space. Staff needed space where they could continue to build and maintain relationships. Personal space related to having time to regroup thoughts and just unwind from the stresses of the day.

- **Psychological space:** there was significant impact on staff mental health, compounded for some as they felt they could not discuss the challenges of pandemic working with usual support structures of friends or family.
- **Not just in bad times:** the support for health and wellbeing needs to be part of usual practice and culture outside of the pandemic, including authentic leadership.
- **Fairness and consistency:** the importance of equality in the way in which policies or new working practice are applied was highlighted. For example, some staff felt they were not allowed to work from home, whereas others felt they were made to “feel guilty” for working from home.

Conclusions

Overall, there were some fundamental messages about the need for staff to always be, and feel, cared for within their organisation. Leadership and management actions need to show staff, in an authentic way, that taking time to maintain their health and wellbeing is valued and staff are encouraged, and supported, to ask for help when needed.

“I think at the end of the day it just comes down to humans just being nice to each other”.
Senior nurse