

HEALTH AND WELLBEING BOARD – 5TH DECEMBER 2024**REPORT OF THE ICB CHIEF OFFICER – PEOPLE AND TRANSFORMATION****WORKWELL PROGRAMME UPDATE****Purpose of report**

1. The purpose of this report is to inform the Health and Wellbeing Board of the delivery plan for Leicestershire, Leicester City and Rutland (LLR) WorkWell, and how the programme will be placed in General Practice to support the population that may have barriers in returning to work and thrive in work.

Recommendation

2. The board is asked to:
 - a. note the update on the WorkWell programme for LLR and that all fifteen Primary Care Networks (PCNs) within Leicestershire have signed up to host and deliver the Programme, and;
 - b. Support the implementation of WorkWell within Leicestershire.

Policy Framework and Previous Decisions

3. A meeting of the Health and Wellbeing Partnership (the 'ICP') approved the submission of a bid to the Department of Health and Social Care (DHSC) at a special meeting of that board on the 15th August 2024. The bid was approved on the 3rd May 2024.

Background

4. WorkWell, a joint Department of Work and Pensions (DWP) and DHSC pilot, is a demonstration of the Government's ambition to combine cross-government efforts to ensure everyone can reach their potential. Further, WorkWell supports the key aims of the major condition's strategy, with mental health and musculoskeletal health conditions being the most common conditions which lead to health-related labour market inactivity.
5. The LLR programme is one of 15 national vanguards being established to provide this service. WorkWell services are expected to begin service delivery from autumn 2024.

6. WorkWell recognises that reversing the trend in inactivity cannot be achieved by programmes acting in siloes - it requires an integrated whole-systems approach to addressing health-related barriers to work at a local level.

What is WorkWell?

7. WorkWell focuses on early intervention and support, offering participants an expert assessment of their health-related barriers, along with a tailored plan to address these. It will also serve as a pathway to existing local services to help people get the support they need.
8. WorkWell will provide advice and support to employers, and it will triage, signpost and send referrals to clinical and non-clinical support including wider community provision, for example, care navigation teams, work health coaches, accessing healthy lives programmes, or debt advice.
9. The service will be available to people with a disability or health condition who:
- Need support to remain in work;
 - Need support managing a condition in order to return to work from sickness absence, or;
 - Need support to start work.
10. It is envisaged that the WorkWell service will be based on the principles of personalised care and delivered by a multi-disciplinary team. It is known that work is an important social determinant of health, both directly and indirectly on the individual, their families and communities. A healthier population is also a wealthier and more productive one. Data shows the longer an employee's sickness absence lasts, the less likely they are to return to work.
11. It is known that work and health are inextricably linked. Being in work raises living standards and pulls people out of poverty, and a prolonged absence from work can lead to a deterioration in health and wellbeing, both due to financial strains and the absence of positive psychological and social support.
12. Recruitment is under way by PCNs for a new specialist role of 'work and health coach' and employed by host practice. It is expected that work and health coaches will be able to provide:
- An initial assessment of barriers to employment;
 - Return-to-work/thrive-in-work planning, with clear objectives that address physical, psychological and social needs;
 - Employer liaison - if the participant consents, the employer can be contacted to share the work plan and provide advice;
 - Advice on workplace adjustments;
 - Personalised work and health support with follow-up as required, including ongoing support in the form of locally determined, low intensity appointments to take stock of progress and recommend further actions and activities.

13. WorkWell services will be locally led in response to population need, building on existing supports to provide an integrated, local work and health service. Integrated Care Systems, including local authorities, will play a central role in convening local partnerships to design and deliver WorkWell, alongside wider partners including jobcentres.
14. Individuals can be referred to WorkWell through their employer, local services within their area, primary care providers such as GPs, Jobcentre Plus and through self-referral.
15. The LLR WorkWell service will:
- Offer a delivery vehicle to Integrated Neighbourhood Teams (INTs) (working in communities across LLR);
 - Build on existing local services and provide a triage, referral and signposting service to other services;
 - Release pressure within primary care;
 - Bring health and wellbeing benefits to being in work. In LLR, according to NHS Digital, there are approximately 20,000 individuals yearly requesting a fit note, all eligible for a WorkWell service. Assuming 4,000 to 6,000 of these are a first or second episode, they would be the prime candidates for the service;
 - Achieve key performance indicators and outcomes that are agreed with the national team. These are likely to include: return to work, remain in work, reduced health barriers to working or looking for work, and user experience;
 - Support economic growth;
 - Inform the development of an LLR Integrated Work and Health Strategy.
16. We will focus our efforts across Leicestershire where there are the highest levels of economic inactivity and long-term conditions, particularly musculoskeletal (MSK) and mental health conditions:
- a. **Charnwood:** Loughborough Lemyngton and Hastings, Storer and Queens Park, University, Shelthorpe and Woodthorpe, Syston West and Shepshed East
 - b. **Harborough:** Market Harborough Central
 - c. **Hinckley and Bosworth:** Barwell, Hinckley Central and Hinckley Clarendon Park
 - d. **North West Leicestershire:** Agar Nook, Coalville
 - e. **Oadby and Wigston:** Wigston town, South Wigston.
17. All fifteen PCNs in the County have agreed to participate in the WorkWell programme.

Resource Implications

18. Funding for WorkWell is via a DHSC grant award. Across 2024/25 and 2025/26, around £57 million is planned for approximately 15 Vanguards to design and

deliver WorkWell Vanguard Services across both financial years. The value of the grant award for LLR is £3,770,800.

Background Papers

<https://www.gov.uk/government/publications/workwell/workwell-prospectus-guidance-for-local-system-partnerships>

Circulation under the Local Issues Alert Procedure

19. Not applicable.

Appendices

1. LLR ICB EIA Stage 1
2. LLR WorkWell Full Delivery Plan – separate attachment

Officer to contact

Louise Young, Deputy Chief Officer – People and Transformation.
Telephone: 07886 455817
Email: Louise.Young36@nhs.net

Relevant Impact Assessments

Equality Implications

20. There are no equality implications arising from the recommendations in this report.

Human Rights Implications

21. There are no human rights implications arising from the recommendations in this report.

Crime and Disorder Implications and Environmental Implications

22. Not relevant.

Partnership Working and associated issues

23. The LLR WorkWell Programme may increase capacity in Talking Therapies, Individual Placement Support and Occupational Health.