

## NORTHUMBRIAN WATER LIMITED 'WELLBEING PROGRAMME': UNITED KINGDOM

### 1. Organisations involved

- Northumbrian Water Limited
- Chartered physiotherapists (RehabWorks)
- Occupational health provider

### 2. Description of the case

#### 2.1. Introduction

Northumbrian Water Ltd (NWL) is one of ten regulated water and sewerage businesses in England and Wales. Trading as Northumbrian Water in the north east, it provides water and sewerage services to 2.7 million people, and, as Essex & Suffolk Water in the south east, it provides water services to 1.8 million people.

The group employs approximately 3,000 workers, of whom 70% are male. Thirty per cent of the workforce is over 50 years old and sick leave costs the company in the region of GBP 1 million per annum (approximately EUR 1.4 million).

In 2008, the company determined that musculoskeletal disorders (MSDs) accounted for 38% of sick leave, with stress and mental health problems costing 4,300 lost work-days. This finding, coupled with organisational changes, led to the establishment of the NWL Wellbeing Programme.

#### 2.2. Aims

The NWL Wellbeing Programme aimed to prevent health problems and deal with those occurring at an early stage before they developed into long-term or chronic issues. In turn, this would improve the health and wellbeing of employees and reduce sick leave.

#### 2.3. What was done, and how?

Discussions among stakeholders in the organisation, including the human resources (HR) department, trade union representatives, line managers and employees, with the support of external providers of occupational health, physiotherapy services and employee welfare, agreed that action was needed to provide early interventions and reduce the rates of sick leave and other related costs, such as insurance claims.

The organisation worked with external occupational health providers to identify various options and prepare a business model for presentation to the senior management team. The initial aim was to develop the focus on wellbeing in general rather than concentrate solely on specific issues, such as MSDs or stress.

##### 2.3.1. Implementation of the activities

The HR department trained line managers about the services available to employees under the Wellbeing Programme. The role of the line manager in this initiative is to direct individuals to any self-help available, or to refer them for more specialised help from external providers. Additional training and information, along with ongoing HR support, aid line managers in their capability to manage these sensitive situations. Face-to-face contact sessions with 95% of line managers gave them the skills and support they needed to do this.

Employees can also self-refer to the NWL Wellbeing Programme to access support and information about a range of health, wellbeing and consumer-related issues. Employees can also request counselling support, either remotely by telephone or face to face.

### **2.3.2. RehabWorks interventions to tackle MSD issues**

Following the 2008 introduction of a robust absence-recording system and analysis of sickness-absence data, rehabilitative interventions were first introduced. RehabWorks, a chartered physiotherapist company that provides injury management and rehabilitation services for industry, partnered with NWL to deliver this. This intervention aimed to reduce the impact of MSDs by providing early access to physiotherapists who could diagnose and offer work-focused treatment. RehabWorks also focuses on prevention and early intervention, offering enhanced training in manual handling and body mechanics, which help in the identification of ergonomic improvements.

The process, still ongoing in NWL, involves a referral from a line manager to RehabWorks as early as within three working days of the problem being reported. Recommendations from the physiotherapists in relation to treatment and management of the symptoms are returned to the company, allowing the employer to make changes if relevant. From 2010, at employees' request, the physiotherapists also send a copy of the final management report to the employee's general practitioner.

### **2.3.3. NWLSupport to tackle stress and wellbeing issues**

In April 2010, a number of initiatives, called NWLSupport, were introduced to tackle NWL's second biggest cause of sick leave: stress and mental health issues. NWLSupport offers confidential counselling and life management support to enable people to cope with stress and the challenges that they may face on an everyday basis.

NWLSupport offered five sessions of face-to-face counselling for employees and their immediate family, to take place within seven days of initial contact. Telephone triage is also provided for those experiencing mental health problems, using qualified occupational health nurses who can then recommend and progress appropriate treatment options.

HR provides ongoing support and training for line managers to help them to manage these sensitive situations.

### **2.3.4. Other health promotion and employee wellbeing activities**

In addition to support services provided by the company, employees have also been encouraged to take part in an annual walking challenge (10,000 steps a day). Other outreach activities include volunteering within the community in company time.

### **2.3.5. Evaluation**

The programme has not been formally evaluated as a stand-alone initiative but sickness-absence data are collected on a regular basis, and the number of referrals is documented.

## **2.4. What was achieved?**

By 2012, 1,871 employees had been referred to the RehabWorks interventions, while 630 employees had used NWLSupport to identify solutions to workplace problems.

Sick-leave rates reduced from 3.25% in 2007–2008 to 3.10% in 2010–2011. Absence related to MSDs reduced by 40%, while stress-related absence reduced by 13%. Employee turnover was down from 8.2% in 2006–2007 to 5.8% in 2010–2011, compared with an industry average of 9.4%.

The first 2 years of the walking challenge have seen 30% of employees take part. This is now under review to explore options for other activity challenges. Over 50% of employees took part in volunteer activities across their local communities.

The support programmes are ongoing. The most recent data collected identify 560 referrals to the physiotherapy service, 330 referrals to occupational health and a 4% participation in the Employee Wellbeing Programme in 2013-2014.

No cost-benefit analysis has yet been undertaken to identify if the interventions have reduced costs. However, the company reports that, while it has been unable to maintain the reduction in MSD-related absence achieved at the end of the first 3 years of the physiotherapy service, absence levels have been well managed and maintained during what has been a period of significant change. Crucially, employees value the services, and they have helped to improve employee engagement levels.

## 2.5. Success factors

The following success factors have been identified:

- *Targeting all workers:* Involving all workers throughout Northumbrian Water Limited, not just specific groups, such as older workers, or specific job roles has increased the impact of the programme. Recognising that it is important to reduce MSD risks and psychosocial risks for all workers helps to create sustainable work.
- *Culture of health promotion:* Training line managers on the softer skills associated with workplace health issues was particularly important for creating a health promotion culture and ensuring continued employee engagement with the changes
- *External support:* The use of professionals and external supports, such as RehabWorks, added weight and credibility to the programme.
- *Coordination of stakeholders:* HR and occupational health services work together to encourage involvement across the company.
- *Diversity of measures:* Different measures were introduced over time, targeting various specific issues. These measures were at both individual and company levels, increasing the breadth and depth of the programme.

## 2.6. Transferability

The systematic nature of approach taken here could be adopted by other companies to target multiple sources of health issues. The processes used by this group could be easily transferred to larger companies with workers support or employee assistance programmes.

## 2.7. Further information

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## 3. References and resources

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