

Voicing the concerns of the Public Health Workforce on wellbeing and work-life balance: a brief policy response

This is a brief policy response to our infographic highlighting the <u>impact of the pandemic on their</u> wellness, including their personal and working lives.

Introduction

The public health workforce (PHW) - across all settings, from health visiting to obesity prevention and environmental health - is under enormous stress. Covid-19 exacerbated the already high workload and increasing demand for their services made them work longer hours, suffer from a lack of work-life balance, and feel burned out. There is currently no sign of this letting off.

The pandemic demonstrated to us all that the PHW is crucial in delivering public health services and interventions. They understand the communities they work with and the health inequalities they face. They are skilled at working with specific communities, but also delivering services to the wider population.

The ongoing impact of Covid-19 has emphasised the importance of having open conversations about work-life balance and wellbeing. Those who deliver public health know what they need as a workforce to ensure they are well supported with a better and more balanced work life.

Overview

- The PHW was already under stress before the pandemic. Covid-19 shone a light on the importance of work-life balance and wellbeing of staff.
- Government must show its commitment to public health and listen to the workforce's concerns.
- There must be a shift at the national level to address the wellbeing of the PHW – a good work-life balance is key for an engaged and effective workforce.
- Public health services must be properly funded, and the workforce adequately paid.
- With the scrapping of the Health Disparities
 White Paper and worries that the Levelling
 Up mission is drifting off, there are real
 concerns that we are lacking a national
 approach to tackling health inequalities and
 that the workforce will be left rudderless.

Wellbeing

The PHW is exhausted. The Covid-19 response increased demand for already over-stretched services. Staff shortages and the difficulties many organisations face when recruiting and retaining the range of staff who deliver services, make the situation of those already in post even more challenging.

The consequence is a stressed and burnt-out workforce, reporting a lack of work-life balance and feeling inadequately compensated for their work. We received countless stories, such as people having to work on weekends to be able to deliver their routine public health services on top of the response to the pandemic or working 12 hours a day for 2 years. The workforce tells us that wellbeing should be a central focus and more time and money should be invested to allow everyone to thrive at work.

Evidence

We asked our members about factors that would make them consider leaving their jobs. 55% said stress, 43% said lack of work-life balance, 42% said burnout, 34% said working long hours and 34%

¹ Local Government Association. Public health staff shortage and exhaustion warning as COVID-19 infection rates rise [Online] 23 March 2022. Available at https://www.local.gov.uk/about/news/public-health-staff-shortage-and-exhaustion-warning-covid-19-infection-rates-rise Accessed on 16th September 2022

said inadequate compensation for their work. Not surprisingly, they reported that this work crisis is impacting their personal lives.

Whilst there is an NHS People Plan which has staff wellbeing as one of its core areas,² there is little published evidence on, or a national strategic plan, to support the wellbeing status of the PHW. The LGA offers support and information to employers, and individual councils have developed strategies and resources to create a positive and supportive working environment.^{3,4} However, a national strategy would provide guidance and support at a national level for the range of people who deliver public health.⁵ This could draw on the principles of the NHS People Plan which offers direction and advice to employers and communities to build supportive working environments. Importantly, such a plan would support the NHS, as the services the PHW delivers alleviates pressures from the NHS and stops people from needing many services down the line.

Addressing burnout of health and care professionals requires sustainable, long-term and multifaceted solutions.⁶ It requires organisational commitment to a culture change, reflection on the use of resources, peer support and professional autonomy.^{7,8}

Policy recommendations

- The core and wider PHW are crucial in delivering services that make the country a healthier
 and more prosperous place. Government, employers and training institutions must recognise
 their value and their needs as a workforce as a first step to improving their wellbeing.
- Develop a people plan for the PHW this would need to consider the wide range of services the PHW deliver and the settings they work in, reflect on NHS and social care people plans and carefully consider where the PHW – and the health of the nation - needs to be in 10-years' time.
- **Listening** to them is essential, so they are better supported and share what can be done so their wellbeing improves. This will result in an even more engaged and effective workforce.
- **Public health grants must increase** to compensate for inflation losses⁹ ensuring that the workforce is adequately compensated for the incredibly hard work they do and are more able to effectively plan services.
- Action not words Government must act on its commitment to public health and
 address health inequalities. The Health Disparities White Paper was the key opportunity to
 tackle the vast inequalities and disparities we currently face. With this paper scrapped, the
 PHW and those working across healthcare, are left with no national guidance or steering. It is
 crucial that Government address this gap and utilise the evidence and insight gathered in
 preparation for this White Paper.

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² National Health Service – NHS. We are the NHS: People Plan for 2020/2021 – action for us all [Online]. July 2020. Available at https://www.england.nhs.uk/ournhspeople/ Accessed on 16th September 2022

³ Glasgow City Council. Workforce wellbeing support. [Internet] 2021. Available at https://www.glasgow.gov.uk/workforcewellbeing Accessed on 28th September 2022

⁴ West Lothian Council. Employee health and wellbeing. [Internet] 2022. Available at https://www.westlothian.gov.uk/article/49978/Employee-Health-Wellbeing Accessed on 28th September 2022

https://www.westiotnian.gov.uk/article/49978/Employee-Health-Wellbeing Accessed on 28th September 2022

5 Local Covernment Association, Wellbeing: Supporting employers with the health, resilience and wellbers of their workfor

⁵ Local Government Association. Wellbeing: Supporting employers with the health, resilience and wellness of their workforce. [Online] Available at https://www.local.gov.uk/our-support/workforce-and-hr-support/wellbeing Accessed on 28th September 2022

⁶ Butcher I, Saeed S, Morrison R, et al. Qualitative study exploring the well-being experiences of paediatric critical care consultants working in the UK during the COVID-19 pandemic. *BMJ Open* 2022;12:e063697. doi: 10.1136/bmjopen-2022-063697

⁷ Montgomery A, Panagopoulou E, Esmail A, Richards T, Maslach C. Burnout in healthcare: the case for organisational change. *BMJ* 2019; 366:l4774 doi:10.1136/bmj.l4774

⁸ Carrau D, Janis JE. Physician Burnout: Solutions for Individuals and Organizations. *Plast Reconstr Surg Glob Open*. 2021 Feb 16;9(2):e3418. doi: 10.1097/GOX.0000000000003418.

⁹ The King's Fund. The Comprehensive Spending Review – what more for health and care spending? [Online] 2021. Available at https://www.kingsfund.org.uk/publications/comprehensive-spending-review-health-and-care-spending Accessed on 16th August 2022