



HEALTH AND WELLBEING BOARD PAPER FORMAL PUBLIC MEETING

Report of: Greg Fell Strategic Director of Public Health and Integrated Commissioning

Date: March 2024

Subject: Employment and Health

Author of Report: Ruth Granger Consultant in Public Health
Laura Hayfield Head of Employment and Skills
Sheffield City Council

Summary:

- Employment is a key determinant of health
- Good work is good for health
- Both getting a job and retaining a job are important
- A substantial proportion of the population who are out of work or who struggle to keep their job have a health condition, live in the most socio-economically deprived parts of the city and have protected characteristics.
- The Health and Wellbeing Board can support good work as advocates for addressing health inequalities, as employers and as providers of services.

Questions for the Health and Wellbeing Board:

1. How can the Health and Wellbeing Board support employers to have positive working practices including providing reasonable adjustments and workplaces which support good work?

2. What can the Health and Wellbeing Board contribute to 'stitching together' of services to support people with health conditions to get and keep a job?
3. As organisations linked to health and social care - how can we provide good work and support people to get and keep a job with us? How can major employers work together on this?
4. How can our service provision support people to get or keep a job? Including supporting people on waiting lists by linking with employment support?

Recommendations for the Health and Wellbeing Board:

1. Note the importance of employment for health and wellbeing
2. Take opportunities to advocate for good work as an important determinant of health including:
 - The role of employers providing good work and supportive environments
 - Supporting the work of the Sheffield Skills and Employment Advisory Board to develop the Employment and Skill Strategy
 - Supporting the work of the Local Integration Board stitching together support for people with health conditions to get and keep a job
3. To provide good work for employees in their organisations.

Background Papers:

- Attached to this paper is the presentation on work and health which outlines the key issues to be discussed by the Board in the meeting
-

Which of the ambitions in the Health & Wellbeing Strategy does this help to deliver?

Ambition 5 : Everyone has a fulfilling occupation and the resources to support their needs

Who has contributed to this paper?

Ruth Granger: Consultant in Public Health (Employment and Health)

Laura Hayfield: Head of employment and Skills

Kevin Owers – Policy Officer, Employment and Skills

Sheffield City Council

Employment and Health

This report summarises the slides that are attached and which will be shared with the Board in the public meeting.

1.0 SUMMARY

- 1.1 Employment is a key determinant of health
- 1.2 Good work is good for health
- 1.3 Both getting a job and retaining a job are important
- 1.4 A substantial proportion of the population who are out of work or who lose their job have a health condition and live in the most socio-economically deprived parts of the city.
- 1.5 The Health and Wellbeing Board have a role as advocates for addressing health inequalities, as major employers and as providers of health and social care services to support good work.

2.0 HOW DOES THIS IMPACT ON HEALTH INEQUALITIES IN SHEFFIELD?

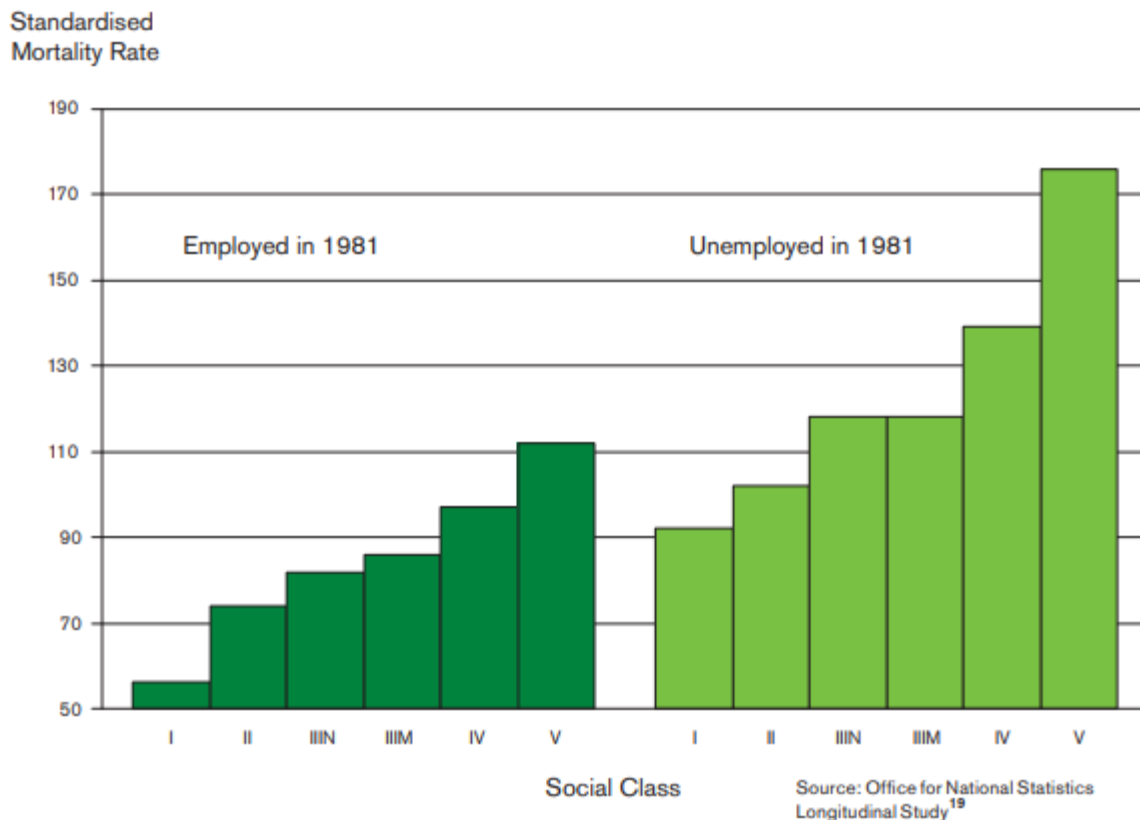
- 2.1 Unemployment is bad for health. Those who are unemployed die earlier than those who are employed.
- 2.2 Employment is a component within the Health and Well-Being Strategy Ambition 5: people have a fulfilling occupation and the resources to meet their needs.
- 2.3 Employment and Health are part of the City Goals, Goal 1: 'We build a fair, inclusive and creative local economy that attracts and retains talent, supports local businesses and invests in opportunities for all'.
- 2.4 People with health conditions are more likely to be unemployed. There is a gap in employment rates between those with and without a health condition. The gap is widest in those with a disability and those needing support from secondary mental health services.
- 2.5 People who live in the most socio-economically deprived parts of the city are less likely to be employed.
- 2.6 The impact of unemployment is long term and intergenerational. A higher proportion of children in the east of the city live in households where no adult is in paid employment. This affects their life chances now and in the future.

3.0 HOW DOES EMPLOYMENT LINK TO HEALTH

3.1 Evidence of the impact of Employment and Health

There has been evidence for decades that people who are unemployed die earlier. The graph below from the Marmot report shows the Standardised Mortality rate - how many people out of 100,000 people die in a year. This is quoted in the Marmot report (2010) Fair Society, Healthy Lives.

Mortality of men in England and Wales in 1981-92, by social class and employment status at the 1981 census



3.2 Why is good work good for health?

Good, paid, employment improves health and wellbeing and reduces social isolation through being a significant source of income. A large body of research has shown that income is related to life expectancy¹. Studies show amongst families where all adults are full time employed only 5% are living in poverty. In families where no adults are in paid work 50% of adults are living in poverty².

Employment also provides wider health benefits in providing a purpose and fulfilling occupation. The social support and networks provided by work are also valuable for health particularly mental health.

¹ Marmot (2010) Fair Society Healthy Lives

² Family work status and poverty <https://www.jrf.org.uk/data/family-work-status-and-poverty>

3.3 What is 'good' work?

Employment can be bad for health if it is unsafe job, is poorly paid or is a place where people experience discrimination or a lack of control. There are a number of definitions of what good work is. One definition is provided by the Trade Union Congress below:

A great job is where you ...

- are paid fairly
- work in a safe and healthy workplace
- are treated decently
- have guaranteed hours
- have the opportunity to be represented by unions and a strong independent voice on what matters at work
- have the opportunity to progress at work and get on in life

Source: <https://www.tuc.org.uk/publications/great-jobs-agenda>

3.4 Impact of health conditions on getting and keeping a job

Long term sickness is the most common reason for economic inactivity (not having a job and not looking for a job) in Yorkshire and the Humber. ³

People with health conditions are more likely to be economic inactive or unemployed and there are significant gaps between people with and without health conditions.

- 10% gap in employment between those with and without a long term health condition
- 65% gap for people who need support from secondary health mental health services
- 22% of autistic people are in employment compared to 52% of disabled people and 81% of non-disabled people ⁴

However, many people with health conditions want to work. Of the 4.9 million people with ill health who are not participating in paid work in the UK 46% want to work now or in the future.⁵

3

Data source: Office for National Statistics. Indicator source: Produced by Office for National Statistics from Annual Population Survey, accessed via [annual population survey - regional - economic inactivity by reasons - Nomis - Official Census and Labour Market Statistics \(nomisweb.co.uk\)](#)

⁴ ONS labour market profile 2022 www.nomisweb.co.uk

Public Health Outcomes Framework (www.fingertips.phe.org.uk)

National Autism Strategy 2021 <https://sheffieldautisticsociety.org.uk/wp-content/uploads/2021/07/The-national-strategy-for-autistic-children-young-people-and-adults-2021-to-2026.pdf>

⁵ [The Great Retirement or the Great Sickness? Understanding the rise in economic inactivity \(dynamics.com\)](#)
Joseph Rowntree Foundation March 2023

3.5 Support available to get a job

There are a number of programmes to support people in Sheffield to get a job including specialist support for people with health conditions. This is provided by a range of providers working at a national, regional and local level. These are funded through a variety of routes. This support can be difficult to navigate both for referrers (like GPs) and for individuals who want support.

More detail about programmes to support people with health conditions to get a job can be found in slide 14 and 15 of the presentation.

The complexity of the landscape of support as well as the changing funding environment for these projects means that the system can be complex to navigate for referrers and for those looking for support. There is a need to stitch this provision together and this is the aim of the Local Integration Board which is described later in the paper.

3.6 Support available to help people to keep their job

Historically there has been a lower level of provision of support for people with a health condition to retain their job. For those working in larger organisations support might come from the organisation's occupational health provision but this support can be limited.

Recognising the national gap in occupational health, the government have recently established a commission examining occupational health provision chaired by Dame Carol Black. The limitations of the availability and scope of occupational health support impacts on job retention.

In Sheffield we also have Sheffield Occupational Health Advisory Service (SOHAS) commissioned by the Public Health Grant which is particularly focused on people working in small organisations without occupational health provision. This service supports people with health conditions to keep their job.

3.7 Governance for Employment and Health

Employment and Health work strategically straddles two worlds. These are the health and social care space and the employment and skills space. The Sheffield Employment and Skills Advisory Board is the partnership group work to address barriers to work. This group is developing the Sheffield Employment and Skills Strategy.

A subgroup of the Board brings together the providers of employment and health support to form the Local Integration Board. The membership includes Department of Work and Pensions, Health Partners, Community and Voluntary Sector and City Council commissioned employment support. The aim of this group is to bring together providers to share good practice on issues such as engaging with employers and to aid understanding of the system by providers so they in turn can support navigation of the system.

3.8 Employment and Skills Strategy

The Employment and Skills Advisory Board are leading work to deliver a new Employment & Skills Strategy for Sheffield, to be adopted by stakeholders across the city. This will deliver a long-term vision for the city beyond 2030 and a roadmap with clear milestones to drive delivery of a 5-year action plan. This will include action to

1. Increase economic activity, providing access to the labour market
2. Provide targeted and/or specialist support for those facing specific barriers to work
3. Support employers to provide inclusive workplaces with flexible practices

4.0 WHAT NEEDS TO HAPPEN TO MAKE A DIFFERENCE IN THIS AREA?

4.1 Provision of services to support those wanting to get or keep their job

Funding for employment programmes and support for people to keep their job have often been short term and can be precarious for smaller providers like the community and voluntary sector.

Changes in funding leads to changes in provision and it can therefore be difficult for those supporting people with health conditions (such as GPs) to know where to send people for support. Individuals who are looking for support can also struggle to find the most appropriate support for their need or health condition.

National funding has been made available for a Work Well Partnership Programme where the focus is on integrating existing local provision for supporting people in work and very recently out of work to keep their job or get quickly back into work. A bid from South Yorkshire for £3.5 million was submitted to the National Work and Health Directorate by the South Yorkshire ICB supported by South Yorkshire Mayoral Combined Authority. If this is successful it will fund work to aid navigation of the system and help to fill gaps in provision.

4.2 All employers supporting good employment practices

To provide good work, employers need to have supportive employment practices so all staff can work in environments which are free from discrimination, pay people appropriate and design jobs that allow people to be productive and thrive. Well-being initiatives such as providing free fruit or physical activity are only of value in the context of an employer who also has safe working practices, fair recruitment and career development and provides reasonable adjustments for staff with health conditions or caring responsibilities. Increasing the support to employers to enable them to have good working practices is an area where more work is needed and is included as part of the Work Well Partnership Programme bid for funding. Supporting employers will also be a component of the new Employment and Skills Strategy.

4.3 Role of Health and Social Care employers

Health and Social Care is the biggest employment category in Sheffield. As major employers Health and Social Care Providers members of the Board have a substantial role in helping people to manage their health condition so they can retain their job and in employing and providing good work for people with health conditions.

Health and social care providers can also support service users for example through ensuring that service users on waiting lists with health conditions are given advice or signposted to support to help them keep their job.

5. Questions for the Board

1. How can the Health and Wellbeing Board support employers to have positive working practices including their approach to reasonable adjustments and providing workplaces which are free from discrimination?
2. What can the Health and Wellbeing Board contribute to 'stitching together' of services to support people with health conditions to get and keep a job?
3. As organisations linked to health and social care - how can we provide good work and support people to get and keep a job with us? How can major employers work together on this?
4. How can our service provision support people to get or keep a job? Including supporting people on waiting lists by linking with employment support?

6. RECOMMENDATIONS

6.1. Note the importance of employment for health and wellbeing

6.2 Take opportunities to advocate for good work as an important determinant of health including

- The role of employers providing positive and supportive environments
- Supporting the work of the Sheffield Skills and Employment Advisory Board to develop the Employment and Skill Strategy
- Supporting the work of the Local Integration Board to fund and stitch together support for people with health conditions to get and keep a job

6.3 To provide good work for employees in their organisations.

Ruth Granger March 2024