

Work, Worklessness and Health in Bradford District

23 November 2009

**A report from the Joint Work and Health Task Group of
the Health and Well Being Partnership and
Employment and Skills Partnership**

November 2009

Contents

Section	Topic	Page
1.	Introduction	3
2.	An overview of the district	4
3.	Work worklessness and health issues	7
4.	Examples of support available to the district	15
5.	Recommendations	20
6.	References	24

Appendices

Number	Topic	Page
1	Members of the Joint Work and Health Task Group	26
2	Main recommendations from Dame Carol Black's report: Working for a Healthier Tomorrow, and the Government response	27
3	Support available to improve work, health and workplace health	30

1. Introduction

This report was produced by the Joint Work and Health Task Group which was established in March 2009 by the Local Strategic Partnership Health and Well Being Partnership and Employment and Skills Partnership.

The purpose of the Joint Work and Health Task Group was to scope the potential for local action to support healthy work places, reduce the numbers of workers moving on to long term sickness absence, and increase the numbers of long term unemployed returning to work.

All partners agreed that the recommendations of the Task Group should be considered within the context of the economic recession.

This report aims to:

- Provide a snap-shot of work, worklessness and health issues within the Bradford district.
- Outline the evidence of the effects of recession on work and worklessness and health.
- Describe some of the national and local support for organisations and individuals to reduce worklessness and the potential negative impact of work and worklessness on health.
- Make recommendations to the Health and Well Being Partnership and Regeneration Partnership on options to improve health in the workplace and reduce the impact of the recession.

The report should be read in conjunction with the Joint Director of Public Health's Annual Report 2008/9 on the economic downturn, the draft of which has been used to inform this report.

The district's Sustainable Communities Strategy 'The Big Plan' and Local Area Agreement (LAA) acknowledges the need to address the work and health agenda, and this is supported by the National Indicators within the LAA: NI 151: Overall employment rate (working-age); NI 153: Working age claiming out of work benefits in the worst performing neighbourhoods

In March 2008 Dame Carol Black published the first ever national review into the health of the working age population '**Working for a Healthier Tomorrow**' (from hereon in referred to as the Black Report) which called for urgent and comprehensive reform and a new approach to health and work in Britain.

In November 2008, the Government published its response to the review '**Improving Health and Work – Changing Lives**'

Recommendations from Working for a Healthier Tomorrow and the Government's response are included in appendix 2.

2. An overview of the district

Bradford's resident population stands at around half a million, making Bradford the 4th largest metropolitan district in England, and 5th largest in the UK.

The working age population in the district is 306,100 (62% of the total population), and this population is growing at a faster rate than other major UK cities outside London, providing a workforce for the jobs created in the district, West Yorkshire and beyond.

Ethnic communities comprise 24% of the total population, and Bradford has experienced an increase in the number of migrants from eastern European countries coming to find work.

Bradford also has higher levels of disability amongst the working age population (22.4%) compared to England (18.4%). (1).

There are around 15,000 businesses in the district. Between them, they provide 195,500 jobs, and about 78% of these jobs are held by local residents. 42,000 Bradford residents travel out of the district to work, and 45,000 people travel from outside into the district. The majority of businesses employ fewer than 250 people, and around 26,000 people (8% of the working age population) in the district are self-employed. Business start-up and survival rates are improving faster than national and regional averages.

Over 80% of employee jobs in the Bradford district are within the service sector, and this sector has been growing, while the number jobs in manufacturing and construction have fallen. However, Bradford still has a significant manufacturing base compared to the regional and national sector profiles, with over 15% of the share of jobs in the district compared to 10% in Great Britain.

Unemployment and economic inactivity is increasing. The employment rate for the District is around 68.5%, and this rate is significantly below the regional (73.2%) and national (74.3%) averages. In the current recession, Job Seekers Allowance claimant count shows an increase in unemployment, and is rising fastest in the more affluent areas of the District. Local redundancies are increasing, and more job losses are forecast. However, indications are that the recession is affecting Bradford less than it is other districts at the current time.

The workless population is 90,000 (29% of the working age population). People from black and ethnic minority communities, lone parents, people over 50, and people with disabilities or low qualifications are less likely to be employed. 49% of the non-white working age population is workless compared to 25% of the white population, and 40% of the workless population is disabled. Vulnerable groups experience poorer health and may have greater difficulty in accessing work.

Youth unemployment has worsened in the current recession. It is highest in the most deprived wards in Bradford. Tong, Undercliffe, Bowling and Keighley South have particularly high levels of youth unemployment.

The district remains a low pay area, with Bradford residents in full time employment earning on average £381.50 per week, compared to £425 regionally and £459 nationally, and although median earnings for Bradford residents rose between 2004 and 2007 by 7.5%, this was lower than the regional and national increase. There is a well proven link between deprivation, unhealthy lifestyles and poor health.

Bradford is within the 10% most deprived local authorities in the country and has significant variation in the levels of deprivation between different neighbourhoods and communities. Reliance on benefits is particularly high in deprived areas, and there are a lot of people living in those areas who do not expect to succeed. Despite recent improvements, skills levels fall short of regional and national averages, and the proportion of people without any qualifications is high.

Bradford District's Bradford's Economic Strategy 2007-2020 aims to improve the economic situation within the district. It focusses on:

- **Improving educational levels and skills within the district.** Skills for Life learners have greatly increased. 11,375 learners achieved nationally recognised qualifications in numeracy and literacy in the three years to July 2007 against a nationally set target of 6,616. The first round of the £4.9 million Working Neighbourhood Fund skills and employment package worth around £2.9 million has been commissioned.
- **Improving the employability of Bradford residents,** targetted at the needs of Bradford businesses.
- **Removing the barriers to work** for those who want to work and connect people to employment; Business start-up rates have improved. In 2007 the number of new VAT-registrations in Bradford increased by 2.9% compared to national growth of 2.1%, whilst the Kickstart programme has helped 749 people planning to set up their own businesses.
- **Attracting company relocations and investment** to provide jobs in growth sectors; We have secured the largest investment into Yorkshire in 2007 – Marks & Spencer is building a major distribution centre creating 2,500 jobs.
-
- **Improving the transport and communications infrastructure** that allow people to live and work well, including cycle routes to provide a sustainable and healthy means of transport for a range of journeys including travel to work. Major transport schemes have been completed including the M606 Staygate roundabout in south Bradford, the Manchester Road guided bus scheme and the Connecting the City project in the city centre. Physical infrastructure improvements are being delivered including city centre streetscape improvements, Listerhills Student Village, Building Schools for the Future, Prologis, Lister Mills, the Southgate development and the redevelopment of Myrtle Walk in Bingley.

The health of the district's population.

The overall health of the local population is improving. Mortality rates in the district are declining, however they remain higher than the national average. There are also significant health inequalities within the district.

The main causes of death within the district are cardiovascular disease, cancer and respiratory diseases. The major risk factors associated with these diseases are smoking, low levels of physical activity, poor diet and obesity. There is also a high prevalence of diabetes in the district.

Other health concerns in the district are sexually transmitted disease and teenage pregnancy; the use and misuse of alcohol, tobacco and illegal drugs; mental health; infant mortality; and social care and support for older and vulnerable people. These are identified in the Big Plan as priorities for health and well being.

Having a job, and having a job in a healthy environment, will improve or hinder a person's chances of making healthy choices.

Evidence shows that:

- Those in employment are likely in general to experience better health than those who are unemployed.
- Those with lower levels of income are likely in general to have poorer health than those with higher levels of income.
- A person's health affects their ability to work.

The workplace has long been recognised as providing opportunities both to improve the health of the workforce and to address health inequality.

3. Work, worklessness and health issues

Work and good health

Evidence suggests that there is a positive relationship between health and well-paid fulfilling work; a negative relationship between health and low paid, unfulfilling work; and a negative relationship between health and unemployment. In short, good work is good for a person's health and well being; poor, unsafe, insecure work is bad for a person's health and well being; and unemployment is bad for health and well being.

In the past, when people thought about health in the workplace, they were mostly concerned with 'health and safety', for instance, minimising physical hazards. Today, traditional health issues, such as noise, dust and chemical hazards, are still vitally important. However, our growing concern with good work-life balance has also made us aware of the relationship between our jobs and our mental and physical wellbeing.

The workplace is a setting where many people spend the largest proportion of their time. For most people, work is a key determinant of self worth, esteem, identity, standing within the community, material progress and a means of social participation and fulfilment.

Being in the right kind of work improves self-esteem, quality of life and well-being. In addition, if people have a health condition, being in work can help people to get better; and remaining in or returning quickly to work is beneficial to people with both physical and mental health conditions.

Good work is also good for business. The benefits of promoting a healthy workplace are for employers as well as employees. Healthy and motivated workers are more likely to 'go that extra mile', give good customer service, take fewer sick days and provide commitment and creativity, thereby increasing productivity and the reputation of the company.

Responsibility for health and wellbeing at work belongs to both employers and employees. The key factors that can determine whether workers will have a positive or negative relationship with work are:

- Effective policies for managing people issues (such as communication, absence, grievance and occupational health).
- Line managers who are confident and trained in people skills. Managers who identify problems at an early stage and seek to resolve them using informal methods.
- Managers who know how to manage common health problems such as mental health and musculoskeletal disorders (MSDs).
- Managers who promote an attendance culture.
- The relationships between line managers and employees fostering high levels of trust between employees and managers.

- Whether employees are involved in organisational issues and decisions.
- Job design.
- Availability and acceptability of flexible working.
- Awareness of occupational health issues and the use of appropriate health services (e.g. occupational health where practicable) to tackle absence and help staff get back to work.

A report by the Institute for Employment Studies shows some small businesses save up to £250,000 on their budget, simply by using family-friendly work policies. One company claimed profitability was up by 37%.

Good health should improve an individuals chances of finding and staying in work and enjoying the consequent financial and social advantages that come with it.

Workplaces are often underutilised as a setting for promoting health and wellbeing. A good deal is known about ways in which job and environmental design can help promote health, and providing opportunities for activity and a healthy diet, and help to give up smoking, is important. Although a review by the US Centers for Disease Control and Prevention has concluded that behaviour change programmes in the workplace can work, more rigorous evidence of what works in the UK is needed.

Work and ill-health

Not all employment provides a strong foundation for good health outcomes. Although being in work generally leads to better health, not all workplaces are healthy. High risk industries can be more harmful to health than being unemployed, and there is persuasive evidence that a lack of job control, monotonous and repetitive work, and an imbalance between effort and reward are associated with a higher risk of coronary heart disease and other health problems. Poor health and safety management increases the risk of occupational diseases and injury.

Research suggests that people at the bottom of the labour market are low paid and have greater job insecurity, identifying a 'low pay, no pay' cycle of employment and unemployment.

The Black report found that ill health was costing the country £100 billion a year, but concluded that although the economic cost is substantial, the human cost to families is immeasurable.

- In 2006/7, 34 million days were lost overall (1.4 days per worker), 28 million due to work-related ill health and 6 million due to workplace injury.
- 229 workers were killed at work, a rate of 0.8 per 100 000 workers.
- 136,771 other injuries to employees were reported under RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences), a rate of 517.9 per 100,000 employees.

- 299,000 reportable injuries occurred, according to the Labour Force Survey, at a rate of 1000 per 100,000 workers.

The main conditions that keep people out of work are common mental health problems and musculoskeletal disorders. This is often compounded by a lack of appropriate and timely diagnosis and intervention.

In 2007/8 , the HSE estimated that nationally, nearly 13.5 million days were lost due to stress, depression or anxiety, and 9 million days due to musculoskeletal disorders.

The average number of sick days per employee varies depending on the size of the organisation and the sector in which the organisation operates. Staff with 1500 employees or more have a greater than average number of sick days per employee (Chartered Institute of Personnel and Development 2008).

In larger employing organisations, employees do not access or are not referred to occupational health services until they have been off sick for an average of 70 days. Different types of work bring with it different risks to health.

In general, work has become more sedentary which contributes to reduced overall levels of physical activity in the population.

Small businesses and other organisations make an important contribution to Great Britain's economic prosperity. However, they also account for a considerable number of the health and safety incidents reported each year. Some small to medium sized employers (SMEs) conduct certain activities that carry a high level of risk. SMEs often find goal-based health and safety management difficult to apply. It is important to find new ways to help SMEs to understand how to comply with health and safety law in a manner proportionate to the risks posed by their work activities.

SMEs are less likely to have access to or to pay for Occupational Health and Human Resources support for help with managing staff and sickness absence.

40% of organisations have no sickness absence management policy.

Role of GPs

GPs are the main point of call for workers off sick from work. However, the DWP Review found that a lack of understanding about the relationship between work and a patient's health, and the omission of this evidence from professional training, has meant that work-related advice that healthcare professionals give can be cautious and may not be in the best interests of the patient for the long term.

A survey of 327 Bradford GPs, conducted by Bradford Occupational Health and Safety Forum (BAOHSF) in July 2005, found that:

- A large proportion of GPs can identify work related ill health, but there is no clear mechanism in place for the referral or monitoring of cases. Stress and musculoskeletal disorders were identified as the top two symptoms of work related ill health in Bradford.

- Most GPs feel that reasonable adjustments to workers return to work after suffering from occupational ill health is not being addressed sufficiently by their employers.
- A very low number (4%) of GPs in Bradford have an occupational health qualification. A large proportion of GPs agreed that the best way for them to improve their own personal skills in occupational health was through training.
- The most preferred solution to dealing with patients with workplace ill health was to refer to an occupational health specialist where this exists.
- Bradford Council has since set up a scheme with GPs to refer Council workers to the Council's Occupational Health Service.
- Some employers have their own Occupational Health Services or may buy these services in.

Unemployment and health

- Worklessness and unemployment contribute to poor health.
- Evidence suggests that there is a strong association between increased mortality and unemployment.
- All age all cause mortality increases as unemployment rises.
- Some association between unemployment and mortality due to cardiovascular disease.
- Evidence to link unemployment with increased morbidity measured by increased use of health services, and increased detrimental outcomes.
- There is a strong association between unemployment and mental health.
- There is a higher prevalence of common mental health disorders amongst the unemployed.
- Evidence suggests that there is a strong association between unemployment and increased measures of psychological and psychiatric morbidity.
- Psychological ill health accounts for just under half of those classified as long term sick or disabled.
- There is a well documented association between redundancy, and unemployment and psychiatric illness.
- Increased rates of unemployment tend to lead to increased mental illness, particularly depression.
- Families without a working member are more likely to suffer persistent low income and poverty.
- The child of a lone parent who does not work is 3 times more likely to be living in poverty than the child of a lone parent who works part time, and 8 times more likely to be in poverty than the child of a lone parent working full time.
- Persistent low income is associated with poorer child health outcomes e.g. recurrent health conditions, psychiatric disorders and lower levels of well being.
- Teenage pregnancy is linked to low income, deprivation, and lack of formal qualifications adding to the cycle of poverty and worklessness.
- There is a strong association between deprived areas, poor health, poverty and worklessness.
- Unemployed people are at 2-3 times greater risk of suicide than their employed counterparts.
- Prolonged unemployment has been shown to lead to a number of negative behaviours in individuals:

- Increased smoking
- Increased alcohol use, especially in young men
- Increased illicit drugs, especially in the young
- Reduced physical activity

Incapacity Benefit and Severe Disablement Benefit- facts

Incapacity Benefit (IB) and Severe Disablement Allowance (SDA) are claimed by a large proportion of working age population in this country. High levels of benefit claimants in an area are strongly correlated with other aspects of deprivation and poverty (ID 2007).

In August 2008, 17.0% of the working age population (WAP) residing in Bradford District were claiming at least one Department of Works and Pensions benefit. (DWP). This is equivalent to 52,030 people. The total Benefit rate is higher than both that of the Yorkshire and Humber Region (14.8%) and Great Britain (14.2%).

7.9% of the District's working age population were claiming either Incapacity Benefit (IB) or Severe Disablement Allowance (SDA), this is equivalent to 24,160 people. This figure is higher than that of the Yorkshire and Humber region (7.1%) and for Great Britain for the same time period (7.0%)

The areas in the district with the highest percentage of claimants are City ward, South West Bradford and Keighley.

Mental health and behavioural disorders is by far the largest single reason for people claiming Incapacity Benefit and Severe Disability Allowance in the Bradford District. 40.3% of people claiming this benefit do so for this reason. The data also indicates that this group is continuing to grow, and that more people are claiming IB and SDA for longer.

Disease of the Musculoskeletal System fell from 4,990 in August 1999 (representing 21.2% of overall IB and SDA total) to 4,170 in August 2008 (17.3% of overall IB and SDA total).

The length of time that people spend on benefits also negatively correlates with their chances of joining the labour force in the future. Evidence from a number of reports shows that where employment practices do not support staff that have been ill to return to work or to work through periods of ill health, the result can be a move into long term unemployment. Someone who has been off work sick for 6 months or longer has an 80% chance of being off work for 5 years.

Mental health and work- facts

Mental health is a significant issue in relation to worklessness and employment. In general being in work is good for an individual's mental health, however, mental health problems amount to the largest proportion of days off work, and there is a clear stigma associated with work and people with mental health problems.

- About 1 in 6 adults in the population has a mental health problem.
- 1 in 6 women and 1 in 9 men are likely to require treatment in a psychiatric unit during their lifetime, yet only a minority of these will suffer long-term or permanent disability.
- 3 in 10 employees will experience mental health problems during a single year and virtually anyone is susceptible to psychiatric illness.
- People with mental health problems have the highest "want to work rate" [of out of work people] with up to 90% wanting to work.
- Only 20% of people with severe mental health problems are employed compared with 65% of people with physical health problems and 75% for the whole adult population.
- Even for people with more common types of mental illness, such as depression, only about half are competitively employed.
- 40% of people with mental health problems say that they were denied a job because of their history of psychiatric treatment.
- 60% say they have been put off applying for a job as they expect to be dealt with unfairly.
- One third of people with mental health problems say that they have been dismissed or forced to resign from their jobs.
- 47% of people who had experienced mental distress said that they had experienced discrimination in the workplace, and 37% had experienced discrimination when seeking employment.

In a survey of people who were open about their mental health problems at work, most found colleagues to be accepting (65%). However, only half said they had had the support they needed and 13% said they had no support. Some people reported being patronised by management or monitored more closely than other colleagues.

- 38% of employers say they would not employ someone with a mental illness.
- 1 in 3 employers think people with mental illness are less reliable than other employees.
- 45% of employers think that none of their staff would be suffering from mental health problems.
- 8 out of 10 company directors say that their company has no formal policy to deal with stress and mental ill health and only 14% of those with a policy thought it was effective.
- 80% of employers agree that more support is required to improve the way businesses deal with mental health in the workplace.

Disability and work- facts

- The employment rate of the working age disabled population has risen from 38.1% to 47.2% between 1998 and 2007.
- The gap between the employment rate of disabled people and the overall employment rate is narrowing.

- Employment rates differ across impairments and are particularly poor for those with learning difficulties (less than 1 in 5) and mental health problems (just over 1 in 10).
- The highest employment rates are for people with diabetes, skin conditions or chest/breathing problems.
- Disabled people in work earn on average almost £1 less an hour than non-disabled people in work, and nearly half of disabled employees are dissatisfied with their pay.
- Over 1 in 3 disabled people not in work would like to work, including almost 3 in 10 disabled people currently classified as inactive.
- Over half of disabled people are currently out of work or have been out of work for over 5 years.
- The average annual rate of disabled people making a transition from benefits into employment is 4%, while it is six times higher for non-disabled people, with disabled people citing lack of financial benefit or complications with benefit claims as a barrier.
- Over half of disabled workers who had given up their job in the past 3 months left because of health reasons.

Disabled people who face multiple labour market disadvantage tend to experience lower employment rates than the overall employment rate of disabled people. For example fewer than 1 in 4 disabled people from a Pakistani background are in employment and just over 1 in 5 disabled people with no qualifications are in employment.

Whilst overall levels of satisfaction with work are similar between disabled and non-disabled workers, disabled employees tend to experience less satisfaction with the amount of influence they have over their job and the scope in their job to use their initiative than non-disabled people. Slightly more disabled people say they feel they possess higher personal skills than those required of their job than non-disabled.

The impact of recession

Whilst good quality research is sparse, and available research tending to focus on mental health outcomes, it is clear that the relationship between recession and negative health outcomes is complex, and multi factorial.

Recession affects employment rates, with an increase in unemployment levels. This will bring with it the likelihood of a reduction in income, increased fuel poverty, housing repossessions, greater social problems and mental health problems, and potential changes in lifestyles and health associated with unemployment and low income for those affected.

The families of those that lose their jobs are also significantly affected. People who lose their job in Britain increase the chances that they will lose their partner. A woman losing her job is increasingly likely to lead to partnership dissolution the longer the partnership has lasted.

One fifth of the steep decline in happiness that people experience when they lose their job is because of the fall in income. But the rest comes from something different - perhaps loss of status, self-esteem or social networks. Job insecurity (for those that remain in work) is also likely to be a significant factor.

The health of men is likely to be a key concern. We know that the recessions of the 80s and 90s had major impacts on men's health who were made redundant. This has important implications for where best to target health and well being programmes. Mental wellbeing for unemployed men may be a key programme of future work.

There will be a tendency for hard pressed families to choose cheaper, more calorie dense (and less nutritious) foods e.g. biscuits rather than fresh fruit. At both individual and population level this will have impacts in terms of disease consequences of poor nutrition.

People may be less likely to want to, or be able to quit smoking as smoking may be using as a means of coping with difficult times, and alcohol consumption could be expected to rise, and levels of physical activity to fall.

Whether this actually happens is unclear. All these behaviours might justifiably be seen as coping measures but clearly have long term public health consequences.

The above factors will almost certainly increase the burden of illness in the population. This will lead to a greater demand on health care services. History tells us where this is most likely to be acutely felt:

- General Practice and primary Care – especially in areas most affected by the downturn
- mental health services - (especially in areas of mental health, increased demand for psychological therapies, treatment of depression, suicide risk services)
- alcohol and drug services
- social care services
- offender management services
- A&E as a consequence of crime and disorder

4. Examples of support available to the district

This section considers some of the national and local support available to improve health at work and get people who are off sick from work back into work quickly. (A more in depth description of services can be found in appendix 2). It is by no means a comprehensive list of all organisations offering occupational health and safety advice, information and support to individuals and organisations.

National support:-

Government Work and Well Being Programme Projects

In 2005, the Government established the Health, Work and Well-being programme to protect and improve the health and well-being of working age people. Projects include:

Identifying and promoting good practice

- Gathering case studies to demonstrate best practice in the field e.g. advice and support; fitness programmes; health assessments; healthy eating and nutrition; managing health conditions; managing sickness absence; quitting smoking; stress management; weight loss; workplace events.
- Promoting and encouraging good practice through award programmes.

Working with stakeholders

- Developing a range of initiatives to engage, support and advise healthcare professionals, and in particular GPs, on health and work issues.
- Developing and improving the range and capacity of occupational health services.

Driving change

- Looking at measures to improve health and employment outcomes for people with mental health conditions.
- Providing tangible support for employers – in particular, small businesses.

Initiatives in response to the Black Report:-

1. Electronic 'fit note' - A new electronic 'fit note' will replace the current Medical Certificate and help GPs switch the focus of their advice to what people can do rather than what they cannot.

2. National Education Programme for GPs - To improve GPs' knowledge, skills and confidence when dealing with health and work issues.

3. National Strategy for Mental Health and Employment - To bring employment and health services closer together, support employers and healthcare professionals and tackle issues such as stigma and discrimination.

4. Occupational Health Helpline for Smaller Businesses - To offer help to smaller businesses by providing business hours access to professional occupational health advice for individual employee health issues (including mental health).

Job Centre Plus (JCP)

Jobcentre Plus is a government agency supporting people of working age from welfare into work, and helping employers to fill their vacancies. It is part of the Department for Work and Pensions (DWP).

JCP helps unemployed and economically inactive people move into employment and remain in work, particularly those facing the greatest barriers to employment

Pathways to Work and **A4E** are part of JCP and provide extra support for people who have a health condition or a disability to help them move in to work or to be able to work in the future.

People making a new or repeat claim for any of the following are automatically part of Pathways to Work.

HSE – Health and Safety Executive

The HSE influences people and organisations to embrace high standards of health and safety; promotes the benefits of employers and workers working together to manage health and safety sensibly; and investigates incidents, enquires into citizens' complaints and enforces the law.

Many small and medium-sized employers are concerned about contacting HSE or local authorities for advice and information. This means that those who could most benefit are not accessing a body of knowledge on industry best practice and expert information. The HSE produces a range of health and safety resources for individuals and organisations and is putting in place a programme of actions to help companies implement best practice.

ACAS - Advisory, Conciliation and Arbitration Service.

ACAS aims to improve organisations and working life through better employment relations. ACAS provides information and resources, independent advice, and model policies on common issues, including the promotion of health and well being in the workplace for example: flexible working, musculoskeletal disorders, mental health, stress and alcohol and drug problems.

Business Link

Business Link provides free business advice and support on line and through local advisers. They can offer practical advice for employers on health and welfare – how to prevent and manage illness, injury and other ill effects, including social ones, stemming from the workplace.

Some of these national services have branches regionally or locally.

Local services:-

Local services may be provided by statutory, voluntary and community, or private sector organisations. Some services are free whilst others may incur a cost or a membership fee.

Environmental Health Service: Health and Safety Unit (CBMDC)

The Health and Safety Unit has a statutory duty to inspect workplaces to see that the health and safety of employees and the public is not at risk.

The Unit supports healthy workplaces, targeting small and medium employers with no in house health and safety staff. Much of the focus is on preventing breaches of health and safety legislation, such as trip and fall hazards, rather than changing employers' behaviours to help prevent employees getting ill.

Jobs@ - (CBMDC)

The overall aim of the project is to support Bradford residents into work offering information, advice and guidance to help them access training and employment opportunities.

BACHS - Bradford and Airedale Community Health Services

BACHS provides a range of community health services to improve the health of the Bradford population working with disadvantaged communities experiencing high health inequalities to promote good health, prevent ill-health and reduce health inequalities. A proportion of this community activity takes place within workplaces. Examples include free Health MOTs for workers; and workplace weight management groups and stop smoking groups.

CLASP - Bradford District Community Legal Advice Service Partnership

Works to improve access to independent welfare and legal advice in the Bradford District, including welfare benefits and employment advice.

KicKstart- CBMDC

Helps local people set up small businesses in communities and works with Job Centre Plus to help workless people into employment / self employment.

Links 2 Construction - CBMDC

The Links 2 Construction team links potential investors and developers with local contractors, suppliers, partners and people, enabling them to work together.

Regeneration Partnership

The Regeneration Partnership commissions for the following related areas of work :-

- Employer engagement- targeting most disadvantaged parts of the district.
- Developing employability programmes for the most vulnerable individuals and communities in the district.
- Providing brokerage services for employers and employees in the most disadvantaged parts of the district.

BAOHSF – Bradford Area Occupational Health and Safety Forum

Bradford Area Occupational Health and Safety Forum a partnership of public, private, voluntary and trade union organisations in the Bradford area working together to improve the health, safety, and well being of people at work. BAOHSF has links with a membership of 600 employers. The Forum raises awareness and provides information about key health and safety and health improvement issues through their free seminar programme particularly aimed at small and medium sized employers (SMEs).

WHAT - Workers' Health Advice Team

- Provides information, advice and support to workers and ex-workers in Bradford District who are suffering ill health as a result of their work.
- Works with other organisations with an interest in health and work and wellbeing.
- Offers training and consultancy support.

WYLP – West Yorkshire Learning Providers

WYLP's aim is to help create a world-class skilled workforce and to equip individuals with the vocational qualifications that employers demand.

Its mission is “to be the key influence in raising the quality and image of vocational learning in West Yorkshire in order to change the lives of learners and to develop the economic and social environment”.

Services incurring a cost:-

Bradford Chamber of Commerce

The Chamber of Commerce provides information, advice and training to its members. It also offers a health plan package. Members pay a membership fee.

The Bradford District Chamber of Trade

The Chamber provides information, advice and training. It also offers a health plan package. Members pay a membership fee.

NHS Plus –Bradford Hospitals Trust and Airedale Hospitals Trust.

NHS Plus is part of the Government’s Health Work and Well Being Strategy. NHS Plus provides occupational health services to other public sector bodies and smaller businesses to support the development of quality occupational health practices.

In addition, there is a wide range of private sector organisations that offer occupational health and safety services to businesses that can be found through the internet.

On line good practice:-

NICE – National Institute for Health and Clinical Effectiveness

NICE has produced evidence based guidance on managing long term sickness absence from work, and various tools for assisting in the process e.g. a checklist for employers and employees to use to help in discussing sickness absence, and a business case to indicate the financial benefits of managing long term sickness absence.

5. Recommendations

This section provides recommendations / options for action locally to address work and health issues based on the research undertaken by the working group. Recommendations are made under the headings of :

- Maintaining and improving the health of the overall population
- Getting people into work
- Getting those who are off sick back into work
- Keeping those at work healthy
- Ensuring that where redundancies are made the impact is minimized
- Ensuring there is a streamlined pathway to advice services, and capacity within these services
- Disseminating this report

Maintaining and improving the health of the overall population

The health of Bradford's population is worse than the national average. There is a need to improve health and well being locally to ensure that the potential of the working age population and the future generations of workers is fully realised.

Recommendation 1

Continue to commission programmes which promote healthy lifestyles, identify and work towards reducing the barriers to healthy lifestyles, and provide support people who want to make lifestyle changes, with a focus on communities and groups that experience poorest health.

Recommendation 2

All LSP Partnerships should be requested to undertake a health impact assessment on all new developments within the district in the planning and development stage to ensure that environments are created that make it easier for people to lead healthier lives and to maintain good health.

Getting people into work

Recommendation 3

The Employment and Skills Partnerships should continue to implement the Economic Strategy to increase the economic potential within the district; increase investment and business set up in the area and support the development of skills of the population to meet the demands of businesses locally and encourage more people to continue in education and training.

Recommendation 4

Health and Well Being partnership and Employment and Skills Partnerships should consider how they can improve their contribution towards the Bradford District Economic Strategy and to support local regeneration in the recession for example by:

- Using local labour, both training and employment where possible.
- Buying supplies locally.
- Providing training and developing the skills.
- Consider how to promote employment and skill development of local people, and in particular people with mental health conditions; people with disabilities; unemployed and low income families; and older people.
- Sign the Bradford pledge to minimise the time needed to pay invoices.
- Consider whether particular businesses should be encouraged that would help in the overall health improvement of the population e.g. healthy food outlets vs more fast food takeaway services.
- having healthy and sustainable transport policies etc.
- Ensuring that national initiatives being implemented as a result of the Government's response to the DWP Review are implemented at local level.

Recommendation 5

The Employment and Skills Partnership and Children and Young People's Partnership should consider how it can support low income families into education and employment to reduce child poverty and infant mortality.

Getting People who are off sick back into work

Recommendation 6

Medium to large employers within the Health and Well Being Partnership and Employment and Skills Partnership should consider how they can make better use of their occupational health services and refer people into services more quickly to reduce the amount of long term sickness absence.

Recommendation 7

Improve access to support for those who are unemployed or off sick from work with mental health problems or musculoskeletal problems.

Healthy workplaces and keeping those at work healthy

Recommendation 8

As significant local employers, the partners to the HWB and the Employment and Skills Partnerships should consider actively promoting healthy lifestyle messages within their work forces.

Recommendation 9

As significant local employers, the partners to the HWB and the Employment and Skills Partnerships should adopt and invest in healthy working practices and policies to protect and improve the safety and health of their workforce, and should use their networks and forums to actively encourage new and current employers to adopt and invest in healthy

working practices and policies. The HWB and ESP partnerships should ensure that employers have the training, tools, and support to enable them to do this.

Recommendation 10

HWB and the Employment and Skills Partnerships should consider providing a joint information leaflet that signposts small and large employers to the various organisations offering workplace support in the District. The Partnerships should ensure appropriate websites have links to occupational health and safety support organisations.

Recommendation 11

Employment and Skills Partnerships should consider actively promoting healthy workplaces and healthy lifestyle messages through its business advisors.

Recommendation 12

Employment and Skills Partnerships should consider improving access to information, training and tools about:

- good 'healthy' working practices,
- good staff and sickness management practices
- occupational health and safety issues, particularly for SME's.
- mental health and disabilities to dispel the myths and reduce the stigma and improve support to ensure the effective management and support for people with disabilities and mental health problems. The Community Links Mental Health First Aid Training available to the district should be promoted.
- employing older people and age discrimination.

Ensuring that where redundancies are made the impact is minimised.

Recommendation 13

Partners to the HWB and Employment and Skills Partnerships should consider how to remind employers of potential impact of redundancy on mental health and signpost workers to appropriate sources of help and support if they are being made redundant. These might include Trade Unions, Citizens Advice Bureaux, Welfare Rights Advisory Services; Jobcentre Plus Rapid Response Service; mental health services and self help material; education and training providers, volunteering opportunities.

Special attention should be paid to the mental health needs of men and young people being made redundant 16 – 24. Men may not have the same support networks as women.

Young people, because their labour market security may be most at risk in a downturn, combined with alcohol and drugs, and often limited social networks, may be most at risk of suicide.

Ensuring there is a streamlined pathway to advice services, and capacity within these services

Recommendation 14

Partners to the HWB and Employment and Skills Partnerships should consider requesting through BDP that an assessment is made of the local capacity to provide advice about debt, money and housing advice. Priority to be given to those in, or most likely to become, financially excluded. These groups may not have ready access to financial services such as access to a bank account, low cost-lending and home contents insurance and to encourage savings such as the Savings Gateway and Child Trust Fund. A wide range of organisations should be involved in this, including local Credit Unions, the Financial Services Authority, DWP, Illegal Lending Unit, local CABx, Welfare Rights.

Disseminating this report**Recommendation 15**

This report would benefit from being shared with the other LSP partnerships, particularly the Children and Young People's Partnership and the Economic and Regeneration Partnership.

6. References

References

Intelligence about work related health needs has been identified through a joint meeting of representatives from the LSP's Health and Well-being Partnership and Regeneration/Economic Partnership; a briefing prepared for the meeting by the Office of the Deputy Chief Executive of the Council; a report from the GIS section of the Council's Research and Consultation Service and consultative meetings with key stakeholders.

Other references include:

References:

1. Work and Health in Yorkshire and the Humber, Briefing. Yorkshire & Humber Public Health Observatory. 2007
2. Working for a Healthier Tomorrow, Dame Carol Black's Review of the health of Britain's working age population, 2008
3. Improving Work and Health, Changing Lives, November 2008
4. Worklessness and Health – What do we know about the causal relationship, Evidence review. Health Development Agency, 2005
5. Health, Work and Well-Being, Briefing Note To Joint Meeting of the Health & Well-Being and the Regeneration & Economic Partnerships, Office of the Deputy Chief Executive – Strategy & Performance, John Ghader: Imran Patel, 21st January 2009
6. Bradford and Airedale Primary Care Trust, Health Informatics Department
7. Mental health and employment: the facts, Society Guardian, Wednesday 14 November 2007, Mary O'Hara. Sources: Shift; Shaw Trust; Employers Forum on Disability; Sainsbury Centre for Mental Health; Mind; Rethink; Mental Health Foundation; Institute of Employment Studies; CBI; Social Exclusion Unit
8. Bradford Economy website- www.bradfordeconomy.com
9. Bradford District Fit for Work Scheme pilot site stage one application, July 2009
10. Report to the H&WBP on the joint meeting of health and Regeneration on health and work, Elizabeth Brookfield and Amanda Fletcher, February 2009
11. Incapacity Benefit and Severe Disablement Allowance, Time series claimant analysis, Bradford Metropolitan District Council, Research and Consultation Service, March 2009 Work and Health in Yorkshire and the Humber, Briefing. Yorkshire and Humber Public Health Observatory, 2007
12. Health Promotion Agency, Northern Ireland, website: www.healthpromotionagency.org.uk
13. HSE website: www.hse.gov.uk
14. HSE Annual Report 2008/9
15. Department of Health Annual Report 2008/9, Economic downturn
16. Survey of Bradford GPs on work related ill-health, Jane Howie, BAOHSF, July 2005.
17. Bradford Area Occupational Health and Safety Forum website: www.baohsf.org.uk
18. Bradford Chamber of Commerce website: www.bradfordchamber.co.uk
19. Bradford Chamber of Trade website: www.bradford-chamber-of-trade.co.uk
20. Bradford CLASP web page: www.bradford.gov.uk/.../bradford_clasp
21. West Yorkshire Learning Providers website: www.wylp.org.uk

22. Business Link website: www.businesslink.gov.uk
23. ACAS website: www.acas.org.uk
24. NHS Plus website: www.nhsplus.nhs.uk
25. Annual Report of the Director of Public Health, 2007/8
26. Draft Annual Report of the Director of Public Health 2008/9
27. NHS employers website : Sources: Shift, Shaw trust, Employers Forum on Disability, Sainsbury Centre for Mental Health, Mind, Rethink, Mental Health Foundation, Institute of Employment Studies, CBI, Guardian Society 14/11/007
28. Factsheet – Employment (and disability – Office for Disability Issues) from website Sept 09: www.officefordisability.gov.uk
29. Department of Health Choosing Health website : www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/Browsable/DH_5030198

Appendix 1

Representatives on the Task Group

The Task group has had a flexible membership consisting of:

Dave Moss - Economic Development Service, CBMDC
Mark Clayton – Economic Development Service, CBMDC
Cynthia Richardson – Partnerships Team, Bradford College
David Jones - Job Centre Plus
Sue Webster - Job Centre Plus
Jane Howie – Bradford Area Occupational Health and Safety Forum
Andrew Mawson - Bradford Area Occupational Health and Safety Forum
Maggie Asquith – Bradford District Care Trust
John Dennis – Health and Well Being Partnership / Culture Consortium
Amanda Fletcher – NHS Bradford and Airedale
Darren De Souza - NHS Bradford and Airedale

With support from Elizabeth Brookfield, CBMDC and Duncan Cooper, NHS Bradford and Airedale

Appendix 2

Summary of the key actions from the Department of Works and Pensions response to Working for a Healthier Tomorrow

In 2005, the Government established the Health, Work and Well-being programme to protect and improve the health and well-being of working age people.

Its current projects and activities include:

Identifying and promoting good practice

- Gathering case studies to demonstrate best practice in the field e.g. Adjustment in the workplace; Advice and support; Fitness programmes; Health assessments; Healthy eating and nutrition; Managing health conditions; Managing sickness absence; Quitting smoking; Rehabilitation programmes; Staff development, training and learning; Stress management; Weight loss; Workplace events.
- Working to build further the evidence base on what works and why.
- Promoting and encouraging good practice through award programmes - for example, the Healthy Working Lives Awards in Scotland, the Corporate Health Standards in Wales and our sponsorship of the National Business Awards and the Business in the Community Awards 2007.

Working with stakeholders

- Developing a range of initiatives to engage, support and advise healthcare professionals, and in particular GPs, on health and work issues.
- Developing and improving the range and capacity of occupational health services.
- Providing tangible support for employers – in particular, small businesses.
- Encouraging public sector organisations to lead by example in managing health at work.
- Encouraging partners to work together at a regional and local level.

Driving change

- Developing and improving the range and capacity of occupational health services.
- Looking at measures to improve health and employment outcomes for people with mental health conditions.
- Providing tangible support for employers – in particular, small businesses.

- Educating individuals and raising awareness through national communications campaigns such as HSE's Better Backs and the Welsh Assembly Government's Welsh Backs campaigns.

In response to the issues raised in the review commissioned by the Department for Work and Pensions, the Government will also be developing the following initiatives:

1. Electronic 'fit note' - A new electronic 'fit note' will replace the current Medical Certificate and help GPs switch the focus of their advice to what people can do rather than what they cannot.

2. National Education Programme for GPs - To improve GPs' knowledge, skills and confidence when dealing with health and work issues.

3. Health, Work and Wellbeing Co-ordinators. These regional co-ordinators will stimulate action on health, work and well-being issues in their areas, offering advice and support to help local partnerships and engagement with smaller business in particular.

4. National Centre for Working-Age Health and Well-being. This will be an independent body to gather and analyse data to enable identification and monitoring of trends; help in determining the impact of interventions and initiatives; and identify evidence gaps and encourage research to close those gaps.

5. The Business Health Check tool - To enable businesses to estimate the costs of sickness absence, turnover, worker ill-health and injury, enable employers to identify the savings that could be generated by investing in health and well-being programmes; and help them measure the return on investment.

6. National Strategy for Mental Health and Employment - To bring employment and health services closer together, support employers and healthcare professionals and tackle issues such as stigma and discrimination.

7. Further NHS Plus Development - To allow NHS Plus to continue to work with others to develop clinical and occupational health standards.

8. Occupational Health Helpline for Smaller Businesses - To offer help to smaller businesses by providing business hours access to professional occupational health advice for individual employee health issues (including mental health)

9. Challenge Fund - To encourage local initiatives that improve workplace health and well-being.

11. A Review of the Health and Well-Being of the NHS Workforce - To consider the evidence for where the priorities for whole system improvement should be and recommend action that will enable local delivery.

12. Piloting Early Intervention Services. A range of early intervention services will be piloted in 2009 and run until at least 2011. These will include: 'Fit for Work' service pilots; the embedding of Employment Advisers within the Improving Access to Psychological Therapies (IAPT) programme from early 2009; and the extension of the Pathways Advisory Service, which places Employment Advisers in GP surgeries, for a further three years.

13. Access to Work - Changes to Access to Work will improve effectiveness – making the service as flexible and timely as possible.

In addition to these national developments, there are a range of services provided by public, private and community and voluntary sector organisations to employers and / or employees, set out in Appendix 3.

Appendix 3

Organisations that promote healthy work and workplaces

ACAS - Advisory, Conciliation and Arbitration Service.

Aims to improve organisations and working life through better employment relations. Helps with employment relations by supplying up-to-date information, independent advice and high quality training, and working with employers and employees to solve problems and improve performance.

ACAS promotes best practice in the workplace, offering free advice to employers and employees from their website or telephone helpline. The website has a wide range of information and guidance on good working practices and policies in the workplace including health, work and wellbeing e.g. advice and model policies on common issues such as musculoskeletal disorders, mental health, stress and alcohol and drug problems, flexible work, promoting health and wellbeing. It doesn't have information about statutory health and safety responsibilities as this is available through the HSE.

ACAS also offers employers more specialised services, including training, workplace projects, conciliation and mediation.

ACAS offers an independent and trusted service for dealing with disputes (Collective conciliation) between groups of workers and their employers (collective disputes). We also deal with disputes where individuals claim their employer has denied them a legal right.

BAOHSF – Bradford Area Occupational Health and Safety Forum

Bradford Area Occupational Health and Safety Forum is a unique partnership of public, private, voluntary and trade union organisations in the Bradford area working together to improve the health, safety, and well being of people at work. BAOHSF has links with a membership of 600 employers. The Forum raises awareness and provides information about key health and safety and health improvement issues through their free seminar programme particularly aimed at small and medium sized employers (SMEs).

BACHS - Bradford and Airedale Community Health Services

BACHS provides a range of community health services to improve the health of the Bradford population. BACHS health promotion services work with disadvantaged communities experiencing high health inequalities to promote good health, prevent ill-health and reduce health inequalities. A proportion of this community activity takes place within workplaces. Examples include free Health MOTs for workers; and workplace weight management groups and stop smoking groups.

Business Link

Business Link is a free business advice and support service available on line and through local advisers. Business Link helps businesses with managing finances, employing people, customer development, tax, environmental legislation compliance, international trade, understanding regulations. They have over 600 guides offering practical advice for businesses in all aspects of business. They can offer practical advice for employers on people health and welfare – how to prevent and manage illness, injury and other ill effects, including social ones, stemming from the workplace.

Bradford Chamber of Commerce

Bradford Chamber's Mission Statement is "To be the local champion of business, providing services to improve business performance and add value."

The Chamber of Commerce:

- Works with companies and individuals to improve their business performance, by building strong relationships.
- Provides an inclusive and effective network for businesses to do business.
- Uses its knowledge, intelligence and services to enable business people to work more efficiently and profitably.
- Champions the needs of local business.
- Helps to create a sustainable business-friendly and supported environment
- Offers a range of support services to its members, which are not free, including a health plan package.

Members pay a membership fee.

The Bradford District Chamber of Trade

Aims to assist its members run their businesses in a more profitable and professional way.

Provides assistance with the setting up and running of your business, giving advice where appropriate via a bi monthly newsletter on changing legislation, planning matters, and employment law applicable to business members.

Run regular training schemes in co-operation with our business partners on relative issues.

Membership to the Chamber also offers:

Discount Business Insurance

Reduced rate contributions to Private Health Insurance

Fleet Rate discounts for Automobile Association (AA) Breakdown Cover

Access to training courses

Opportunity to use our competitive mail shot service to network relative businesses

Members pay a membership fee.

CLASP - Bradford District Community Legal Advice Service Partnership

Works to improve access to independent legal advice in the Bradford District

CLASP aims to ensure that people can easily and quickly get quality assured, independent legal advice and advocacy when they need help with:

Benefits – Debt - Housing – Employment – Immigration – Asylum - Family/domestic violence - Mental health - Community care - Health – Education – Consumer - Clinical negligence - Actions against the police and public law

Environmental Health Service Health and Safety Unit (CBMDC)

Environmental Health staff deliver services which include:

- Investigating and monitoring land, air, water and noise pollution.
- Ensuring the safety of food supplied by inspection and education.
- Controlling (with Primary Care Trust) the spread of communicable disease.
- Inspecting many workplaces to see that the health and safety of employees and the public is not at risk.

Supports healthy workplaces, targeting small and medium employers with no in house health and safety staff. Much of the focus is on preventing breaches of health and safety legislation, such as trip and fall hazards, rather than changing employers' behaviours to help prevent employees getting ill.

HSE – Health and Safety Executive

The role of the HSE is to prevent death, injury and ill health to those at work and those affected by work activities.

The HSE's work covers a varied range of activities; from shaping and reviewing regulations, producing research and statistics and enforcing the law.

HSE provides strategic direction and leads the health and safety system as a whole. In addition to inspection, investigation and enforcement, key activities include research, introducing new or revised regulations and codes of practice, alerting duty holders to new and emerging risks as they are identified, providing information and advice, and promoting training.

Local authorities operate in partnership with HSE to ensure that duty holders manage their workplaces with due regard to the health and safety of their workforce and those affected by their work activities.

To achieve this, local authorities, as with HSE, provide advice and guidance on what the law requires, conduct inspections and investigations, and take enforcement action where appropriate.

With regard to the public, there are many regulatory bodies whose remit includes protection of the public from work activities. Local authorities also have wider responsibilities for the safety of local communities.

Where appropriate, HSE and local authorities will therefore work with partner bodies to ensure that activities are co-ordinated, duplication of effort is avoided and that public safety is effectively delivered.

Job Centre Plus

Jobcentre Plus is a government agency supporting people of working age from welfare into work, and helping employers to fill their vacancies. It is part of the Department for Work and Pensions (DWP).

Job Centre Plus's key objectives are to:

- Increase the effective supply of labour by promoting work as the best form of welfare and helping unemployed and economically inactive people move into employment.
- Work towards parity of outcomes for ethnic minority customers.
- Pay customers the correct benefit at the right time and protect the benefit system from fraud, error and abuse.
- Provide high-quality and demand-led services to employers, which help fill job vacancies quickly and effectively with well-prepared and motivated employees.
- Improve continuously the quality, accessibility and delivery of services to all customers.
- Ensure that people receiving working age benefits fulfil their responsibilities while providing appropriate help and support for those without work.
- Help people facing the greatest barriers to employment to compete effectively in the labour market and move into and remain in work.
- JCP provides flexible, responsive and targeted support to meet the needs of individuals, helping their personal journey back into work. Formal interventions take place from day 1 when customers can attend information and coaching sessions, provider seminars & can access to the Adviser Discretion Fund and day one eligibility to Work Trials. A further intervention takes place at the 13 week review meeting which helps to identify the difficulties encountered in finding work, for example health problems. At 6 months, customers aged 25+, will be offered

additional help, including a £1,000 recruitment subsidy to employers and access to training, volunteering opportunities and self employment advice.

- As part of the commitment by JCP to the Carers Strategy, help is available to carers to help them combine paid employment with their caring role and re-enter the job market after their caring role has ended. This also enables them to ensure their health and wellbeing. This is achieved through encouraging flexible working opportunities and increased training provision. This work is enabled by JCP Care Partnership Managers.

As part of the commitment by JCP to the Drug Strategy outlined in Drugs: protecting families and communities' drug users can volunteer to be referred to a drug treatment provider. It is aimed at customers who are claiming JSA or ESA, who use problem drugs ,heroin or crack cocaine, who are not already undergoing treatment and their addiction is a barrier to work. This work is enabled by JCP District Drugs Co-ordinators.

A4E Pathways

Pathways to Work provides extra support for people who have a health condition or a disability to help them move in to work or to be able to work in the future.

People making a new or repeat claim for any of the following benefits or allowances are automatically part of Pathways to Work:

- Employment and Support Allowance (ESA)
- Incapacity Benefit. (Customers who make a new claim to IB after 2/12/07 are mandatory referrals).
- Income Support on the grounds of Incapacity;
- Income support whilst appealing against a decision that Incapacity Benefit is not payable; or
- Severe Disablement Allowance,

Anyone not automatically included can volunteer for the service and the help it provides.

The range of help available includes:

- Financial advice for customers returning to work, New programmes of help for people to understand and better manage their condition or disability; Information about work that people might be able to do without losing their benefit, permitted work, and;
- New and existing financial help, New Deal for Disabled People; training and employment programmes.

Jobcentre Plus delivers Pathways to Work in 18 areas including the West Yorkshire area.

The Pathway to Work programme provides training, support and financial assistance to take long term workless back into the job market, which includes:

- Directions – 2 day programme to promote the health benefits of work and dispel the myths of financial loss on returning to work
- Choices - tailored work focused support including back to work
- Condition Management Programme (Occupational Support) – designed to meet the needs of the customer through 1-2-1 support or group sessions to enable customers to manage their health problem on returning to employment
- In Work Support – offers an initial support interview when a job offer is made and up to 12 months post employment support.

In addition there are main stream programmes:-

- Disability Employment Adviser
- Work Preparation Courses
- Workstep
- Employability Skills Training
- Local Employer Partnerships
- Work Trials
- First Step Engagement
-

Evaluation of Pathways to Work pilots has shown an increase of around eight percentage points in six-month off-flow rates from incapacity benefits compared with national averages. With the majority of claimants registered long-term, there is also a need to extend the policy to include them if we are to make significant inroads into the numbers of people currently workless due to ill-health or disability.

However, while successful overall, The Black Report reported that Pathways to Work has had limited effect for those whose main health condition is a mental illness.

Jobs@

The overall aim of the project is to support Bradford residents into work. Jobs@ is a part of the Bradford Metropolitan District Council. Jobs@ offers information, advice and guidance to residents of the Bradford District and help them access training and employment opportunities. It acts as a gateway to a skilled workforce for new and existing businesses and support them with their recruitment and retention practices. The project is delivered by a team of 18 Employment Advisors who work from 7 bases located around the Bradford district.

The project offers individuals advice on job search, self-employment, CV compilation, application form completion, interview techniques. The team are also qualified to deliver motivational training to groups and to offer information, advice and guidance to those seeking a career direction.

Employers can access a professional service designed to help build and support recruitment and retention. Jobs@ services include campaign management, district wide exposure of vacancies, access to jobs fairs, pre employment assessments, work trials, induction support, staff motivational training, interview support and application sifting.

Jobs@ also facilitates learning workshops for employers on a range of subjects from managing sickness absences to exploring funding opportunities for upskilling staff.

Kickstart

Bradford Kickstart, the name given to the LEGI programme, is run by Bradford Council, and supported by organisations and service providers from across the Bradford District. It aims to help local people set up over 1000 small businesses in our communities of opportunity during the next ten years from 2006 - encouraging growth, prosperity and employment in Bradford District.

Aims :

- To help people who want to launch their own business.
- To support new enterprises to grow and create employment.
- To work with Job Centre Plus to help an additional 500 workless people into employment / self employment.

The scheme offers a wide range of support, to people who are thinking of working for themselves, and to young businesses in Bradford District that are hoping to grow and develop. Typical services provided free to companies include accounting, bookkeeping, HR, recruitment, legal services, branding, marketing, PR and website design.

At the heart of the scheme is the Kickstart Community - an interactive website that offers the online services of Bradford Kickstart.

More than 700 Bradford District businesses trading across many sectors have already benefited from **Professional Services** funded by Bradford Council's Bradford Kickstart scheme.

In responding to the recession and feedback from local companies, the range of services has recently been expanded to include specialist support on accessing finance, change management, e-commerce solutions and product development.

Professional Services is funded by Kickstart but supplied by approved commercial suppliers mostly based within the District. These suppliers also benefit from the scheme. It introduces them to new clients and creates new long term business opportunities, especially valuable to businesses trading through the recession.

Although many of the businesses supported are relatively new, all businesses are eligible to apply provided they have a desire to grow and create jobs within the District.

Business Link and Kickstart have access to most of the trading businesses in the District through:

- a. Monthly via e-shot
- b. Mail shots
- c. Promotion of the offer at employer engagement events
- d. Face to Face as part of our regular business support work

LEGI Kickstart has two current projects which support those with disabilities to start-up and grow their businesses.

a. The Business Enablement Project acknowledges the fact that some people may experience additional barriers when deciding to set up their own business. Our project addresses these barriers and gives flexible help appropriate to the individual and their need. We can provide support in a number of ways, for example:

- Training
- Communication Support
- Special aids/equipment
- Help with travel cost for people unable to use public transport
- Support with personal needs
- Emotional support.

b. Bradnet (based in Bradford) are part of a consortium which support local people into business and specialise in providing intensive assistance to those with disabilities.

Links 2 Construction

The Links 2 Construction team was set up by Bradford Council to support regeneration activity in the Bradford District. The key objective is to link potential investors and developers with local contractors, suppliers, partners and people, enabling them to work together for the benefit of the Bradford District economy.

NHS Plus – offered by Bradford Hospitals Trust and Airedale Hospitals Trust.

NHS Plus is part of the Government's Health Work and Well Being Strategy. It helps develop the NHS as a model employer; delivers services to other public sector bodies and smaller businesses, and supports the development of quality occupational health practices.

NHS Plus offers services covering 4 main areas:

Prevention and removal of health risks arising in the workplace – workplace risk assessments; immunisation to remove the risk of staff acquiring or passing on work related diseases e.g. hepatitis B.

Screening and surveillance for early signs of health related issues – Pre employment screening, health screening for a range of jobs e.g. food handlers; workplace protection screening programmes; health screening programmes e.g. noise.

Independent advice on staff unable to work due to ill health reasons – referral to specialist nurses and doctors to assess staff health following long term or short term intermittent sickness absence; expert written help with managing absent staff, advice on rehabilitation and work place adjustments.

Lifestyle and well being – well person health screening and workplace health promotion initiatives e.g. exercise, diet; counselling support for staff experiencing home or work related difficulties and affecting their ability to attend work.

NHS Plus is not a free service for businesses.

NICE – National Institute for Health and Clinical Effectiveness

NICE has produced evidence based guidance on managing long term sickness absence from work, and various tools for assisting in the process e.g. a checklist for employers and employees to use to discuss sickness absence; a business case to indicate the financial benefits of managing long term sickness absence.

This guidance is for all those who manage long-term (or recurring short- or long-term) sickness absence and incapacity, including employers and people working in the NHS. It will also be of interest to workplace representatives and trades unions, employees and those receiving incapacity benefit or employment and support allowance (ESA).

Three of the recommendations aim to help employers and employees work together to ensure the right support is available to help someone on sickness absence return to work as soon as they are able.

NICE recommendations for employers include:

- Identify someone who is suitably trained and impartial to undertake initial enquiries with an employee who is experiencing long-term sickness absence or recurring short- or long-term sickness absence.
- If necessary, arrange for a more detailed assessment by relevant specialist/s. This could be coordinated by a suitably trained case worker/s.
- Coordinate and support any health, occupational or rehabilitation interventions or services and any return-to-work plan agreed with the employee.

The guidance also recommends that those who are unemployed and claiming incapacity benefit or ESA should be offered an integrated programme of support to help them enter or return to work. This advice is aimed at the Department for Work and Pensions and other relevant commissioning bodies and organisations.

Regeneration Partnership

The Regeneration Partnership commissions for the following related areas of work :-

- Employer engagement- targeting most disadvantaged parts of the district.
- Developing employability programmes for the most vulnerable individuals and communities in the district.
- Providing brokerage services for employers and employees, again in the most disadvantaged parts of the district.

The commissioning themes were agreed through consultation with employers, third sector and statutory organisations, in mid January 2009.

WHAT - Workers' Health Advice Team

- Provides information advice and support to workers and ex-workers in Bradford District who are suffering ill health as a result of their work.
- Works with other organisations with an interest in health and work and wellbeing.
- Offers training and consultancy support.

WHAT provides:

- Occupational health and safety information and advice for workers and ex workers.
- Health and safety training and consultancy services for voluntary organisations, community groups and trade union representatives.
- Telephone advice service for workers in Bradford.
- Health and safety appointments and drop in service.
- Maintains a health and safety library resource and provide telephone and e-mail advice for use by safety reps and others with an interest in health and work.
- Independent self referral confidential counselling service for workers suffering from stress related illness.
- Promoting trade union approach to health and safety.
- Supporting safety reps.
- Organising events eg. Workers Memorial Day, International RSI Awareness Day
- Supporting groups of workers suffering similar problems e.g. Bradford RSI Support Group, Bradford Asbestos Victims Support Group, Bullying at Work Support Group.

WHAT offers independent occupational health advice, advice on sickness benefits right up to representation at medical appeal tribunals, advice on keeping your job including disability discrimination, and advice on rehabilitation.

The service is complementary to those services offered by Trade Unions on behalf of their members. The service is independent and advice is given on a confidential basis, free of charge.

WYLP – West Yorkshire Learning Providers

WYLP is the largest network of learning providers operating in Yorkshire and the Humber, formed in 2003 to be the voice of the providers in strategic partnerships at Regional and at district levels. WYLP is a membership organisation promoting a strong and vibrant single network of providers acting on their behalf to promote world-class Apprenticeships for young people and adults and supporting the delivery of the Train to Gain service. WYLP is there for learners, employers, providers and for stakeholders

working in partnership to help create a world-class skilled workforce and to equip individuals with the vocational qualifications that employers demand.

WYLP's mission is "to be the key influence in raising the quality and image of vocational learning in West Yorkshire in order to change the lives of learners and to develop the economic and social environment"

WYLP has four local networks: Leeds, Bradford & District, Wakefield and Calderdale & Kirklees.

Any organisation contracted or sub-contracted to deliver work based learning in West Yorkshire is eligible to become a member of WYLP.

An additional directory of occupational health and safety services can be found on the Bradford Area Occupational Health and safety website: www.baohsf.org.uk