Section 1: Introduction and background

As a result of the Covid-19 pandemic, the workforce planning context for health and social care services has changed radically.

In recognition of these unprecedented circumstances, the Scottish Government has delayed the requirement for health and social care partnerships to prepare a three-year workforce plan until the 31st March 2022. In the meantime, the government has requested that a one-year interim plan be developed. The aims of this plan are to:

- Give a brief background to workforce planning issues in the context of a wider system of planning and linking the workforce to any relevant key performance indicators or targets.
- Describe the process of engagement with stakeholders including primary care, third and independent sector partners.
- Explore how local and national wellbeing initiatives have helped sustain the workforce during the pandemic and how these will be embedded as a means to increase staff availability and reduce turnover.
- Identify the critical issues for, and known impacts on workforce requirement in the next 12 months highlighting particular risks and anticipated workforce demand.
- Consider the workforce impact of any changes to staffing models as a result of developments, highlighting any specific local, geographical, and economic impacts and anticipated workforce demand.
- Identify the potential workforce implications of any local initiatives and/or innovative approaches to care delivery including areas of workforce skills development or the introduction/extension of new roles that will be required to support current or future models of care/service.
- Outline short-term and medium-term plans.

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- Outline short-term and medium-term plans.

The vision of the West Lothian Health and Social Care Partnership (WLHSCP) is:

"to increase wellbeing and reduce health inequalities across all communities in West Lothian"

In 2018, the West Lothian Integration Joint Board (IJB) 2018 approved a Workforce Planning Strategy for the period 2018 to 2023 that sets out a workforce plan to support its vision. The workforce plan aims to grow, support, and sustain a well-informed multidisciplinary, multiagency workforce that can work collaboratively across traditional service delivery boundaries to improve outcomes for people in our communities and deliver person-centred, safe and effective care.

The principles and priorities involve shifting the balance from condition focussed practice to person-centred practice, enabling citizens, communities, and staff to have a greater say in planning and delivering health and social care services, ensuring more care and support at home or closer to home and more joined-up working across professions and agencies.

The focus is on the needs of the local community who comprise an increasingly ageing population who are living longer, many of whom have complex needs as a result of two or more limiting long-term physical or mental health conditions.
The changing demographic in West Lothian exerts pressure on both health and social care services both in relation to demand on services but also on the workforce, recognising that a significant proportion of our workforce is part of the local population.

Effective Health and Social Care integration involves partnership working and mutual support between many organisations that are providing vital support within the community.

These include the Local Council, the Health Service, Care Home and Care at Home Providers, independent contractors within primary care and the third sector organisations.

The recent Independent Review of Adult Social Care in Scotland\(^3\) reinforces the need for a culture shift that puts people at the heart of the decision-making process; that values human rights, lived experience, collaboration, mutuality and the common good.
Promoting a positive and inclusive culture that creates an environment that supports people while encouraging effective engagement, open communication, and high performance are a priority for the WLHSCP. The National Health and Wellbeing Outcomes provide a strategic framework for the planning and delivery of health and social care services. The Health and Social Care Standards set out expectations that every person is treated with dignity, respect, and compassion; is included; and receive responsive care that provides support and promotes wellbeing. The Primary Care Outcomes Framework clarifies expectations and guides implementation at every level of the integrated system.

To drive forward the vision, a dedicated IJB Workforce Planning Group, with representatives from across the partnership, was set up and by early 2020 implementation of the workforce plan was well underway. During the first year, the focus was on promoting careers in the partnership including successful engagement initiatives with local schools and colleges. During the pandemic, the focus of workforce planning shifted to maintaining essential services and implementing new ways of working.

**Section 2: Stakeholder engagement**

In order to provide a cohesive picture of the health and social care workforce needed across the West Lothian geographic area, the West Lothian Integration Workforce Planning Group has engaged with key stakeholders including service managers, trade unions, colleagues from primary care, and the third and independent Sector. A list of stakeholders involved can be found in Appendix 1. This involvement reduced some of the uncertainty experienced by providers in determining their own workforce needs, promoted collaborative working, and helped to create a shared understanding of the strategic direction.

An engagement process was undertaken with stakeholders who were identified and invited to complete a questionnaire (Appendix 2). Stakeholders were invited to participate in a series of virtual meetings with colleagues from across the partnership, to help identify workforce challenges, to share knowledge, and to provide support with the questionnaire.

Emerging themes from the responses seek to represent the breadth of experiences shared by the stakeholders and reflect their input into the short-term and medium-term plans. It offers a snapshot of the health and wellbeing of the workforce in West Lothian and a summary of the priorities and support needed for remobilisation.
Section 3: Supporting staff physical and psychological wellbeing

Over the last year, health and social care teams working in the community, primary care, and independent care sectors have shown strength and resilience in the face of considerable pressure.

Key challenges reported were:

- Stress of social distancing and wearing PPE created barriers to face to face care delivery.
- Changing PPE requirements.
- Risk of Covid-19 to both themselves and their families.
- Impact of staff self-isolating and shielding.
- Impact of home working, home schooling, and/or care responsibilities.
- Uncertainty about the future and the long term impact of the pandemic.
- Impact on primary care services and public expectation.
- High demand for mental health services and higher levels of care needs.
- Dealing with members of the public who were more anxious than normal.
- Anxiety of delivering community services with non-adherence to social distancing.
- Pressure to create space in hospitals and the impact on community services.
- Quantity of information and guidance being issued and difficulty navigating it, including Covid-19 guidance and wellbeing support.
- Considerable impact of the pandemic on care homes.

Creating a positive learning environment for support, learning, and supervision

Creating a positive and supportive working environment during the pandemic, with the challenges of remote working, continues to be achieved by managers through a range of measures:

- Regular team meetings and daily huddles.
- Use of video-conferencing.
- Online group chats.
- One to one clinical supervision.
- Time to update on Covid-19 vaccines; typing skills and other online learning.
- Protected meal breaks.
- Regular annual leave.
- Specific training and support for the NHS Care Home Teams.

Wellbeing services

Staff are generally aware of and encouraged to access a variety of wellbeing resources delivered locally and nationally. Examples are outlined in Appendix 3. Local council staff can access resources through ‘the four pillars of well-being’ site (Appendix 3), which includes a free Employee Assistance Program (EAP), and has been well received for stress related issues. Ease of access is a priority issue.
Vacancies, recruitment and absence

Recruitment has varied during the pandemic. There has been less movement of staff as relocating to other areas and traveling abroad to work have become impractical. In some areas, there have been increased applications for vacancies. Recruitment of staff to deliver essential care both in the community and the independent sector has been challenging at times.

Unavoidable absences during the pandemic mean services have relied on staff bank. Careful infection prevention and control has made covering absences more difficult. Service managers have made every effort to ensure that annual leave, breaks, and flexi-time are upheld.

Feeling safe

The following factors have helped staff feel safe:

- Risk assessments.
- Practical advice.
- PPE supply improving and there being a robust system in place to access it.
- Test and Protect Programme.
- Guaranteed income.
- Access to the staff vaccination programme.
- Working at home when vulnerable or isolating.
- Longer breaks and time outs.
- Protected breaks.
- Annual leave.
- Peer to peer support.
- Targeted training and support for the NHS Care Home Teams.

Support for flexible working

Supporting people to work from home has been well received and will continue to be required in the short term at least. Staff have felt more able to exercise their own discretion over their work, in consultation with their managers. Flexible working has assisted employees with additional childcare and shielding responsibilities while enabling them to achieve their work commitments.

Staying connected using IT

Technology has proved critical to ensuring staff feel supported and connected during the pandemic, enabling delivery of essential services. Continuing to address barriers to digital communication will remain a key priority.

Local Initiatives to support wellbeing

Examples of local initiatives for staff support include: Wellbeing groups via Microsoft Teams; virtual coffee stops; activity challenges; quizzes; motivational sayings; sweeties and cakes; walking outdoors when weather permits.
FEELING SAFE

The HSCP developed a PPE hub to provide supplies to all the teams ensuring that distribution happened within two days of an order.

Provision of PCR and Lateral Flow Device (LFD) testing helped allay fears.

FEELING ISOLATED

Feeling "out the loop", no face to face contact with friends and colleagues.

CHALLENGES

MANAGING THE WORKING ENVIRONMENT DURING LOCKDOWN

Simple things like finding somewhere to get some lunch during the day became difficult.

LIMITED FACE TO FACE CONSULTATION TIME

Increase use of telephone consultations has been difficult, impacting on therapeutic relationship.

Wellbeing Initiatives

Management and Leadership

On Line help guides and services

National and Public Initiatives

Work Place

Teams and Colleagues

CHALLENGES

CREATING A POSITIVE LEARNING ENVIRONMENT

Creating the right environment for learning and supervision has been a priority for managers. Predicting when a team was struggling can be difficult as it changes over time and is dependent on caseload demands.

HAVING SUPPORT

Maintaining support for each other, has been important in keeping stress levels down and keeping up morale.

Team meetings, daily huddles, chat rooms

Feedback and response summary to stakeholder survey
Section 4: Short-term workforce drivers

Remobilisation

Covid-19 will continue to impact the workforce in the short-term; therefore building and maintaining staff resilience will be crucial for effective remobilisation.

Key factors for effective remobilisation will include:

- Maintaining staff wellbeing to ensure availability of a trained workforce to respond to Covid-19 related work at same time as remobilisation.
- Timely, easy-to-access wellbeing support for the workforce.
- Effective prioritisation of remobilisation of key services.
- Clear public expectations regarding remobilisation of services.
- Continued support for home working and flexible working, where possible.
- Regular supervision and staff communication.
- Continued use of IT for quick collaboration and decision making, and more paperless working.
- Upskilling staff IT skills.
- Effective leadership of multidisciplinary teams to drive improved collaboration.
- Supporting people back to work.

Support for those returning to work

Staff returning to the workplace following a substantial period of working from home may feel apprehensive or deskilled, which may deplete resilience further. Well planned inductions will support managers reintegrate their workers safely while maintaining services.

Digital capacity

The opportunity to stay connected using IT has raised awareness of the value of progressing to paper-light and increasing virtual capacity. The ability to continue to undertake effective work, while working remotely/virtually may help with recruitment and retention challenges, particularly for those with childcare or caring responsibilities. Increasing staff IT skills and access to computers is important and essential.

Mental health services

An increase in individual needs and carer stress in older people and mental health services has been managed well. However, as workload is likely to continue to increase there is potential for an increase in workplace stress. Alongside mental health services, many of the third sector organisations that support patients have been running in a virtual way. In recognition of the importance of face to face interaction with effective assessment process and the development of therapeutic relationships, remobilisation of these services remains a priority.
**Covid-19 related activity**

Some services have redeployed staff to support the Test and Protect and the Vaccination Programmes. Staff will need to return to substantive roles as services resume operation. Consideration needs to be given to managing the priorities of redeployment in line with national guidance for remobilising the service.

The provision of PPE and specialist equipment has been well received. Consideration must be given to physical distancing and ventilation as this is limiting the existing workforce in managing waiting lists.

**Immediate risks and anticipated demands**

The immediate risk is not having enough staff to meet the demands and to support the vision. Long-term and unexpected staff absence due to Covid-19 self-isolation has been challenging. Ensuring health and social care teams have access to the vaccination has gone some way to mitigate this.

Attention must be given to a joined up approach to workforce planning, recruitment and retention, while ensuring the continued support for staff health and wellbeing.
Section 5: Medium-term workforce drivers

Once the initial remobilisation has started there will need to be a period for the redesign for services. Redesign needs to look holistically at the needs of the West Lothian population and the service requirements to meet those needs.

In West Lothian, the focus is on promoting care services and working together effectively to meet the needs of communities. This may involve looking further at working more closely with local business support, career services, employment programmes; and strengthening connections with other primary care, health care, social care and third sector organisations.

Local, geographical and economic impacts

Supporting career development opportunities

The West Lothian demographic is that of an ageing workforce. At present, demand outweighs supply for trained staff with experience. Staff may be more likely to move towards city hospitals rather than staying locally. It is vital to secure care-at-home provision in certain geographical locations and to attract health and social care professionals who live out of the area. There is a need to create career development opportunities in order to retain staff.

Employment growth is forecast for West Lothian over the mid and long term particularly in caring personnel and health professionals. Maintaining a blended approach to homeworking may reduce commuting activity bringing social, economic, and environmental benefits.

Education and Development

It is vitally important to develop experienced staff with specialist expertise to promote quality of care, to sustain a service through teaching and learning in practice and to enable others to be confident and competent in their roles. Educating staff to work to the limits of their abilities and be paid at the appropriate pay scale is paramount. Enabling staff to shadow workers and to visit and learn from other services can build relationships and understanding between organisations.

The partnership has formed part of a multi-agency pan Lothian working group with an aim to developing a ‘Lothian Care Academy’. The ‘Lothian Care Academy’ will provide mandatory and essential learning across Lothian Health and Social Care Partnerships ensuring consistent and standardised learning across health and social care, equitable access to high quality learning for employees, and allowing a more flexible pool of staff who will be able to work in different care environments across health and social care.
Anticipated demand

There is an urgent need to fill present vacancies in all services and to consider different ways of working to support, develop and retain staff. At present the task orientated, socially distanced technology focussed world has taken over. Consideration needs to be given to supporting primary care in implementing the GP contract, supporting oral health services and remobilising multidisciplinary teams to work together to demonstrate evidence of person-centred, safe, effective practice that meets the needs of the localities served.

Short-term and long-term impact on the wellbeing of the workforce
Section 6: Supporting the workforce through transformational change

Issues that are impacting on recruitment include:

- A loss of expertise as the increasingly ageing workforce is choosing to, or is ready to, retire.
- Staff shortfall makes it difficult for existing staff to train and support new staff.
- A shortfall of specialist practitioners with expertise in facilitative leadership and teaching in the workplace.
- Competitive pay rates in neighbouring authorities and the private sector.
- Differences in terms and conditions in Scotland to other areas of the UK.
- Insufficient trainee availability.
- Temporary posts, part-time posts, and maternity backfill.
- Dominant reductionist world view inadvertently promotes and perpetuates ‘technical’ roles rather than values-based ‘caring’ roles.
- Lack of education and development career pathways in practice.

New roles and skills needed to support the workforce through transformational change

Structure

- Invest in the development of primary and community care focused advanced practice and consultant roles to support managers in ensuring the quality of care.
- Develop assistant non-registered roles supported by realistic, accredited work-based supervision and learning.
- Enable staff, trainees, and new starts to gain experience in primary, community and independent sectors.
- Develop an equitable approach to digital provision, upskilling, and support.

Process

- Develop a person-centred, multidisciplinary and multi-agency approach to the development of integrated services focussing on communities served.
- Promote prevention, early intervention, and supported self-care.
- Develop a learning environment that promotes quality improvement.
- Involve citizens, communities, and staff in planning and delivering care.
- Develop evidence of person-centred delivery and evaluation of adult and older people services in the community and in primary care.

Outcome

- Work together to evidence achievement of the national health and social care standards and health and wellbeing outcomes.

In conclusion, short-term and medium-term plans have been developed that will shape the work of the IJB Workforce Planning Group for the next two years.
## Right People

<table>
<thead>
<tr>
<th>Aim</th>
<th>Priority</th>
<th>What we will do</th>
<th>How we will do</th>
</tr>
</thead>
<tbody>
<tr>
<td>Right People</td>
<td>Be a good place to work.</td>
<td>Promote West Lothian as an attractive place to work. Promote health and social care as a career choice.</td>
<td>Restart robust recruitment advertising campaigns especially for difficult to recruit posts. Design career pathways and opportunities for those that wish to progress within the partnership. Engage champions/role models to share their experiences.</td>
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<tr>
<td></td>
<td>Engage a younger workforce.</td>
<td>Attract school/college/university leavers. Promote health and social care as a career choice.</td>
<td>Improve accessibility of modern apprenticeships, work experience and foundation apprenticeship opportunities. Revise schools and colleges to promote the opportunities and explain choices which best fit.</td>
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<td></td>
<td>Ensure workforce is fit for purpose, sustainable and affordable.</td>
<td>Ensure workforce planning is embedded into service improvement plans. Provide dedicated quality HR support for each service.</td>
<td>Support each service to undertake an integrated workforce review. Support managers to integrate workforce planning into everyday responsibilities. Scope exit interviews to better understand reasons for turnover.</td>
</tr>
<tr>
<td></td>
<td>Work with partners to support appropriate staffing to deliver and sustain services.</td>
<td>Liaise with third and independent sectors to share learning and experience. Improve communication and partnership working.</td>
<td>Work together to promote recruitment. Ensure effective HR support for managers is in place. Ongoing recruitment of workforce to reduce vacancy gap.</td>
</tr>
</tbody>
</table>

## Right Skills

<table>
<thead>
<tr>
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<th>What we will do</th>
<th>How we will do</th>
</tr>
</thead>
<tbody>
<tr>
<td>Develop a workforce aligned to the organisation values.</td>
<td>Promote the organisation values and behaviours.</td>
<td>Integrate values into day to day service delivery. Lead by example and adapt values and behaviours. Incorporate values and behaviours into recruitment and selection processes. Provide robust induction programmes for new starters and those returning.</td>
<td></td>
</tr>
<tr>
<td>Ensure workforce is fully equipped to fulfil their role.</td>
<td>Ensure appropriate processes in place to identify workforce needs. Build digital capacity addressing inequalities in digital provision and upskilling teams. Support training and development requirements that promote person-centred multidisciplinary/multiagency working. Encourage and support the workforce to work at the top of their competency level. Ensure that the National Health and Social Care Standards are implemented and embedded in practice. Identify technology training needs and how technology can enable learning and develop associated training plan.</td>
<td>Workforce review sessions with teams reflecting on Covid-19 while also considering workforce needs for the future. Ensure staff have access to and are upskilled to use appropriate IT. Undertake ongoing person-centred training needs analysis. Promote learning and development opportunities for employees. Ensure personal development reviews are implemented. Facilitate implementation of National Health and Social Care Standards across the partnership. Optimise use of technology to support learning and widen access to opportunities.</td>
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<tr>
<td>Ensure workforce is focused on prevention and early intervention.</td>
<td>Promote a collaborative participatory approach to the evaluation of service delivery. Ensure workforce are confident and competent to utilise opportunities to improve health and reduce inequalities.</td>
<td>Ongoing evaluation of progress with workforce plan through regular multidisciplinary/multiagency engagement sessions. Develop programme of capacity building in line with public health skills and knowledge frameworks.</td>
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<tr>
<td>Encourage and provide opportunities to develop skills.</td>
<td>Ensure opportunities are available to help people retrain or attain new qualifications to support personal and organisational growth.</td>
<td>Utilise flexible working policies. Contribute to a multi-agency pan-Lothian working group that will be responsible for the development of a ‘Lothian Care Academy’.</td>
<td></td>
</tr>
<tr>
<td>Promote and deliver integrated working.</td>
<td>Develop a more person-centred, safe and effective workforce. Ensure workforce is appropriately qualified and has the flexibility to move across the partnership.</td>
<td>Promote working together with different people in different departments to develop and evaluate a person-centred approach to redesign. Review existing roles and determine where roles can be more generic/flexible. Engage with education providers to review course being delivered. Develop management teams who understand integrated working.</td>
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</table>
## Short-Term Plan 2021-2022 / Medium-Term Plan 2022-2023 cont.

<table>
<thead>
<tr>
<th>Aim</th>
<th>Priority</th>
<th>What we will do</th>
<th>How we will do it</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Right Place</strong></td>
<td>Continue to support the shift in the balance of care to community settings.</td>
<td>Ensure skilled and sustainable workforce in community where it is needed.</td>
<td>Invest in community care and support services across health and social care to increase capacity and improve access. Enhance multidisciplinary teams within primary care setting. Ensure workforce available to support services delivering new ways of working. Explore colocation opportunities.</td>
</tr>
<tr>
<td><strong>Right Time</strong></td>
<td>Plan for an ageing workforce.</td>
<td>Consider the challenges and potential solutions to address an ageing workforce.</td>
<td>Consider alternatives to retirement e.g. new roles, mentorship roles. Utilise work/life balance policies to support continued employment that promotes learning, development and succession planning.</td>
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<td></td>
<td>Maximise all opportunities for attendance by supporting the workforce in line with policies and procedures.</td>
<td>Promote flexible working by exploring ongoing/long-term use of home/mobile working for all staff. Provide resilience training to ensure workforce are prepared for change. Ensure ongoing delivery of Personal Protective Equipment (PPE) for all services. Identify time for integrated teams to build locality networks of mutual support and facilitate the development of positive working relationships within and out-with immediate team. Develop facilitative leadership roles that support quality, education and development in practice.</td>
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<td>Have a skilled workforce at the right time.</td>
<td>Embed a values-based, person-centred approach to leadership and integration.</td>
<td>Workforce plans within service improvement plans need to incorporate training and development.</td>
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<td></td>
<td>Plan ahead to ensure a resource is available to deliver service needs at the right time.</td>
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Appendix 1

Stakeholders invited to complete the engagement questionnaire

Stakeholders involved in the engagement process include representatives from the following:

Social Policy Management Team
Mental Health Officers
Older People Services
Community Care Services
AHP services
Mental Health Management Team
Primary Care Management Team
Strategic Workforce Planning Group
Business Support
Economic Development & Regeneration
Public Health and Health Policy
Finance and Planning
Human Resources [HR]
Education
Oral Health
Pharmacy Services
GP Practice Managers
GP Quality Clusters
Commissioned Social Care Services
Carers of West Lothian
Scottish Care
West Lothian Voluntary Sector Gateway
Appendix 2
Stakeholder engagement questionnaire

We invite you to complete and return this questionnaire by 12th March 2021. Further guidance is set out in the ‘Annex 1 - Interim Workforce Plan 2021-22 Template Indicative Content’ document provided.

1. Supporting staff holistic wellbeing

What well-being initiatives have been well received and why?

What are the challenges faced in ensuring staff wellbeing?

What are the anticipated workforce implications in terms of impact on staff wellbeing i.e. recruitment, retention, turnover, staff absence and having space to take annual leave?

2. Short Term Workforce Drivers (Living with Covid-19)

What are the critical issues and known impacts on workforce requirements for your service area in the next 12 months? Refer to template for examples.

What are the immediate workforce risks in key job families, groups or roles?

What is the anticipated workforce demand associated with these risks (provide whole time equivalent details, where possible)
3. Medium Term Workforce Drivers – within the next 12-36 months

What will be the workforce impact of any changes to staffing models required as a result of service changes or developments? Refer to template for examples.

Are there any local, geographical or economic impacts on workforce development? If so, please provide a brief list (e.g. labour supply)

What is the anticipated workforce demand associated with these risks? (Provide whole time equivalent details where possible)

4. Support for transformational change

Describe any on-going hard to fill posts/skills gaps

Please list any new roles / skills you think you will need to support the workforce through transformational change. The key indicators for transformation being:

- Demonstrating evidence of person-centred care
- Promoting prevention, early intervention and supported self-care
- More joined up multidisciplinary and multiagency working
- Developing a learning environment that promotes quality improvement
- Involving citizens, communities and staff in planning and delivering care
- Evidencing the achievement of the national health and social care standards and health and wellbeing outcomes
Appendix 3
Examples of local and national wellbeing initiatives available

NHS Lothian Staff wellbeing.
https://staff.nhslothian.scot/COVID-19/Pages/NHS-Lothian-Staff-Wellbeing.aspx

Wellbeing links on MS teams.

Wellbeing Hub in a Tub: A box full of sleep packs, hand cream, lip balm, energy snacks, refreshments, car chargers, headphones and many other items for community staff.

Implementation of a Pause room; a quiet room with coffee and access to wellbeing resources for staff to have time out. Project Wingman lounge: a welcoming relaxed place staffed by airline staff to go and chill. Garden development.

‘Thumbs up Thursday’ and ‘Choose Day Tuesday’ were initiatives created by some of the team leads to encourage staff to celebrate something that has gone well that week or identify something positive that they wanted to achieve.

Access to additional cervical screening clinics for staff.

In independent care settings staff have a designated staff room away from service users.

Care Homes. Staff Wellbeing.
https://services.nhslothian.scot/CareHomes/Pages/StaffWellbeing.aspx

National wellbeing hub - https://www.nationalwellbeinghub.scot/

Things you can do to help clear your head - https://clearyourhead.scot/

Headspace app - https://www.headspace.com/science

Psychosocial Mental Health and Wellbeing support.  


Free access to wellbeing apps for NHS staff.
https://www.nhsemployers.org/news/2020/03/free-access-to-wellbeing-apps-for-all-nhs-staff

Unmind. Mental Wellbeing. Done Well. - https://unmind.com
Four Pillars of Wellbeing

**Mental**
- Employee assistance programme
- Men's mental health
- LGBTQ and mental health
- Self help Supports

**Physical**
- Get active advice
- Healthy eating options
- Addictions support
- Lifestyle challenges

**Financial**
- Income Maximisation Checks
- Money/Dept advice
- Housing and Energy advice
- Budgetary Support

**Work Place**
- Health and safety information
- First aid at work
- Risk management
- Safety alerts

Supporting our employees through their wellbeing journey...

Information available on Mytoolkit / Employee Health & Wellbeing/
Four Pillars of Wellbeing
References


https://www.skillsdevelopmentscotland.co.uk/media/47103/rsa-infographic-west-lothian.pdf Last accessed 10th March 2021