One Voice Joint statement on health and care staff wellbeing

One of the most important things that the coronavirus pandemic has highlighted over the past year has been that the physical and emotional wellbeing of health and care staff, must be of equal priority to that of patients. This has not always been the case in the past for a number of reasons, including a narrow focus on performance and, sometimes, putting patients' needs ahead of our own. Staff who are psychosocially healthy are better able to meet the needs and preferences of patients. So, it is essential to respond to needs of staff now as we emerge from the critical stage of the pandemic and the NHS is in its most fragile state ever.

While staff are by far the biggest cost for the NHS, they are also the biggest asset; without dedicated staff and the wide range of skills they bring, the NHS simply would not exist. The safe, effective, efficient, and compassionate care that we all look to the NHS to provide is only possible if staff, both clinical and non-clinical, are physically and emotionally healthy. However, although the NHS is one of the world's largest direct or indirect employers, it lags behind other organisations in terms of care for staff. This **must** change.

Health and care staff need to feel that their wellbeing and psychological health are valued by their employing organisations not solely during the height of extraordinary situations, such as the pandemic, but each and every day. This cannot be achieved by words alone; but must be achieved by **actions**.

We wish to create a culture at work in which staff feel safe and encouraged to speak about their experiences. Wellbeing can be affected by our experiences at work but also the conditions in which we work. We actively acknowledge the importance of our relationships, our peers at work, and the teams in which we work. Leadership and team cohesion are vitally important. Staff receive much support at home and informally from colleagues though some may also benefit from more focused psychosocial responses to our needs of, usually, a non-medical nature that include, for example, peer support.

Organisations can do much to promote informal support and to create more formal responses. This means we should take a systemic, preventative approach and not simply focus on treating people's experiences as symptoms of personal stress. It also means actively identifying, and addressing, the wider causes of poor psychosocial wellbeing.

That approach requires a focus on psychosocial aspects of work at organisational levels such as emotional labour, workloads, team functioning, valuing diversity, absence of bullying and harassment, civility and respect, the availability and use of supervision, and kindness and compassion for staff and patients. Importantly, these considerations apply in caring for patients but also in recognising the importance of non-clinical staff to achieving safe and superb care, and through practical matters such as adequate hospital parking facilities and flexible working patterns.

We believe that organisations that commission services and employers both have crucial responsibilities to live up to in achieving the vision set out in this statement. Alongside this, we believe that change is the responsibility of everyone within health and social care and that we all have a role to play. within health and social care and that we all have a role to play.

Signatories



Janet Monkman Chief Executive



Daryl O'Connor Trustee



Eddie Crouch Chair



Hannah Abbott President



Richard Murray Chief Executive



Victoria Tzortziou Brown OBE, Joint Honorary Secretary.



Steve Ford Chief Executive



of Primary Care Dr Minesh Patel Chairman



Stephen W Jones Professional Lead for Mental Health





Dr Chaand Nagpaul CBE Chair of Council



Jonathan Stewart National Chairman



Katherine Henderson President



Gill Walton Chief Executive and General Secretary



Prof. Claire Anderson Chair, English Pharmacy Board