

Acknowledgements

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Foreword

At a time when rapid demographic change and ever greater global competition are placing growing pressures on economic and welfare systems all around the world, acting to prevent people from becoming ill at work – and supporting and rehabilitating those who do become ill – is not only crucial for the physical and mental health of the nation’s workforce, but ultimately critical to the nation’s financial health. It underpins the success of British business, the economy, and ultimately the very fabric of our whole society. Promoting wellness at work is fundamentally about recognising this essential truth – that good health is good business. It means harnessing the critical potential of the workplace as a force for good in promoting the health of working people. First we must persuade all employers of the need to act. Of course, many already do. But it is imperative to build the business case – that it can be beneficial to the company (and not just socially responsible) – for employers of all sizes and sectors to promote the health of their workforce. The benefits and successes highlighted by the projects in this programme undoubtedly help to progress that cause. But secondly, and perhaps even more importantly, we must be able to develop comprehensive advice and support for employers on how best to act. There is no substitute

here for a rigorous evaluation of what works. Copying best practice will not guarantee the success of any given workplace approach, as this is necessarily dependent on the specific environment and challenges facing that workforce, sector of employment or even geographical area. But it will allow the creation of principles and standards that will inform others of what is possible and help to raise the bar in workplaces across the nation. The findings in this project will be invaluable in meeting that challenge. Ultimately the success of any initiative will depend on the commitment of those involved. Well@Work highlights the critical importance of ‘workplace champions’ as well as senior advocates or programme sponsors who can engage employees and demonstrate the commitment of management to the initiative. It is not just about the employer’s commitment, but also the responsibility of the individual employee to engage with the support available. The challenge and opportunity for all of us is to find ways to improve this support, especially for small and medium size businesses, who so often say they want to be able to access support but cannot easily do so. With sickness absence costing the economy over £13 billion a year – and lower productivity while at work due to common mental health problems alone

estimated to cost in excess of £15 billion a year – all of us have a critical role to play in securing the future health of the working population. Over the coming months, we must rise to the challenge of making wellness at work a reality for all, not a privilege for the few. We will not be able to secure the future health of our nation without it.

Dame Carol Black
National Director for Health and Work



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Introduction

With over half the UK population spending an estimated 60% of their waking hours at work, the workplace is undeniably an important setting for promoting a healthy lifestyle. Although this has been clearly recognised in recent national policy reviews, there is limited evidence on the effectiveness of workplace health promotion initiatives from studies in England.

To remedy this, the Well@Work programme, a national workplace health initiative, was established.

This report provides key findings from the programme and calls to action that many sectors of society, from government to businesses, sport and leisure providers, to employees themselves, can use to encourage all organisations to develop and implement a comprehensive workplace health programme.

Background

Well@Work was a collaborative project between government and non-government agencies and was an action in the government’s 2004 White Paper ‘Choosing Health, Making Healthy Choices Easier’. The British Heart Foundation provided programme management, overseeing project implementation and financial monitoring.

A national steering group made up of representatives from Well@Work funding partners, Sport England, the Big Lottery Fund and the Department of Health, met regularly throughout the project. The project evaluation was conducted by Loughborough University.

Aims

The Well@Work pilot project set out to:

- assess the effectiveness of workplace health programmes in a wide range of working environments
- develop an evidence base on ‘what works’ in workplace health promotion in England.

The projects

Well@Work established 11 projects across the nine English regions involving a total of 32 organisations and a potential workforce of 10,000 employees.

The workplaces where the projects took place included a mix of large and small businesses, private, public and voluntary sector organisations, for example: offices, factories, local council departments, GP surgeries, a prison and a hospital. A list of the participating organisations is given on page 5.

The projects delivered a diverse range of initiatives focusing mainly on physical activity, (which was a core component across all projects), diet and smoking. Additional topics were also addressed including stress and mental health. The projects were encouraged to deliver activities across four themes:

- awareness and education
- programmes and services
- supportive environment
- developing health-related policy.

Different approaches were used to suit the needs, interests and resources of each organisation and its employees.

Projects were delivered by a regional team including:

- a full or part-time project coordinator based within the workplace or a partner organisation
- a regional steering committee
- partnerships with other organisations eg, primary care trusts or leisure sports trusts, and small and large businesses.

Timelines

Well@Work was conducted over three years. Planning began in July 2004, workplace selection took place in Autumn 2004 and projects commenced from April 2005 to January 2006, running for an average of 22 months and completing between April and September 2007.

Funding

Funding was provided by the Department of Health, Sport England, the Big Lottery Fund and the British Heart Foundation. The total budget for Well@Work was £1.6 million; this covered project management costs, the national evaluation and two-year grants of £100,000 to each of the nine regional pilots.

Evaluation

The national evaluation of Well@Work was conducted by Loughborough University and used a pre post design with consistent and comparable methods and measures across all Well@Work projects. Both quantitative and qualitative methods were employed.

Key outcomes of interest were:

- changes in employee health and lifestyle behaviours
- improvements in the supportive workplace environment
- improvements in selected business-related indicators.

Changes in outcomes were assessed via an employee survey, a site visit to audit the workplace environment and collection of business-related data provided by participating workplaces.

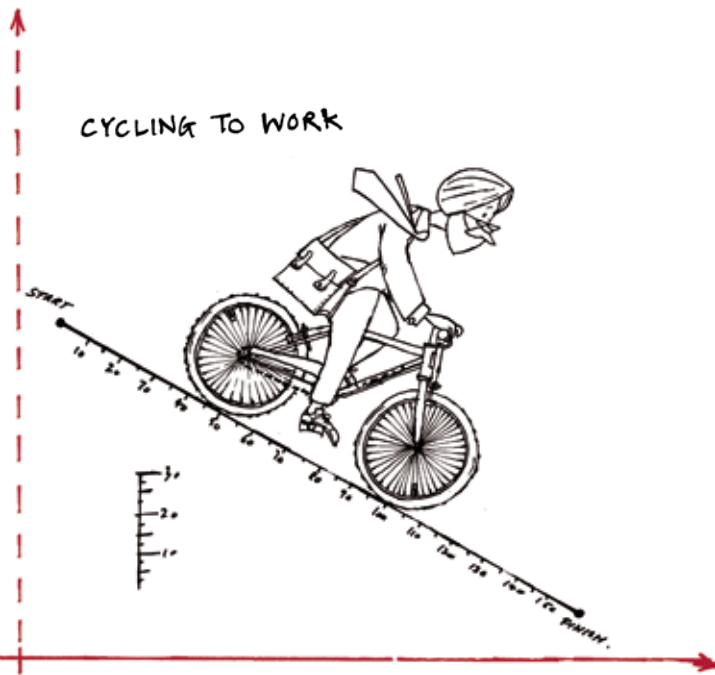
The qualitative evaluation involved in-depth interviews and focus groups and aimed to capture the views, opinions and experiences of employees, employers and those involved in implementing the Well@Work projects.

Table 1: Participating organisations

Region	Lead organisation	Workplace	No. of organisations	Sector	No. of employees	Location
East	Creating Excellence with Business Link Norfolk	Small to medium size enterprises	8*	Private	894	Urban/ Rural
East Midlands	Engage East Midlands	Voluntary Organisations	14**	Voluntary	773	City/Urban /Rural
London	St Mary’s University	Newham General Hospital	1	Public	2240	City
North East	Darlington Primary Care Trust	AMEC International	1	Private	184	Urban
North East	Darlington Primary Care Trust	Supreme Care Homes	1	Private	255	Urban/ Rural
North West	Wigan Leisure and Culture Trust with Ashton and Leigh Primary Care Trust and Healthworks Ltd	HM Prison/Young Offender Unit Hindley	1	Public	720	Rural
North West	Wigan Leisure and Culture Trust with Ashton and Leigh Primary Care Trust and Healthworks Ltd	Heinz	1	Private	1400	Urban
South East	Berkshire East Primary Care Trust	MARS UK	1	Private	1579	Urban
South West	Exeter City Council	Exeter City Council	1	Public	843	City
West Midlands	Telford and Wrekin Primary Care Trust	Primary Care Trust (including GP practices)	1	Public	1000	Urban
Yorkshire & Humber	Calderdale Primary care Trust	Provident Insurance plc	1	Private	465	City/Rural

*East organisations: Lee & Plumptre, Structure Flex, Swains International, Swains Voice and Data, Open Contact, Easton College, Break, Business Link 4 Norfolk

**East Midlands organisations: Inspire Nottingham, Nottingham CVS, Positive Futures, Engage, NW Leicester Council for Voluntary Service, Derby Dales Council For Voluntary Service, Derby Community Foundation, Stapleford Bureau, Derby Council For Voluntary Service, High Peak, South Derby Council For Voluntary Service, Beeston Volunteer Centre, Age Concern Northampton, Age Concern NW Leicester



CASE STUDY

Workout For Health (North West Project)

Alison Gilfoyle's work as project coordinator of Well@Work in Wigan has had a real impact – so much so that the Heinz food company and Hindley Young Offenders Institute will continue funding her to keep the health initiatives moving.

But providing the right initiatives for the hard working staff at Hindley and Heinz, with a total of around 2,000 people, wasn't a walk in the park, and Alison knew a realistic approach was crucial: *"It is quite physical work, and sometimes the last thing you want to do after a long shift is exercise, so we also focused on diet and general health awareness".*

Heinz is located in area of Wigan which has long been associated with heart disease, and putting healthy options on the canteen menu was a priority. Workers rose to the challenge, and sales showed a trend towards healthier eating during the project.

The most popular initiative showed that health awareness was improving too. More than 600 people signed up for health checks, which covered areas including blood pressure and cholesterol, and both organisations will provide funding for regular checks in future.

But workers were getting more active too. Two teams at Hindley strode out for a month-long pedometer challenge. Their distances were charted on a map of the USA, and by the end of the contest the winners had clocked up almost 2,000 miles – the equivalent of walking from New York to Dallas.

In just three weeks, almost 100 Heinz staff enrolled in a bike purchase

scheme; Waist Watchers sessions reported losses of up to two stone; and others from both workplaces took up the offer of professional coaching at Haigh Hall golf course.

Now, Alison's looking to the future: *"People have become more open to improving their health and fitness... it's not just individuals who benefit, but organisations, in terms of reducing sickness rates and improving morale."* She's planning to encourage more local companies to start up health schemes: *"The models at Heinz and Hindley have given us a really good foundation. We've learned a lot"*.

What the staff said:

"The pedometer challenge has been a fun way of interacting with work colleagues, as well as keeping my own

personal fitness levels up". Hindley employee

"Waist Watchers was a very good way of learning about what's good to eat and to look differently at food labels and their contents". Heinz employee

"I learned how to hold a golf club – and sometimes hit the ball! The session was informal and I didn't feel out of place".



Key findings

Health and lifestyle

Over the two-year programme, 546 initiatives were run across the participating workplaces. The majority of initiatives were aimed at increasing awareness and education or providing programmes and services. Far fewer initiatives were aimed at creating more supportive environments and developing supportive policy within the project timeframe.

Overall, over half the initiatives were classified as 'one offs', 'taster' or 'come and try' sessions. Ongoing activities (eg, sport clubs or classes) and 'short course' interventions each accounted for one fifth of the interventions delivered. The remainder of interventions were challenges or competitions. Examples of the interventions are provided in Table 2 on page 8.

Physical activity

Physical activity initiatives (including sports and recreation and active travel) accounted for half of all initiatives, however this varied across projects (from 23% to 73%).

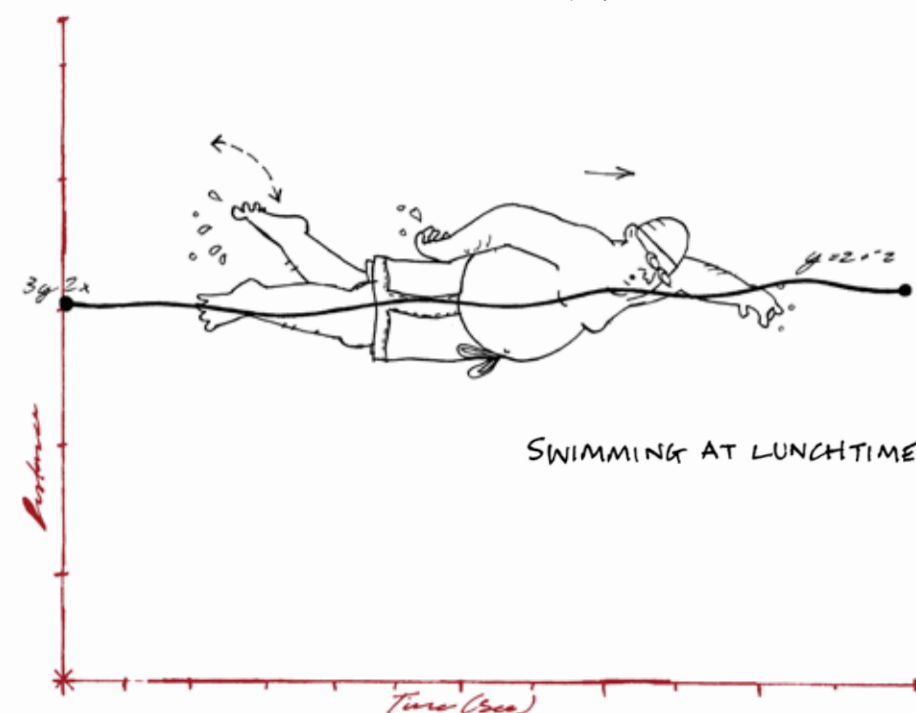
Physical activity initiatives were perceived as the 'easiest to sell to employees', fun, enjoyable and easy to link in with or conduct as social events. Popular initiatives included 'come and try' or 'taster' sessions, team based events and competitions. Employees enjoyed and valued the peer support provided by this type of event and found the competitions motivating.

A significant increase in METminutes* of physical activity between baseline and follow-up was observed in six of the projects, which is supported by the strong focus on physical activity initiatives in many of the projects.

Barriers to implementing physical activity initiatives included a lack of suitable space or facilities in which to conduct activities and, in some cases, a lack of changing and shower facilities prohibited participation.

Active travel

Statistically significant increases in active travel were observed in three projects, two of which focused strongly on delivering active travel programmes including links with local Sustrans initiatives (eg, Town on The Move), walking and cycling commuter challenges, bike purchase schemes, bike maintenance and cycling lessons and improved cycle racks/storage.



*(multiples of resting metabolic rate) for participation at low, moderate and vigorous intensities based on the Ainsworth compendium (Ainsworth et al., 2000). METminutes were computed by multiplying the MET value of an activity by the number of minutes of participation. Total METminutes were computed by summing the METminutes for each activity.

Ainsworth BE, Haskell WL, Whitt MC, Irwin ML, Swartz AM, Strath SJ, O'Brien WL, Bassett DR Jr, Schmitz KH, Emplainscourt PO, Jacobs DR Jr, Leon AS. (2000) Compendium of Physical Activities: An update of activity codes and MET intensities. Medicine and Science in Sports and Exercise, 32 (Suppl), S498-S516



“It’s been good for inter-departmental communication - it’s had a very positive effect.”

Total minutes of cycling and walking to work increased significantly in these three projects (the private sector, a food manufacturer and the general hospital). All three projects showed a significant increase in walking to and from work at follow-up, however only two of the

projects showed a significant increase in cycling.
The geographical location and environment surrounding a workplace may restrict active travel opportunities. Although organisations may not have direct control of the immediate walking

and cycling environment, employers may be able to improve facilities and infrastructure in collaboration with the local authorities to encourage employees to participate in active travel.
Continued on page 10

Table 2: Examples of interventions

Area	Awareness and education	Programmes and services	Physical environment	Policy
Physical Activity	<ul style="list-style-type: none">• Presentations / talks• Personal travel plans	<ul style="list-style-type: none">• Exercise classes eg, yoga, pilates, boxercise, aerobics• Activity clubs eg, football, badminton, cycling, squash, running, Nordic walking• Dancing classes – ballroom, salsa, flamenco, belly-dancing• Lunchtime walks• Corporate gym membership schemes• Taster sessions – rock climbing, scuba diving, surfing, golf• Pedometer, triathlon, rowing and active travel challenges• Cycling refresher courses• Dr bike clinics• One-offs – inflatable human table football; ‘it’s a knockout’; dodge ball and rounders tournaments• Promotion of stair use – posters and challenges	<ul style="list-style-type: none">• Installation of bike racks / storage facilities• Drying room• Installation of on-site gym equipment• Physical equipment library - purchasing of sports / physical activity equipment for loan to employees• Decoration of stairwells	<ul style="list-style-type: none">• Development of physical activity policy
Diet / Nutrition	<ul style="list-style-type: none">• Presentations / talks• Tray liners• Table talkers• Fruity Fridays• Food and mood resources• Healthy eating and ‘cook ‘n’ taste demo workshops• Make and try smoothie taster days• Healthy snack days	<ul style="list-style-type: none">• Weight management courses – ‘Fat Busters’ / ‘Summer Slim Down’ / ‘Absolutely Flabulous’• Team weight loss competitions – ‘World Cup Weigh In’ / ‘Cold Turkey’ / ‘Biggest Loser’	<ul style="list-style-type: none">• Water cooler provision• Healthy vending machines• Blender provision• Free fruit provision• Healthy changes to canteen menus	<ul style="list-style-type: none">• Development of nutritional standards policy
Smoking Cessation	<ul style="list-style-type: none">• Presentations / talks• No smoking campaigns – National no smoking days	<ul style="list-style-type: none">• Smoking cessations classes – 1-2-1 and group support• Nicotine patches	<ul style="list-style-type: none">• On-site smoking bans	<ul style="list-style-type: none">• Development and revision of smoking policies
Stress / Mental Health and Alcohol	<ul style="list-style-type: none">• Presentations / talks• Leaflets and displays• Stress management workshops	<ul style="list-style-type: none">• Qi Gong classes• Tai Chi classes• Indian head massage sessions• Massage chairs		
Other	<ul style="list-style-type: none">• Health talks / presentations• Health awareness weeks• Bare care awareness• Sun awareness• Breast, testicular and prostrate cancer awareness• Healthy photography competition	<ul style="list-style-type: none">• Health checks		

CASE STUDY

Calderdale Well-being@Work (Yorkshire and Humber Project)

Despite low levels of exercise and poor diets, it wasn’t just the workforce at Provident Insurance in Halifax who needed a boost on the health front – it was the company too. With no on-site gym or health and fitness package for staff, as well as being close to more fashionable Leeds, Provident was losing out in the struggle to recruit and retain key workers.

“Health and lifestyle are becoming more of a focus when people apply for jobs,” explains HR manager Amanda Hardcastle, “and it was something we needed to address to improve morale and make the company more attractive to potential staff.”

Unsurprisingly Provident jumped at the chance to join Well@Work and the transformation has been remarkable, with over 80% of staff getting involved and the company winning an award from Business in the Community for its stirring efforts.

Weight loss was the key priority, and project coordinator Jan Spence, knowing that Halifax people thrive on competition, set up a series of team challenges – and the staff really came out fighting. With the 2006 football World Cup to spur them on, almost 150 people in teams representing different countries battled to lose the most weight, losing a total of 22 stone. “To get 25 per cent of the workforce on a weight loss programme was amazing” said Jan.

Equipped with their own pedometer, staff stepped out on 30 minute lunchtime walks which were mapped out across the town centre, a nutritionist helped improve one canteen menu, and fresh fruit was sold at cost.

A discounted pass scheme for local gyms and swimming pools was introduced and will hopefully continue in future. And to keep the spirit of competition alive, trophies will be presented annually for sporting events such as the company squash league.

The company’s strong support was crucial and is ongoing, with three department heads overseeing the project long-term. As Amanda says: “Health and fitness is now part of our culture, ... and a healthy workplace is now a big part of what we offer potential new staff. Having someone like Jan has been great, but we can now stand on our own feet”.

Jan is moving on, with further Calderdale NHS PCT funding, and other organisations will benefit from the project’s success. “Provident has become a model. Other companies are already signing up to smoking cessation and weight loss programmes”.

A personal story – Tara Woodrow, claims negotiator, Provident

Twenty four year old Tara has found that losing over a stone in a Well@Work weight loss programme really helps her cope with her asthma: “Before, I was always wheezing and out of breath – now I feel a lot healthier. I’ve made some really big changes to my life, doing more exercise, including lunchtime walks and pilates, and cutting out junk food. Weekly weigh ins at work have been really useful and it helps to have other people around who are also trying to lose weight”.





Sport and recreation

A significant increase in sports and recreation participation was observed in nine projects and these results are consistent with the strong focus on physical activity across the Well@Work projects. Seven of the projects showed a significant increase in MET minutes of sports activities between baseline and follow up.

Nutrition

Nutrition initiatives accounted for one fifth of project events but this varied across projects (range 4% to 41%). Statistically significant increases in fruit and vegetable consumption were observed in five projects. This change was consistent with employees' perceptions that the Well@Work project motivated and helped them to eat more healthily.

Fruit taster sessions, the provision /distribution of free fruit and weight loss programmes or classes were popular initiatives across most projects.

Smoking cessation

A small decrease in the prevalence of smoking was observed in six projects and a small increase was observed in four projects; none of these changes were statistically significant. Most initiatives aimed at providing smoking cessation courses and supporting workplace changes needed to prepare for the new legislation introduced in July 2007.

Alcohol consumption, mental health and stress issues

There were no changes to reported levels of alcohol consumption, but some projects reported a modest improvement in awareness of the recommended daily levels of alcohol intake.

Health checks

Health checks were a popular method for engaging employees and launching the Well@Work projects with eight of the 11 projects offering this type of initiative. The checks were well received by employees, provided personalised health information that raised employees' interest in their health and often motivated them to participate in other programme activities and make positive life changes.

Project coordination and delivery

The role of the project coordinators was significant in the delivery and success of Well@Work projects. Their contribution to the development and coordination of the projects was substantial. Project coordinators were responsible for making projects happen, providing ideas, sourcing providers and signposting organisations to external resources. A successful programme coordinator should ideally possess management, planning, coordination and communication skills as well as an interest in health issues and/or an ability to deliver initiatives.

Recruiting 'workplace champions' to assist in the development and implementation of health initiatives was a useful strategy which provided support to the project coordinator, enhanced employee participation and improved

project communications. Workplace champions had a clear and positive impact on the number of initiatives implemented over the two-year period. It was helpful to have more than one champion in large organisations, workplaces with multiple sites and those with multiple and/or diverse employee groups (such as shift workers, factory/ warehouse employees, and administration or sales staff). Workplace champions did however indicate the need for clear roles and areas of responsibility and identified support from the project coordinator and training as being essential.

A key workplace 'advocate' or programme 'sponsor' within the organisation was an important factor for the success of the Well@Work projects, providing the coordinator with advice and support in getting to know the organisation and gaining access to management. They were particularly important when the project coordinator was externally based and/or part-time.

Support from senior managers, line managers and supervisors was seen as essential for the success of the project, in supporting the project coordinator and workplace champion roles and in engaging employees.

Building supportive workplace environments and healthy workplace policies

Creating a supportive workplace environment can help and encourage employees to maintain healthy lifestyles, however only a few changes were made in

Well@Work organisations during the programme.

All projects made improvements to the awareness and education environment, by providing newsletters, poster boards or intranet pages. These changes were easy and inexpensive to implement. Changes to the physical environment were often small in scale, partly due to the lack of funding for this type of development. Examples included providing or improving bike storage or providing sports equipment and providing healthier options in canteens and vending machines.

Few changes to the policy environment were undertaken during the programme. Those Well@Work projects with higher management support were able to commence or achieve some policy changes; these included an active travel policy, physical activity policy or changes to staff induction materials or a physical activity policy.

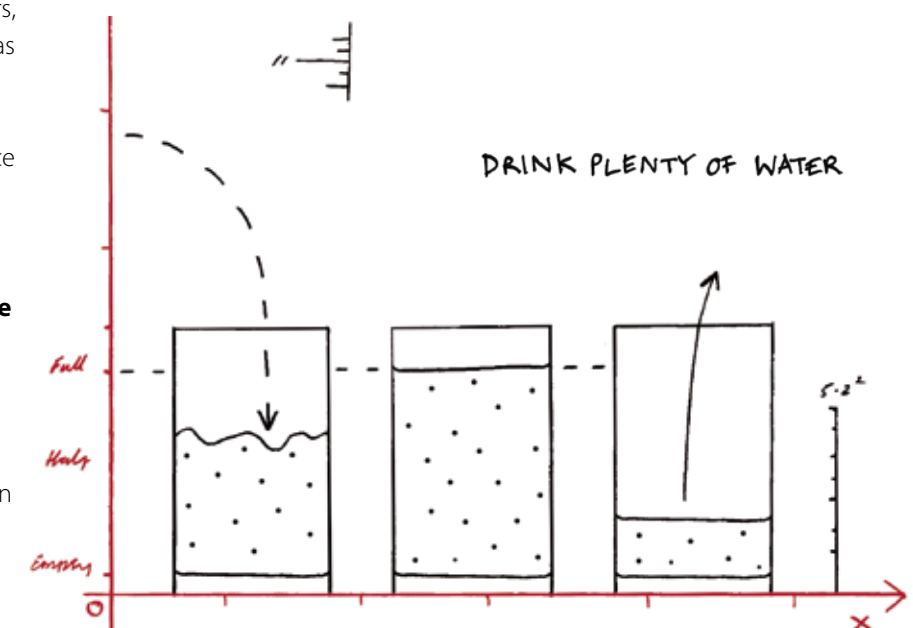
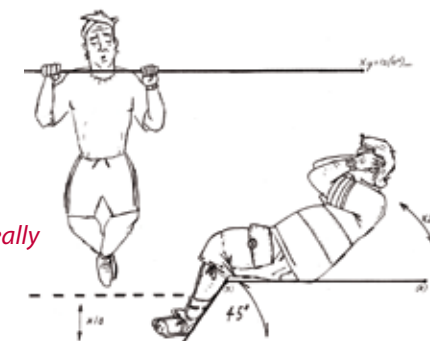
Business indicators

The potential for improving business performance, for example in areas such as increased productivity and reduced absenteeism, was important to many organisations involved in Well@Work. However, limited data were provided by participating workplaces to accurately assess the impact of Well@Work in these areas.

Two projects provided some evidence to indicate a reduction in absenteeism between January 2005 and June 2007, however this cannot be solely attributed to the effects of the Well@Work project.

There was considerable discussion of the impact of Well@Work by employees and employers in discussion groups held at the end of the projects. Employers perceived an improvement in staff morale, working atmosphere, communications and interactions between employees and managers in the workplace. These were described

"I knew I had to lose weight, but I needed a kickstart... it really helped to have colleagues to encourage me."





as “less tangible” but important outcomes and were valued and considered important for other business areas particularly over time. Across all projects employees reported enjoying their experiences and liking the opportunity to meet new colleagues and socialise.

Employee perceptions of the project
Employee awareness of the Well@Work projects was extremely high across all the participating organisations (average 93%). Employee ratings of how well the project was publicised within the organisations was also rated quite highly (average 67%).
Employees indicated that the Well@Work projects had been well received and enjoyed by most

employees at most workplaces. Many reported that the projects had been “informative”, “helpful”, “useful” and “interesting” and had a positive impact on employees’ awareness of health messages and healthy lifestyles.
Participation rates (from questionnaire responses) provide an estimated reach across all 11 projects of 65% although this varied across the projects from 23% to 82%.
On average only 40% of employees reported that the Well@Work projects had ‘met their needs.’ This may be due to the focus or content of the Well@Work projects; access to and convenience of initiatives and activities; poor communication of Well@Work initiatives; and low levels of employee interest or ‘readiness’ to participate.

Success and sustainability
Overall, organisations participating in the Well@Work programme considered the experience to have been very worthwhile and had positively impacted on both staff and the organisations.
Eight of the 11 Well@Work projects have plans in place to continue with a workplace health initiative after the pilot phase, this includes providing the financial resources and mainstreaming the project coordinator post in some cases.
The extension of Well@Work projects in over two thirds of projects indicates that participating employers valued the workplace health initiatives and recognised the positive impact on employees and workplace culture.

Table 3: Projects which are being continued

Region	Project continuing?	Project coordinator position continuing?*	Comment
East	✓	✓	Project coordinator developed a workplace health promotion initiative and accreditation scheme as a commercial venture to roll out to other businesses. Two SMEs involved in Well@Work have signed up for the next year and will receive support from a coordinator type role.
East Midlands	✗	✗	Initiatives taken on board but no formal continuation of the project.
London	✓	✗	Linked with another workplace health initiative. In-house workplace champion scheme being developed in participating organisation. Project coordinator taken up a post in the local authority - interest for local authority wide roll out of initiatives.
North East AMEC	✗	✗	Coordinator left halfway through project and not replaced. Organisation under new management and not continuing with the project.
North East Supreme Care Homes	✗	✗	Coordinator left halfway through project and not replaced. Organisation under new management and not continuing with the project.
North West Heinz	✓	✓	Leisure Trust extending workplace health programmes to other businesses in the local area – organisations have signed up and will receive project coordinator services / time for 1 day per week.
North West HM Prison/Young Offender Unit Hindley	✓	✓	Leisure Trust extending workplace health programmes to other businesses in the local area – organisations have signed up and will receive project coordinator services / time for 1 day per week.
South East	✓	✓	Carrying on with project in-house with full-time project coordinator role supported / privately employed. PCT has identified some funding for a coordinator position and looking to roll out similar programmes to other businesses in the local area.
South West	✓	✓	Coordinator position incorporated into another role within the organisation. Planning to roll out workplace health promotion programmes to other businesses in the local area.
West Midlands	✓	✓	Continuing with workplace health coordinator position to service an in-house project and looking to roll out to other organisations within the area.
Yorkshire & Humber	✓	✗	Project continuing in-house without a coordinator. PCT has created a workplace health coordinator role and is now rolling out workplace health promotion programmes out to other businesses in the local area.

* this refers to the project coordinator position continuing within, or with some links to, the participating workplace

CASE STUDY

Working Well (East Project)

Diversity was project coordinator James Mihill’s problem. With eight very different organisations across a wide area of Essex and Norfolk, workforces of between 12 and 270, and a mix of ages and fitness levels, they only had one thing in common – no one dedicated to the health and fitness of their employees.
James’ 12 years experience in the fitness industry was vital to creating the wide range of initiatives that were needed to get employees on board, but he knew his first task was to recruit teams of workplace champions. He says: *“We were determined that the project was company and employee led, and their support was crucial. We also wanted to ensure that it was embedded within the organisations by the time the pilot finished so that it was sustained.”*

With a firm commitment of two hours company time each week for the champions, James and his team got to work on a variety of exercise and nutrition schemes. Health checks were popular at all eight sites, a running club was set up at Swains International, and new water coolers and vending machines offering healthy snacks helped staff get on the move.
We all need a proper start in the morning, and Open Contact’s introduction of a breakfast bar chock full of healthy cereals ensured employees were fit for the day, while workers at

Lee and Plumpton and Structure-Flex received free fruit on Fruity Fridays.
Wimbledon fortnight inspired staff at the charity BREAK to take part in a mini tournament in the car park and other adventurous activities included scuba diving, archery, kayaking and rock climbing.
Since the end of the project, three organisations, Swains, BREAK and Open Contact, have joined private workplace health scheme Fit for Business, and all eight will keep champions in place. James believes that every organisation has seen tangible benefits: *“We’ve begun making inroads towards making these workplaces healthier and fitter – they’ve all said staff morale has improved. Healthy activities bring people together within the company”.*

A personal story – Tarnya Darling, call centre worker, Open Contact
Well@Work has helped 24 year old Tarnya make a really great trade – she’s swapped cigarettes for cycling. Tarnya’s one of the biggest success stories of the project – not only quitting smoking but radically changing her diet and getting involved in a host of healthy activities, including riding three miles to work every day. Health checks during the project has shown that Tarnya’s lung capacity has improved, but she’s not just a beneficiary of Well@Work; as a workplace champion from the start of

the scheme, she’s played a big part in organising actives and motivating her colleagues to get involved.
“Since the project launched, my health has come on leaps and bounds – my whole lifestyle has changed. We have fruit delivered to work, and I eat lots of nuts and seeds. I used to find exercise scary but now it’s fun.”



Case studies of interventions and activities

A number of interventions and activities delivered across the Well@Work projects were identified for their potential to provide additional evidence on the immediate effectiveness of selected interventions. These included improved health knowledge, skills, motivation and changes to health actions and behaviours of participants.

Three examples of such interventions evaluated by Loughborough University are detailed below.

Pedometer challenges

Methods

Three team-based pedometer competitions aimed to increase the number of steps employees took at work.

Competitors received a pedometer and a challenge guide which included information on recommended daily steps, the health benefits of becoming active, ideas on how to add steps into their daily routine and the number of steps required to climb different landmarks.

Baseline measurements were recorded over a four week period before the challenge.

The team with the highest total step score and the team with the highest increase in steps both won a £50 prize. Challenge 1 and 2 ran for eight weeks, challenge 3 was shortened to six weeks

Results

- Challenge 1:
- ten teams (50 employees) started the competition
 - four teams (20 employees) finished
 - the average change in step counts was 39% (range 3% - 55%).
- Challenge 2:
- fifteen teams (73 employees) started the competition
 - eight teams (36 employees) finished
 - the average change in step counts was 32% (range 7% - 77%).
- Challenge 3:
- nine teams (52 employees) started the competition
 - four teams (25 employees) finished
 - the average change in step counts was 48% (range 16% - 63%).

There was considerable individual and team variation in the number of step counts and levels of change, although no results on longer term (post challenge) change are available.

What did we learn?

- the team and competition elements of the challenges helped to motivate some employees, although others did not like this competitive element
- drop out rates tended to be quite high
- the challenge engaged some employees who had not previously participated in Well@Work activities and encouraged them to participate in others
- enthusiasm for the competitions was sometimes affected by finding out other teams step counts were “too far ahead”, resulting in some teams giving up.

For the future

- shorter competitions (up to six weeks) work better - staff can get bored
- keeping employees’ momentum and enthusiasm is important
- competitions are easier to run on a single site, by one or more people and/or an onsite coordinator
- collecting and collating step counts is time consuming – it’s valuable to recruit team captains or workplace champions to organise and motivate the participating employees and collect step counts on a weekly basis.

Weight loss competitions

Methods

‘Cold Turkey’ and ‘Biggest Loser’ were two weight loss competitions offered to employees through two Well@Work projects.

Cold Turkey was a team-based competition run over 11 weeks. The team that achieved the greatest percent weight loss was the winner and received a trophy. Fruit baskets were also awarded each week to the team with the greatest percent loss.

Biggest Loser was an eight week individual weight loss competition. The male and female who achieved the greatest percent weight loss received £130 in gift experience vouchers. The male and female with the greatest decrease in waist circumference received £30 of vouchers.

Both competitions provided similar resources and support: a weekly weigh-in; tape measure; resource booklets including self help materials and advice on losing weight; weekly ‘top tips’ and recipes.

Results

- Cold Turkey**
- twenty five teams (100 employees) weighed in (30 males; 70 females)
 - all employees completed the 11 week competition
 - fourteen teams (56 employees) lost an average of 8kg each (range 0% - 6.9%) equivalent to 0.7kg/week
 - percent weight loss ranged from 0.8% to 4.7%.

Biggest Loser

- fifty one employees weighed in
- twenty one employees weighed in at week 5 (8 males; 13 females)
- twenty employees lost on average 2kg each (range 0.3kg – 5.5kg) equivalent to 0.4kg/week
- percent weight loss ranged from 0.4% to 6.4%.

The average weekly weight loss data is similar to results of other worksite-based interventions which have shown a range of 0.21 – 1.63 kg/week (Foshee et al., 1986). Both competitions scored similarly, and favourably, on participant ratings of weight loss and changes in confidence, energy levels, knowledge and motivation (Chart 1).

Chart 1: Participant feedback success ratings

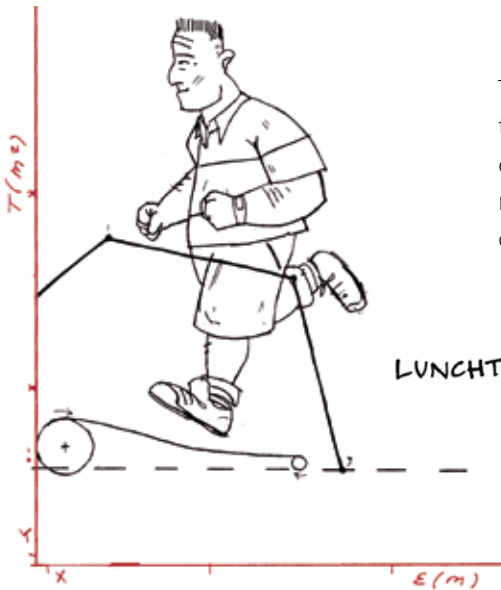
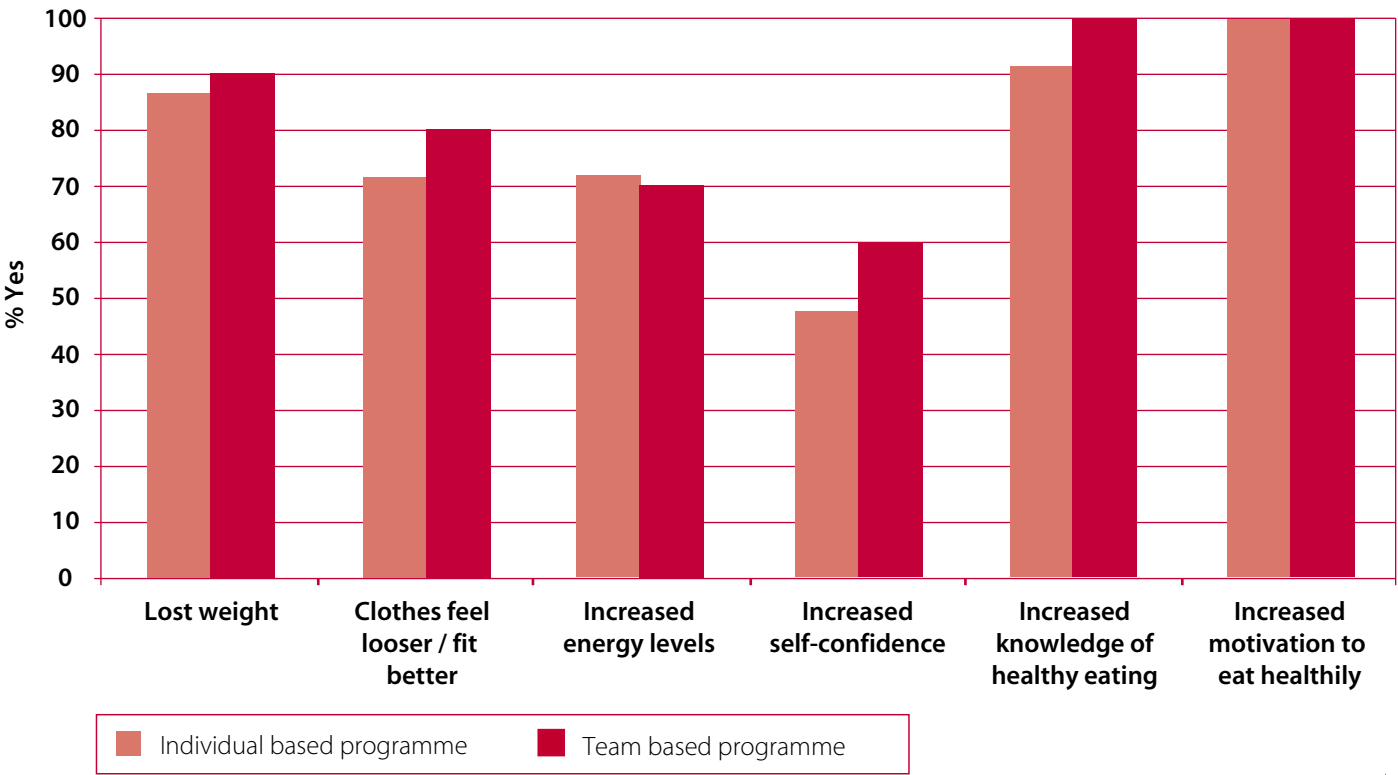
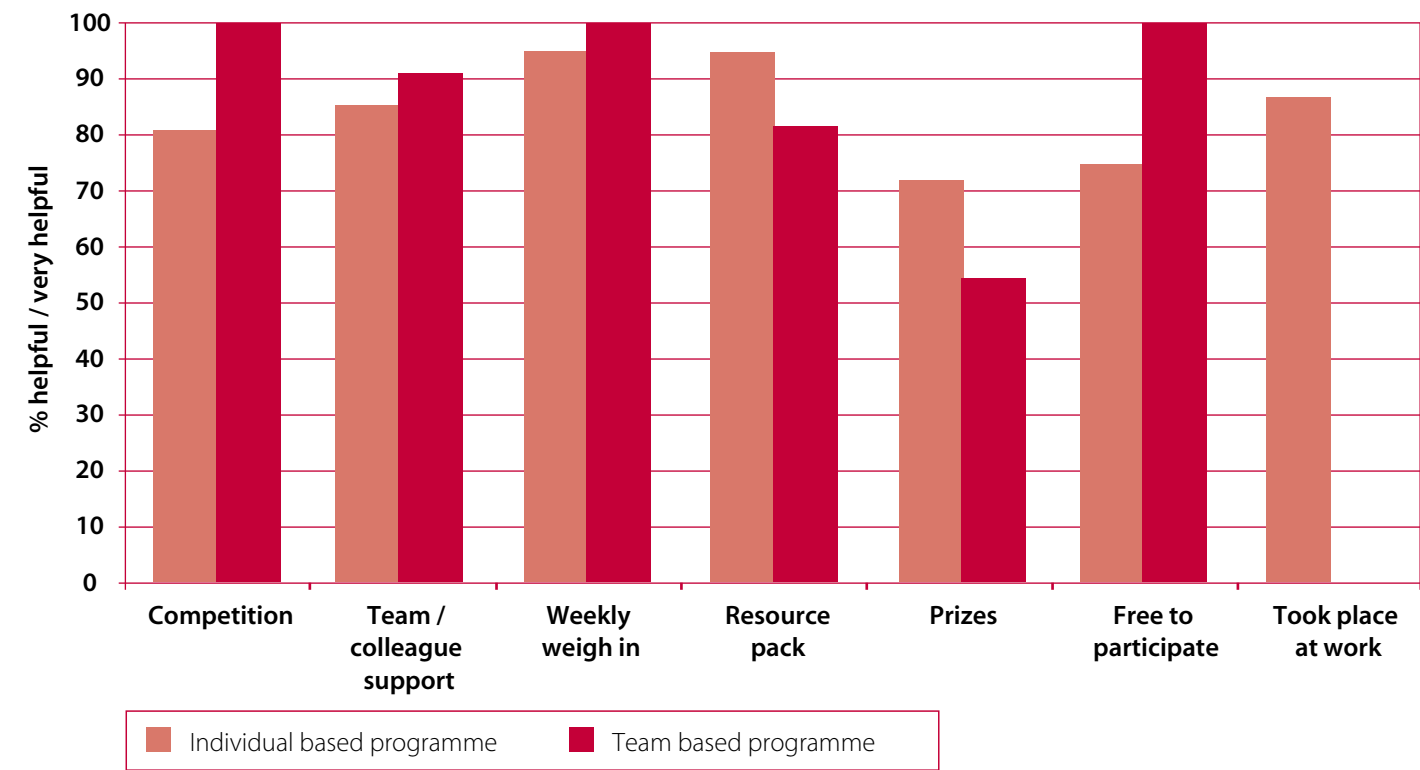


Chart 2: Participant feedback success ratings



Employees from both competitions rated the different aspects of the competitions favourably. Those in the team event rated the competition element as more helpful (Chart 2).

62% of employees in the individual competition and 39% of employees from the team competition indicated that their current weight loss attempt had been more successful than previous attempts.

What we learned

- Employees liked:
- the convenience of being able to participate in the weight loss group at the workplace; availability during work time was a significant factor for participation

- the social support and encouragement offered by fellow ‘team mates’ or colleagues; this was important for continuing participation
- the weekly weigh in sessions and personal contact with the project coordinator.

However, it’s important to offer a variety of weigh in times/opportunities to ensure equitable access for all employee groups - Biggest Loser participants found it difficult to make the weigh in sessions, especially those working on the factory floor, due to lack of flexibility in their working conditions.

For the future

- collecting weigh in data by visiting each employee’s workstation may increase involvement and reduces demands on employee time, although

it requires time and effort from a project coordinator or programme assistant

- offering prizes as incentives can encourage some employees, however the social support offered by running these programmes in the workplace was considered the most important factor for success by employees.

“Work colleagues who also took part in the project were a great support because if we were all eating healthily you weren’t tempted to snack on unhealthy items”

“The weigh ins and group effort made you make more of an effort to lose weight so you didn’t let your team down”

Winning With Wellness (South East Project)

With long hours and irregular shifts to cope with, staying healthy was a big challenge for the workers at Mars UK’s Slough factory. And the size of the challenge really came into focus when Body Mass Index tests revealed that 50% of the workforce were overweight.

Diet and weight loss were clearly the priority. Many initiatives were put in place, starting with the staff canteen, where subsidised healthy options were introduced - the offer of a free fruit salad with a main course salad went down a treat. And in meetings, biscuits were binned and replaced by fruit platters.

The ‘Fatbuster’ weight loss course was a big hit, especially with a group of ten shift workers who lost a collective five stone. But the big winner was 24 year old production planner Chris Dugmore, who dropped from 14 to 13 stone during the eight week ‘Slough’s Biggest Loser’ initiative, and won the top prize - a session in an acrobatics aircraft.

He says: *“I knew I needed to lose weight but I needed a kickstart...it really helped to have colleagues to encourage me.”* With no more junk food, less alcohol and a stepped-up exercise regime, Chris feels he’s really turned the corner in looking after his health.

Other initiatives continue to be a success. The revived Sports and Social Council now runs football and hockey teams, and on-site classes including yoga and pilates were in such demand that the company is converting one room into an exercise studio, and 30 minute walks fit nicely into lunchbreaks.

Arthi Santa, who was seconded from Berkshire East PCT to coordinate the project full-time, was impressed: *“To get 80% (of over 1100 workers) involved in at least one aspect of the project was a good achievement...at the very minimum, we’ve made people more aware of how they can change for the better.”* And more than impressed by

the eight workplace champions and the high level of management support: *“They were great, very motivated, and they really got involved. The champions will stay in place permanently, and can take the project forward.”*

And management was obviously impressed with Arthi too – the company has pledged continued funding for some of the initiatives she set up.





"I now take the stairs at every opportunity, as opposed to the lift, inside and outside of work"

Stair climbing interventions

Methods

- A4-sized posters were positioned at various locations beside elevators and on stairwell doors
- 'Beat the Chief Executive' (BTCE) challenged employees to time themselves walking flights of stairs with the aim of beating the time it took the CE to walk the same distance. Staff logged their times on the project intranet pages and the fastest employee won a prize
- photographs of stair users were taken during the working day. Employees photographed received on-the-spot prizes and had their pictures posted on the project intranet pages
- ongoing improvements to the stairwells were made throughout all interventions, including redecorating the stairwells and hanging artwork of local scenes on the walls

- an infra-red counter at the foot of each stairwell on the basement and ground floors automatically measured stair use 24 hours a day. These floors were chosen as they contained the main entrances into the building. A 'stair user count' was registered each time the infra-red beam was broken.

The timeline was

Baseline phase (6-weeks) → email sent to all employees introducing the 'Stairway to Health' programme and encouraging use of the stairs → posters (2-weeks) → break (2-weeks) → 'Beat the Chief Executive' challenge (2-weeks) → break (2-weeks) → photos 1 (2-weeks) → break (4-weeks) → photos 2 (2-weeks) → follow-up (2-weeks)

Results

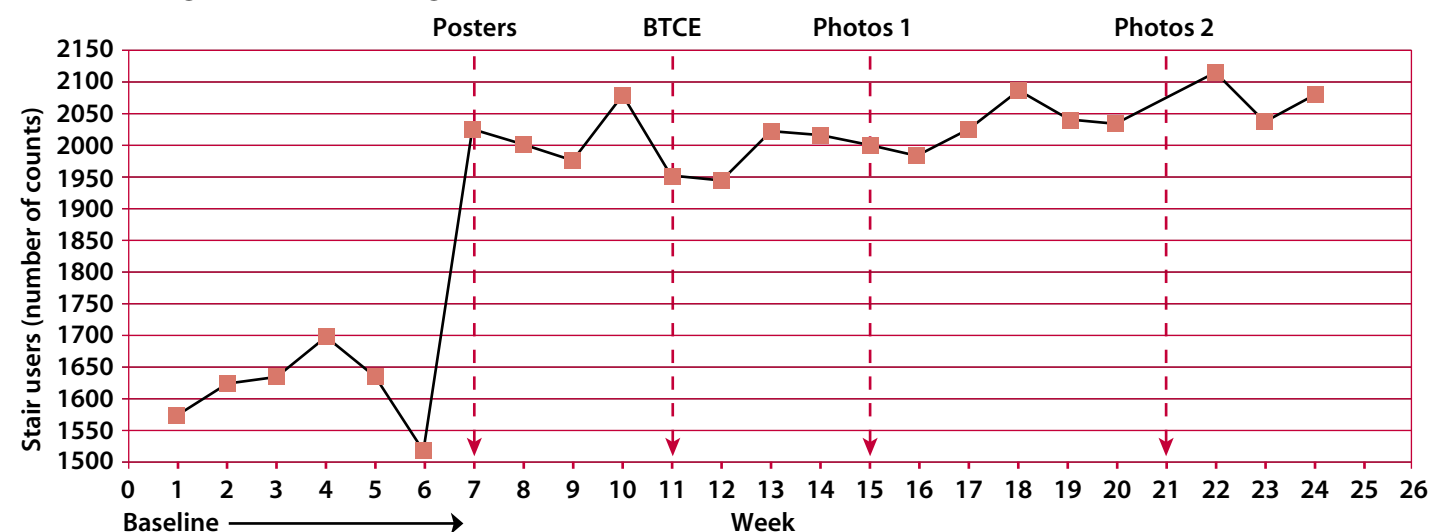
- stair counts across all four stairwells increased by 25% from baseline with the introduction of the posters

- stair use remained elevated from baseline levels during the photo interventions, peaking during the second photo initiative (29% above baseline)
- the BTCE intervention did not show any increases in stair use
- stair counts at week 24 (2 weeks post final intervention) remained 28% higher than baseline counts.

What we learned

- a multi-faceted programme to promote stair climbing resulted in substantial increases of stair usage counts
- however, the automatic counters don't allow for a directional measure of stair use and thus it's unclear whether the increased usage was by users ascending or descending. The changes may also be a result of other initiatives which were part of the wider Well@Work project and not just reflect the effect of the stair climbing interventions.

Chart 3: Progress of stair climbing interventions



CASE STUDY

Exeter Moves, Be Active 4 Life (South West Project)

Well@Work projects have really got people at Exeter City Council moving up in the world. A poster campaign and a bright new paint job on landing walls led a to a 40% increase in people getting out of the lifts and onto the stairs in just three months. And all in all, the project has been a resounding success, with more than 70% of the council's 950 employees becoming involved.

Twelve champions across five sites organised a range of initiatives and provided support and encouragement to their colleagues. Along with project coordinator Richard Pears, a former professional footballer, they asked employees what they wanted to ensure they got the right initiatives in place. Richard says: "The aim was to motivate and inspire people to make small changes to their daily routines – we're not trying to make them into athletes, just help them feel better about themselves."

With strong management support, many successful ventures were launched. An active travel scheme, in which 15% of council employees borrow bikes from a central pool proved popular and staff can also buy bikes tax free through cyclescheme.co.uk. It was a big hit for Mark Waddams, a 48 year old tree officer who's now getting fit by cycling 13 miles to and from work. And other employees who took up activities like golf or horse riding had the added bonus of 50% funding to get them started.

The new mini gym arrived at just the right time for building support manager Claire Morris to get in shape for her wedding: "Gyms can be very intimidating, but here I can exercise for half an hour before and after work alongside colleagues who give me support and make it all more fun. I feel healthier and my concentration's better."

The gym, along with weight loss classes, is really working out for Claire – she's lost two stone since the project started.

And there were other benefits for the council too – during the project, working days lost due to illness dropped by 20%. Alan Craig, head of museums and leisure, says: "Health and fitness is now part of the workplace culture. People feel better after exercise, and lots of groups have sprung up, which is good for morale".

A personal story – Ed Starkie, IT worker, Exeter City Council

As a Be Active for life champion, Ed administers a cycle purchase scheme and runs a new mountain biking club. He says: "There certainly has been a positive effect. There's a buzz about the project, which has become a real talking point throughout the council."





"I used to find exercise scary, but now it's fun."

Lessons learnt

Programme planning and initiation

The time required to plan, start and run a workplace health programme can take up to 12 months. Realistic timelines and objectives for participation and outputs should be set.

A key 'advocate' or 'sponsor' within the organisation is important to help build management support and to link health initiatives with the business agendas.

Visible support and involvement from senior managers, supervisors and line managers is essential for a successful workplace health programme. Support is required for those involved in delivery and for the programme itself to enhance employee engagement.

Project coordination is a key factor in the delivery and success of workplace health programmes, particularly in the early phases. A project is more likely to succeed and be sustainable if coordinators are supported and provided with sufficient time and resources.

Recruiting 'workplace champions' is recommended to help plan and implement programmes and to encourage employee engagement and a sense of ownership of the programme. Having more than one champion offers the advantages of both peer support and increased capacity.

If project coordination is provided by individuals based outside the organisation, the providers must have strategic plans to be 'on-site' and 'visible' to both management and employees on a regular basis.

Organisations implementing comprehensive workplace health programmes themselves may need,

and should seek, support from external health and/or service providers who can bring a breadth of knowledge, expertise, experience and existing resources.

Programmes must meet the identified needs and interests of employees, engage employees in the planning and delivery of initiatives and create employee ownership.

Some employees, such as shift or part-time workers, or those with less flexible work schedules, such as factory or healthcare workers, may face particular difficulties getting involved. Programmes must accommodate these individuals to ensure they have equal access and the opportunity to participate.

Multiple communication channels should be developed and used to maximise awareness of a programme across the wider workforce. Put simply, if employees don't know about it, they won't participate.

Delivering interventions and barriers to implementation and participation

Initiatives to increase participation in physical activity in the workplace are more likely to be attended if they are free, voluntary, are offered at convenient times, require minimal time commitment and are supported by management.

Programmes which promote walking are valuable in the workplace and may include:

- lunchtime walking groups
- maps showing safe, pleasant and accessible walks
- individual or team challenges (eg, pedometer based programmes)

- signposting distances (number of steps) around the workplace.

Active travel (cycling and walking) can be promoted as part of a workplace health programme and should ideally be:

- incorporated within a workplace travel policy
- supported by appropriate amenities (bike storage, changing facilities) and incentives eg, bike purchase and/or bike loan schemes.

Health checks are popular and were a well received initiative in the Well@Work project. Employees prefer 'health checks' or 'lifestyle assessments' to be undertaken by independent (external) service providers. This may address concerns about the

confidentiality of personal data and also reinforce the value senior management place on employee health through the provision of an external 'service.'

A lack of suitable space or facilities can limit the provision of physical activities and a lack of changing and shower facilities may present barriers to participation, limiting the success of initiatives aimed at increasing participation in physical activity. In such cases, signposting to community facilities may be an effective strategy.

Organisations with a large workforce may generate sufficient employee interest to sustain an on-site/in-house programme. Smaller organisations, or those with a large number of part-time or shift workers, may, again, find signposting to opportunities in the

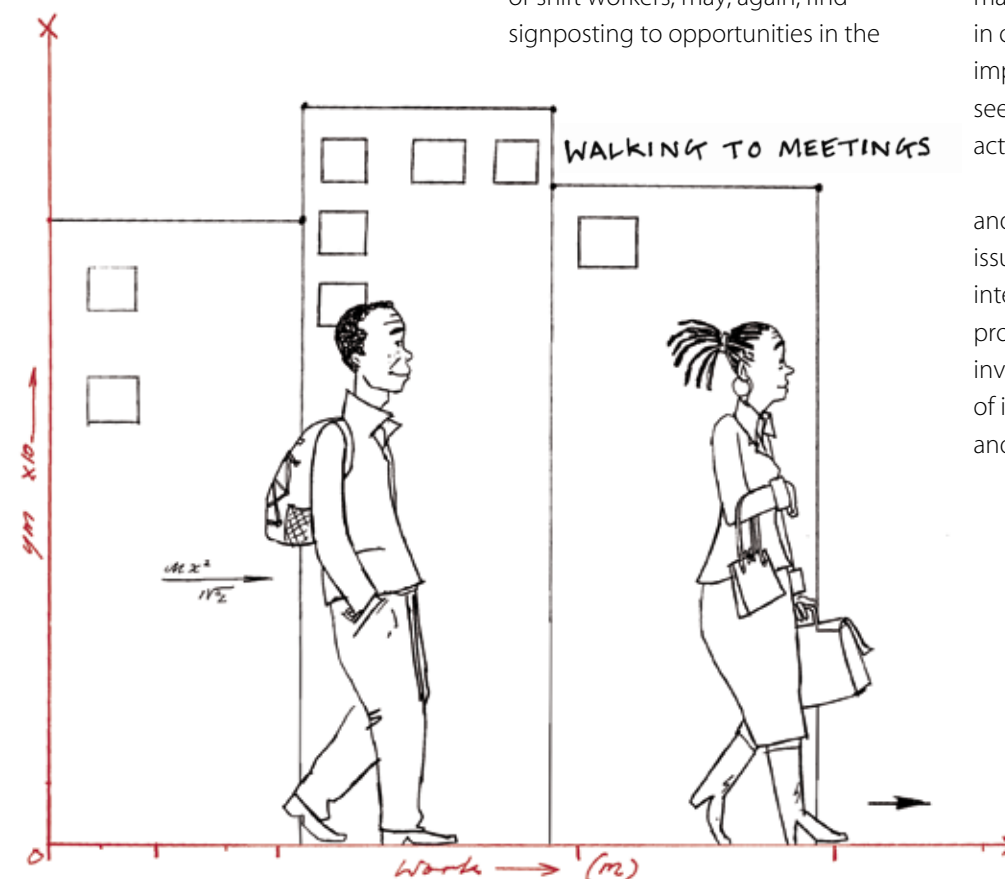
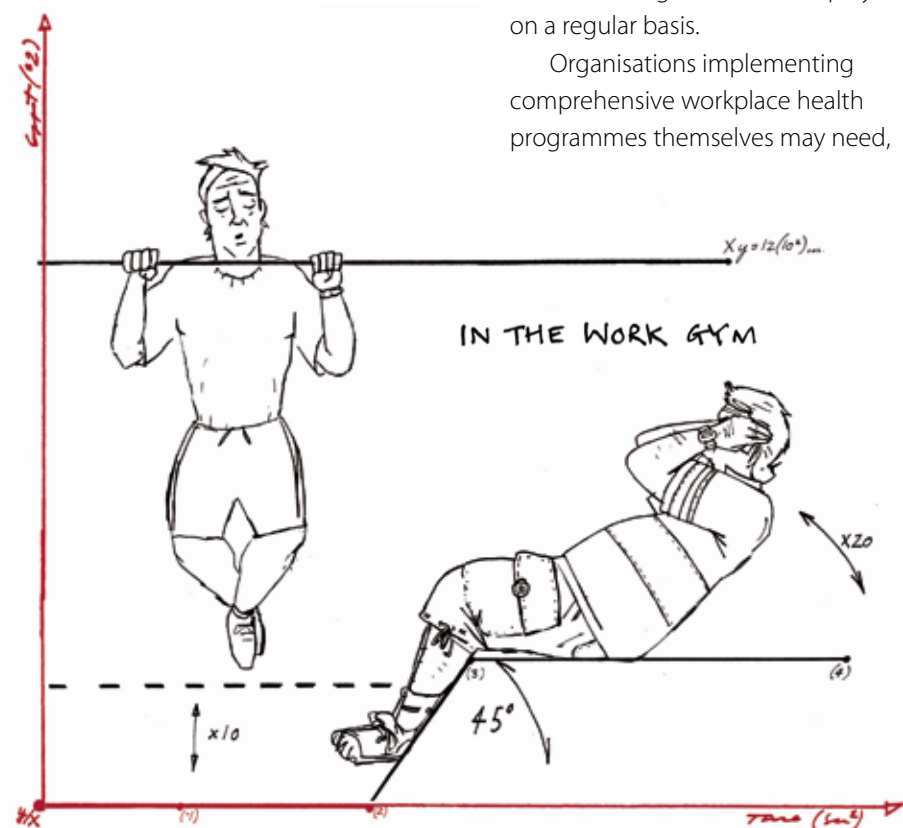
community a more effective strategy.

Additional difficulties in providing and sustaining ongoing programmes and physical activity classes in the workplace may be caused by:

- diverse employee interests
- varying levels of readiness to engage and confidence to participate
- constraints of work schedules
- family commitments.

Healthy eating can be successfully addressed in workplace programmes through the use of initiatives such as fruit taster sessions and weight-loss courses or classes. Initiatives that aim to provide healthy eating options may be restricted by existing food service contracts in canteens and vending machines, and require a longer view in order to affect change. It is also important that healthy options be seen as affordable; high pricing can act as a deterrent.

Initiatives addressing alcohol, drugs and mental health can raise sensitive issues and need to be carefully integrated into a workplace health programme. Employers and individuals involved in the delivery of these types of initiatives may need further training and support.



Changes to workplace environment and policy

Changes to the physical environment of a workplace such as the design, facilities and amenities are beneficial in supporting employees in making healthy lifestyle choices.

Organisational policy to support healthy lifestyles should be developed to ensure programmes are sustainable in the long-term. This can be integrated within one or more related policy areas, such as:

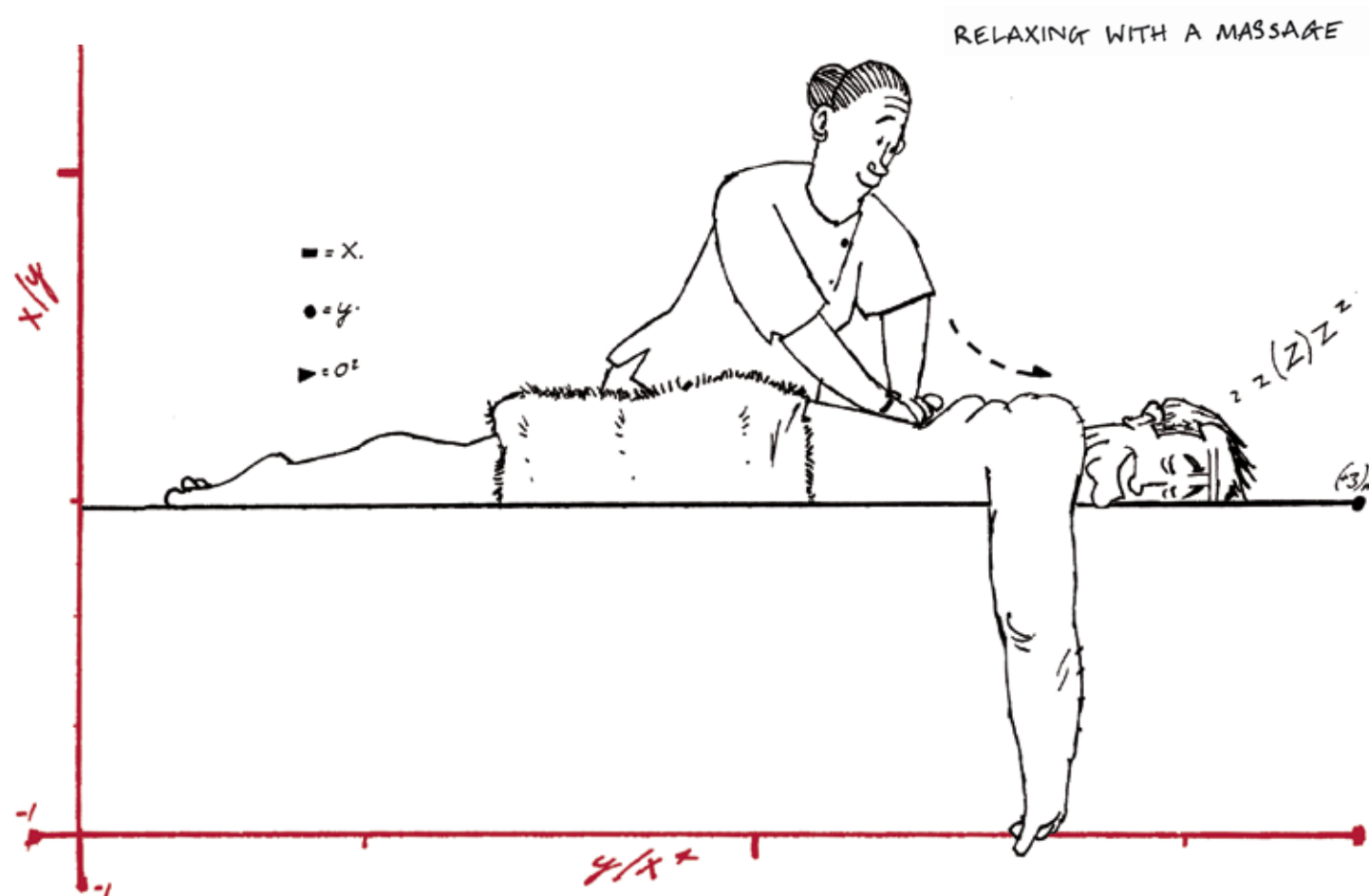
- occupational health and safety
- human resources (recruitment, retention)

- absenteeism and return to work agendas
- travel policy
- canteen and vending machine services and contracts.

Changes to both the physical and policy environments demonstrate an organisation's commitment to supporting employees' health. However, as these changes can be hard to achieve in the short-term, they should be viewed as mid to long-term developments which require significant management support.

Evaluation

Workplace health promotion programmes should be evaluated to assess their impact and demonstrate their effectiveness. This should include evaluation of business indicators such as absenteeism, workplace morale and productivity.



Well@Work (London Project)

Finding the time to be active is tough for all of us, but developing a programme that would help the staff at one of London's busiest hospitals to take time to get fit was a real challenge for project coordinator Scott Lloyd. Knowing the time pressures that staff were under, Scott's solution was to provide a range of brief but effective lunchtime activities – and they really got the workforce working out.

More than a third of staff – over 900 people – got involved in events from Nordic walking and health MOTs to weight loss classes and salsa dancing – even more impressive as Newham is officially England's second most inactive borough. Scott says: "We've shown we can make an impact by encouraging people to make small changes for the better in the time they have available."

Bikes that had been languishing in sheds and garages are now back on the road helping staff ride to health, thanks to regular cycle workshops which provided free repairs. Krzysztof Mikstacki is a 32 year old physiotherapy assistant who cycles to work: "They're really useful. The mechanics are good and they've often helped me fix brakes and gears." Workers can also buy new tax-free bikes through a wages deduction scheme.

When business manager Bernie Doherty's father survived a major heart attack it was a real wake up call and the project was an ideal opportunity to make some changes:

"Exercise is now part of my working routine and I feel fitter. The Nordic walking is on site and convenient. And I don't eat so many stodgy foods – I'm more likely to choose a salad instead."

Although the hospital doesn't have its own gym, a scheme was arranged with four local leisure centres which gave staff discounted annual passes.

Dr Mike Gill, the Trust's medical director has no doubt about the project's impact: "I sense that we have encouraged people to value their health more. In many ways the hospital reflects the community, so by taking part we can understand our patients better and create a model we can start to apply. I hope the hospital is a healthier place than it was two years ago."



CASE STUDY

And the project's successes have also been recognised by an award from the Association of Healthcare Communicators.

A personal story – Rene Lowther, hearing screener, Newham Hospital

Rene is a real success story – in just six months she lost a stone and dropped a dress size. She says: "I don't really like gyms, but I wanted to feel healthier and the weight loss classes were appealing because they were in the workplace. Now I find I have a lot more energy, and it's great to feel you've achieved something."

Call to action

Based on the evidence, findings and lessons from Well@Work, the BHF, funders and key representatives from the projects have developed recommendations which we believe all employers, including national and local government, and other key stakeholders should implement.

Employers – public, private and voluntary sector

Senior management should both support and be actively involved in workplace health programmes in order to instil a healthy and active workplace culture. These initiatives must take into account the specific needs of part-time workers, shift workers, older workers, home workers, travelling sales workers and workers with chronic conditions.

Specific recommendations include:

- developing business plans that recognise the value of workplace health programmes and incorporate specific objectives and targets with appropriate staff and financial resources
- regular reporting on progress against objectives at main board and senior management meetings and within annual reports
- establishing an internal or external function to coordinate and deliver workplace health programmes
- ensuring catering contracts stipulate the availability of healthy food
- considering workplace health issues when building new premises or moving premises
- developing supportive organisational policies eg, flexible working, active travel.

National Government

National Government should introduce and implement policies and programmes for promoting workplace health across all types of employers and workplaces including large organisations, small to medium enterprises (SMEs) and the voluntary sector.

Specific recommendations include:

As a significant employer, leading by:

- considering fiscal measures including tax incentives to encourage employer commitment to invest in the health of the workforce, such as bike schemes or the provision of private health insurance
- directing more resources into health promotion and prevention in the workplace
- raising awareness of the importance of workplace health programmes with public and private sector employers and championing best practice
- funding well planned programmes in this area to develop further the evidence base, in particular, looking at a cost benefit evaluation of workplace health
- providing regional planning incentives to encourage workplace environments that integrate active travel etc
- publishing and promoting a workplace health standard that can work across all employers including public, private and the voluntary sector.

Local government

As part of their Local Government Leadership role and place shaping duty, local authorities should encourage workplaces in their local area to adopt workplace health programmes.

Specific recommendations include:

As a significant employer, leading by example:

- ensuring active design principles are built in at an early stage of any design on new developments and workplaces
- ensuring active travel plans are adopted by workplaces, in partnership with travel providers
- including health programmes within the workplace as ways of achieving health and sport outcomes under new Local Area Agreements
- promoting the benefits of workplace health programmes through forums and partnerships eg, local chambers of commerce, local business groups and the local strategic partnership
- maintaining a web-based inventory of local physical activity opportunities relevant to all age groups and interests
- acting as a central source of good practice on workplace health and developing a commissioning framework for promoting and delivering workplace health
- highlighting links between workplace health and other agendas eg, obesity, health inequalities and public service agreements targets such as climate change.

Primary Care Trusts (PCTs)

PCTs should recognise and promote the benefits of workplace health and wellbeing programmes.

As a significant employer, leading by example, specific recommendations include:

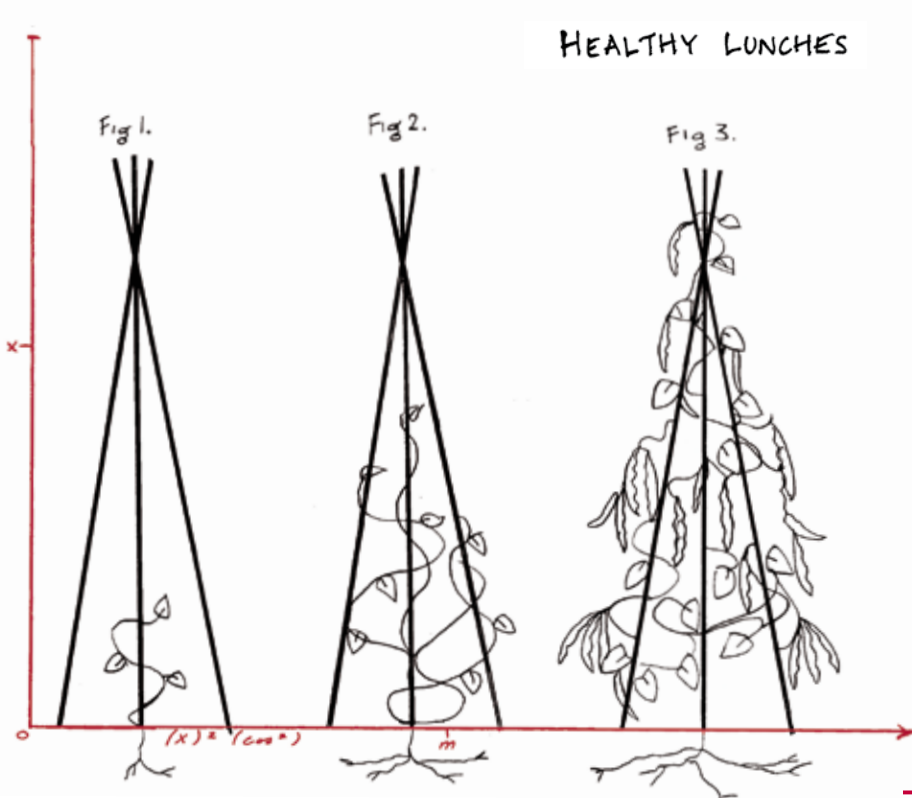
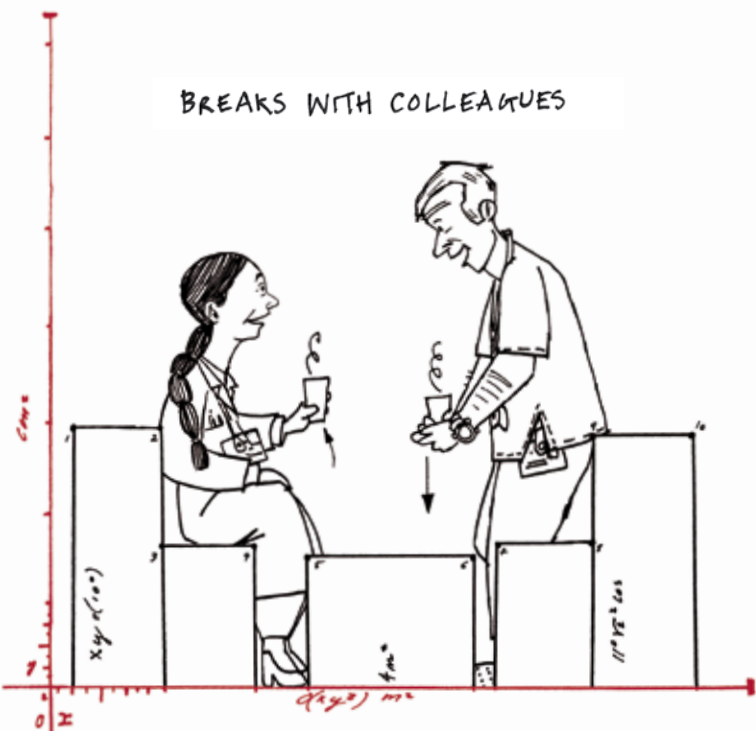
- providing health prevention initiatives in the workplace eg, smoking cessation support
- integrating health care services such as health checks and health trainers into workplaces
- acting as a central source of good practice on workplace health and developing a commissioning framework for promoting and delivering workplace health.

Employees

Employees have an important role, not just by participating in workplace health programmes, but in shaping them as well.

Specific recommendations include:

- lobbying for health programmes in their workplace
- becoming a workplace health champion by engaging in the planning and delivery of workplace health schemes
- participating in consultations and influencing policy and programmes
- encouraging colleagues to take part in programmes and activities.





"I made a conscious effort to take my son places where there are long walks instead of sitting watching TV all weekend"

Unions

Unions should work with employers to improve work conditions and, ultimately, the health of their members.

Specific recommendations include:

- ensuring workplace health policies and programmes are a standing item on the agenda of management meetings
- encouraging members to promote and advocate for workplace health programmes
- making union facilities available for other organisations to use where appropriate.

Sport and leisure providers and independent health care providers

Sport and Leisure providers and independent health care providers should consider planning services to better meet the needs of the working population.

Specific recommendations include:

- offering training to fitness industry professionals on how to engage with local workplaces
- providing discounts to facilities for employee groups
- staging health promotion days on business sites so employees are aware of what is on offer in their locality
- considering forming an alliance or partnership to share information and good practice and to develop support packages to meet the needs of a range of employers.

The research community

The research community should rigorously evaluate workplace health programmes to add to the evidence base for workplace health.

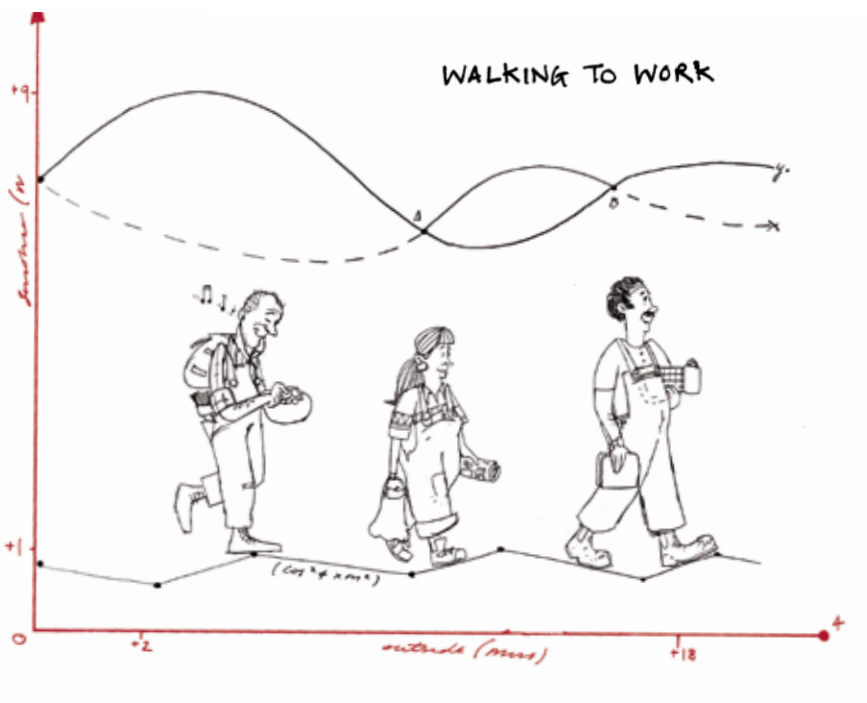
Specific recommendations include:

- providing guidance on how to carry out good quality local evaluation
- requesting that employers collect and provide robust and reliable business data
- incorporating cost benefit analysis in the evaluation of workplace health promotion programmes
- publishing findings in appropriate academic journals.

In conclusion

Workplace health promotion is vital in tackling a number of health and lifestyle issues including rising obesity levels and declining rates of participation in physical activity. It has a role to play in supporting people to make healthy lifestyle choices and in promoting messages about health issues and it can help employers to improve productivity and encourage workplace morale.

In a speech on the 7th of January 2008, the Prime Minister Gordon Brown said that he wanted to create an NHS which was: "...focused as much on prevention as on cure". If we invest in prevention now, we will save millions in the future on treatment, millions within the economy, and, ultimately, improve millions of lives.



Small Steps, Big Rewards (East Midlands Project)

The challenge for East Midlands project coordinator Lynne Richardson was to persuade people who spend their working lives helping others to think about their own needs for a change. As she says: *"The mindset in the voluntary and charity sector is that they are there for other people who need help, not themselves"*.

Because the project covered such a wide geographical area, Lynne relied heavily on workplace champions, who played a crucial role in encouraging and motivating their colleagues to get involved. She told us: *"having the champions was a very positive feature. It's very important that they're enthusiastic and committed"*. One Champion, Nicola Marriott, said: *"The project definitely raised awareness about health issues such as five a day and looking after your heart. I know people have made changes to their lives, even if it's just by walking to work"*.

'Small Steps, Big Rewards' summed up the aims of the project, and 250 workers from 14 different organisations in the region were spoiled for choice when it came to opportunities which helped them make little changes that went a long way to improving their health.

Workers were pleasantly surprised to find that no-one was being asked to give up their lunch hour to train for a marathon

or be expected to turn into an Olympic athlete overnight. Instead, much gentler options were available, including stress relieving massages, nutrition classes, popular health quizzes and free fruit for staff.

Not that the active side of things was left out – discounted gym membership was on offer, everyone was given a pedometer to encourage walking and a poster campaign that highlighted the benefits of healthier living saw a big increase in stair use. There's now a small but determined Nordic walking group, and Nottingham Council for Voluntary Service has entered a team in Cancer Research UK's Race for Life.

And their chief executive, Helen Voce, opted for a thoroughly exotic way of getting fit when she joined a 30 strong belly dancing class. *"It was great fun – we wore scarves to look the part and had a real laugh doing exercise. And there were lots of other activities, which meant a good cross section of people got involved. Exercise is on the agenda now because this programme got us talking about it. Healthy people do tend to have a more positive attitude so I'm sure we've benefited"*.

CASE STUDY



