

WELLBEING SUB-COMMITTEE

MINUTES of the 16 September 2021 meeting (held via Teams)

Present: Jo Jones* (Chair) Andy Allison Katie Davies Steve Mardy Susan Smith	Andrew Cooper Kate Davis Annemarie Piso Sarah Swales	Roland Cross Wendy Huntriss Gareth Robertshaw Chris Watts
In attendance: Nicola Beaumont (Secretary) Cate Querin	Leigh Beales Paul Tyrer	Ann Coulson
Apologies: Mobina Begum Dee Grismond Stephen Murphy Bryony Walker	Oliver Bray Lee Jones Mphango Simwaka	Dev Capps Andrew Manley Daniel Stanley
*Chaired the meeting		

Part A: Preliminary Items

Welcome, Introductions and Apologies

- 001.2122.WSC The Chair welcomed all members to the Wellbeing Sub-Committee and apologies were reported by the Secretary.
- 002.2122.WSC It was noted that:
 - a) Laurie Wilson (Health & Safety Adviser) was leaving the University and would not be attending any future Wellbeing Sub Committee meetings.

Committee Terms of Reference and Membership 2021/22

- 003.2122.WSC The Committee received a report (paper WSC-2122-001) on the Terms of Reference and membership.
- 004.2122.WSC It was noted that:

a) The Terms of Reference and membership were unchanged and taken as accepted by the Chair and it was noted that these will be subsequently reviewed at every Wellbeing Sub-Committee meeting.

Chair approved Minutes of the last meeting held on 13 May 2021

005.2122.WSC The Committee received a report of the Chair approved Minutes of the last meeting held on 13 May 2021 (paper WSC-2122-002).

006.2122.WSC It was **noted** that: a) The 13 May 2021 Chair approved minutes were an accurate record and Committee approved.

Matters Arising – From the 13 May 2021 meeting

- 007.2122.WSC The Chair presented a report on the matters arising from the minutes of the last substantive meeting of the Committee held on 13 May 2021 (paper reference WSC-2122-003).
- 008.2122.WSC It was noted that:
 - a) The Deputy Director of Human Resources had met with the HR Business partners regarding Active Care and Heath Assured. There is a range of promotional activity occurring and the Deputy Director of Human Resources will report back in more detail at a future meeting (regarding minute 120a.2020.WSC).
 - b) Aspects of the Health Assured offer formed part of what the People and Organisational Development Team regularly promoted as part of their communication or via the network (regarding minute 120a.2020.WSC).
 - c) The Deputy Director HR and Associate Director Student Services have agreed that the University Mental Health Charter could be used as a framework for bringing together the activity of both Human Resources and Student Services and strengthening communication and intervention (regarding minute 120c.2020.WSC).
 - d) Human Resources focus on communicating to colleagues is being delivered through the wellbeing networks and the development offer from the People and Organisational Development Team (regarding minute 120c.2020.WSC).
 - e) The University Mental Health Charter would help to connect the communication to students and colleagues around stress and wellbeing and enabled this to be looked at across the University to ensure that the communication being offered was more aligned (regarding minute 120c.2020.WSC).
 - f) The Committee accepted all remaining updates and completions on the matters arising as shown on the report.

 A specific update regarding Active Care and Health Assured be added as a separate agenda item for the next Wellbeing Subcommittee meeting on the 20 January 2022.

Part B: Items of Business:

Colleague & Student COVID Update

- 010.2122.WSC The Committee received a verbal update from the Deputy Director of Human Resources and Associate Director of Student Services on the Colleague & Student COVID respectively.
- 011.2122.WSC It was **noted** that:

Colleague update:

- a) Human Resources continued to report on positive cases amongst staff. During April and June 2021 low numbers of positive cases had been reported. Higher numbers of cases started to emerge in June with a peak of cases in July 2021 and a reduction through August and September.
- b) Human Resources continued to support managers and colleagues with a well-established process of reporting positive cases.
- c) The Department of Education and Public Health England are now requiring the University to report on self-isolation and hospitalisation.
- d) Occupational Health have developed with the physiotherapy clinic some new and innovative support for those with long COVID (referred to in the Occupational Health Report – paper WSC-2122-005).
- e) Human Resources are reviewing the risk assessment for clinically extremely vulnerable colleagues to ensure it continues to offer the right kind of support and protection in the current scenario.
- f) Human Resources are producing a manager's return to campus guidance designed to cover other groups including people who were anxious about returning to campus as well as those with other practical issues in terms of caring responsibilities and using public transport.
- g) Human Resources have developed a specific webinar and facilitated session about returning to campus, managing emotions, tensions and transitions which had two pilot sessions in September 2021. More of these sessions will be scheduled or a facilitated session could be scheduled for specific teams.
- h) The wellbeing offer is incorporated into the People Development Programme for this semester which will be communicated week commencing the 27 September 2021. Anyone with any questions to contact the People and Organisational Development team.
- i) In terms of someone living with someone who is clinically extremely vulnerable, due to the complexity of individual circumstance, it would for managers and individuals to identify what is appropriate and what is possible. If managers were unsure what to do, they would be advised to contact the Employee Relations Team who could advise on this, or Occupational Health if it was a health-related question.

Student update:

- Students would be starting induction week commencing the 20 September 2021.On the 16 September 2021 students were receiving communication on 'be safe on campus' which would be reinforced.
- k) Within every course induction a compulsory COVID induction was being delivered on the course.
- Student Services had embedded support within their disability offer for those with long COVID and information about this had been sent to students.
- m) Clinically extremely vulnerable students were supported on an individual basis and supported to complete their studies, wherever possible.
- n) Student Services were continuing to monitor positive COVID cases, selfisolation, and student hospitalisation. The numbers were currently low.
- o) Student Services were continuing to provide information to Public Health England and to the Department of Education.

The University Mental Health Charter

- 012.2122.WSC The Committee received a report from the Associate Director of Student Services providing an update on The University Mental Health Charter (paper reference WSC-2122-004).
- 013.2122.WSC Minutes 013.2122.WSC and 014.2122.WSC are exempt from publication under section 43 (Commercial Interests) of the Freedom of Information Act 2000.

014.2122.WSC

Our approach to supporting and enhancing colleague wellbeing

- 015.2122.WSC The Committee were made aware that a key priority in the new University strategy, contained within the section 'A community of great people', was outlined as follows:
 - · To invest in the wellbeing and resilience of colleagues

To structure the discussion, the committee were asked in advance of the meeting to consider the following questions

- 1. What do we already do to support colleague wellbeing that is having the most impact?
- 2. What do we need to start doing or do more of to enhance colleague wellbeing?

- a) The culture at the University supported and enhanced wellbeing.
- b) From UNISON's point of view the fact that there were stress risk assessments was seen to be an incredibly valuable tool that are effective in highlighting, recording, and putting action plans in place at an individual team and departmental level.
- c) UNISON raised concern about variation in how these risk assessments were implemented on the ground. The impact of this was that sometimes mental health issues were not dealt with appropriately.
- d) UNISON raised concern about mental health issues being dealt with inappropriately in other processes, for example, grievance procedure.
- e) UNISON would like the risk assessment process to be evaluated and anticipated that the University Mental Health Charter could introduce an element of consistency to ultimately improve the culture of the University.
- f) Regarding the Employee Assistance Programme and resources available, UNISON believed this to be a good package that the University provided but highlighted the take up being low. The need to improve access or to take feedback about what is needed was highlighted.
- g) The Associate Director of Property Assets and Infrastructure echoed the view that the culture at the University supported and enhanced wellbeing with a people focused approach from the top of the organisation and that the humanity shown over the past 18 months had been very encouraging.
- h) The Associate Director of Property Assets and Infrastructure believed the University had a lot of positive things to say about encouraging wellbeing, with good accommodation, good air quality that was monitored, good access to drinking water, Headingley Campus having fantastic green space and a clear objective would be to improve this at City Campus.
- i) The University encouraged people to be active through bike hire schemes and the outdoor gym and circuits at Headingley with a lot of community engagement.
- j) The new estate masterplan had the new economic foundations five steps to wellbeing embedded in it as a key objective and any developments would have to be tested against that.
- k) As a physical estate the University had its challenges, but Estates recognised that staff and student wellbeing was incredibly important.
- The Associate Director of Property Assets and Infrastructure would welcome the ability to have a stronger drive for wellbeing and push through certifications where a framework could help improve the physical environment.
- m) The Associate Director of Student Services believed the same challenges applied to colleague wellbeing and student wellbeing, in terms of knowing what individual interventions were having a positive effect, a neutral effect or a negative effect.

- n) The observation of the Deputy Director of Human Resources was that a lot of work was being done but the unknown was how much of it was received, how much helped and how much was interesting to people or made a significant difference to people's wellbeing.
- It was about understanding whether people felt there was enough support to enable them to maintain good mental health so that they didn't need to access any of the crisis interventions.
- p) There were a large group of mental health champions who were active across the organisation and committed to improving mental health. Human Resources were interested to know if more could be done to create a better network and sense of community and whether people felt comfortable talking about mental health.
- q) The Deputy Director of Human Resources believed the University Mental Health Charter would help but that starting the dialogue in this committee would allow for exploration into providing the right focus on mental health support.
- r) Campus and Residential Services (CARES) had undertaken a lot of work with the People and Organisational Development Team in supporting their team. The impact of this being measured by their own in-service surveys, with wellbeing being a key pillar.
- s) CARES had found that having local action plans and making the managers for those areas accountable for the local action plans had a positive impact. This was an agenda item on the leadership meetings and there was a desire to find out how this was being communicated to teams on the ground.
- t) The focus on wellbeing for PDR discussions that had come out as a communication from the wider University had been welcomed in CARES and they had also created local wellbeing materials in conjunction with the People and Organisational Development Team. It was about identifying the right communication vehicle for the right audience.
- u) In terms of enhancing colleague wellbeing for staff within CARES, there needed to be consideration of the impact when one area did one thing that had quite a significant impact on another area, and the blame culture which felt like a siloed mentality. This had been sensed whilst gearing up for a return to campus.
- v) UNISON believed the University was a great place to work but raised the issue of how sometimes work pressures were not always considered especially when outside of someone's immediate team, and when decision making had unintended significant impact on other teams outside of an area. This could sometimes be counterproductive, causing a decrease in productivity for various reasons such as lack of engagement and sickness absence.
- w) UCU shared some of what had been discussed in terms of culture but believed it was uneven and that there was a culture of fear amongst academics and a culture of defensiveness amongst certain managers who may not feel able to represent views from staff that may not coincide with the views of management.

- x) UCU believed there were some great initiatives within the University but that the conundrum was that staff were so pressed time wise that they didn't engage with the initiatives as they didn't have the time to engage.
- y) UCU suggested that when an initiative is looked at, that consideration be given as to how to engage staff, as the pressure on work was often great.
- z) UCU highlighted Occupational Health to be an invaluable service but that there was a misperception from members of staff of what it was and that some saw it as a management tool and not a supportive service.
- aa) The concept of having a wellbeing objective was helpful for people as it gave a mechanism for people to work more in balance and consider themselves.
- bb) When mental health at work and wellbeing at work was discussed people tended to view good wellbeing as when the stress could be managed so it was the removal of the negative. It would be enlightening if wellbeing at work was viewed as work enhancing wellbeing.
- cc) The Associate Director for the Centre for Learning and Teaching highlighted the importance of ensuring that team leaders were trained to be responsive and aware of mental health problems and to also make sure they had refreshers.
- dd) If someone was off sick and this had been reported as stress, a prompt was received within iTrent which linked to resources and this was identified as a positive, good trigger at that point. The Associate Director for the Centre for Learning and Teaching wondered if more prompts could be considered which the line manager or team leader could then chose to send on at an appropriate time.
- ee) The Associate Director for the Centre for Learning and Teaching highlighted the importance of the mental health first aid programme.
- ff) From a Human Resources perspective, it was positive that wellbeing featured in the workforce plan and University strategy. The challenge for Human Resources was to bring this to life and make it meaningful for all colleagues across the University.
- gg) The Deputy Director of Human Resources recognised all the great contributions and the interconnections and thanked colleagues for the useful start in these conversations.
- 017.2122.WSC It was **RECOMMENDED** that:
 - a) The Deputy Director of Human Resources encouraged further discussion and welcomed any further contributions and ideas

018.2122.WSC

It was AGREED that:

 The Deputy Director of Human Resources, the Organisational Development Partner and the Occupational Health Manager would consider the comments received in relation to the workforce plan.

Occupational Health Report

019.2122.WSC The Committee received a report from the Occupational Health Manager for information, providing an update of the University's Occupational Health activities (paper reference WSC-2122-005).

020.2122.WSC It was **noted** that:

- a) UCU asked whether the data could in future be a comparison from this time last year to inform understanding of whether referrals were changing in nature and the causes.
- b) The long COVID rehabilitation programme was communicated through the HR Business Partners, and the Employee Relations Team and any colleagues with long COVID were able to speak to their managers who could explain about the long COVID rehabilitation programme.
- c) If colleagues wanted to engage with the long COVID rehabilitation programme, the manager would complete a referral to Occupational Health who would then meet with the colleague and refer onwards if appropriate.
- d) The Deputy Director of Human Resources acknowledged that there were more places where the long COVID rehabilitation programme could be advertised.
- e) The Deputy Director of Human Resources recognised that when Human Resources received a notification of positive cases more could potentially be done to alert managers at that point or at certain points if people were off for any length of time.
- f) Human Resources had tried to contact all the people that they knew of who had been off for any length of time or had a prolonged period of absence due to COVID and the long COVID rehabilitation programme had been offered to that group of staff directly.
- g) The long COVID rehabilitation programme was through the University's own physio provider and the feedback from those referred through had been positive.

021.2122.WSC It was **RECOMMENDED** that:

a) The long COVD rehabilitation programme be advertised through the University newsletter, as it was seen by UCU to be a great resource.

022.2122.WSC It was **AGREED** that:

- a) Human Resources would consider the best way to advise colleagues of the long COVID rehabilitation programme so that people were aware of it should they need to access it or want to.
- b) The Occupational Health Manager would consider how a data comparison can be documented in the Occupational Health Report to highlight trends.

Part C: Other Business

Any other business

023.2122.WSC It was **noted** that:

a) No further business was reported by the committee.

Date of next meeting

024.2122.WSC The date of the next Wellbeing Sub-Committee meeting is the 20 January 2022.

Confirmed by the Committee/Board as a correct record and signed by the Chair:

Signed: Sarah Swales Date: 20/01/2022