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Workplace wellness intervention in the NHS: Outcomes at five years

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Objectives: To determine the impact of 5-year employee wellness programme on physical activity levels in a large NHS workplace serving 13,000 employees.

Design: This real-world research adopted a prospective longitudinal cohort study design with pre-test/post-test evaluation. Intervention was 'Q-active' theory-driven workplace wellness intervention based on an ecological model of health with primary focus on physical activity. Intervention included a dedicated website, dedicated gym and exercise facilities, structured exercise sessions, promotion of incidental physical activity and active travel, healthy-eating interventions and campaigns, community interventions, health education, personal training, health screening, complementary and relaxation therapies.

Methods: All employees were sent a questionnaire survey, completed at baseline (n=1,452) and 5 years (n=1,134). Standardised measures assessed primary outcome of physical activity, and secondary outcomes including BMI, diet, self-efficacy, social support, perceived general health and mood, smoking behaviours, self-reported sickness absence, perceived work performance and job satisfaction.

Results: At 5 years, significantly more respondents actively travelled both to work ($\Phi = -.073$, $p < .001$) and for non-work trips ($\Phi = -.054$, $p = .007$), and more were active whilst at work (Cramer's $V = .179$, $p < .001$). Significantly more respondents met current recommendations for physical activity at 5 years than at baseline (60.5% compared with 56.4%; $\Phi = .140$, $p < .001$). Significantly lower sickness absence and greater job satisfaction were reported at 5 years than at baseline.

Conclusion: Findings support the current public health drive to improve health behaviours in NHS employees. Although controlled design was not feasible in this setting, we propose that workplace wellness intervention can improve health behaviours in the NHS workplace.