Supporting occupational health and wellbeing professionals

Produced in association with affinity health at work

Buyers' guide
Wellbeing products or services

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1. Introduction

The business case for investing in wellbeing at work is well established[1, 2]. Effective occupational health and wellbeing provision is crucial for organisations. Putting in place evidence-based wellbeing products or services has the potential to improve workplace support, reduce work-related illness, prevent avoidable sickness absence and improve retention and performance. When employees thrive, they are 84% more productive and 79% more creative[3]. With 12% of the UK workforce now reporting long-term health conditions[4], and many others having left work due to ill health, effective occupational health and wellbeing provision has never been more important.

An estimated £41 billion is spent globally each year on wellbeing at work, and over 350,000 digital healthcare technologies were available in 2023. With so many products and services to choose from, it can be overwhelming for those responsible for buying and implementing wellbeing products or services.

Yet **choosing a service is not the only decision that needs to be made**. Successfully implementing wellbeing services in your organisation requires careful planning and consideration to make sure services are effectively integrated and embedded into workplace culture. Importantly, choosing the wrong product or service, or not spending time and resources on implementing it carefully, could not only be a waste of time and money but lead to poor physical or mental health amongst your workforce.

This guide aims to provide occupational health (OH) professionals, and those responsible for purchasing wellbeing products or services, with evidence-based frameworks to make informed and effective decisions and make sure there are no unintended consequences for your workers.

In this guide we cover:

- the importance of choosing the right wellbeing interventions and avoiding non-evidence-based, potentially harmful, solutions
- evidence-based frameworks to help identify gaps in provision to inform purchasing needs
- the role of OH services in providing support and advice on improving work environments and cultures
- the challenges posed by the increasing number of digital health solutions, such as insufficient evidence of effectiveness, data security issues, and ensuring access and engagement
- ongoing monitoring of impact and evaluation of wellbeing interventions to confirm they are achieving the desired outcomes.

Since organisations have different procurement processes, we do not cover issues of procurement processes or governance in this guide, but we encourage those buying services to use the information to inform their decision-making criteria.

1. https://www.som.org.uk/sites/som.org.uk/files/Occupational_Health_The_Value_Proposition_March_2022.pdf
2. https://www.affinityhealthatwork.com/our-library/2072
3. BITC and YouGov, 2022
4. The Health Foundation, 2023

Getting started

With so many products and services available, it can be helpful to identify what you need. When buying wellbeing products or services, there are three key questions:

1. **What do you want to achieve?** What problem are you aiming to solve? What gap do you need to fill? This guide includes tips to help you assess your needs to optimise your decision-making. If after considering these tips you are not sure what you need, invite suppliers to share information on how their products or services can help you, but let them know that you are in an exploratory phase.
2. **What does success look like for you?** Define the specific outcomes you want to achieve with your wellbeing services. Being clear about your goals from the outset will ensure you select the right interventions and measure their effectiveness accurately.
3. **What are the trade-offs?** Products and services will differ in strength of the evidence base, cost, ease of implementation, adaptability, and so on. Think about what is important to you before you speak to suppliers to help you define your procurement criteria.

2. What does a 'good' wellbeing programme look like?

Every organisation has different needs and resources. This means there is no one best set of activities that make up a wellbeing programme. A good approach will develop a coherent strategy that considers the following:

1. **Define** what wellbeing means for your organisation.
2. Meet an employer's **legal obligations**.
3. Follow a **systematic approach** to mental health and wellbeing.
4. Use a **shared approach** to health and wellbeing.
5. Draw on **evidence-based** solutions.
6. **Consult with employees** regularly to review needs.

There are several frameworks for helping buyers identify their needs so that the wellbeing provision is fit for purpose. In the following sections, we will expand on the strategy above.

2.1. Define what wellbeing means for your organisation

Comprehensive wellbeing programmes consider the different dimensions of health and wellbeing to optimise employee health, satisfaction and productivity.

The World Health Organization[5] defines mental health as a state of wellbeing in which an individual realises their own abilities, can cope with the normal stresses of life, can work productively, and is able to make a contribution to their community. It is more than the absence of mental disorders. It exists on a complex continuum, which is experienced differently from one person to the next, with varying degrees of difficulty and distress and potentially very different social and clinical outcomes.

"That's where our messaging is strong – for people to look after their health every day, not just when unwell." (BT)

5. World Health Organization. (2022). Mental health. https://www.who.int/news-room/fact-sheets/detail/mental-health-strengthening-our-response

Wellbeing means different things to different organisations. There is no one right way. Nearly all organisations will include physical and mental health, and other dimensions (sometimes called 'pillars') of wellbeing include:

- **Physical health and wellbeing** – ensuring a safe work environment and promoting activities to support physical health such as evidence based health screening where required, exercise programmes, and ergonomic and well-designed workspaces
- **Mental and emotional health and wellbeing** – ensuring access to evidence based mental health resources and support such as counselling and employee assistance programmes, ensuring all stress staff in supervisory positions feel confident and competent to speak with team members about their mental health, effective peer support, management interventions to provide knowledge and skills, and good work design and management
- **Social wellbeing** – promoting positive relationships between workers across functions and levels, promoting effective communication, and creating a supportive work culture where everyone feels valued and supported
- **Financial wellbeing** – ensuring workers are fairly compensated for their work, providing resources to increase financial literacy, and offering job security
- **Professional wellbeing** – ensuring people have access to opportunities for development and progression, are rewarded for their contributions and are satisfied with their work
- **Psychosocial wellbeing** – ensuring there is consideration of the work culture, and attention is given to the known psychosocial or work-related risks to health, e.g. work demands, control, support, role

Framework(s) used to guide action

There are several frameworks, accreditation schemes, pledges and charters that can be drawn on to inform priority action – for example, the World Health Organization's Healthy Workplace Framework, the Mental Health at Work Commitment, the HSE Management Standards, the ISO 45003, accreditations, and sector-specific and regional frameworks.

Several factors drive these differences. These typically include the nature of the work done, the size and history of the organisation, the resources and budget available, whether the responsibility for wellbeing sits with Occupational Health, Human Resources or another part of the organisation, and the company values and culture.

Being clear on the scope of wellbeing is an important starting point because:

- different products or services are designed to impact on different types of wellbeing
- there are different outcomes for each of the areas
- you are more likely to achieve a positive impact, and avoid harm, if you do fewer things well than do too many. Spreading your resources too thin – through putting in place poor-quality products or services or not having the time to gain buy-in and engagement – may be ineffective or cause harm.

"The most powerful point is that one size does not fit all." (BT)

KEY QUESTIONS:

What areas of wellbeing does your organisation include?

Are you clear on what outcomes you want to achieve from your programme, and are these matched to your wellbeing framework?

2.2. Meet your legal obligations

Employers in the UK have a legal responsibility, or duty of care, to do all they can to reasonably support their staff's health, safety and wellbeing. It is important employers meet their responsibilities and are aware of relevant legislation to ensure fair treatment of all their employees and avoid discrimination.

The minimum activity will depend on the nature of work in your organisation but requirements include:

- protecting worker health through conducting risk assessments – all organisations with more than five employees are required to assess the risks to health (physical and mental ill health)
- statutory health surveillance for specific hazards (e.g. noise, asbestos, hand arm vibration)
- supporting employees with health conditions or disabilities to return to and stay well in work.

It is vital employers pay attention to the particular risks associated with their work (e.g. trauma for child social workers; lone working for rail workers).

Occupational health professionals can advise on what is required for you to meet your legal obligations for health and wellbeing at work.

Further information on an employer's legal obligations can be found here:

- The Health and Safety at Work etc Act 1974, which places a duty on employers to ensure, as far as is reasonably practicable, the health, safety and welfare of their employees
- The Management of Health and Safety at Work Regulations 1999[6]
- The HSE Management Standards for work stress[7]
- The Equality Act 2010, which covers different types of discrimination and applies to protected characteristics, such as disability[8]
- The Employment Rights Act 1996, which covers areas related to the employee's contract
- Acas, for advice and guidance on employment matters for employers and employees[9]

KEY QUESTIONS:

Do you know what your legal obligations are?

Does your current programme enable you to fulfil your legal obligations?

6. https://www.legislation.gov.uk/uksi/1999/3242/contents/made
7. https://www.hse.gov.uk/stress/standards/
8. https://www.equalityhumanrights.com/equality/equality-act-2010/your-rights-under-equality-act-2010/
9. https://www.acas.org.uk/health-and-wellbeing

2.3. Follow a systematic approach

A systematic and comprehensive approach to wellbeing at work should include activities at three intervention levels[10] targeted at:

1. Preventing harm

- Sometimes called primary interventions, these activities focus on eliminating or reducing risk at source.
- Activities include asking about appropriate health risks before allocating workers to specific jobs, job redesign, psychosocial management, participatory decision-making, flexible work, changes to tasks or schedules.
- These activities deliver the strongest return on investment – on average, £5.60 return for every £1 spent[11].

2. Supporting and developing

- Sometimes called secondary interventions, these activities modify how a worker responds to a potentially harmful environment through developing knowledge, skills and resources to maintain and enhance health and address early symptoms.
- To reduce or buffer the impact of work stressors, activities include training or development on specific skills such as mindfulness, stress management and job crafting; managerial training to identify early indicators; and active monitoring of staff exposed to traumatic or highly stressful situations (where appropriate).
- These interventions deliver an average £5 return for every £1 spent.

3. Restoring and repairing

- Sometimes called tertiary interventions, these activities reduce or minimise the negative health effects associated with chronic exposure to risk.
- Activities include providing access to additional resources such as vocationally focused rehabilitation, workplace adjustments and increased support, evidence-based therapeutic provisions (i.e. following NICE (National Institute for Health and Care Excellence) guidelines by appropriately trained clinicians).
- These interventions deliver an average £3.40 return for every £1 spent.

"We're always trying to focus our attention on prevention, because that's where you get the biggest gain."

- Dr Elschen Kotze, BT

KEY QUESTIONS:

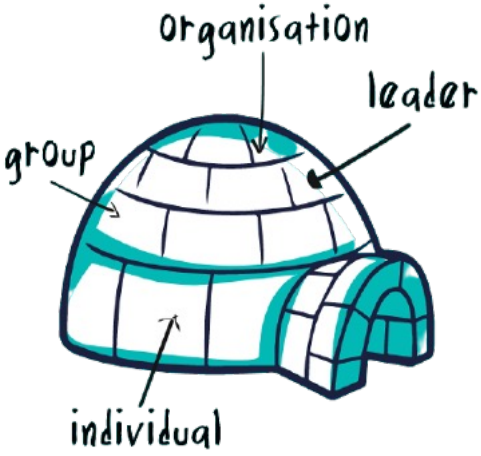
Do you have activities in each of these three areas?

Are you investing in the areas that will provide the most return on investment?

10. https://www.som.org.uk/sites/som.org.uk/files/The_Value_of_OH_and_HR_in_supporting_mental_health_and_wellbeing_in_the_workplace_Nov23_0.pdf
11. Deloitte Consulting, 2022

2.4. Design for a shared approach

Research shows that a shared approach to health and wellbeing is beneficial. The IGLOO framework for thriving at work[12, 13] proposes that different resources at different levels within the organisation are needed to help employees thrive. All too often, support is focused on one level – often the individual – but no one can stay well, recover well or work well on their own if their colleagues and managers do not provide conducive work environments. Other people, such as colleagues and managers, and the policies and organisational systems, play important roles. Before commissioning a new product or service, it can be useful to consider what support is in place at each of the IGLOO levels to identify if there is duplication or a gap in provision.



I – Individual Level: Support provided to the individual so they can take support themselves, e.g. mental and physical health awareness, talking therapy, physiotherapy, OH case assessments.

G – Group or Team Level: Support provided by the work group, e.g. feedback and co-managing tasks, peer support, social support.

L – Leader or Manager Level: Support provided by the manager, e.g. active listening and problem solving, workload management, maintaining frequent contact and a flexible approach

O – Organisational Level: Support provided by the HR or OH professionals and EAP provision, through policies, frameworks, oversight of organisational practices and comprehensive wellbeing programmes.

O – Outside the Organisation: Support provided by GPs, healthcare providers, charities, family and friends. Organisations can share local and national information with workers to help them access the support they need.

KEY QUESTIONS:

Where do your existing products or services fit in the IGLOO framework?

Do you have any duplication, i.e. individual focused activities that do the same thing?

Do you have any gaps, i.e. no activities focused on improving group/team or line manager support?

12. Nielsen et al. (2017) Workplace resources to improve both employee well-being and performance: A systematic review and meta-analysis. Work & Stress, 31:2, 101-120
13. Nielsen, K., Yarker, J., Munir, F., & Bültmann, U. (2018). IGLOO: An integrated framework for sustainable return to work in workers with common mental disorders. Work & Stress, 32(4), 400-417. https://doi.org/10.1080/02678373.2018.1438536

2.5. Draw on evidence-based solutions

There are several advantages to using evidence-based solutions. When solutions are backed by good-quality research and data, they are more likely to:

- be **effective**, and therefore more likely to deliver positive outcomes for your workers, including return on investment.
- stand up to **public and legal scrutiny**, should an employer face legal challenges.
- **reduce your risk** of implementing ineffective or harmful products and services. This is particularly important in the areas of mental and physical health, where poorly designed and implemented programmes can lead to harm.
- be **credible and trustworthy**. Workers who know the solutions are grounded in evidence are more likely to trust and engage with the product or service.
- **address the specific needs of your employees** (if chosen appropriately), which will contribute to individual health and organisational health.

It is important to find out information about the evidence base when deciding whether to buy a wellbeing product or service.

The Nesta Standards of Evidence[14] help us understand what kind of evidence is available for the product or service. Level 1 data is the starting point, with Level 5 data showing a reliable and effective product. While Level 5 evidence is the goal, many wellbeing products or services are early in their development and testing, so there is a lack of evidence at Levels 4 and 5. It is thus always helpful for organisations to get involved in relevant research as this will help improve the evidence available from which to make good decisions.

The five levels of evidence (NESTA)

Level 1	Describes what the programme does and why it matters (e.g. qualitative studies, cross-sectional surveys).
Level 2	Shows a positive change but can't prove it was due to the intervention (e.g. qualitative studies, cross-sectional surveys).
Level 3	Demonstrates causality or compares with a control group (e.g. quasi-experimental designs, surveys, objective data).
Level 4	Replicates findings on causality in another setting (e.g. randomised designs using surveys or objective data).
Level 5	Has manuals, procedures and systems to ensure consistent results and monitor positive impact (e.g. multiple randomised designs with process evaluation).

What is important is that you – and the supplier – understand what is already known about the product or service so that you understand what it might mean for your organisation.

For example, if a supplier presents evidence at Level 1 or 2, this does not tell you whether it is effective – it might or might not be effective, and only further higher quality research would answer this question.

14. https://www.nesta.org.uk/feature/innovation-methods/standards-evidence/

Balancing the evidence with cost and implementation

Alongside the quality of the evidence, it is important to think about:

- cost
- how hard it is to implement
- the scale of the impact (what does the evidence tell you?).

The following three scenarios illustrate how evidence, cost and implementation play a role in decision-making:

- A cheap, easy-to-implement intervention which has a positive impact.
- A cheap, easy-to-implement process which has very little impact (and does no harm) but people like it.
- A very costly, hard-to-implement but impactful process.

With so many approaches available, it can be difficult to assess the supporting evidence for each intervention. Occupational health (OH) professionals play a crucial role in this process by leveraging their expertise to identify, evaluate and use the best evidence to inform their decisions.

KEY QUESTIONS:

Do you know what evidence exists for the products or services you have in place?

Can your organisation assist in developing the evidence base for specific products or services?

2.6. Consult with employees regularly to review their needs

Regularly consulting with employees about wellbeing products or services, especially prior to their implementation, is crucial to ensure their needs are being met. If employees do not think the product is needed or they are worried about how their information will be kept confidential, they are less likely to take part in the wellbeing activity. Consulting as widely as possible is vital. Different staff groups may need different types of support and may be best communicated with in different ways. Finding ways to understand each group's needs can help you address their concerns, draw on their recommendations when choosing and implementing new services, and adjust existing services to better support their wellbeing.

KEY QUESTIONS:

Do you involve your employee resource groups or staff networks in wellbeing decisions?

Have you asked for feedback from specific groups in your organisation to see if their needs are being met?

3. What does a 'good' product or service look like?

Good products or services come in many different shapes and sizes. There is no one best way to assess whether a product or service is good, but there are several things to think about as to whether the product or service is right for your organisation.

When products or services are well designed, the supplier will be able to share information with you about the:

1. *Design*
2. *Delivery*
3. *Implementation*
4. *Evaluation and ongoing steps to improve the impact.*

3.1. Design

Products and services are designed in many ways. There is no one best way as this will differ depending on the problem and the context.

However, when interventions are designed using an evidence-based approach they are likely to have:

- **involved stakeholders, including those who will deliver, use and benefit,** to gather information on the problem and how it could best be solved
- **brought together a team with relevant expertise,** including someone with personal experience of the problem and someone with behaviour change expertise to make sure the design is fit for purpose
- **reviewed published research evidence** before starting the development process to understand what already exists, what has worked before, what has not worked and why
- **drawn on existing theories,** as they can help us understand how people feel and behave at work – research shows that products and services are more likely to work when they are underpinned by theory
- **developed a programme logic** to explain how the product or service will make an impact and on what
- **used universal design principles** to make sure the design is useful for people with diverse abilities and needs
- **assessed usability** to ensure the product or service can be used by those intended, provides a friction-free seamless user journey, and motivates the user to engage throughout the learning
- **collected data** to learn how the product or service is working in different settings, with different people
- **written up the development process** so that judgements can be made about the quality of the development process and how the product or service might be similar or different to other interventions.

KEY QUESTIONS:

Do you know how your products or services were developed and if they are based on evidence?

When you are speaking to potential suppliers, do you routinely include questions around how they developed their products or services?

3.2. Delivery

There are several things to think about when planning for the effective delivery of health and wellbeing services. Research shows that wellbeing interventions are more likely to be effective if they are delivered:

- in a suitable location. There is no evidence as to whether in-work or off-site delivery is better; it will depend on the service and the nature of the work. In all cases, consider the accessibility of the location.
- in work time. It is therefore important to create time in the working day for people to engage with any assessment or training and development activities. This also means providing services to those on shifts during their shifts (e.g. early or night shifts), where reasonably practical.
- in a format that meets workforce needs. This might mean a combination of self-directed and facilitated learning, or – as many organisations are now finding, given the demands of work – "'short bites' of information and offering to cover the same topic over several shifts to reach more people".
- by a trusted, credible expert, who is accredited if relevant. It is therefore vital the people who deliver the service have the right skill set, experience and qualifications.
- in accordance with ethical principles, including confidentiality.

Different products or services will have different performance indicators. Consider what performance indicators are relevant, and practically measurable, and what successful provision looks like for your organisation. Examples may include the time between the referral and the contracted activities (e.g. appointment date, assessment, or receipt of service or deliverable).

KEY QUESTIONS:

Is the delivery method for each of your products or services optimised to meet your workers' needs?

Can new service providers adapt their delivery to meet your organisation's needs?

3.3. Implementation

To support the delivery, you need a careful implementation or roll-out plan to secure buy-in and engagement and make sure the positive benefits are sustained over time. This could include:

- gaining senior sponsorship to ensure resources are made available. If leaders are engaged, their teams are more likely to engage with the product or service and put their new learnings into practice.
- embedding all products or services under a wellbeing strategy, including visually, by using a shared branding.
- communicating through multiple channels to reach workers, and sharing messages on multiple occasions over time to generate engagement and uptake. Providers often have a template implementation plan that can be tailored.
- developing tailored communications for managers, to make sure they are able to cascade information and are confident answering questions from their team about why the product or service will be helpful.
- developing tailored communications for job roles and staff groups and tailoring services.
- protected resources, e.g. budget and people, for the duration of the plan to achieve continuity of delivery.

- responsive support from the service provider so your employees are able to seek answers to any questions or concerns.
- ongoing support post-delivery so the benefits of the investment can be accrued over time, and workers have a point of contact in case they have questions or concerns.
- marking achievements and sharing stories to generate interest and nudge slow adopters to engage.

"Who is facilitating the support after I've gone in and delivered a session?" (Libby Morley-Hassanali)

KEY QUESTIONS:

Do you have active and vocal sponsorship from a senior leader?

When buying products or services, do you plan for the long-term implementation before the launch?

3.4. Evaluate impact and respond to changing needs

The most common way organisations assess the impact of new products or services is by their reach, i.e. how many people are accessing them or turning up. But this doesn't tell us much about how likely the activity is to change someone's behaviour or whether there is something about the way the activity is being implemented that is stopping it from having the desired effect.

The RE-AIM model[15] can help us think about what we are (or are not!) measuring:

REACH	EFFECTIVENESS	ADOPTION	IMPLEMENTATION	MAINTENANCE
How many people turned up? Are the right people accessing it?	Did it make an impact on an outcome of interest?	Are there things in place to help people use the skills, knowledge and tools in practice?	Has it been delivered properly in your organisation?	Has it been incorporated so it is delivered over the long term?

We need to think carefully about what we are trying to change, and how we measure that. To do that, we can measure the outcome (the what) and the process (the how).

"If your objective is…to increase the knowledge of something, then…it's the knowledge you should be assessing." (TfL)

15. Glasgow, R. E., Harden, S. M., Gaglio, B., Rabin, B., Smith, M. L., Porter, G. C., Ory, M. G. & Estabrooks, P. A. (2019). RE-AIM Planning and Evaluation Framework: Adapting to New Science and Practice with a 20-year Review. Frontiers in Public Health 7(64).

When thinking about 'Effectiveness', it is important to think about the outcomes you want to achieve. Outcome evaluation examines whether the intervention had an effect. This can be measured at different levels:

- **Reactions:** Did workers find the intervention relevant, useful and engaging?
- **Learning:** Did workers gain the intended new knowledge, skills, abilities or confidence?
- **Behaviour:** Did workers change their behaviour in the way that was anticipated?
- **Results:** Did the product or service deliver on the intended outcome?

These outcomes can be measured through surveys, interviews, focus groups and by tracking organisational data. For further information, see the SOM's report on the Value of Occupational Health and Human Resources[16] in supporting mental health and wellbeing in the workplace.

Ask potential suppliers what they measure, and how they measure it. Remember, there are many reasons why suppliers might not have this information – it can be difficult to gather, and clients often do not pay for additional evaluation – but explore how they can work with you to gather evaluation data so you can monitor and, if needed, adapt the service you are offering to your workers.

However, the organisation buying the product also needs to consider how it will measure the impact of the intervention itself. Process evaluation looks at how the intervention was implemented and identifies factors that influenced its success or failure. This ongoing evaluation can be reviewed during the intervention to determine if changes are needed, for example whether additional resources would better meet the workforce's needs[17].

3.5. Spotlight on digital health solutions

Digital health technology aims to improve health and wellbeing or enhance health systems. These solutions include smartphone apps, wearable devices and telehealth platforms (NIHR, 2022). With 350,000 digital health technologies available and 5 million downloads daily, they are used for education, screening, diagnostics, and care delivery. Digital health technology allows people to manage their health anytime, anywhere.

There are several potential benefits of digital services. They have a greater reach, especially in areas with stigma, which empowers self-management and makes support more accessible. They are often cheaper, reduce travel needs, and provide valuable data through analytics.

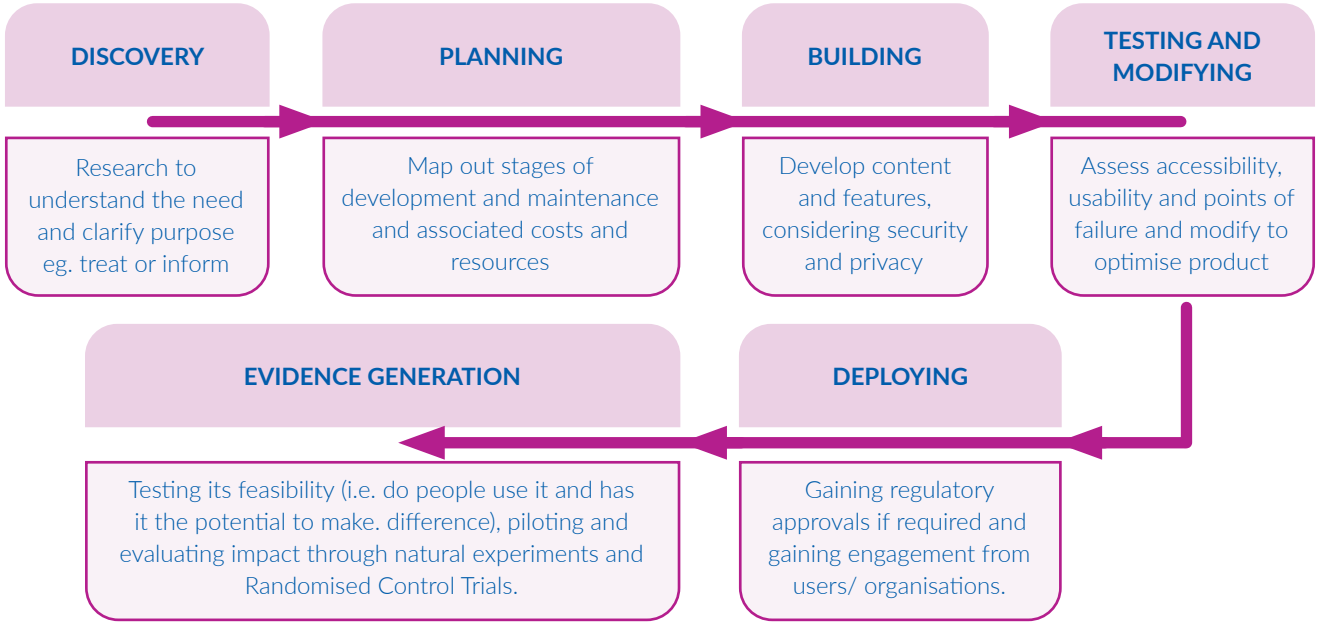
"Having an offering for all employees within the business, for example those who work shifts and on-site workers, is important. That's where digital offerings can be very useful."

16. https://www.som.org.uk/sites/som.org.uk/files/The_Value_of_OH_and_HR_in_supporting_mental_health_and_wellbeing_in_the_workplace_Nov23_0.pdf
17. Nielsen K, Miraglia M. What works for whom in which circumstances? On the need to move beyond the 'what works?' question in organizational intervention research. Hum Relations. 2017;70(1):40 62.doi:10.1177/0018726716670226

There are also several obstacles to using digital technology in wellbeing:

- Both providers and users need a **digital mindset** to adopt these tools effectively. Large segments of the UK workforce lack digital literacy.
- Many tools **lack evidence** to support the effectiveness of certain technologies, which leads to hesitation in their use.
- The **innovator challenge**: Developing digital solutions requires time and money, and innovators struggle to balance investing in research and investing in quality designs that quickly engage users.
- **Access** can be challenging, particularly for those without reliable internet or those who do not use phones or computers for their work.
- **Data security and trust issues** are significant concerns, as users need to be confident that their personal health information is protected.

Understanding the provider's rationale, decisions and actions can help you decide whether the solution is right for your workers. A typical development pathway[18] could look something like this:



Further information on what to look for in a good digital health and wellbeing product, and reviews of some more established digital health and wellbeing products, can be found at https://orchahealth.com

KEY QUESTIONS:

When commissioning digital health products, consider the questions you would normally ask but with a specific focus on how the service provider has developed and tested their solutions, to understand if they are a good fit for your organisation.

18. Yarker, J., Lewis, R. & Munir, F. (2022). Pathways for digital health interventions. Under development.

3.6. Spotlight on peer support

Peer support is increasingly used by organisations, especially in those where staff are at high risk of potentially traumatic incidents. Peer support programmes, sometimes called mental health or wellbeing champions, are often used to increase support seeking and facilitate access to health and wellbeing services.

There are several key considerations[19], as defined by a group of international experts, when putting in place a system of peer support:

- Goals of peer support should include empathy, a listening ear, and identifying and signposting peers who may be at risk to professional help.
- Formal application and selection process are important and staff recruited to the role should be respected, trusted and experienced.
- Training and accreditation should cover active skills, providing non-complex supportive interventions such as problem solving, understanding ongoing pathways of professional support. Additionally, peer supporters should be assessed on their competencies before taking on the role and their training and support should be ongoing.
- Oversight of supervision, training and support by a mental health professional or clinical director.
- Roles of peer supporters should be integrated into everyday activities, rather than solely carried out during high-risk incidents.
- Support for peer supporters is vital and should include access to a clinician and regular peer supervision.
- Evaluation on a regular basis against specific outcomes, preferably by an external independent evaluator, will aid programme improvement and sustainability.

19. Creamer, M. C., Varker, T., Bisson, J., Darte, K., Greenberg, N., Lau, W., ... & Forbes, D. (2012). Guidelines for peer support in high-risk organizations: An international consensus study using the delphi method. Journal of traumatic stress, 25(2), 134-141.

4. What do potential wellbeing intervention suppliers need to know about you?

A good supplier will ask questions about your organisation and show a genuine interest in the problems you are facing. A good supplier will also recognise when the product or service is not right for your organisation, and be clear on what outcomes they can and cannot deliver on.

"A lot of companies say we will personalise or target this to your audience. But then, when you go on calls with them, they don't ask any questions. I think understanding how we work is extremely important and should be extremely important to the supplier." - *Magdalena Wronska, TfL*

Sharing the following information allows suppliers to consider what product or service might be useful for you and to identify relevant information about the design, delivery, implementation and evaluation to help you decide whether the product or service is a good fit for your organisation:

- What does your company do?
- Where is your company located?
- How do your people work, e.g. onsite/offsite/shifts?
- What are your current challenges, e.g. absence, morale, you're unsure what is working?
- What do you have in place already, e.g. champions, EAP?
- What are your strategic goals for wellbeing, e.g. to improve retention?
- What data do you have on work, health and wellbeing, e.g. absence data, employee survey, culture reviews?
- Have you consulted your employees, on what they need and want?
- How do you contact employees for wellbeing communications, e.g. do they have emails/a wellbeing hub?
- How do you typically deliver this type of solution, e.g. intranet?
- What led you to implement a wellbeing initiative, e.g. an engagement survey?
- What potential barriers to the success of the intervention might there be, e.g. buy-in?
- What impact do you want on the supply chain, e.g. to share learnings?
- If relevant, do you need to consider international delivery?
- What is your procurement process?
- What expertise and resource do you have internally to support people if there are questions or follow-ups needed post-delivery?

5. What do you need to know about your suppliers?

There is often no one 'right' answer to this question. The answer will depend on the nature of the product or service, the problem to be addressed and your organisation's needs. Suppliers' responses to these questions should help you decide whether the intervention is a good fit for your organisation.

1. About your organisation and your people

- Do they ask what has worked in your organisation before?
- Do they take an interest in your organisation and ask how the business operates?

2. Product or service details

- What is the product or service?
- How and why was it developed?
- How does it fit/does it compete with existing provision?
    - What outcome does it aim to change?
    - How will it fit alongside other primary, secondary, tertiary offerings, e.g. OH, EAP, staff counselling, private medical insurance?
    - Which of the IGLOO levels is it targeting?
- How is it delivered and what has worked before (online or in person)?
- How has universal design and usability been considered and assessed?
- What evidence of impact is there (against the five NESTA levels)
- How does the provider measure training impact?
- Can the provider help the procuring organisation to understand if the product is working for them?

3. Delivery

- Who delivers the product or service?
- Are they members of a professional body? What qualifications do they have?
- If appropriate, can your company train its own trainers to become self-sufficient? If so, what do you need to do to ensure they continue to deliver quality training?
- What quality assurance process is used? How is the fidelity of the product or service monitored and by whom, i.e. how do you know the activity is delivered consistently and to a high standard?

4. Accreditations

- Is there a formal accreditation available on completion to provide CPD for staff?
- Can they certify those they train, i.e. is there a qualification available for the intervention?

5. Pricing, procurement and contracting

- What is included in the price?
- What support will be made available throughout the process and at what price?
- Consider all aspects from design to evaluation – is this at an additional cost?
- Consider the costing framework for the delivery period – is per unit the best approach (not always)?
- When will the cost be reviewed?
- Is the governance process integrated into the contract?
- Is data protection adequately addressed?

6. Set-up

- Data security and GDPR compliance
- What implementation support is needed and provided?
- Do you have template communications you can adapt?

7. Scaling

- Can the product or service be piloted in a small part of the organisation first?
- How would the product or service be scaled across the organisation?
- How could international roll-out be supported?

8. Ongoing support

- What level of support is offered?
- Who is involved in the support? Often there is an account manager alongside back-office support for day-to-day queries and admin. Find out what resources are available.
- Is refresher training needed, and is this payable?
- How frequently would review meetings take place, and would this impact on the cost of the service?
- How will the company respond to ongoing needs, including challenges and data requests?
- Can the provider provide example policies relating to the product that the procurer can adapt for themselves?

9. Reporting and evaluation

- What information will be reported, and how frequently?
- What management information is available, and is this accessible online?
- What utilisation measures are used?
- How will the effectiveness of the product or service be evaluated in your organisation? Can pre- or post-measures be included?
- What impact do the product or service (e.g. validated wellbeing-related outcomes) and the process (e.g. attendance, net promoter score, satisfaction, reach) have on assessing whether the programme has achieved its aims?

Case study 1: BT

About BT

BT is one of the world's leading communication services companies, providing a wide range of services across four major brands. With a workforce of over 100,000 dedicated employees, BT connects millions of people and businesses globally, ensuring seamless and reliable communication every day.

To better understand BT's method for procuring and implementing wellbeing services, we spoke with **Bruce Greenhalgh**, Senior Specialist in Health and Wellbeing, and **Dr Elschen Kotze**, Senior Occupational Health Physician and Head of Health, who shared their common challenges and the strategies they draw on to select and integrate effective wellbeing solutions in a consistent way across their global operations.

Use a comprehensive strategy to drive consistent implementation. BT's comprehensive wellbeing strategy ensures consistent implementation of preventative and reactive services across the business. An in-house portal provides clear guidance on available services and marketing strategies tied to events, such as Mental Health Awareness Week.

Develop long-term relationships. Different providers use different terminology, which creates challenges in maintaining consistency, particularly with mental health services. Where possible, BT develops long-term relationships with suppliers to ensure a uniform service globally and to allow for trend tracking with continuity of data.

Benchmark. Benchmarking against reliable sources such as NHS and NICE guidelines ensures coherence and quality of care.

Trial products or services to manage risk. Challenges can arise when a high-cost provider has low uptake within the business. Trial periods can determine suitability when implementing new products or services, as they offer an opportunity to examine how the product or service is received by different work groups, and how it fits with existing provision.

Draw on evidence-based practices. At BT, the importance of robust, evidence-based practices cannot be overstated. Be mindful of suppliers' claims and ensure practices are backed by robust external evidence. To be able to make meaningful decisions, it is important to stay updated with evolving best practices.

Contract for service evaluation and governance. Ongoing evaluation ensures suppliers deliver as contracted. Monitor services closely, engage with employees for feedback, and use pre- and post-measure surveys to assess outcomes. Implement strong governance for internal services such as peer support networks, to ensure proper training and support.

Prioritise inclusivity and accessibility. Providing a variety of wellbeing services, both in person and online, caters to preferences and is crucial for inclusivity. Offering online services supports a global workforce for businesses with functions outside of the UK.

BT's approach to procuring and implementing wellbeing services highlights the importance of long-term relationships with suppliers, terminology and standards, comprehensive strategies, inclusivity and accessibility, and evidence-based practices.

Case study 2: TfL

About TfL

Transport for London (TfL) is the integrated transport authority responsible for implementing the Mayor of London's strategy and commitments on transport across the capital. With a workforce of over 27,000 dedicated employees, TfL ensures the smooth and efficient movement of millions of passengers each day.

To gain deeper insights into TfL's approach to procuring wellbeing services, we spoke with their Wellbeing Lead, **Magdalena Wronska**, who shared common challenges and her top tips for selecting effective wellbeing solutions.

Challenges:

Overwhelming supplier outreach: TfL receives numerous approaches from wellbeing suppliers, which has the potential to lead to a fragmented approach. *"We get lots of suppliers reaching out. If we ignore them, they try to find entries through different people or departments."*

Inadequate evaluation metrics: Wellbeing services are often assessed through satisfaction feedback, which doesn't always align with specific goals such as increasing knowledge or changing behaviours.

Lack of evidence: Many suppliers claim evidence-based services without substantial evidence. *"Overpromising is a big element. It gets really frustrating when there's no real evidence to back up the claims."*

Saturated market: The dense market makes it hard to find suppliers who genuinely tailor their services.

Inclusive delivery issues: Wellbeing programmes often overlook employees with non-traditional schedules. *"A lot of what those suppliers offer is aimed at office workers… those working nights are rarely provided opportunities to take part in wellbeing initiatives."*

Magdalena's recommendations:

Develop and communicate a comprehensive organisation-wide wellbeing strategy to not only streamline engagement but also ensure all managers have a foundational understanding when engaging with suppliers.

Clarify intended outcomes upfront and discuss evaluation methods with suppliers early in the process for alignment and adaptability. This will ensure the wellbeing services are assessed effectively.

Scrutinise the offer. Be mindful of the potential of suppliers to exaggerate their expertise and results, and look for the qualifications of those delivering the services.

Select suppliers who demonstrate genuine interest and understanding of the organisation's operations. "Understanding how we work should be extremely important to the supplier."

Be inclusive in your provision. Look for a range of wellbeing services that are relevant or can be adapted for all staff within the organisation and combine with targeted approaches.

Magdalena's insights highlight the need for governance on wellbeing services throughout an organisation, accurate evaluation, and more inclusive wellbeing strategies.

Case study 3: Independent OH practitioner

Libby Morley-Hassanali, Vice President of iOH and independent practitioner

Libby Morley-Hassanali is an independent occupational health nurse practitioner, trainer and author. With extensive experience in stress and mental health, Libby is the owner of Mindshift Consultancy, which works with organisations of different sizes and sectors. She serves as an Associate Lecturer at Robert Gordon University and is a member of the faculty of EOPH.

To understand some of the common challenges faced by external independent consultants, we spoke to Libby, who shared her top tips as a provider of training and wellbeing services:

Strategic programme design and continuous engagement is vital. Piecemeal services without follow-up significantly diminish impact. Ensure there is a clear strategy supported by continuous engagement. Long-term collecting and analysing post-training feedback and data will drive ongoing improvements. Using data to demonstrate impact and return on investment can help senior leadership buy-in.

Embed opportunities for continuing professional development (CPD). Initial training may not be sufficient to maintain engagement or proficiency. Offer ongoing CPD opportunities to keep employees informed and engaged.

Support passion-driven initiatives. Successful implementation often depends on leveraging passionate individuals in key roles to drive wellbeing initiatives, while supporting them to take an evidence-based approach and to create boundaries and strategies to protect their own wellbeing.

Promote shared ownership as you delegate responsibilities. Responsibility for wellbeing initiatives can be poorly delegated as they cascade through the organisation, which leads to inconsistent implementation and lack of accountability. Enhance responsibility and buy-in by involving focus groups and representatives from various business areas. This inclusive approach will consider diverse perspectives, promote shared ownership of wellbeing initiatives, and foster a more cohesive and committed effort across the organisation.

Be clear on contractual arrangements and pricing strategy. Ambiguous contracts and poorly determined pricing can lead to misunderstandings, operational issues and undervaluation of services. Establish clear contracts with detailed payment and cancellation terms to manage expectations and ensure smooth operations. Carefully consider your pricing to reflect the value of your services, for both sustainability and perceived worth.

Be aware of the downsides of voluntary participation. Mandatory training is often ill received, yet voluntary training may not reach those who need it most. Balance mandatory and voluntary training for broad participation and engagement.

Libby's insights provide key considerations for both parties to create effective and sustainable wellbeing programmes that benefit the entire organisation.

6. Mapping exercise: identify your organisation's needs

A mapping exercise can identify what resources you have in place already and how they are mapped against your current challenges.

Needs assessment	Provision (products or services) assessment
• What does your data tell you, e.g absence, engagement survey data? • What do your people say the problem is? • What do your people say they want?	• What do you have in place? • What products or services are people using and why? • What evidence do you have that they work? *Use the frameworks in this guide to help you map your current provision:* • Does your provision cover all three levels of intervention (protect and prevent harm, promote health, and react and repair)? • Does your provision target resources at different IGLOO levels? • Does your provision provide specific solutions to specific work groups? • Is your provision integrated as a whole programme, in a common language and flow between different activities? • How are the products or services you have in place designed, delivered, implemented and evaluated?

7. Checklist and key questions

Area for consideration	Key questions
Interest in you	• Do they ask about your needs, sector, ways of working? • Are they able to demonstrate how their product/ service is relevant to your organisation?
What the product is, and how it integrates with existing services	• Are they able to clearly articulate what the product or service is, and how it differentiates from other provision? • How does the product or service align/integrate/duplicate with other products or services you already have?
How and why it was developed	• What was the development process? Who was involved? What steps did they take to refine and test the product or service? What problem(s)/challenge(s) is it aiming to solve?
Accessibility	• Has the programme been designed with accessibility in mind? Does it consider different learning styles, disabilities and access needs? • What accessibility frameworks inform their approach?
How it is delivered	• Online or in person? How is the fidelity of the service monitored and by whom, i.e. how do you know the activity is delivered in a consistent way and to a high level?
Who it is delivered by	• Are those delivering products or services members of professional bodies? What qualifications do they have? • If appropriate, can your company train its own trainers to become self-sufficient?
What evidence there is	• What is the evidence base? What data do they have? Is it generalisable/ relevant to your organisation?
Accreditations	• For training, is there an accreditation available on completion to provide CPD for staff? • Can they certify those they train, i.e. is there a qualification available for the intervention?
Pricing	• What is included? • Are there add-on costs? • When would there be a price increment? • Are there economies of scale/reduced pricing for higher sales?

Area for consideration	Key questions
Set-up	• How is data security and GDPR compliance assured? • What implementation support is needed and provided? • Do they have a template/template comms you can adapt? • Will they present to your people to raise awareness? Will they answer questions about the product or service? • Will they provide support if staff struggle to access the content?
Ongoing support	• What level of support is offered? • Who is involved in the support? Often, there is an account manager alongside back-office support for day-to-day queries and admin. Find out what resources are available. • Is refresher training needed, and is this payable? • How frequently would review meetings take place, and would this impact on the cost of the service? • How will the company respond to ongoing needs, e.g. challenges, data requests?
Reporting and evaluation	• What information will be reported, and how frequently? • What management information is available, and is this available online? • What utilisation measures are used? • What impact does the product or service (e.g. validated wellbeing-related outcomes) and the process (e.g. attendance, net promoter score, satisfaction, reach) have on assessing whether the programme achieved what it aimed to achieve? • How will the effectiveness of the product or service be evaluated in your organisation? What would you need to do/what resources would you need to make this happen? • Could you work together to share good practice or learnings from this work to the wider OH and wellbeing community?
Review and improve	• What processes do you have in place to review your wellbeing offer and its impact?

8. Useful resources

CIPD - Long-term health conditions: How people professionals can support employees.
Accessed at https://www.cipd.org/uk/knowledge/guides/support-long-term-health-conditions/

CIPD - Managing a return to work after long-term absence: Guidance for people professionals.
Accessed at https://www.cipd.org/uk/knowledge/guides/managing-return-to-work-after-long-term-absence/

EAPA: A Buyer's Guide to Employee Assistance Programmes
https://www.eapa.org.uk/wp-content/uploads/2019/03/EAPA-Buyers-Guide-Online.pdf

Health and Safety Executive Management Standards
https://www.hse.gov.uk/stress/standards/

SOM: The value of Occupational Health and Human Resources in supporting mental health and wellbeing in the workplace:
https://www.som.org.uk/sites/som.org.uk/files/The_Value_of_OH_and_HR_in_supporting_mental_health_and_wellbeing_in_the_workplace_Nov23_0.pdf

SOM: Occupational Health: The Value Proposition
https://www.som.org.uk/sites/som.org.uk/files/Occupational_Health_The_Value_Proposition_March_2022_0.pdf

Royal College of Psychiatrists position statement on Occupational Mental Health
https://www.rcpsych.ac.uk/docs/default-source/improving-care/better-mh-policy/position-statements/ps01_22.pdf?sfvrsn=dad49604_10

World Psychiatric Association (WPA) Position Statement: Mental Health in the Workplace
https://www.wpanet.org/_files/ugd/842ec8_152d2f0df10241ceb3a30dd8287c0188.pdf

World Health Organisation: Mental health at work
https://www.who.int/news-room/fact-sheets/detail/mental-health-at-work

National Institute for Health and Care Excellence (NICE): Mental wellbeing at work
https://www.nice.org.uk/guidance/ng212

Find a qualified professional

Society of Occupational Medicine
https://www.som.org.uk/find-an-oh-professional

SEQOHS (Safe Effective Quality Occupational Health Service)
https://www.seqohs.org/#:~:text=The%20Safe%20Effective%20Quality%20Occupational,and%20to%20retain%20their%20accreditation

Vocational Rehabilitation Association
https://vrassociationuk.com

Health & Care Professions Council
https://www.hcpc-uk.org

British Association for Counselling and Psychotherapy
https://www.bacp.co.uk

EAP providers
https://www.eapa.org.uk/find-an-eap-provider/

9. How this guide was developed

This guide was developed by Professor Jo Yarker, Dr Rachel Lewis and Hannah Musiyarira from Affinity Health at Work, drawing on an evidence-based approach. There is a growing body of research that helps us understand how wellbeing interventions can best be designed, implemented and evaluated. This research, and information from a short survey and expert insights, has helped inform the development of this guide.

We would like to thank the following people for generously giving their time and expertise to contribute to and review this guide: members of the SOM Council, Libby Morley-Hassanali, Magdalena Wronska, Bruce Greenhalgh, Dr Elschen Kotze, Professor Neil Greenberg, Jonathan Gawthrop, Nick Pahl, and respondents of the survey.

Disclaimer: This report summarises the best available evidence at the time of writing; it does not constitute professional advice. Readers should make their own assessment as to its relevance for their purposes and obtain appropriate competent professional advice relevant to their particular circumstances and legal and regulatory requirements.

Supporting occupational health and wellbeing professionals

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