

# **Provisional Kent and Medway Integrated Work and Health Strategy (version 3.3) 2025 – 2030**



# Introduction to the Strategy

The **Kent and Medway Integrated Work and Health Strategy** has been developed through a collaborative effort between the Kent and Medway Integrated Care Partnership (ICP) and the Kent and Medway Economic Partnership (KMEP). This joint initiative reflects a shared commitment to improving the health and productivity of our workforce, benefiting businesses and organisations and the local community.

This strategy is designed to support employers in creating healthier workplaces and to support people with all long-term health conditions and disabilities to start, stay and succeed in work. The audience for this strategy document is primarily professionals working in services that aim to support people, businesses and organisations. Communication about the strategy will be tailored to other audiences.

Recognising that Kent's and Medway's communities are diverse, with unique needs, opportunities, and strengths, this strategy will be implemented to ensure that local needs are met. This strategy is our overarching high-level ambition, which will be supported by targeted action plans in our local communities.

As major employers and anchor institutions, we understand our own critical role in this initiative. We are committed to lead by example by creating a healthy work environment for all our employees.

## Strategy Aim

The **Kent & Medway Integrated Work & Health Strategy** has the aim of integrating and improving support for people and employers with the goal of helping people with long-term health conditions and disabilities to start, stay and succeed in work.

### Aspiration A: Build Employer Confidence

#### Commitments

1. Build employer confidence in the ways they support employees and access to relevant support.
2. Build strong working relationships between employers and employees and a culture of a collaborative approach to achieving business and employee needs.

### Aspiration B: Development, Skills and Training

#### Commitments

1. Create the environment that supports people to undertake meaningful work.
2. Provide career guidance and opportunities, values and ambitions.
3. Provide employers access to system-wide knowledge to enhance their offerings and help employees reach their potential.

### Aspiration C: Person-Centred Approach

#### Commitments

1. Promote a multidisciplinary and holistic approach to address work and health needs.
2. Promote flexible working and reasonable adjustments.
3. Build current and prospective employee confidence and motivation to engage in meaningful work.

### Aspiration D: Healthy, Thriving Workforce

#### Commitments

1. Engender a culture where employers proactively promote physical and mental wellbeing at work.
2. Collaborate within and beyond organisations to mitigate the wider determinants of health and inequalities.
3. A life stage approach to consider the impact of different phases at work.

## Implementation Plan

There will be targeted action plans with the activities which will be undertaken to meet our commitments.

# Intelligence and Evidence Base:

## How We Gathered Intelligence



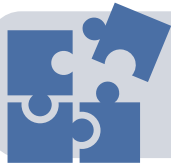
We reviewed existing national, regional and local policy, strategies and planning and will continue to incorporate new information as it is published.



We brought together data on health, employment and the economy and analysed this from the perspective of supporting people with long-term conditions or disabilities to start, stay and succeed in work.



We talked to over 115 stakeholders in interviews and focus groups and gained their views from an employer and employee perspective on the challenges of engaging with meaningful work for people with long-term health conditions and disabilities. We also asked about what is already in place and what change they would like to see.



We explored and mapped the provision which is available in different geographical areas of Kent and Medway to see how well the provision meets the needs in each area.



We reviewed a range of academic literature relating to research on the subject of work and health.

# Policy Context:

## National Picture

In response to the growing number of people out of work, the UK government introduced the Back to Work Plan<sup>1</sup> in 2023 to support those facing long-term health conditions, disabilities, or long-term unemployment. Following a change in government in July 2024, the mission to grow the economy has maintained a strong focus on advancing the work and health agenda.

In November 2024, building on the previous governments Back to Work Plan, the government produced the Get Britain Working White Paper<sup>2</sup> as part of a new three-pillar approach. This paper sets out initiatives to reduce economic inactivity and achieve an 80% employment rate. Emerging policies from this paper will be tailored to ensure that national initiatives deliver real benefits for people, businesses and organisations in Kent and Medway.

As part of this third pillar, the government has also introduced the Skills England Bill<sup>3</sup> and the Employment Rights Bill<sup>4</sup>, aiming to boost the nation's skills and reform workers' rights. Further pillars include a new modern Industrial Strategy and Local Growth Plans and to improve the quality of work through the Plan to Make Work Pay.

In March 2025, the government published a Green Paper<sup>5</sup> on Reforming Benefits, proposing changes to the welfare system, improving employment support and reducing barriers to work.

### Get Britain Working White Paper – Summary of Initiatives

£115 million for local areas to deliver Connect to Work, a new supported employment programme



Bring Jobcentre Plus and National Careers Service together to provide a national jobs and careers service



Support all areas in England to develop local Get Britain Working Plans



Expand access to NHS Talking Therapies, Employment Advisors and Individual Placement Support (IPS)



Establish a new youth guarantee to offer training, an apprenticeship, or help to find work for all young people 18 to 21



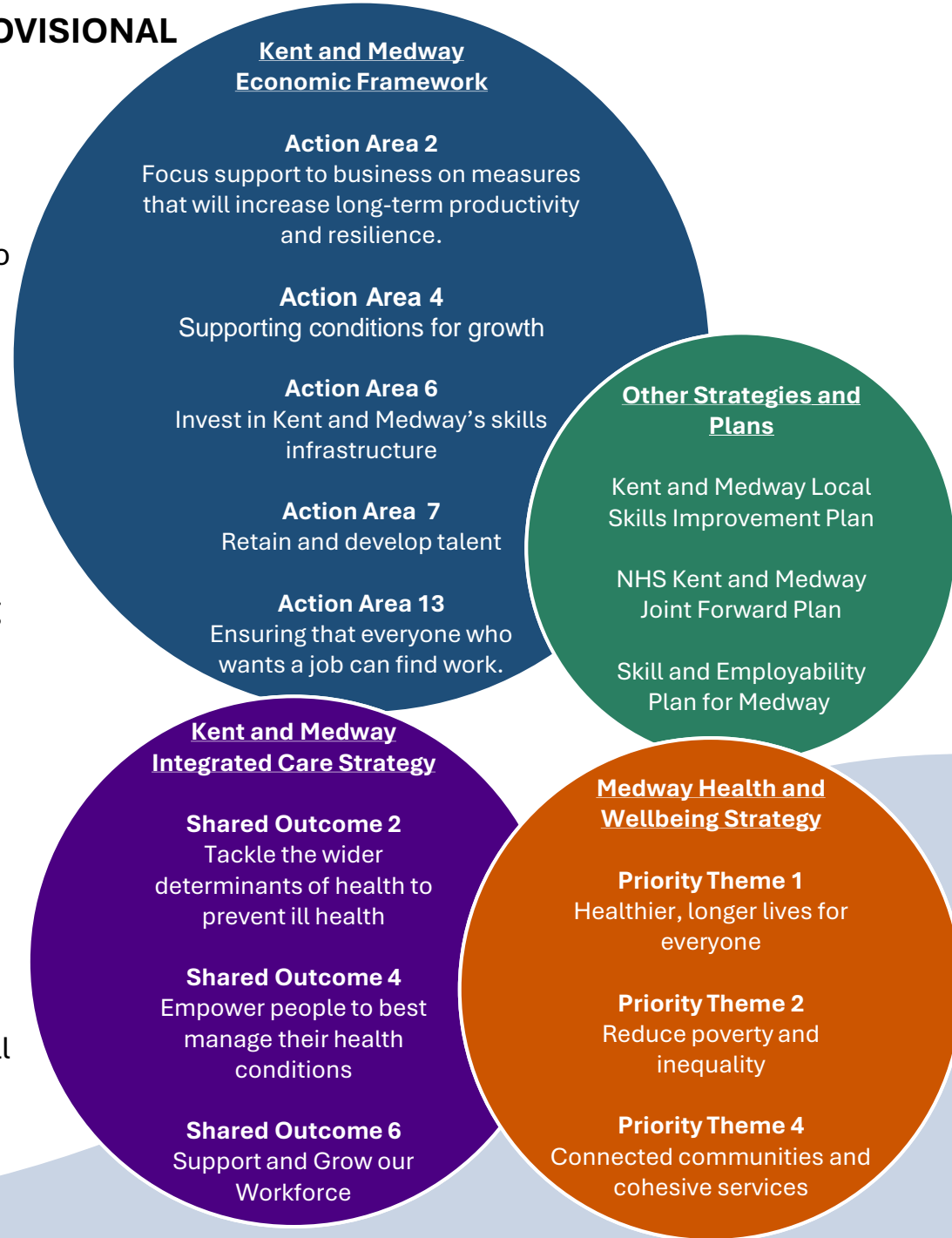
# Policy Context:

## Local Picture

The Kent and Medway Integrated Care Strategy, which also serves as Kent's Health and Wellbeing Strategy, and the Kent and Medway Economic Framework both recognise the strong connection between economic prosperity and the health and wellbeing of the population. Both strategies look to address the economic determinants that enable healthy lives, including access to stable employment. Similarly, Medway's Joint Health and Wellbeing Strategy highlights the importance of improving access to steady, secure employment as a critical factor in improving wellbeing.

Many other organisations across Kent and Medway have also developed local strategies that align with this shared vision of health and work. Each highlight the impact this has on the economy, service providers, and population health and wellbeing.

These shared priorities offer a strong foundation, and by building on these existing local strategies, this strategy will be a cohesive and impactful plan that supports the prosperity of both people and businesses in Kent and Medway.



# Why We Need a Strategy:

## Relationship Between Work and Health

Within the past year there have been several national reports on the relationship between work and health, citing the impact of the rising number of people out of work is having on the economy. The Health Foundations report, Towards a Healthier Workforce<sup>6</sup> revealed:

- More than 8 million people now report health conditions that restrict the type or amount of work they can do, up from 6 million in 2013.
- A record 4 million people are not participating in the labour market due to a work-limiting condition, with 2.6 million citing long-term sickness or disability as their main reason for being out of the workforce.
- In 2023, there were 3.9 million workers aged 16 to 64 years with a work-limiting health condition, up by 1.5 million, or 64%, from a decade ago

It further empathises how ‘employment can bring with it better incomes, financial stability, security and greater sense of purpose, which in turn can lead to healthier diets and exercise, higher living standards, and better mental health.’<sup>7</sup>

This is also supported by Lord Darzi’s report into the NHS which explains there is a ‘virtuous circle if the NHS can help more people back into work’ and that ‘improving access to care is a crucial contribution the NHS can make to national prosperity.’<sup>8</sup>



# Why We Need a Strategy:

## People Perspective

There is a mutually beneficial relationship between work and health.

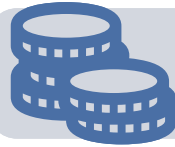
People who are unemployed:



Are five times more likely to report poor health than employees.<sup>9</sup>



Are more likely to experience a detrimental impact on mental health.<sup>10</sup>



Experience a detrimental economic impact.<sup>11</sup>

People who have never worked or are long-term unemployed:



Are more likely to be obese than the England average.<sup>12</sup>



Are less likely to be physically active.<sup>13</sup>



Are more likely to smoke than the England average.<sup>14</sup>



# Why We Need a Strategy:

## Economic Perspective

There is an economic impact on the country and employers. Long-term sickness can lead to increased costs for businesses including funding sick leave and hiring temporary employees. Indirect costs may include lowered productivity and the potential loss of business, especially in time critical industries.

### Employers need skilled staff



- 48% of Kent & Medway employers surveyed in 2023 experienced problems recruiting the staff they needed.
- Of this total, 19.7% said that staff recruitment is a major problem for them.<sup>15</sup>

### Cost to businesses



UNEMPLOYMENT

- Annual hidden cost of employee sickness has risen by £30 billion since 2018.
- Most of this increased cost (£25 billion) to businesses is from lower productivity among people working through sickness, with just £5 billion down to rising sick days.<sup>16</sup>

### Long-term absence limits productivity



SICK LEAVE

- People with work limiting health conditions are 3 times less likely to return to work within a year than those without health conditions.<sup>17</sup>

### Tax receipts and benefits bill



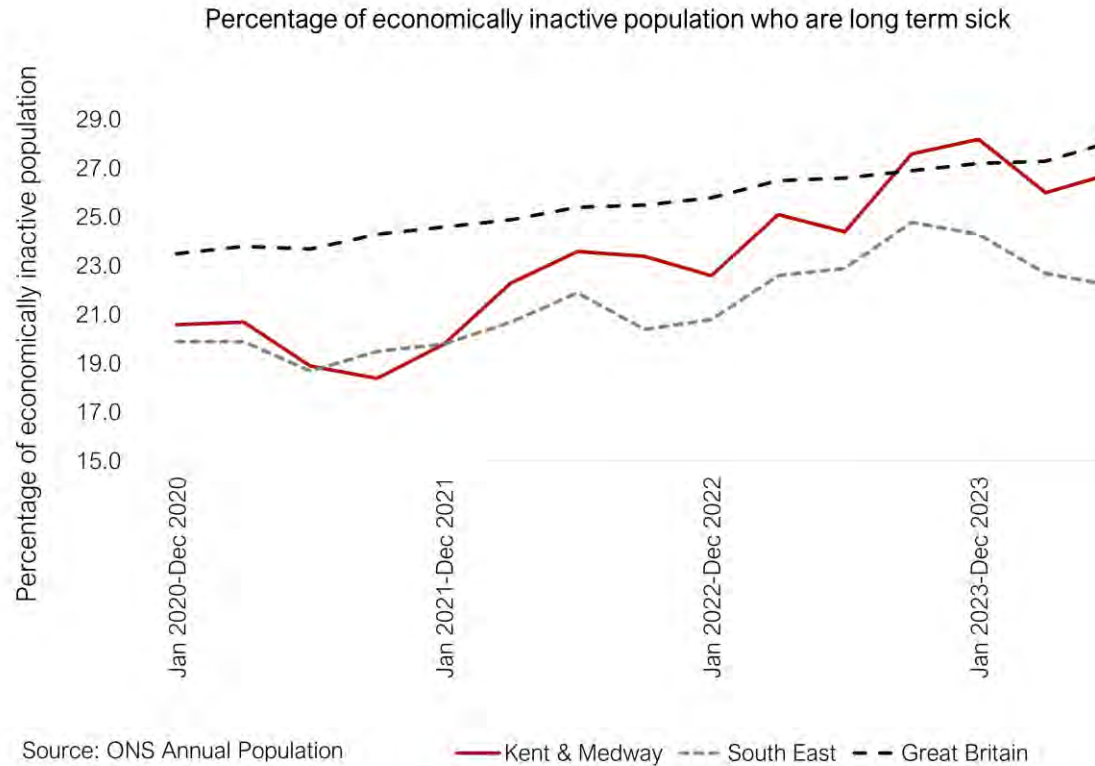
- Fewer employees reduces the UK tax receipts & increases the benefit bill, reducing investment in the economy and necessary infrastructure.
- The Office for Budget Responsibility estimates that the cost of sickness and disability benefits will increase by £30 Billion over the next 5 years across the UK.<sup>18</sup>

# Why We Need a Strategy:

## Economic inactivity perspective

In late 2020, 209,000 people were economically inactive in Kent and Medway, of which 18.4% was due to long-term ill health. By June 2024, this had increased to 26.8%, higher than the Southeast average.<sup>19</sup> While this reflects the national trend the rate of change is more pronounced in Kent and Medway as Figure 1 shows.

Nationally, a particularly concerning trend is the number of young workers aged 16-34 experiencing work limiting conditions. This has doubled in the last 10 years. Mental health, including anxiety and depression, are believed to be key factors.<sup>20</sup>



**Figure 1: Percentage of economically inactive population who are long-term sick  
January 2020 – June 2024**

# Why We Need a Strategy:

## Fit Note Perspective

Figure 2 shows the top 5 diagnoses for which fit notes have been issued in Kent and Medway between 2019 and 2024. Mental health and behavioural disorders (MH) and musculoskeletal conditions (MSK) are the leading diagnoses for fit note episodes.

Table 1 shows that the number of fit notes being issued for mental health and MSK across Kent and Medway increased between June 2022/23 and June 2023/24. This was by 9.5% and 13.6% respectively.

As well as designating a patient as 'not fit for work' a fit note can designate a patient as 'may be fit for work with reasonable adjustments.' Nationally, in 2022/23 this option was used in 5.9% of cases.

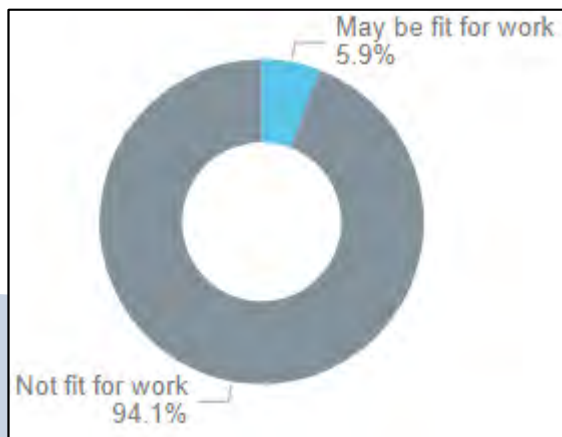


Figure 3 : Proportion of fit notes noting fitness for work with reasonable adjustments 2022/23 <sup>21</sup>

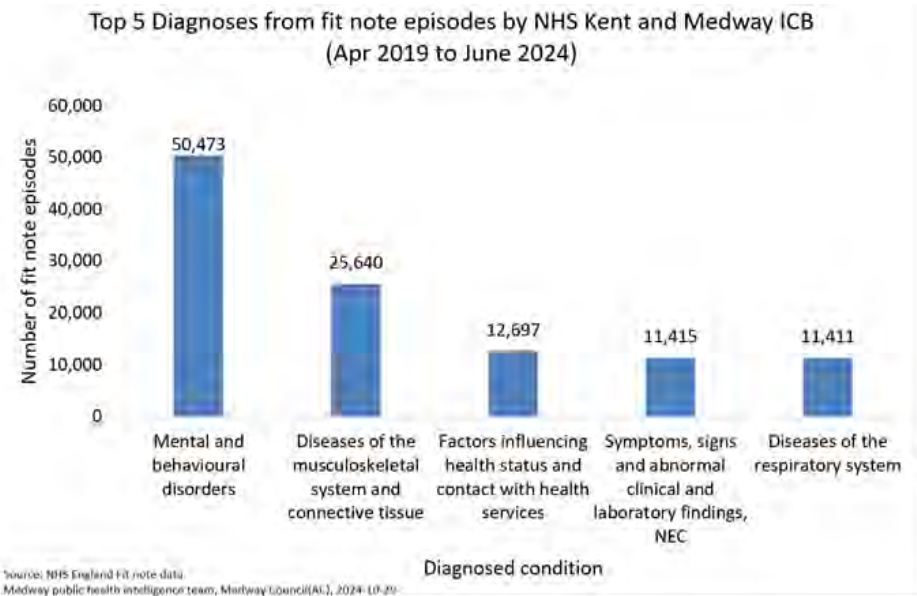


Figure 2 : Kent and Medway top 5 diagnoses from fit note episodes 2019 -2024

Table 1 : Change in fit note numbers for Kent and Medway relating to MSK and mental health <sup>22</sup>

Fit Notes Kent and Medway	June 22/23	June 23/24	% Increase
Mental Health	2357	2581	9.5
Musculo-skeletal	1166	1325	13.6

# Why We Need a Strategy:

## Stakeholder Feedback

We talked to over 115 stakeholders in interviews and focus groups and gained their views from an employer and employee perspective on the challenges of engaging with meaningful work for people with long-term health conditions and disabilities. We also asked about what is already in place and what change they would like to see.

### Employer Feedback

Concerns about doing things wrong when trying to support people with long-term health conditions and disabilities.



Access to the right support for employers, for example, employer and manager training, a toolkit, signposting to resources, becoming Disability Confident and access to funding.



Wellbeing training was articulated to know how to help employees stay physically and mentally well e.g. physical active.



Importance of working together including listening to people, collaboration between organisations and engagement of organisations and employers in developing and implementing the strategy.

### Employee Feedback

Importance of a person-centred approach and establishing best practice for supporting people to start, stay, and succeed in work.



In terms of job roles education and training was raised as a barrier to gaining meaningful employment, particularly reading and writing skills.



Inclusive recruitment practices, taking a creative approach to recruitment to facilitate success for those with long-term health conditions and disabilities who have the skills and capabilities to succeed in the role.



A range of support was put forward that would help employees to start, stay and succeed in work. This included occupational health, flexible working, access to the necessary equipment and a coherent support offer.

# The Development and Structure of the Draft Strategy

This document now sets out each of the four aspirations, each of which has a number of underpinning commitments. The activities to deliver these will be captured in a live delivery plan and are not included in this strategy.

## Aspirations

These are the overarching themes of the strategy that will guide our work



## Commitments

These are the commitments to action that we will make towards each aspiration



## Activities

These are the activities which will be undertaken to meet our commitments.



# Aspiration A: Building Employer Confidence



The aspiration aims to build confidence amongst employers by engaging with people with long-term health conditions and disabilities and supporting them to gain and retain meaningful work.

Navigating legislation related to long-term health conditions and disability in the workplace is challenging so there needs to be easy access to information and guidance, which is particularly important for small and medium enterprises (SMEs) and self-employed people.

For small and micro-SMEs, which are in the majority in Kent and Medway, recruiting the right person for the right role is particularly important in reducing costly and disruptive staff turnover and growing the success of the business.

We want to raise awareness among employers about the benefits of a diverse workforce, to minimise hesitancy to employing people with long-term health conditions and disabilities and to build an inclusive workforce culture. This could help tackle known skills shortages, with employers serving as ambassadors who can lead by example.

Courage and confidence to take on a new role can be quickly dissipated. It is hard to regain if the role is not successful. It is important employers can support people in the right way, at the right time and in the right role.

To underpin this aspiration, a strong, trusted, working relationship is important between employer and employee, facilitating a collaborative, open and honest dialogue which is responsive to the needs of both parties.







# Aspiration A:

## Building Employer Confidence

### Commitment 1

Build employer confidence in supporting employees with long-term health conditions and disabilities and improve access to relevant support.

We heard employers' concerns about doing the right thing for their employees with long-term health conditions or disabilities. This included legislative requirements and practical implementation within their organisation or business, and managing potential sickness absence and impact on their productivity.

In response we will **signpost and make information easily accessible to employers, including training where appropriate, and improve access to occupational health advice. This can also include workforce training such as sign language, assistive technology and autism awareness courses.** We will also draw attention to the impact of trauma and raise awareness of trauma informed approaches.

**The Disability Confident Scheme<sup>23</sup> will be promoted as a way of building employer and organisation confidence,** which helps provides a staged approach for an organisation to ensure that disabled people have the right opportunities to fulfil their potential.

In the recruitment process it is important that people can fully demonstrate their skills and capabilities for the role ensuring a good match between applicant, role, and organisation e.g. job carving. This commitment proposes that **more creative and alternative approaches to recruitment and onboarding practices are explored and implemented.** This also includes **reasonable adjustments** and use of the **Access to Work scheme<sup>24</sup> where appropriate.**

# Aspiration A: Building Employer Confidence



## Commitment 2

Build strong working relationships between employers and employees and a culture of a collaborative approach to achieving business and employee needs.



Stakeholders told us about the need for good communication and open and honest dialogue. A focus on a collaborative approach and nurturing good understanding between employer and employee is required.

The aim is to work towards mutually beneficial arrangements resulting in good outcomes for employees and organisations/business. **Collaboration between organisations and businesses will facilitate the sharing of best practice, knowledge, resources, and information.** In turn this will build employer confidence in effecting change.

Where possible, opportunities to aggregate and share services will be taken, such as occupational health. **Anchor institutions can pilot and share innovative approaches,** to inspire people with long-term health conditions and disabilities into meaningful work. The aim is to **develop and embed innovative approaches,** with anchor institutions **considering how this could be included as part of social value in our procurement practices.**

Organisations **will be encouraged to engage in the strategy and its implementation,** especially through the Strategic Partnership for Health and the Economy (SPHE).



# Aspiration A: Building Employer Confidence



Case Study -

# Aspiration B:

## Development, Training and Skills



The aspiration aims to ensure appropriate development, training and skills for people with long-term health conditions and disabilities to start, stay and succeed in work. This will also respond to demand from key industry sectors to tackle skills shortages.

People may not have the required skills to start their career, change their occupation or succeed in an existing role, this could be reading, writing and mathematical skills or very specific, specialist training. It is also important to educate, inform and inspire people of all ages and stages of their career about the benefits and opportunities of work.

For some, the impact of their long-term health condition or disability may require transition to a new occupation or role type. Quality independent advice and guidance is key to a successful transition.

For those engaged in work who have low level skills, development training and upskilling provides a vital opportunity to move onto higher paid roles. This helps in reducing the tension between work and benefits.

An ethos of appropriate development, training and upskilling based on good communication between employer and employee should be fundamental to people, organisations and businesses and will be encouraged along with ease of access, in a timely way, to relevant opportunities from across the system.



# Aspiration B:

## Development, Training and Skills



### Commitment 1

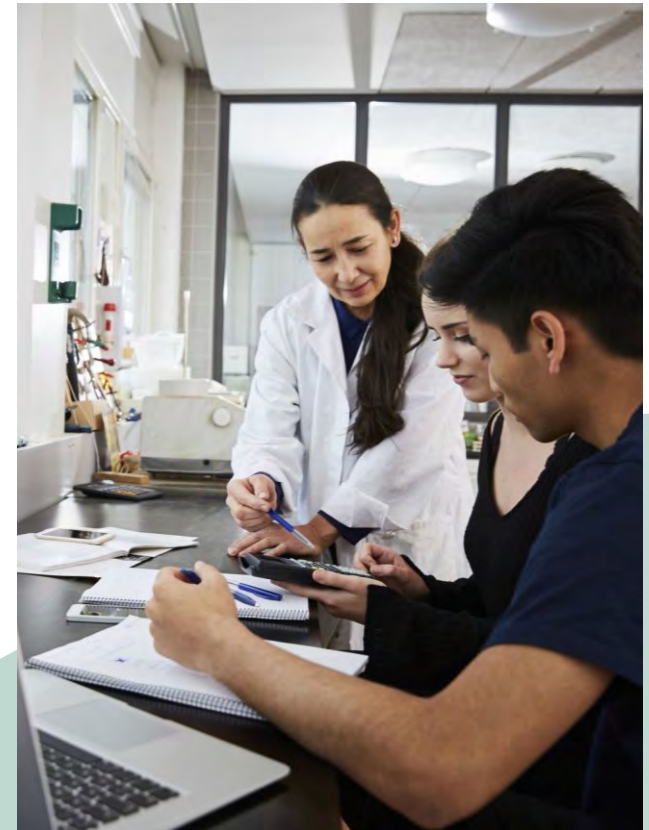
Create the environment in which people are supported and inspired to undertake development, training and skills to facilitate their engagement with meaningful work.

This commitment **engenders a workplace culture of education and training provision that facilitates and inspires people with long-term conditions and disabilities to undertake professional development** to help them to start, stay and succeed in work.

This could be, for example, development offered as part of recruitment into a new role, opportunity for promotion or to upskill and transition into a new role that might allow a person to more easily manage their long-term health condition or disability.

This commitment **promotes availability of relevant training provision in accessible formats and provision of the time, space and opportunity for people to undertake training and development** that will be mutually beneficial for people businesses and organisations.

This provides opportunities to support employers to fill skills gaps and develop staff to have greater skills and capabilities to be able to contribute to organisational and business objectives.



# Aspiration B:

## Development, Training and Skills



### Commitment 2

Provide opportunities for people to receive appropriate careers guidance and take part in development, training, and skills support to begin their career or seek new roles which align with their circumstances, values and career ambitions.

Long-term health conditions and disabilities may mean that over time a person is no longer able to continue in their current role. This may be because of the type of work or the environment in which that work takes place.



**Independent advice and guidance alongside training and development can help people enter the workforce or transition to a new role.** This includes raising aspirations for those in education, their parents and educators by **providing career advice, work experience and exposure to work along with building closer links between education and employers to prepare young people for the workplace.**

The aim is, where appropriate, for **opportunities to be provided for employees with a long-term health condition or disability to explore new opportunities to engage in meaningful work that aligns with the management of their long-term health condition or disability.**

Retraining or upskilling may be particularly important at different life stages or as technological developments impact upon traditional roles. Consideration should be given to career pathways or changes within a certain industry, across different sectors, remote working or self-employed roles.

# Aspiration B:

## Development, Training and Skills



### Commitment 3

Provide employers with access to knowledge about development, training and skills opportunities across the system which can enhance their own offer to facilitate people reaching their potential.

Appropriate development, training and skills helps people take on roles that align with management of their condition. It helps people seek higher paid posts to avoid risk of the work/benefit tension and poverty gap. Along with a sense of achievement for that person, employers benefit through inclusive teams, succession planning, workforce retention and reducing skills gaps.

The aim of this commitment **is to widely disseminate the range of opportunities for training and development so that people of all ages who wish to engage can do so easily.**

The **provision of these services across Kent and Medway is being reviewed and gaps in type or geographical availability of provision identified**, the aim is to move towards equity of provision.

Conversely, there is **existing provision which is currently underutilised. Signposting and communication of opportunities** will be improved so that those who would benefit can access the best support.

# Aspiration B:

## Development, Training and Skills



Case Study -





# Aspiration C:

## Person Centred Approach

This aspiration seeks to ensure the needs of people are at the heart of the integration of work and health. This will be considered from a range of perspectives including the person's health and other needs and the type of work they do.

Open and honest dialogue is key to ensuring that the business needs of the organisation are balanced alongside people's needs to create an inclusive work culture.

A multidisciplinary approach will be promoted to help people to start, stay and succeed in work, bringing together support across a wide range of health and work partners to tailor support to each person, aiming to meet all of their needs in an integrated way.

Programmes including the Connect to Work supported employment programme, work trials, and Individual Placement Support (IPS) set out in the Harm to Hope Strategy<sup>25</sup> will be aligned to the person-centred approach which is holistic and incorporates the wider determinants of health.

### **Connect to Work Supported Employment Programme**

Funded by a £34m Department of work and Pensions grant, this programme will support more than 9000 people until March 2030. It is designed to help individuals facing barriers to employment find and sustain meaningful work. The programme will offer personalised support through two nationally recognised models—Individual Placement and Support (IPS) and the Supported Employment Quality Framework (SEQF)—with a focus on people with disabilities, care leavers, veterans, and others who may need tailored assistance to enter or remain in the workforce.

The programme will be delivered through The Education People, and commissioned providers, and will work closely with local employers, health services, and community organisations. Participants will receive up to 12 months support if they are out of work, however it can also support employed individuals who are at risk of falling out of work due to the barrier they face. There is a strong emphasis on integration, quality, and outcomes, Connect to Work aims to reduce economic inactivity, improve wellbeing, and boost inclusive growth across the region.

# Aspiration C:

## Person Centred Approach



### Commitment 1

Promote a multidisciplinary and holistic approach to addressing the work and health needs of each person with a long-term health condition or disability, supporting them to start, stay and succeed in work.

We heard from stakeholders that there is support available to help people to start, stay and succeed in work. This includes health related support, for example physiotherapy and mental health support, Department of Work and Pensions (DWP) programmes, training and development including careers guidance, and support provided by voluntary and community sector organisations.

Not everyone knows about all this support or how to access it. This commitment **aims to raise awareness of the full range of multidisciplinary support available for work/health professionals and employers, including signposting support available to employees and those seeking employment.**

We will also look to **improve the co-location of services, building on the current DWP initiative in Maidstone by locating job coaches in GP practices.**

In this way professionals can work with people in a multidisciplinary and holistic way to build the programme which meets their needs and supports them in the most appropriate way, coordinating a bespoke solution from the full range of support available.







# Aspiration C:

## Person Centred Approach

### Commitment 2

Promote flexible working options and reasonable adjustments which take account of the needs of people alongside business requirements.

This commitment focuses on **maximising the potential of flexible working opportunities within the bounds of organisational and the operational needs of businesses** to provide opportunity for those with long-term health conditions and disabilities. For example, this could be to attend appointments, undertake treatment or to take breaks as necessary while bearing in mind the operational needs of the employer.



Making reasonable adjustments to a person's work is a requirement for those in employment with a disability. **Reasonable adjustments and workspace accessibility should be used effectively to enable people with long-term conditions and disabilities to start, stay and succeed in work.** Including maximising potential from the Access to Work scheme.

The fit note has an option to record that a patient 'may be fit for work taking into account the following advice' and then offers the option of a 'phased return to work', 'altered hours', 'amended duties' or 'workplace adaptations'. **Broadening the use of this option has the potential to enable more people with long-term conditions and disabilities to stay in work.** We know that once people have left the workplace it becomes increasingly harder for them to return.



# Aspiration C:

## Person Centred Approach

### Commitment 3

Build current and prospective employee confidence in their capability and competence to engage in meaningful work that is appropriate to their circumstances and to be able to seek support when needed.

Taking the step to engage in work can be a significant one and a poor experience can have devastating consequences. This commitment seeks to ensure **that job descriptions reflect the expectations of the role accurately, giving applicants clear expectations of the role.**

We will facilitate success through programmes including **Connect to Work, work experience and work trials and IPS, set out in the Harm to Hope Strategy<sup>23</sup>.**

**Well-paced, tailored transition into work will be promoted and a focus on developing resilience to navigate challenges associated with the long-term health condition or disability. Advantages of peer support and mentoring opportunities will be incorporated as appropriate.**

**We will work with the voluntary sector to help encourage volunteering opportunities,** which can be a good precursor to paid work and provide valuable experience for CVs and applications.

**Anchor institutions must lead the way** in providing supported, safe environments for people with long-term health conditions and disabilities to gain experience in employment and build their confidence. **An inclusive culture will also be promoted** which mitigates against stigma and builds confidence of all employees.



# Aspiration C: Person Centred Approach



Case Study -

# Aspiration D:

## Healthy, Thriving Workforce



The aspiration takes a preventive approach to health and wellbeing, aiming to minimise deterioration of long-term health conditions and disabilities, and supporting the wider workforce to remain in good physical and mental health.

Presenteeism, where people attend work while not being productive due to illness or other factors has a greater impact on productivity than absenteeism<sup>26</sup>. This is a significant factor in reduced productivity for organisations and businesses.

To help employees stay fit and well, employers will be encouraged to promote healthy eating and physical activity and the management of stress to mitigate risks to mental health. We will promote access to support to stop smoking and maintain a healthy weight.

A collaborative approach across the system is proposed, this includes partnership working and connecting with expertise on healthy food, fuel poverty, housing and the cost-of-living crisis.

A life stage approach is proposed, acknowledging and making provision for key periods of a person's life which present new challenges, for example pregnancy, menopause and ageing within the workforce.



# Aspiration D:

## Healthy, Thriving Workforce



### Commitment 1

Engender a culture in which employer and employee take a proactive approach to promoting good physical and mental wellbeing at work.

Physical activity is key to good physical and mental health and wellbeing. Lives are becoming more sedentary, compounded by the increase in virtual working and a disproportionate amount of time sitting. This commitment promotes that **where business allows; employees should be allowed the flexibility to take breaks to move around, make use of adjustable desks and encouraged to use active means of travel.**

Overweight and obesity is a significant risk factor for conditions such as diabetes, musculoskeletal problems and cardiovascular disease. **Employees should be provided with opportunity to access healthy food, including in work-based food offers. Signposting and support to access healthy weight programmes and information should be available.**

There is still work to do to reduce smoking rates across Kent and Medway, particularly for those in routine and manual jobs. Smoking is a significant risk factor for cancers and cardiovascular disease. There are a range of high-quality **stop smoking services across Kent and Medway and these should be signposted and accessible to staff.**

Organisational and job design, leadership and workload if not managed well can all have a stressful impact on employees. **A focus on managing these well, for example moments to pause, will be taken to achieve a positive impact on employee mental wellbeing and work life balance. Simple solutions can often be effective including quiet spaces for wellbeing breaks and peer support networks.**



# Aspiration D:

## Healthy, Thriving Workforce



### Commitment 2

Collaborate within and beyond organisations to mitigate the impact of the wider determinants of health and inequalities, e.g. healthy food, fuel poverty, housing.

We know the combined impact of the wider determinants of health comprise 80% of the factors that impact on a person's overall health compared to 20% from clinical factors. This was further highlighted by stakeholders who mentioned housing, transport, and being able to work whilst waiting for treatment influences how a person can engage in meaningful work.



Image credit: Ebbsfleet Development Corporation

Recognising this strategy's scope, this commitment **seeks to ensure employees are signposted in a timely way to a range of appropriate support linked to the challenges of the cost of living and benefits.**

Poor living conditions can exacerbate existing long-term health conditions and disabilities or cause conditions to develop. It is important that **people know how to access support for fuel poverty aligned to the cost of living or more general housing queries** for example linked to properties with damp and mould.

We will also contribute to **transport consultations and looking creatively at how people can be supported with transport and travel and making the most of the Access to Work Scheme.**

# Aspiration D:

## Healthy, Thriving Workforce



### Commitment 3

A life stage approach which considers the impact of different life phases on people at work, e.g. menopause and an ageing workforce.

There are stages in a person's life which bring specific challenges. This commitment recognises those periods and seeks to support employers and employees to manage them whilst remaining engaged in the workforce.

We know that 1 in 10 women leave the workforce due to menopause<sup>27</sup>. There is opportunity **to make training and resources available so that employers and employees have greater understanding of the impact of menopause and adjustments to ease the impact.**

During and since the COVID-19 pandemic there has been a trend of people taking early retirement and leaving the workforce prior to their normal retirement date. This has impacted on the size, and experience of the overall workforce. **Accommodating the needs of the ageing workforce looking for a different work life balance can ensure that these skills and experience are retained.**



# Aspiration D: Healthy, Thriving Workforce



Case Study -



# Links to other Strategies, Plans and Frameworks



This Work and Health Strategy links to and supports a number of strategies, plans, and frameworks across Kent and Medway.

Education in Kent 2025-2030

From Harm to Hope – Kent’s Drug and Alcohol Strategy 2023 - 2028

Kent and Medway Housing Strategy 2025 – 2030

Kent and Medway Learning Disability and Autism

Kent Environment Strategy 2024

Kent SEND Strategy 2025 - 2028

Local Transport Plan 5 – Striking the Balance - KCC

Medway Council Education Strategy

Medway Council Workforce Strategy

Medway Housing Strategy to 2030

NHS Kent and Medway People Strategy

Our People Strategy 2022-27 – KCC

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# Glossary

Term	Definition
<b>Access to Work Scheme</b>	Access to Work is a publicly funded employment support programme that aims to help more disabled people start or stay in work. It can provide practical and financial support if you have a disability or physical or mental health condition.
<b>Anchor Institutions</b>	Refers to large, typically non-profit, public-sector organisations whose long-term sustainability is tied to the wellbeing of the populations they serve.
<b>Connect to Work</b>	Announced in the Autum 2024 budget, the new supported employment programme will be delivered by local authorities (KCC for Kent) working closely with the health service, offering up to 12 months intensive employment support to disabled people, those with health conditions and those with other non-health complex barriers to employment.
<b>Department for Work and Pensions (DWP)</b>	Is responsible for welfare, pensions and child maintenance policy. It administers the State Pension and a range of working age, disability and ill health benefits.
<b>Disability</b>	The law says someone is disabled if both of these apply: <ul style="list-style-type: none"> <li>• they have a "physical or mental impairment"</li> <li>• the impairment "has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities".</li> </ul>
<b>Disability Confident Scheme</b>	Disability Confident is creating a movement of change, encouraging employers to think differently about disability and take action to improve how they recruit, retain and develop disabled people.
<b>Economic Inactivity</b>	People not in employment who have not been seeking work within the last 4 weeks and/or are unable to start work within the next 2 weeks.

# Glossary

Term	Definition
<b>Employee</b>	A person who has agreed to be employed to work for some form of payment under a contract of employment. In this strategy the term employee is also used to represent those who work in a voluntary capacity.
<b>Fit Notes</b>	Healthcare professionals' issue fit notes to people to provide evidence of the advice they have given about their fitness for work. They record details of the functional effects of their patient's condition so the patient and their employer can consider ways to help them return to work.
<b>Individual Placement Support (IPS)</b>	Employment support service integrated within community mental health teams for people who experience severe mental health conditions.
<b>Long-term Health Condition</b>	People that cannot, at present, be cured, but people living with these conditions can be supported to maintain a good quality of life.
<b>Kent and Medway Integrated Care Partnership (ICP)</b>	A partnership of organisations that come together to plan and deliver joined up health and care services to improve the lives of people across Kent and Medway.
<b>Occupational Health</b>	Occupational health is an area of work in public health to promote and maintain highest degree of physical, mental and social well-being of workers in all occupations.
<b>Strategic Partnership for Health and Economy (SPHE)</b>	A multiagency group that brings together relevant partners across Kent and Medway to drive improvement in shared economic and health outcomes. Reports to the ICP and KMEP.
<b>Small and Mediums Size Businesses (SMEs)</b>	SME: Fewer than 250 employees and turnover lower then €50. Small SME: Fewer than 50 employees and a turnover lower than €10 million. Micro SME: Fewer than 10 employees and a turnover lower than €2 million.