

# ‘Lles mewn Gwaith’

# ‘Wellness in work’

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Canolfan Economeg Iechyd a Gwerthuso Meddyginaethau

# Cyflogaeth yng Nghymru

- Ym mis Ebrill 2024, roedd 1.41 miliwn o bobl yn cael eu cyflogi yng Nghymru. Mae 69% o bobl 16-64 oed mewn rhyw fath o gyflogaeth ar hyn o bryd.
- Rydym wedi gweld nifer sylweddol o bobl yn gadael ac yn methu ag ailymuno/atos yn y gweithlu yng Nghymru yn ystod ac ar ôl y pandemig COVID-19.
- Mae cyfradd yr anweithgarwch economaidd (y rhai heb swydd ac nad ydynt wedi mynd ati i chwilio am waith a/neu sydd ar gael i ddechrau gweithio) wedi parhau'n uwch na chyfartaledd y DU, gyda chynnydd sylweddol ers mis Awst 2023.
- Mae 543,000 (28.4%) o bobl o oedran gweithio allan o waith yng Nghymru ar hyn o bryd.

# Employment in Wales

- As of April 2024, 1.41 million people were employed in Wales. 69% of people aged 16-64 are currently in some form of employment.
- We have observed a considerable number of people exiting and failing to rejoin/remain in the Welsh labour force during and following the COVID-19 pandemic.
- The rate of economic inactivity (those without a job and have not actively sought work and/or are available to start work) has persisted above the UK average, with a significant increase since August 2023.
- 543,000 (28.4%) working-age people are currently economically inactive in Wales.

# Pam?



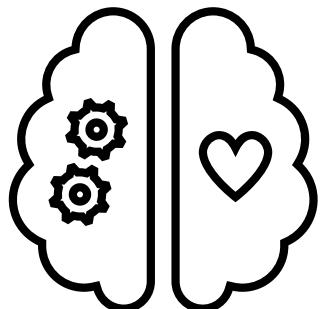
- Salwch hirdymor yw'r rheswm mwyaf cyffredin dros anweithgarwch economaidd yng Nghymru ymhlið dynion a menywod.
- Ar lefel y DU, nododd 36% o ymatebwyr Arolwg Llafurlu 2023 bod ganddynt o leiaf un cyflwr iechyd hirdymor (cynnydd o cynnydd o 5 Pwynt Canran ers 2019).
- O'r 1.8 miliwn o weithwyr yn y DU sy'n dioddef o salwch sy'n gysylltiedig â gwaith, mae 875,000 (49%) o achosion oherwydd straen, gorbryder neu iselder. (Diffinnir salwch sy'n gysylltiedig â gwaith fel salwch o ganlyniad i waith).
- Mae cyflyrau cyhyrysgerbydol yn ychwanegu 27% o achosion salwch sy'n gysylltiedig â gwaith.

# Why?



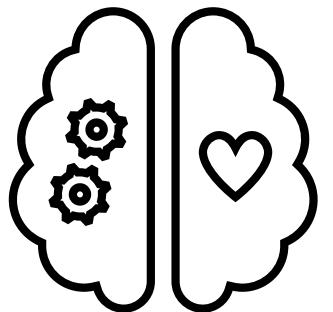
- Long-term sickness is the most common reason for economic inactivity in Wales across men and women.
- At the UK level, the Labour Force Survey 2023 saw 36% of respondents reporting having at least one long-term health condition (an increase of 5 Percentage Points since 2019).
- Of the 1.8 million UK workers suffering from work-related ill health, 875,000 (49%) of cases are attributed to stress, anxiety or depression. (Work-related ill health is defined as ill health as a result of work).
- Musculoskeletal conditions constitute an additional 27% of work-related ill-health cases.

# Iechyd Meddwl



- Mae iechyd meddwl yn costio £7.2 biliwn y flwyddyn i Gymru.
- Mae problemau iechyd meddwl cyffredin fel gorbryder, iselder a straen na ellir ei reoli yn effeithio ar un o bob chwe gweithiwr yng Nghymru bob flwyddyn (Belloni et al., 2022).
- Dros y DU, gwelir y cyffredinolrwydd uchaf o achosion iechyd meddwl cysylltiedig â gwaith yn y sector gweithgareddau iechyd dynol a gwaith cymdeithasol (3,530 fesul 100,000 o weithwyr).
- Roedd cyfanswm y diwrnodau gwaith a gollwyd oherwydd straen, iselder neu gorbryder yn gysylltiedig â gwaith yn 17.1 miliwn o ddiwrnodau yn 2022/23. Ar sail pob achos, mae hyn yn tua 20 diwrnod a gollwyd fesul achos: dros 54% o'r holl ddyddiau gwaith a gollwyd.

# Mental Health



- The costs of mental health in Wales are estimated at £7.2 billion per year.
- Common mental health problems such as anxiety, depression and unmanageable stress affect one in six employees in Wales each year (Belloni et al., 2022).
- Across the UK, the highest prevalence of self-reported work-related mental health is observed in the human health and social work activities sector (3,530 per 100,000 workers).
- Working days lost due to work-related stress, depression or anxiety totalled 17.1 million days in 2022/23. On a per case basis, this equates roughly to 20 lost days per case: over 54% of all working days lost.

# Adroddiadau Lles mewn Gwaith CHEME

- Mae CHEME wedi ysgrifennu dau adroddiad ar Les mewn Gwaith yng Nghymru.
- Roedd yr adroddiad cyntaf (2019) yn cyflwyno dadleuon economaidd dros fuddsoddi mewn iechyd a lles y gweithlu yng Nghymru. Ariennir y gwaith gan Iechyd Cyhoeddus Cymru.
- Cymraeg: <https://cheme.bangor.ac.uk/documents/Wellness-Work-Welsh-Report.pdf>
- Yr ail adroddiad (2023) yw adolygiad o'r dystiolaeth economaidd ynghylch cymorth i bobl mewn gwaith a chynorthwyo pobl i ddychwelyd i'r gweithlu. Wedi paratoi ar y cyd â chydweithwyr a chyfranogwyr cyhoeddus o Ganolfan Dystiolaeth Ymchwil Iechyd a Gofal Cymru, Iechyd Cyhoeddus Cymru a Llywodraeth Cymru.
- Saesneg yn unig ar hyn o bryd: <https://doi.org/10.1101/2024.01.17.23300197>

# CHEME Wellness in work Reports

- CHEME have conducted two unique reports concerning Wellness in Work in Wales.
- The first report (2019) presented economic arguments for investing in the health and well-being of the workforce in Wales. The work was funded by Public Health Wales.
  - English: <https://cheme.bangor.ac.uk/documents/Wellness-in-Work-Report.pdf>
- The second report (2023) is a review of the economic evidence concerning support for people in work and assisting people to return to the workforce. Conducted in collaboration with colleagues and public contributors from the Health and Care Research Wales Evidence Centre, Public Health Wales and Welsh Government.
  - English only at present: <https://doi.org/10.1101/2024.01.17.23300197>

# Adroddiad Lles mewn Gwaith 2023

- Cynhaliwyd chwiliad cyflym o'r llenyddiaeth sydd wedi'i gyhoeddi i nodi tystiolaeth economaidd ar raglenni neu ymyriadau a gynlluniwyd i alluogi gweithwyr i aros yn neu ddychwelyd i'r gweithlu.
- Adnabyddwyd 76 o bapurau a'u cynnwys yn yr adolygiad.
- Roedd yr astudiaethau a nodwyd yn adrodd ar raglenni neu ymyriadau a gynlluniwyd i gynorthwyo gweithwyr i oresgyn cyflyrau iechyd meddwl cyffredin; cyflyrau iechyd meddwl difrifol; brechiadau ffliw; defnyddio cyffuriau anghyfreithlon; ysmygu a fêpio; bwyta'n iach ac ymarfer corff.

# 2023 Wellness in Work report

- We conducted a rapid search of the published literature to identify economic evidence on programmes or interventions designed to enable employees to remain in and/or return to the workforce.
- 76 papers were identified and included in the review.
- Identified studies reported on programmes or interventions designed to assist employees overcome common mental health conditions; severe mental health conditions; influenza vaccination; illicit drug use; smoking and vaping; healthy eating and physical activity.

# Canfyddiadau Allweddol

- Mae tystiolaeth o ansawdd uchel y dangos bod ymyriadau yn y gweithlu ar gyfer gweithwyr sydd mewn perygl o ddioddef anhwylderau iechyd meddwl cyffredin yn arbed costau i fusnesau a'r sector iechyd a gofal cymdeithasol.
- Mae tystiolaeth o ansawdd uchel ar gael ar gost-effeithiolrwydd ymyriadau sy'n canolbwytio ar fwyta'n iach a gweithgaredd corfforol yn y gweithle.
- Mae tystiolaeth gymysg bod ymyriadau ar gyfer gweithwyr ag arthritis neu gyflyrau cyhyrysgerbydol eraill yn gost-effeithiol o gymharu â gofal arferol (triniaeth fel arfer).

# Key findings

- There is high quality evidence that interventions in the workforce for employees at risk of common mental health disorders can be cost saving for businesses and the health and social care sector.
- There is high quality evidence on the cost-effectiveness of interventions focusing on healthy eating and physical activity in the workplace.
- There is mixed evidence that interventions for employees with arthritis or other musculoskeletal conditions are cost-effective compared to usual care (treatment as usual).

# Canfyddiadau Allweddol: Iechyd Meddwl

- Roedd yr ymyriadau a nodwyd i hybu iechyd meddwl a lles yn y gweithlu yn cynnwys:
- **Tufts Be Well at Work:** ymyriad tele-iechyd sy'n darparu cymorth iechyd meddwl wedi'i deilwra i weithwyr sy'n byw gydag iselder yn yr UDA. Roedd yr ymyriad yn effeithiol o ran gwella effeithlonrwydd, gyda chostau rhedeg isel a chynhyrchodd elw ar fuddsoddiad (ROI) (Lerner et al., 2021).
- **RESPECT:** rhaglen hyfforddi iechyd meddwl wyneb yn wyneb i reolwyr yn Awstralia i ddeall iechyd meddwl gweithwyr yn well. Lleihauodd y rhaglen absenoldeb yn y gweithle a chynhyrchodd ROI o £10 am bob £1 a wariwyd (Milligan-Saville et al., 2017).
- Mae dystiolaeth yn awgrymu y **gallai mentrau atal sylfaenol ar draws y sefydliad** gynnig mwy o ROI nag ymyrraeth 'adweithiol' yn ddiweddarach (e.e., atal eilaidd neu drydyddol), o gymharu â thriniaethau iechyd meddwl seico-gymdeithasol wedi'u targedu ar gyfer iselder (Deloitte, 2022).
- Gall hybu lles meddwl gweithwyr gynhyrchu budd economaidd net pwysig a chynhyrchu enillion ariannol o tua £100 miliwn y flwyddyn i'r DU (National Institute for Health and Care Excellence, 2022b).

# Key findings: Mental Health

- Interventions identified to promote mental health and well-being in the workforce included:
  - **Tufts Be Well at Work:** a telehealth intervention delivering tailored mental health support to employees living with depression in the USA. The intervention was effective in improving productivity and incurred low running costs and generated a positive return on investment (ROI) (Lerner et al., 2021).
  - **RESPECT:** a face-to-face mental health training programme for managers in Australia to better understand employee mental health. The programme reduced workplace absenteeism and generated an ROI of £10 for every £1 spent (Milligan-Saville et al., 2017).
  - Evidence suggests **organisation-wide primary prevention initiatives** may offer a greater ROI than 'reactive' intervention at a later stage (e.g., secondary, or tertiary prevention), compared with targeted psycho-social mental health treatments for depression (Deloitte, 2022).
  - Promoting employee mental well-being can produce important net economic benefit and produce financial gains, of the order of £100 million per annum for the UK (National Institute for Health and Care Excellence, 2022b).

# Canfyddiadau Allweddol: Bwyta'n iach

- Roedd yr ymyriadau a nodwyd i hybu **bwyta'n iach a gweithgaredd corfforol** yn y gweithlu yn cynnwys:
  - **Fuel Your Life.** Canfuwyd bod rhaglen rheoli pwysau safle gwaith yn gost-effeithiol wrth weithio efo grŵp bach, ond nid felly pan gaiff ei gynnal ar sail un-i-un (Corso et al., 2018)
  - Nododd dau werthusiad economaidd gost-effeithiolrwydd **rheoli siwgr yn y gweithle** (Basu et al., 2020; Fitzgerald et al., 2018).
  - Canfu ymyriadau a oedd yn **targedu gostyngiad mewn amser eistedd a chynyddu gweithgarwch corfforol** (desgiau eistedd-sefyll a rhaglenni ymarfer corff i staff) bod cynnydd cymedrol mewn cynhyrchiant a llai o boen yng ngwaelod y cefn, llai o absenoldeb, gwelliant lles meddyliol a cholli amser gwaith, yn y drefn honno.

## Key findings: Healthy eating

- Interventions identified to **promote healthy eating and physical activity** in the workforce included:
  - The **Fuel Your Life** worksite weight management programme was found to be cost-effective when implemented as a small group, but not so when conducted on a one-to-one basis (Corso et al., 2018)
  - Two economic evaluations reported cost-effectiveness of **workplace sugar control** (Basu et al., 2020; Fitzgerald et al., 2018).
  - Interventions targeting a **reduction in sitting time and increasing physical activity** (sit-stand desks and employee exercise programmes) found modest increases in productivity and reduced lower back pain, reduced absenteeism, improved mental wellbeing and lost work time, respectively.

# Canfyddiadau Allweddol: Cyhyrysgerbydol

Roedd yr ymyriadau a nodwyd i **gefnogi gweithwyr â chyflyrau cyhyrysgerbydol ac arthritis rhiwmatoid yn cynnwys:**

- Dadansoddiad cost a budd o ymyriad dychwelyd i'r gwaith ar gyfer gweithwyr asiantaeth dros dro a gweithwyr diwaith a oedd ar restr salwch oherwydd anhwylderau cyhyrysgerbydol yn yr Iseldiroedd. Canfu er bod y rhaglen yn fwy effeithiol a bo ganddi'r **potensial i gyflawni cyfraniad cynaliadwy gan weithwyr agored i niwed i'r gweithlu**, roedd hefyd **yn ddrutach na gofal arferol** (Vermeulen et al., 2013).
- Ni chynhyrchodd gwerthusiad economaidd o ymyriad yn y gweithle i wella cynhyrchiant ymhlieth gweithwyr ag arthritis rhiwmatoid ganlyniadau economaidd cadarnhaol. Roedd y canfyddiadau'n dangos bod yr ymyriad **yn fwy costus ac yn llai effeithiol o'i gymharu â'r grŵp gofal fel arfer** (Noben et al., 2017).

# Key findings: Musculoskeletal

Interventions identified to support workers with musculoskeletal conditions and rheumatoid arthritis included:

- A cost-benefit analysis of a participatory return to work intervention for temporary agency and unemployed workers sick-listed due to musculoskeletal disorders in the Netherlands indicated that although the programme was more effective and had the **potential to achieve a sustainable contribution of vulnerable workers to the labour force**, it was also **more costly than usual care** (Vermeulen et al., 2013).
- An economic evaluation of a workplace intervention to improve productivity among workers with rheumatoid arthritis **did not produce positive economic outcomes**. Findings indicated that the intervention was **more costly and less effective when compared to the care as usual group** (Noben et al., 2017).

# Gweithlu Iechyd a Gofal

- Y gweithlu iechyd a gofal cymdeithasol yw'r mwyaf yn economi Cymru, yn cyflogi dros 180,000 o unigolion. Mae cyfran sylweddol o'r gweithlu iechyd a gofal cymdeithasol yn fenywod, ac mae'r gweithlu'n heneiddio. Roedd bron i 40% o'r gweithlu iechyd a gofal cymdeithasol dros 50 oed yn 2020, cynnydd graddol o ddim ond 29% yn 2009.
- Wrth i alwadau ar y GIG yng Nghymru godi, mae pwysau llwyth gwaith ar weithwyr iechyd a gofal cymdeithasol yn cynyddu. Mae gorweithio ('burnout') yn gysylltiedig â materion reciwtio a chadw yn y gweithlu gofal iechyd (Galleta-Williams et al., 2020).
- Ym mis Medi 2023, amcangyfrifwyd bod 6,075 o swyddi gwag cyfwerth ag amser llawn ar draws GIG Cymru (nid yw hyn yn cynnwys contractwyr gofal sylfaenol fel Meddygon Teulu ac ymarferwyr deintyddol y GIG). Mae'n dangos galw sylweddol heb ei ddiwallu yn reciwtio GIG Cymru.

# Health and Care Workforce

- The health and social care workforce are the largest in the Welsh economy, employing over 180,000 individuals. A substantial proportion of the health and social care workforce are women, and the workforce is aging. Nearly 40% of the health and social care workforce were aged over 50 in 2020, a gradual increase from just 29% in 2009.
- As demands on the NHS in Wales rise, workload pressures on health and social care workers increase. Burnout is intricately linked to recruitment and retention issues in the health care workforce (Galleta-Williams et al., 2020).
- As of September 2023, there were 6,075 FTE vacancies across NHS Wales (this does not include primary care contractors such as General Practitioners and NHS dental practitioners). Indicating considerable unmet demand in NHS Wales recruitment.

# Bylchau ymchwil

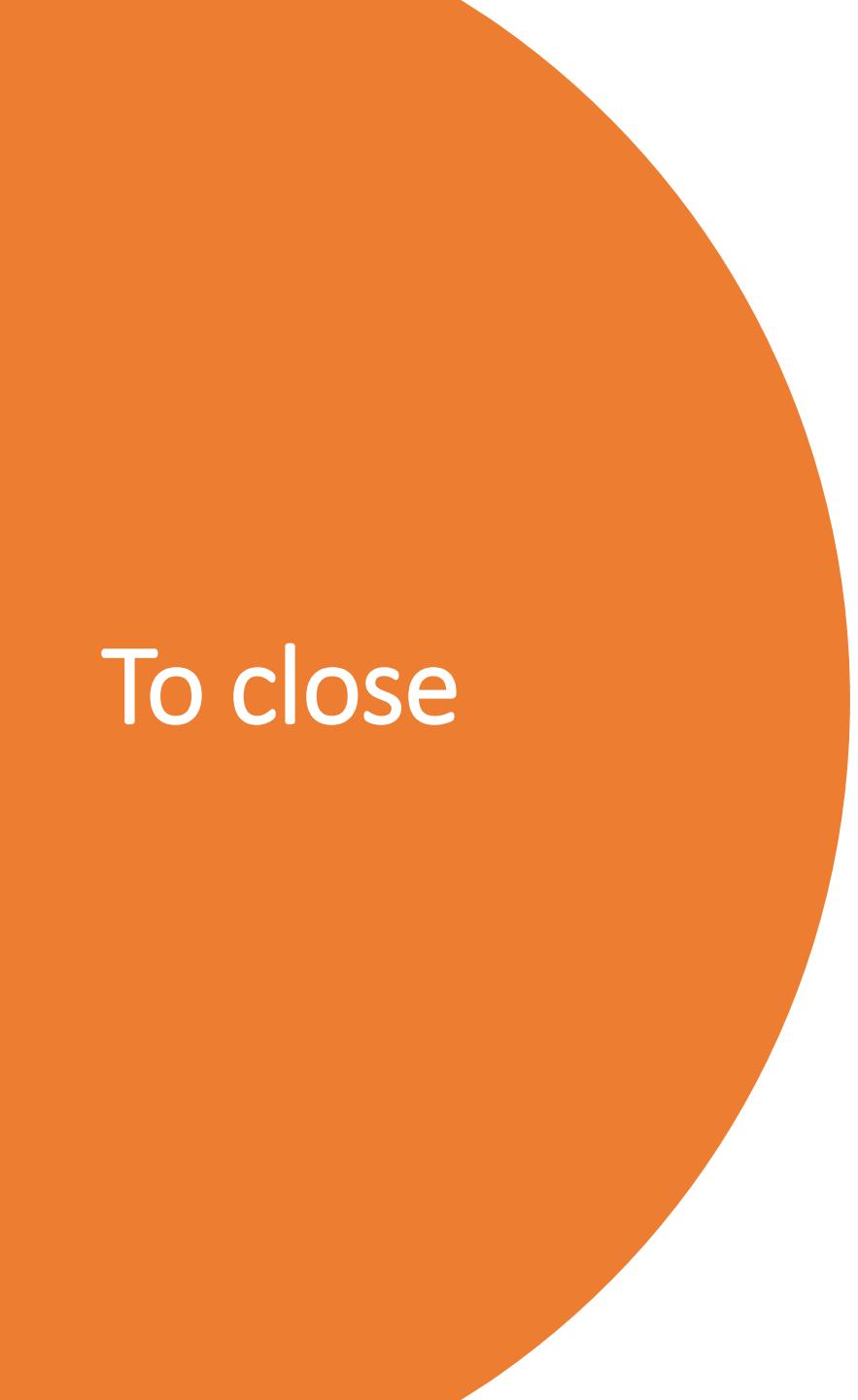
- Ni nododd ein hadolygiad dystiolaeth ynghylch **canlyniadau ymhliith gweithwyr hŷn sy'n dymuno ailymuno â'r gweithlu**, ond mae dystiolaeth sy'n awgrymu y gallai diweithdra gael effeithiau niweidiol ar lesiant pobl hŷn oherwydd colli cysylltiadau cymdeithasol, ysgogiad meddyliol, hyder, cael eu gwerthfawrogi a gwneud cyfraniad cadarnhaol i gymdeithas.
- Prin yw'r dystiolaeth ynghylch **canlyniadau cynhyrchiant ymhliith menywod o oedran y menopos** a menywod â chyflyrau fel endometriosis.
- Mae bwlch dystiolaeth ynghylch **niwroamrywiaeth yng Nghymru**. Anawsterau dysgu difrifol neu benodol ac awtistiaeth yw'r anableddau sydd â'r cyfraddau cyflogaeth isaf yng Nghymru. Nid yw 70% o'r boblogaeth ag awtistiaeth yn y TU mewn cyflogaeth.

## Research gaps

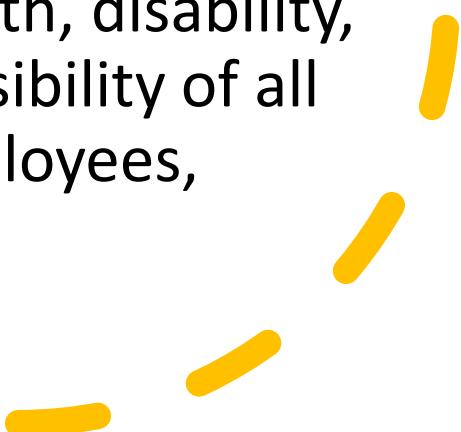
- Our review did not identify evidence regarding **outcomes among older employees wishing to re-enter the workforce**, but there is convincing evidence to suggest that worklessness may have detrimental effects on the well-being of older people due to missing social connections, mental stimulation, confidence, being valued and making a positive contribution to society.
- There is limited evidence regarding **productivity outcomes among women of menopausal age** and women with conditions such as endometriosis.
- There is an evidence gap concerning **neurodiversity in Wales**. Severe or specific learning difficulties and autism are the disabilities with the lowest employment rates in Wales. 70% of the population with autism in the UK are not in employment.

# I gloi

- Canfu llawer o'r gwerthusiadau economaidd sydd wedi'u cynnwys yn yr adroddiad hwn fod manteision ariannol i ymyriadau yn ymwneud â chymorth i bobl mewn gwaith a chynorthwyo pobl i ddychwelyd i'r gweithlu.
- Roedd manteision i'r **cyflogwr** yn deillio o **lai o absenoldeb** a chynnydd mewn **effeithlonrwydd**.
- Daeth manteision cymdeithasol ehangach i'r amlwg yn sgil **llai o faich** ar y system gofal iechyd a **lefelau cyflogaeth uwch**.
- Mae atal afiechyd y gellir ei osgoi, anabledd, a marwolaeth gynamserol yn gyfrifoldeb i bob un ohonom, gan gynnwys cyflogwyr a gweithwyr, trwy gynhyrchu gwell iechyd ar y cyd.



To close

- Many of the economic evaluations included in this report found that there were monetary benefits to interventions concerning support for people in work and assisting people to return to the workforce.
  - Benefits to the **employer** arose from **reduced absenteeism** and **productivity** increases.
  - Wider societal benefits manifested in **reduced burden** on the healthcare system and **increased employment levels**.
  - The prevention of avoidable ill-health, disability, and premature death is the responsibility of all of us, including employers and employees, through co-produced better health.
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Diolch yn fawr  
iawn!

- Unrhyw gwestiynau? Any questions?
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