

# CASE STUDY

## BIRMINGHAM CITY COUNCIL: PROMOTING AND PROTECTING WELLBEING

Local authority public health specialist teams have been at the heart of the COVID-19 response, working long hours, under high pressure for many weeks. Birmingham City Council took a targeted approach to supporting the mental health and wellbeing of this team through the pandemic.

### Introduction

The public health division at Birmingham City Council is a multi-disciplinary specialist function which has expanded from around 60 whole-time equivalent (WTE) employees to 130 WTE through the last 18 months. This includes a new functional unit to support the COVID-19 response from July 2020.

Public Health has been at the heart of the acute and strategic response to the pandemic. In March 2020 the division shifted into an emergency cell structure working in a rota/shift pattern and almost all 'business as usual' activity halted. There was significant burden on the senior specialist members of the team, especially the Director of Public Health, who covered the seven days a week 'out of hours' response and function.

The Director of Public Health asked for support from the Council's health and wellbeing team developing a multi-strand intervention, including a clinical psychology option, to support the mental wellbeing of the division and avoid burnout.

### What Birmingham City Council did

The corporate health and wellbeing team recognises that the pandemic has brought about

further stressors in employee lives, including bereavement and grief; domestic abuse; anxiety from catching the virus; financial security concerns and a sudden shift from office to home-working.

To capture colleagues' feelings, stressors affecting their lives and support needed, two employee health and wellbeing surveys were launched in June 2020 and January 2021. This drew on the [BITC toolkit on health and wellbeing](#). The data insights and subsequent response to the surveys included setting up an employee domestic abuse safe space; creating the four pillars of mental health support (Employee Assistance Programme, Mental Health First Aiders, Occupational Health, and Chaplains); offering free HSBC financial health checks for colleagues; launching manager training on mental health support for team members and the menopause and supporting the peer-to-peer employee networks, including the Working Carers Network, as 25% of respondents identify as carers. Results were presented to directorate management teams – including the public health team – to highlight divisional survey results and data insights.

The Public Health Division put in place additional measures to support colleagues, including a PH Kitchen space on Teams to promote social



interaction, a monthly divisional quiz night and a 'Good Place' sharing space for positive news/interest items. Mood elevator check-ins were used at divisional meetings to help keep a running track of mood across the team.

Additional occupational psychological support was put in place for colleagues, 1-2-1 support was put into place for Directors and Assistant Directors and four groups were established for monthly facilitated group therapeutic support for four months between November and February.

The Director of Public Health sent out a weekly 'Monday Message' to the division focused on sharing wellbeing and learning tips and this included a lot of signposting to mental wellbeing support as well as celebrating contributions from different colleagues.

## Impact

Throughout the pandemic, sickness absence rates have remained stable within the Public Health division which, given the circumstances and additional pressures, is positive. Also, the overall mental wellbeing of the team captured through the surveys did not deteriorate, although levels of anxiety remained persistently higher than other wellbeing measures.

The attendance at the group sessions was good and only one session had less than 100% attendance. Individuals remained within the same therapeutic group for the duration of the programme. Several members built on the experience of the group work to request individual therapeutic support and access other services.

One participant said:

**"WITHOUT THIS, I DON'T THINK I WOULD HAVE EVER MANAGED THE PANDEMIC. BEING PART OF THE GROUP HAS HELPED ME SHARE AND LEARN WITH OTHERS AND ALSO HELPED ME UNDERSTAND MY OWN MENTAL WELLBEING BETTER."**

The individual sessions for senior staff were particularly well received and individuals reported them as 'life-saving' in providing a safe, clinically supported space to unpack and process the pressures of leading teams through the pandemic response – particularly as technical expert leads in unprecedented times.

The Director of Public Health held weekly 'Yam Jams' on Yammer with staff across the organisation and spoke openly about the impact of the pandemic on his personal health and mental wellbeing, which was incredibly powerful and well received by colleagues.

The strong emphasis across the Council on mental wellbeing and support for personal health and wellbeing has been very positive and created an environment of open conversation on the subject. Building on this experience, the Public Health Division is commissioning a structured group programme with occupational psychology support for anxiety management to pilot over the early summer.

## Call to action

When a crisis shifts to being a new reality, investing time and space in supporting mental wellbeing and resilience is time well spent and pays back in productivity and staff survival, therefore thinking about and taking preemptive action is worth doing.

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