



Report Title	Health and Wellbeing Plan 2025/26 Closing Report	
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Previous committees/groups	<p>Health and Wellbeing Group –18 November 2025 Engagement Session</p> <p>People and Culture Group – 18 December 2025</p> <p>People Committee – 20 January 2026</p> <p>Trust Executive Group (TEG) – 21 January 2026</p> <p>Health & Wellbeing Group – 17 February 2026</p>	
Recommended action(s) (assurance, approval, information)	Information and Assurance.	
Purpose of the paper	To provide assurance on the final delivery status of the 2025/26 Trust Health and Wellbeing Plan.	
Executive Summary		
<ul style="list-style-type: none"> • The report assures the Trust Board of the strong year-end progress made against the 2025/26 Trust Health and Wellbeing Plan, supporting the YAS Strategy’s ‘Our People’ ambition. • The plan, shaped by stakeholder consultation, focuses on personal and professional wellbeing, with nine approved priorities supported by two sub-plans. • Delivery against the priorities will end the year on track except for one. Reducing trust absence levels has remained challenge with top two long term absence reasons this year related to stress/anxiety/depression and musculoskeletal issues. • Staff engagement and participation in wellbeing initiatives have increased, with positive feedback and improved health metrics reported. • Work against the pilot internal immunisations programme and future of Occupational Health (OH) is progressing at pace with the view to having the new model in place for April 2027, one year ahead of the approved timescale. • Increased quality of referrals and financial savings across the OH contract continue to be achieved through localised engagement and increased awareness. Work continues in this area to further drive effectiveness and efficiencies. • Risk remains around high sickness absence and associated costs. Data led deep dive work continues to understand the root cause of absences across the Trust which will form area focused workstreams for 2026/27. 		
Recommendation(s)	The Trust Board is asked to note the contents of the report, recognising the sustained and positive progress made against the planned priorities.	
Link to Board Assurance Framework Risks (board and level 2 committees only)	<p>2. Provide access to appropriate care.</p> <p>7. Support staff health and well-being effectively.</p>	

Health and Wellbeing Plan 2025/26 Closing Report

1.0 INTRODUCTION

- 1.1 This paper provides a closing summary of the successful progress made against the approved priorities as set out in the 2025/26 Trust Health and Wellbeing Plan.
- 1.2 Although this report was completed during Q4 on-going delivery phase, the outcomes detailed in the report against each priority consider the projected end position based on current trajectory.
- 1.3 The Board is asked to note the contents of this paper and recognise the sustained and positive progress that has been made to support the health and wellbeing of our staff.

2.0 BACKGROUND

- 2.1 The 2025/26 Trust Health and Wellbeing Plan was developed to support the delivery of 'Our People' ambition within the YAS Strategy, with the ambition to be a diverse and inclusive organisation with a culture of continuous improvement, where everyone feels valued, included, proud to work and can thrive.
- 2.2 The plan was developed using evidence and feedback gathered through consultation with a wide group of stakeholders including members of the Health and Wellbeing Group. The plan was approved at TEG, People and Culture Group and Trust Board with assurance at People Committee.
- 2.3 The approved plan focuses on two core themes aligned to the NHS England Health and Wellbeing Framework (personal health & wellbeing, and professional wellbeing support) covering a total of nine high level priorities with two of the priorities supported by sub-plans. The sub-plans focus on mental health and occupational health (OH) services engagement.
- 2.4 Delivery and progress against the approved plan have been monitored through the Health and Wellbeing Group meetings, held every other month.

3.0 PROGRESS AGAINST THE 2025/26 TRUST HEALTH AND WELLBEING PLAN

- 3.1 Despite a challenging year, positive progress has been made against the plan. Appendix A details the full plan with the respective measures of success and actual outcomes/outputs achieved to date.
- 3.2 Taking into consideration the progress to date against each of the nine priorities and the planned work in readiness for completion in March, the projected year end outlook against the plan looks strong, as detailed below. See Appendix A for more detail against each.

NHS Framework	Priority (Planning)	RAG STATUS
CORE OFFER		
PERSONAL HEALTH & WELLBEING	(1) To develop and deliver a mental health programme for staff to support their mental wellbeing by March 2026.	
	(2) To develop and deliver a physical fitness programme for staff to support their physical wellbeing by March 2026.	
	(3) Focus on prevention promoting self-care and campaigns to improve mental, physical, emotional and financial wellbeing from baseline working in collaboration with relevant stakeholders.	
	(4) To undertake, analyse and share the annual Health Needs Assessment in conjunction with stakeholders, to identify improvement areas by October 2025.	
IMPROVEMENT WORKS		
PROFESSIONAL WELLBEING SUPPORT	(5) To research and deliver an immunisation programme including a pilot across all academy sites by March 2027.	
	(6) Develop a needs-driven business proposal with a clear vision for the provision of Occupational Health services in YAS by March 2028.	
	(7) To support improvements to Trust sickness absence management from baseline (7.1% to 6.6%) by the end of 2025/26 financial year.	
	(8) To develop and implement a three-tiered approach to Wellbeing Support following the review of the Post Incident Care (PIC) ensuring accessibility to staff with RISE to be launched by July 2026.	
NEW OPPORTUNITIES		
PERSONAL HEALTH & WELLBEING	(9) To be an active member of the NHS Micro exercises pilot steering group and be involved in the proposed project MS Teams App Pleaz pilot for the period of January 2025 to March 2026.	

3.3 It is anticipated that priority 7 focused on trust absence levels will remain in ‘amber’ at year end point. Although the required actions against this as per the ‘OH awareness and engagement sub-plan’ have remained on track, the actual sickness levels for the trust remain high, hence the reason for capturing this as off-track (amber). The target for 2025/26 was to achieve a 0.5% reduction from a baseline of 7.1%. Although total sickness levels have been fluctuating this financial year, since September, sickness rates have remained high, rising from 6.8% in September to 9.3% in December, with January dropping slightly to 8.7% with a further reduction in February to 8.2%. Although a slight decline, the rates remain well-above the

threshold of 5% and the target of 6.6% which is concerning. The top two long term absence reasons have been anxiety/stress/depression/other psychiatric illnesses and other musculoskeletal problems, with top two short term absence reasons being gastrointestinal problems and cold, cough, flu.

- 3.4 Given the risks with the high absence levels, this is one of the three Trust priorities for 2026/27 business plan. A dual approach will now be led by the Absence Reduction Delivery Group: a project management office led programme focusing on reasonable adjustments, alternative duties and compassionate health conversations for managers, alongside a quality improvement led, data driven discovery phase initially targeting 6 stations (3 of the most challenged versus 3 with positive indicators that can provide comparative learning). More detail is provided on the upcoming work in this area within the 'Proposed 2026/27 Trust Health and Wellbeing Plan' paper.
- 3.5 Some of the successes achieved this year have included the successful launch and utilisation of monthly reflective spaces for all areas, with IUC, EOC and PTS sessions being widely used and benefiting staff. Positive feedback continues to be received where staff have accessed this. Although 999 Operations and Corporate drop-ins have also been set-up, the uptake has been minimal, more awareness to help increase utilisation is still required. Work will continue promoting this further with the option of remote drop-in sessions where required. Feedback from those who have accessed the sessions have included comments such as:

"I am made to feel comfortable, feel I am listened to and supported."

"Drop ins are extremely useful. Leonie is easy to talk to and has given me helpful advice."

- 3.6 Following the success of the 8-week pilot Personal Exercise Plan (PEP) approval was received from the Health and Wellbeing Group meeting on 29th July 2025 to embed and expand the offer more widely on a rolling basis. Since the approval, a new cohort of 14 individuals from PTS started the programme, this was delivered between September to October 2025. From the 14 PTS colleagues, 2 did not see the programme to its completion due to personal reasons, however despite this, fantastic results have been evidenced with individuals continuing their health and fitness journey. A third cohort focused on attracting 999 Operations colleagues started late January 2026 and is already seeing positive results.
- 3.7 Across both the pilot programme (working with EOC colleagues) and PTS staff the combined average weight loss per person was 13.6lbs, average step count increased from 5,000 to 10,644 with average sleep scores going up from 5.8 to 7.3. All participants stated a positive impact. Some comments received are detailed below:

"I feel slimmer, I look better. Shirts feel better and I feel like internally my body is better now. Defo would have helped with my fatty liver and helps with diabetic borderline reduction too...."

"...I frequently visit the gym now, mostly after a 12-hour shift without feeling exhausted. I have increased my running rate and pace, my blood sugar are significantly improved, and while I am not sure I can attribute this to the program, but my blood pressure has also stabilised for most the time."

“I feel a lot more energetic, and I can tell the difference with my size from the weight loss... I have a better relationship with foods too...”

“I am going to carry on and keep going so I can keep on track and fall into bad habits.”

“...I have been trying to lose weight for the last few years and got nowhere despite being good. Now I know about food composition, gym and the weight is coming off and my body shape changing.”

- 3.8 Delivery against the communications plan has been progressing well with several campaigns delivered to date including focus on stress and alcohol awareness, men’s health, sun/summer safety, suicide awareness, winter care and available support. A range of communication channels including social media have been used to promote awareness and engagement. This has included the use of Pulse, staff updates, posters, face-to-face engagement, YAS App, local area admin teams, Facebook, Health and Wellbeing Teams Channel and push via meetings and investment days.
- 3.9 The team successfully launched and analysed the results of the annual Health Needs Assessment which has been used to inform health and wellbeing planning priorities for 2026/27 amongst other data sources. 712 responses were received, which is an increase of 7.2% from 2024 (664). The most requested areas of support were:
- Health checks
 - Weight management
 - Healthy eating
- 3.10 Planning and delivery of the internal pilot immunisations programme and research on options to support future delivery of OH provision remains on track. The immunisation pilot started in January 2026 and will continue to run until the end of March 2026 working with new starters and YAS Academy colleagues. Work on the full business case exploring future delivery options for the provision of OH services has now started following approval at Trust Executive Group (TEG) on 17 December 2025. It is anticipated that the new model will be in place for April 2027, a year earlier than originally approved as per existing Health and Wellbeing Plan.
- 3.11 Work on the OH utilisation, quality of referrals and ensuring the most appropriate support is provided at point of need continues. ‘Voice of the customer’ and ‘how to make quality referrals’ sessions continue to be promoted, working closely with Optima Health (OH service provider). Some improvements have been visible, notably in the appropriateness and quality referrals being made, which is resulting in a reduction of repeated and unnecessary referrals including savings against the contract. As detailed below (using March 2026 projected usage and spend) this has resulted in a reduction of 2,153 referrals (it is important to note that an element of this will be attributed to other factors such as reduction in workforce recruitment during the period) and a cost saving of £245,185 (34% reduction) in the financial period 2025/26 compared to the same period in 2024/25. £46,064K of this cost saving was attributed to savings achieved through the reduction in ‘did not attend’ and ‘short notice cancellations’. Work continues in driving further quality and efficiency improvements.

TOTAL OH REFERRALS			TOTAL OH EXPENDITURE	
APR '24 – MAR '25	7,609		APR '24 – MAR '25	£716,473k
APR '25 – MAR '26	5,456		APR '25 – MAR '25	£471,288k
DIFFERENCE	2,153 (28%)		DIFFERENCE	£245,185 (34%)

- 3.12 Promotion continues in increasing the usage of the MS Teams PLEAZ micro-exercises platform, a pilot programme which was launched in February 2025 for a period of twelve months. Four Trusts are part of this pilot programme which include Greater Manchester Mental Health Trust (GMMHT), Wirral Community Health and Care, London Northwest University Hospital Trust and YAS. Quarterly survey results show that most users access the exercises via the MS Teams App. 85% of the respondents found it easy to use the micro-exercises, with majority respondents stated seeing a positive physical and mental impact. Overall usage data shows that the content continues to be mainly accessed via 'in meetings' and 'on demand' with repeated users being higher than new users to the platform. Access to the platform has been extended for a further 12 months at no cost with another four trusts now onboarded with an evidence-based evaluation on the project to start shortly, working closely with Manchester University research colleagues. Work will continue in driving awareness and engagement with the app during this period.

4.0 ADDITIONAL ACTIVITIES

- 4.1 The seasonal vaccination programme delivery commenced on 1 October and concluded 12 December with flu vaccinations continuing to be provided upon request to frontline operational staff as a priority. The vaccination was available to all staff with various clinics being held across the region to enable easy access for staff. An offer of a £10 redeemable incentive had also been made available to staff this year, this included an option of claiming a Costa, Love to Shop or HQ canteen voucher. The most requested incentive was the Costa vouchers with the least requests received for HQ canteen, primarily due to location and access for staff not based at Wakefield.
- 4.2 The support through the local vaccination team, who had been recruited via expressions of interest and supported through abstractions during the period, including the introduction of a vaccination register for A&E and PTS frontline staff, helped drive engagement and uptake. The uptake for flu vaccination amongst YAS frontline workers was 46.3% (NHSE data) with a total of 2,877 staff vaccinated through YAS of which 2,122 were frontline workers. The target was 39.5% (5% above last year's uptake figure of 34.5%). National comparisons across the sector are detailed below.

Ambulance Trust	No. FHCW*	No. FHCW received Flu Vaccine	% FHCW received vaccine
West Midlands Ambulance Service University NHS Foundation Trust	4,876	3,119	64.0%
East Midlands Ambulance Service NHS Trust	3,275	1,993	60.9%
South East Coast Ambulance Service NHS Foundation Trust	2,915	1,610	55.2%
South Western Ambulance Service NHS Foundation Trust	3,313	1,686	50.9%

London Ambulance Service NHS Trust	3,757	1,863	49.6%
East of England Ambulance Service NHS Trust	3,926	1,932	49.2%
South Central Ambulance Service NHS Foundation Trust	2,262	1,106	48.9%
Yorkshire Ambulance Service NHS Trust	4,570	2,117	46.3%
North West Ambulance Service NHS Trust	4,670	1,939	41.5%
North East Ambulance Service NHS Foundation Trust	3,042	1,251	41.1%

*FHCW – Frontline Health Care Workers

- 4.3 The Health and Wellbeing Team has actively been involved in working closely with HR colleagues and wider stakeholders to implement the Avoidable Employee Harm project. This evidence-based project started in NHS Wales and later receiving support for national launch from Healthcare People Management Association (HPMA). The focus of this work is on improving our people practices by highlighting the damage that can occur to both employees and organisations, when disciplinary processes are poorly commissioned and managed. Through implementation of this work in Wales, fantastic people experiences have been evident. A Task and Finish Group has been working on a plan to implement this within YAS with some refinements to the training package to incorporate YAS specific data. This work is nearing finalisation with initial training session planned for 23rd March 2026, after which a wider roll-out programme will be planned in.

5.0 FINANCIAL IMPLICATIONS

- 5.1 Although great cost savings have been achieved against the OH contract, these savings will be partially offset against the increased demand experienced through the physiotherapy contract.

6.0 RISKS

- 6.1 High levels of Trust sickness absence and the associated costs attached to it remain a concern. Data led deep dive work continues to understand the root cause of absences across the identified stations which will form area focused workstreams for 2026/27.

7.0 RECOMMENDATION

- 7.1 It is recommended the Trust Board:
- Note the contents of the report, recognising the sustained and positive progress that has been made against the planned priorities.

8.0 SUPPORTING INFORMATION

- 8.1 The following information makes up this report:

Appendix A – 2025/26 Trust Health and Wellbeing Plan with metrics attached.