



**THIS IS A MOVEMENT  
FRIENDLY PRESENTATION  
PLEASE FEEL FREE  
TO MOVE OR STRETCH  
AT ANY TIME**

**som**  
Supporting occupational health  
and wellbeing professionals

**VERSUS  
ARTHRITIS**

# OUR VISION:

# A FUTURE FREE FROM ARTHRITIS

## OUR MISSION:

We won't rest until everyone with arthritis has access to the treatments and support they need to live the life they choose, with real hope of a cure in the future.

### **To deliver our mission we;**

- invest in world-class research,
- deliver high-quality services
- and campaign on the issues that matter most to people with arthritis.

# WHO IS VERSUS ARTHRITIS?

## Operational Services

Direct Services for Adults  
Young People and Family  
Service  
Health Development Team  
Helpline  
Online Community

## Research

Ave £13 million  
Early Detection &  
Prevention  
Targeted Treatments  
Living Well  
People & Partnerships

## Policy and Influencing

Influencing Policy and  
Practice  
Four Nations Approach  
Public Affairs

# STATISTICS

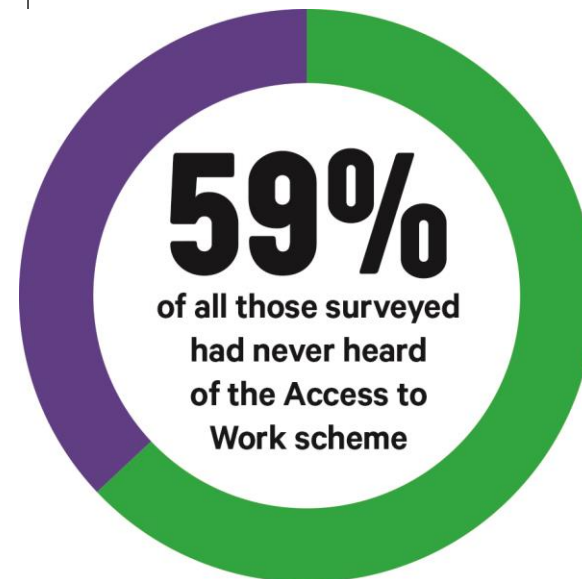
- 2.8m people under 35 years (11%)
- 10.2m people aged 35-64 years (40%).
- 7.4m people aged 65 and over (61%)
- 400,000 develop the condition before age 16

Over half of people (53%) we surveyed with MSK conditions say their symptoms have a negative impact on work..

Disability Pay Gap - People with arthritis are 20% less likely to be in work compared to someone without arthritis.

The cost of working days lost due to arthritis is estimated to reach £3.43 billion by 2030.

Research by the CMHW recently found that in a group of nearly 900 people, only 36% were employed, and only 44% of those in employment were aware of schemes such as Access to Work.



FOUR  
TIMES  
MORE

Depression is **four times** more common among people in persistent pain.

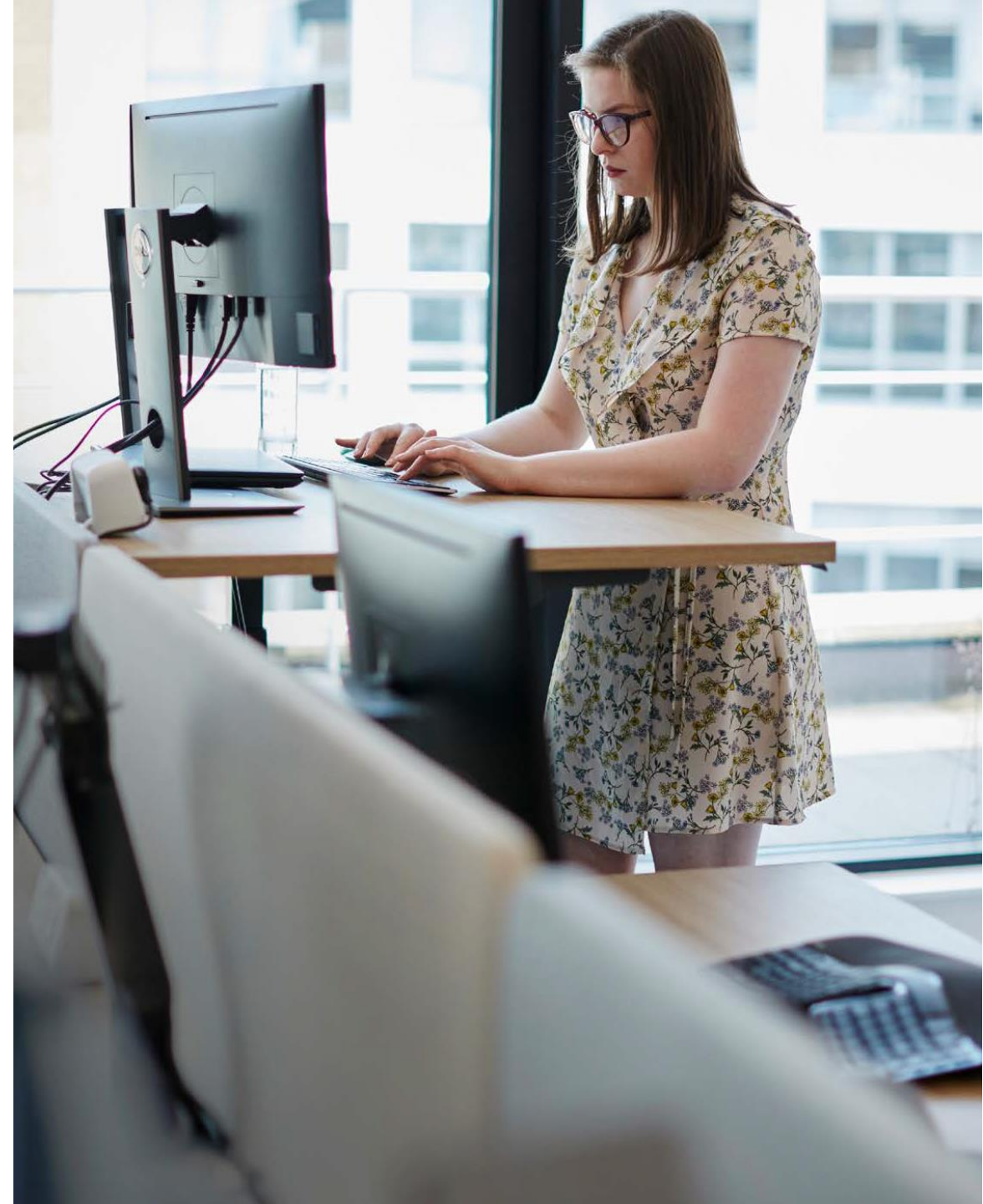
A graphic on a purple background. It features a large green silhouette of a head in profile facing left, containing the text 'FOUR TIMES MORE' in white. Below it is a smaller white silhouette of a head in profile facing left. At the bottom, white text reads 'Depression is four times more common among people in persistent pain.'

# IDENTIFYING WORK-RELATED TRAINING AND RESOURCES FOR WORKPLACE PROFESSIONALS

A gap analysis survey, was sent out for 4 weeks between early March and April to identify what training and resources for workplace professionals are currently available and what are the gaps. The survey was sent to SOM members, SOM OH Nurse and OH GP connect email lists, via social media and to Versus Arthritis contacts.

We asked whether respondents felt confident supporting people living with MSK issues within a work context, what information would help people to have better outcomes, and whether people living with MSH/ arthritis had access to adequate information.

**204 responses – majority nurses**



# KEY FINDINGS

- The biggest concern identified by respondents was around access to resources.
- Many felt that with adequate signposting, people were able to access appropriate support; however, it was also raised that this required OH staff to be aware of what support is out there themselves, and many are not.
- There were a lot of requests for more self-management resources, so that OH staff can support people to look after themselves in work.
- Sharing of case studies and best practise would help people to feel more confident when advising on MSK and workplace issues.



# 204 SURVEY RESPONSES

**Q5, Do you feel that people with arthritis/MSK have access to information and support needed to confidently self-manage their condition within work?**

Overwhelmingly **No**, not always, or variable depending on the individual and situation/condition. ***“A lot of the information is out there but it is often hard to access.”***

**Q6, Are you concerned about a lack of support or resources, for people with arthritis/MSK to manage their condition within work?** Scale 1-5 with 5 most concerned. **59%** rating the concern at level 4 out of 5 (the most concern) and 30% at level 3.

- **Profession:** 49% nurse / OH Nurse / OHAs. 18+% AHPs inc ergonomists / physios. 16+% WHP, 11% Doctors.
- **Sector:** 40% NHS. 45% private, 16% public, remaining other. – charity, research, education, self-employed.
- **Location:** 65% England, 19% Scotland, 10% Wales and NI, remainder international.
- **Support:** 43% provided advice up to 5 times per month., 38% over 10 per month, 19% up to 10 per month.

# 204 SURVEY RESPONSES

**Q7, On a scale from 1-5 how confident do you feel in supporting someone with MSK/ arthritis with work capacity issues?** 40% of respondents answered 1, 2, or 3, meaning they were either unsure or not confident at all.

**Q8, What information resources or support do you feel would help improve work outcomes for people with arthritis/ MSK? Please rank in order from 1 (most important) to 5 (least important).** Self-help resources for the employee on managing their condition within work was the most popular.

**Q9, Is there adequate support and information to help people with arthritis/ MSK understand and request the support they need to remain in or return to work?** Majority said no (65%), with only 22% saying yes, and the rest providing free text responses.

***"Employers need to be more aware and understanding that we have an increasing aging workforce, and with that comes many challenges."***



# 204 SURVEY RESPONSES

## **Q10, What training would be useful in upskilling you to help people with work related issues?**

There was a wide variety of responses here, but the most common theme was increased awareness and training around employee rights and employer responsibilities, such as reasonable adjustments, Access to Work, ergonomic training etc.

## **Q11, If you could name one area of training, information resources, or support that would help improve work outcomes, what would it be?**

There was once again a wide variety of responses but the underlying themes were a desire to be able to share best practice with other colleagues, and better engagement from/ with employers to support their workforce.

***"I feel I have a good knowledge due to my own issues. However, not all my colleagues would understand the daily battle with pain, joint stiffness and fatigue and the effort required to get to work and function."***

# 204 SURVEY RESPONSES

**Q12, Do you feel that current workplace wellbeing initiatives are meeting the needs of people with moderate to severe arthritis/ MSK?**

Overwhelmingly no (72%). Once again, the coverage seems to be sporadic, and the focus is on mental health.

**Q13, Do you have any other comments or suggestions?** There were a lot of calls for tips on how to support patients to self-manage, either while they wait for surgery or because their condition is unsuitable for surgery. There was also a feeling that both employers and employees need to engage more with the topic of MSK health in order to achieve better outcomes.

***"It is always good to know of examples of adjustments that have been successful with others – I know one size does not fit all but having some prompts is better than start from a blank."***

# 204 SURVEY RESPONSES

- **Q15, In terms of the definition of disability under the Equality Act 2010; Arthritis is not an automatic qualifying condition. Do you feel it is simple enough for individuals with arthritis to know if they meet the criteria?** The majority of people felt that it was not clear enough (69%). Some felt that it was not relevant to their patients.

***"It is not straightforward for any condition unless it is a named one under the Act."***

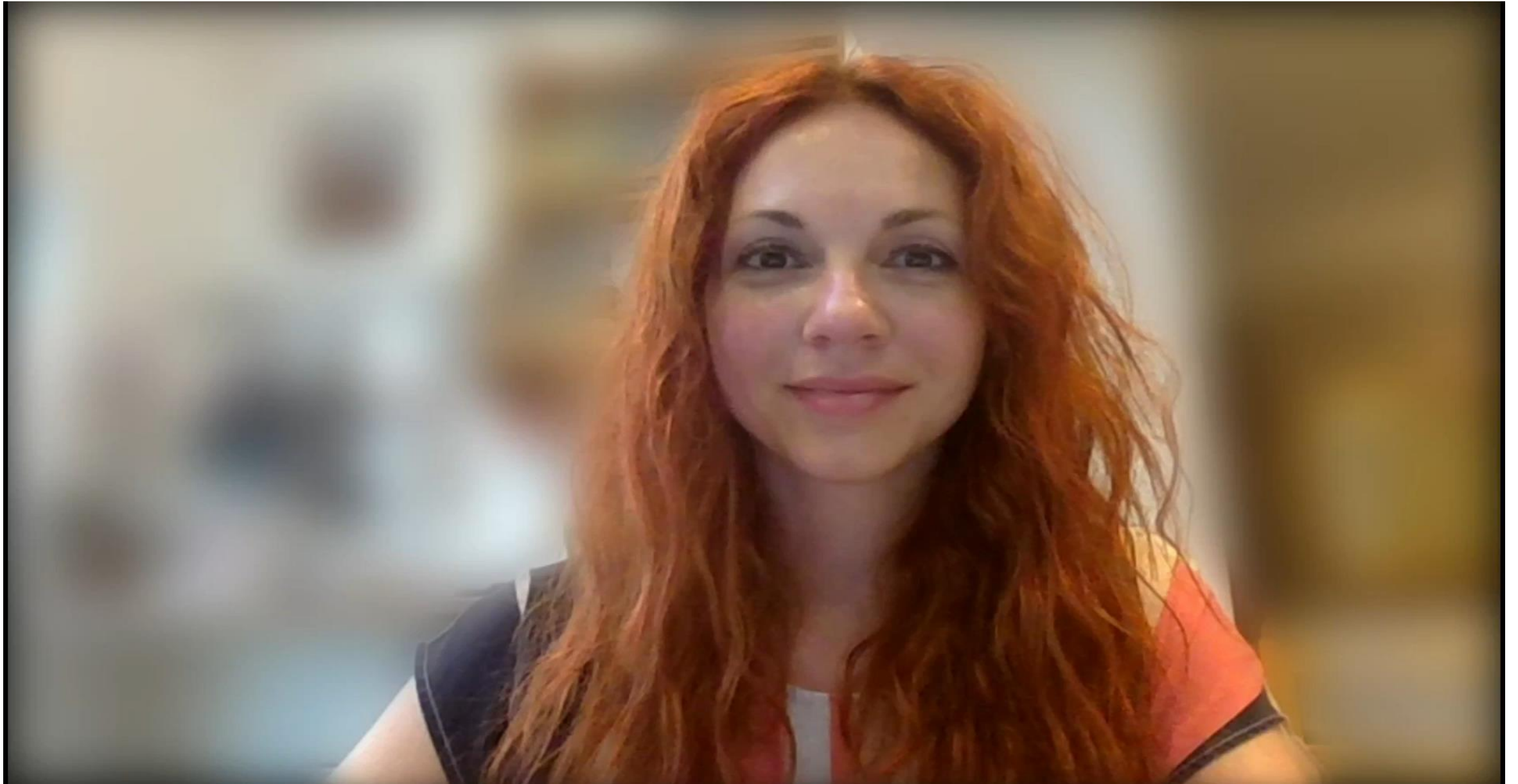
# DR GLYKERIA SKAMAGKI

Dr Skamagki works at the University of Birmingham and has recently led on a project investigating the wellbeing of over 50s in work

She is also involved in a project called Mobility for Sustainable Employability, which is looking at supporting people who have chronic MSK problems to stay in work. They have produced free resources for both employers/ managers and employees.



# DR GLYKERIA SKAMAGKI



# WHAT ARE WE DOING ABOUT IT?

**Gap analysis survey:** surveying both PWA and workplace professionals (eg OH). Still awaiting responses from PWA survey. SOM are producing a public report on the survey results, the output of this webinar, and the next steps.

**Website review:** we worked with the CMHW on a piece of research to review content aimed at supporting people with MSK issues.

**Supporting employers:** raising awareness with employers, development and maintenance of a professionals' network to share information and good practice, providing training to employers, employability and workplace health professionals

## **Influencing health/ employability**

**policy:** responding to MSK and workplace government initiatives, working with researchers on workplace health to support key projects, development of key influencing messages and key data set, creation of workplace health stories and change

**Developing a resource pack:** map current resources, undertake engagement with employers, workplace professionals and PWA, consult and engage with key stakeholders to understand their needs



# WHAT CAN YOU DO?

**We want to hear from you:** what do *you* think would be helpful? What do you think the next steps should be for creating training and information resources? What should these resources look like? Please share your ideas over Zoom or in the chat.

For more information please visit our website  
[versusarthritis.org](http://versusarthritis.org)

0300 790 0400

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Versus Arthritis  
Copeman House  
St Mary's Gate  
Chesterfield  
S41 7TD

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ARTHRITIS**

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