

# Professional Service Unit Wellbeing

## Champion – Guidance notes

### **1. Resourcing**

#### 1.1 Role sharing

Small Units may share a single Wellbeing Champion, where there is a natural synergy between them and where this would be an arrangement that would be practicable.

Larger Units may have more than one person sharing the role. A ratio of 1:20 Wellbeing Champions to staff is suggested. This will have the additional benefit of providing cover for the role in the case of absence, and of providing continuity and smoothing the transition when Wellbeing Champions 'retire' from the role or leave the University.

#### 1.2 Time commitment

Beyond the initial training time, the indicative time commitments for Wellbeing Champions are estimated as:

- 1-2 hours per week (onward communication of services, initiatives etc., updates provided at Unit meetings, reporting back to institutional groups)
- Bi-monthly meetings of the Wellbeing Champion network (1.5 hours) to include supervision, sharing of good practice and regular CPD updates
- Further CPD/training 1 day per year.

Wellbeing Champions are expected to make a commitment to the role for the minimum of one year (subject to circumstances). Continuation in the role will be reviewed on an annual basis with input from the role holder, Service Director and the Wellbeing Champion Coordinator. This will provide an opportunity for the role to either be renewed for a further year, or to be passed on to another colleague.

### **2. Wellbeing Champions and line management**

- Line managers remain accountable for the wellbeing of their staff and are supported in this by the Wellbeing Champion
- Wellbeing Champions are not accountable for the wellbeing of staff in their Unit - they are responsible for carrying out the role as defined in the role profile
- The role of Wellbeing Champions will become part of the individual's workload and as such should be subject to the normal conversations about performance and workload management that take place between line managers and staff
- Matters of concern about the management of workloads in relation to the Wellbeing Champion duties should be discussed between the Wellbeing Champion and line manager in the first instance, and if necessary then discussed with the Wellbeing Champion coordinator.

### **3. Confidentiality and boundaries**

It is important for all concerned that there is clarity about the purpose of the Wellbeing Champion role, about the boundaries of what the Wellbeing Champion can and cannot do, and about protocols on confidentiality.

In order to address this:

- a protocol for one-to-one meetings will be drafted and provided to Wellbeing Champions
- standard template statements on the Wellbeing Champion role (what they can/can't do) and confidentiality will be prepared for Wellbeing Champions to use to frame one-to-one conversations and will form part of the meetings protocol
- a quick guide will be produced for staff on who to go to on different matters (e.g. for x, y, z go to line manager, for a, b, c go to Wellbeing officer)
- use of the meeting protocol, the templates and quick guide will be part of the Wellbeing Champion training and will include different scenarios/case studies.

#### **4. Wellbeing Champion Operations**

##### **4.1 Unit communications**

How Wellbeing Champions effectively communicate about wellbeing to colleagues in their Unit is likely to be managed by different individuals in different ways depending on their preferences and experience. However, there are certain recommended approaches that will be presented to Wellbeing Champions during initial training and there will be an expectation that a minimum standard of good practice will be adopted.

This will include:

- Attending Wellbeing Champion meetings and noting items of relevance/interest to feed back to their colleagues
- Providing regular verbal updates to colleagues at Unit/team meetings
- Publicising their role and contact details within the unit and encouraging colleagues to contact them for help, information, or with their ideas and feedback on wellbeing services.
- Creating a channel in their Unit TEAMS site for Wellbeing, and 'curating' this channel by regularly posting news, events, information and so on
- Holding regular open 'drop in' sessions during which they can take calls or have meetings with colleagues (either by blocking out time in their calendar and/or blocking a small meeting room)
- Unit webpages may include a section on 'discretionary' roles, including the Wellbeing Champion, but also other roles such as H&S rep and computing officer.

##### **4.2 Signposting**

One of the key roles of the Wellbeing Champions is to 'signpost' wellbeing-related services to their colleagues both on an ongoing basis, to raise awareness, or in specific instances where colleagues need specialist support. This will be delivered through:

- Team/Unit meetings
- Unit TEAMS site wellbeing channel
- Open 'drop in' sessions
- On an ad hoc basis (where meetings are requested by colleagues)

Wellbeing Champions might, for example, provide an overview of one wellbeing service provider at each team/Unit meeting, such as Chaplaincy at one meeting and OH or the Sports Centre at another.

Wellbeing Champions must therefore be fully informed about the relevant services, their roles and how their services can be accessed. This information will be provided during the initial orientation training and will be included in a 'Wellbeing Champion handbook' that will be accessible on the Wellbeing Champion TEAMS site.

The relevant service providers will also be invited to contribute to the CPD of Wellbeing Champions on an ongoing basis.

#### 4.3 Promoting institutional initiatives

Institutional wellbeing initiatives may originate from different locations within the University (e.g. Occupational health, OSDS, cross-Unit/School collaborations, Sports Centre), but should be coordinated through the MHTF and WEG. In this way Wellbeing Champions will be regularly updated on institutional wellbeing initiatives and will be able to ensure that these are effectively communicated and promoted locally.

#### 4.4 Local initiatives

Wellbeing Champions will be encouraged to be innovative and to develop new ideas and local initiatives. These will be shared through the Wellbeing Champion network and reported back up to MHTF. Initiatives that prove successful can be replicated in other areas and potentially relaunched as institution-wide initiatives.

#### 4.5 Individual support

Where the Wellbeing Champions are having one-to-one conversations with individual colleagues it is important that these are framed in a way that protects both the Wellbeing Champion and other individuals, while ensuring that the individual is getting the support they need. In order to ensure that conversations stay within the boundaries of the role and to ensure that confidentiality is appropriately maintained, Wellbeing Champions will be provided with and trained in the use of a 'meeting protocol' including clear statements on role boundaries and confidentiality.

#### 4.6 Record keeping and reporting

Some records of activity should be maintained by the Wellbeing Champion:

- a) for reflective practice on individual performance in the role,
- b) to enable the Wellbeing Champion to keep track of any issues or concerns they are dealing with, and
- c) to provide intelligence to Unit Directors and the Mental Health Task force on activity levels and emerging trends/concerns. Further guidelines will be produced.

As a starting point Wellbeing Champions should:

#### **For role delivery and reflective practice:**

- maintain a personal log summarising any meetings held, and periodically review the personal log as part of their own reflective practice.

- include summary information, but not all details need be recorded. As a guide this may include dates and times of meetings, the name of the person/s with whom they met, a summary of the discussion and any agreed actions outcomes and agreed follow up activity (e.g. review meetings, feedback). Names or other identifying information of individuals not present at the meeting should not be recorded.
- ensure that the personal log is kept securely, either in a personal drive or other secure location. It is a personal record not a Unit/institutional record and should be destroyed at the end of the individual's tenure as Wellbeing Champion.
- keep notes of local/Unit initiatives including dates, participation levels and outcomes

**For reporting purposes:**

- summary statistics for individual support should be provided to the Wellbeing Champion Coordinator on a quarterly basis, to be aggregated together and reported back to Mental Health Task Force
- periodic activity level summaries should be reported to the relevant line manager/Service Director to include numbers of one-to-one meetings, participation levels in wellbeing activities, and any general concerns or trends emerging which will be relevant to the leadership of the Unit (while maintaining confidentiality about individual cases).