



**Leeds Health and  
Care Academy**

# ACADEMY IMPACT REPORT

**1<sup>st</sup> April<sup>2025</sup> – 31<sup>st</sup> March<sup>2026</sup>**

**[leedshealthandcareacademy.org](https://leedshealthandcareacademy.org)**

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# WELCOME

The Academy’s primary purpose is to better integrate the health and social care workforce in Leeds and enable Team Leeds to fulfil its potential.

Welcome to the 2025/26 impact report for the [Leeds Health and Care Academy](#).  
This past year has been one of significant change and challenge across the health and social care landscape, including the reorganisation of Integrated Care Boards (ICBs) and the restructuring of NHS England.

Throughout this period of uncertainty, our partnership has remained essential. The value of the Academy has become increasingly clear as we focused our efforts to better support the local health and social care workforce through three primary pillars:

**Employer Support:** Enhancing wellbeing and coaching initiatives to protect and sustain our staff.

**Staff Development:** Providing comprehensive training and growth opportunities via the Leeds Learning Portal.

**Workforce Solutions:** Utilising the Talent Hub to strategically support staff, partners and our future workforce.

As we mobilise to a neighbourhood model for health and social care in Leeds, the Academy is an integral part of the infrastructure in Leeds, enabling the system to respond effectively and positively to challenges and opportunities. Once again, we have attracted funding and resources into the city and leveraged our platforms and programmes to continue to support the current and future health and care workforce of our city.

We’re delighted to be able to share some of the detail of the work we have been doing over the last year, the increased reach of the Academy, and the impact we are having, working closely with our partners.

We would like to thank everyone who works for and with the Academy for making our role in the city so impactful and purposeful. We are grateful for the ongoing governance from the members of the Leeds One Workforce Strategic Board and together we look forward to continuing our stewardship of the Academy for 2026 and the years to come.



**Kate O’Connell,**  
Director of Leeds Health and Care Academy



**Dr Sara Munro,**  
Chief Executive Officer, Leeds & York Partnership NHS Foundation Trust and Leeds Community Healthcare NHS Trust and Strategic SRO for Workforce



**Mariana Pexton,**  
Deputy Chief Executive, Leeds City Council and Co-Chair of Academy Steering Group

# ABOUT THE ACADEMY

## OUR PURPOSE

Leeds Health and Care Academy works on behalf of the city's entire health and care system to make Leeds a leading place to train, work and build a career in health and care at every stage of life.

Through strong partnerships, we create opportunities for skills development, employment and inclusive economic growth. We actively engage people from underserved communities, support recruitment into the sector, and inspire the next generation workforce. Together, this ensures Leeds has a diverse, skilled and sustainable workforce equipped to meet the health and care needs of the city, now and in the future.

## OUR VALUES

We can only achieve what we do with the commitment and support from our partners across the city. Being part of Team Leeds is central to how we work and we are firmly aligned to the Team Leeds values:

Person centred and caring

Inclusive and collaborative

Learning and improving

Respectful and empowering

Acting with honesty, integrity and accountability

Our partnership also continues to recognise the founding principles of the Academy, our decisions and action aim to:

Advance inclusivity, through supporting, connecting and developing diverse people from diverse health and care organisations

Narrow inequalities in our population and our workforce

Optimise the Leeds Pound, ensuring value for money and investing in our local communities and services.

## OUR DELIVERY MODEL



### CONNECTOR

Strengthen partnerships and optimise assets



### CATALYST

Make things happen and amplify impact



### PARTNER

Learn together and contribute expertise



### INNOVATOR

Harness creativity and collectively drive progress

## HOW WE CONNECT

### OUR STRATEGIC PRIORITIES

### WHO WE CONNECT WITH

### THE CHANGING STRATEGIC ANE SCARE

#### FUTURE WORKFORCE

#### LEARNING TOGETHER

#### TEAM LEEDS

#### HEALTH EQUITY

#### WORKFORCE INSIGHTS

Leeds One Workforce Strategic Board

Statutory Bodies  
- WY ICB, NHS Trusts, Leeds City Council

VCSE Sector

Primary Care

Academic partners including Universities, Colleges and Schools

Social care

Independent sector

Regional and national partners

The Leeds Ambitions

Neighbourhood Health

Leeds Provider Partnership

Health-tech and digital innovation

Health Equity

# IMPACT AT A GLANCE

## Leeds Health and Wellbeing Workforce Indicators 2025

Each year the Academy collates the Health and Wellbeing Workforce Indicators for the entire Leeds health and care system to help us better reflect the health and care workforce of Leeds diverse communities.

**67%**

The majority of our health and care workforce live in Leeds

**1/3**

Just over a third of the workforce is under 35 years old

**5%**

of the workforce tell us they have a disability

**78%**

Almost 78% of the workforce is female

**70%**

are paid at or more than the Real Living Wage

Full details of the workforce profile can be found here:

[City workforce profile - Leeds Health and Care Academy](#)

### LEEDS HEALTH AND CARE LEARNING PORTAL

Open access platform, launched in 2022 to share and widen access to learning across the sector.

*6,500 additional users registered this year.*

[Click here](#)

### LEEDS HEALTH AND CARE TALENT HUB

The Hub provides personalised support to individuals helping to connect the people of Leeds into careers, education, training, volunteering and work experience.

*This year we have supported over 2000 people.*

[Click here](#)

### CAREER COMPASS LEEDS

A person-centred interactive digital platform. Launched in 2024 to help people navigate our complex sector, find and access the right career for them.

*1500 users navigated and utilised the platform this year.*

[Click here](#)

## FUNDING

New funding secured in 2025/26

**£1.228 MILLION**

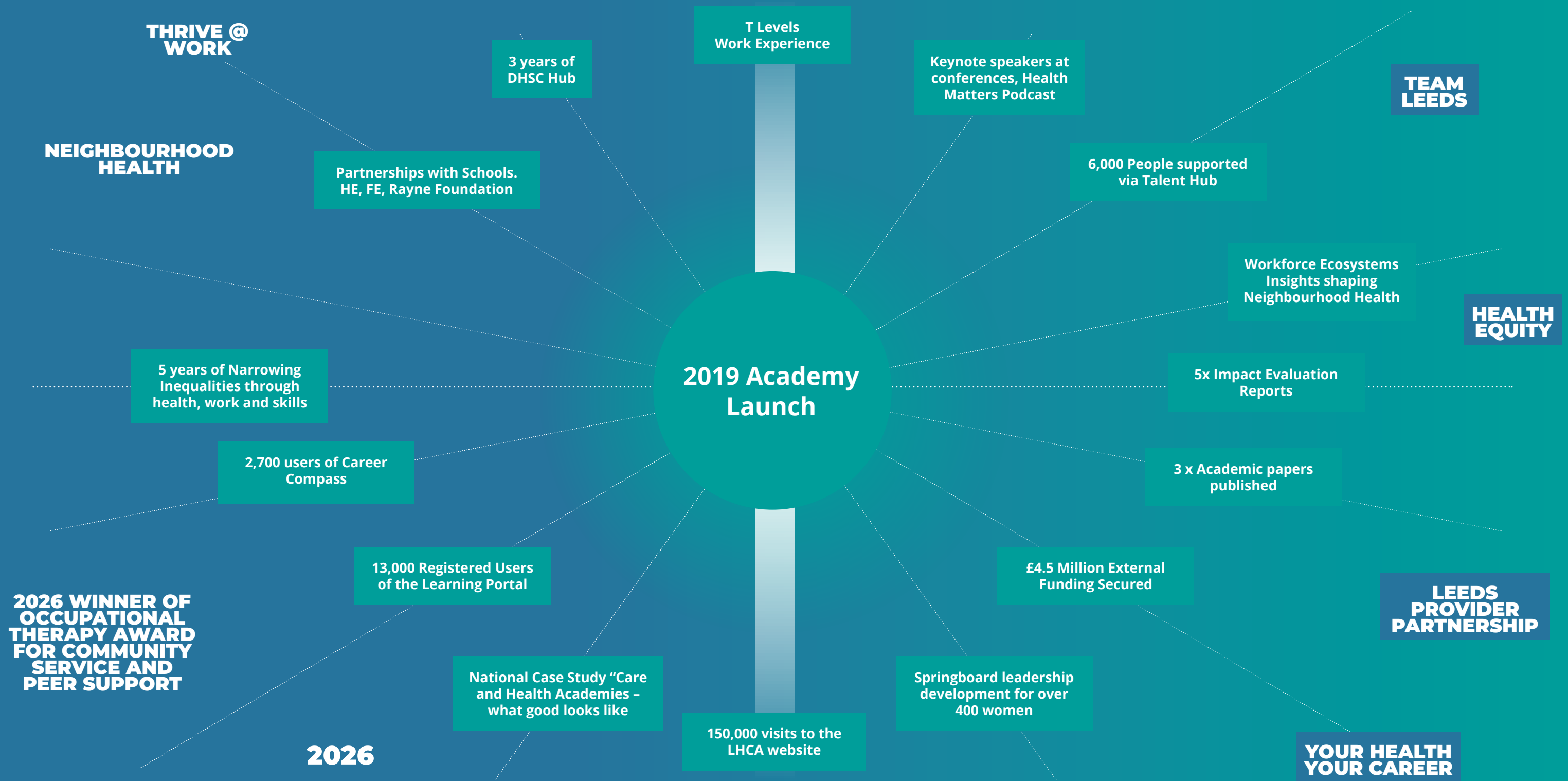


**These insights enable us to focus Academy programmes** and adapt our workforce strategies directly to the evolving needs of the local community.

We have used this additional income to invest and accelerate Academy programmes in Neighbourhood Health and the Work, Health and Skills agenda and Ill-health prevention.



# ACADEMY DEVELOPMENT



# IMPACT: THRIVE@WORK

Last year the government published its Get Britain Working White Paper in response to one of the most significant challenges facing the UK labour market- rising economic inactivity, driven in large part by ill health.

West Yorkshire was one of eight trailblazer areas selected to design, test and evidence scalable models that integrate health, work and skills. Leeds led on the implementation of Workforce Health and Resilience through its pilot Thrive@ Work.

This initiative brought together partners across the Leeds Health & care system to create a more coordinated, accessible and equitable approach to workforce health and wellbeing with a particular focus on supporting those with the most complex needs.

With a timescale of 10 months for delivery (April 20205-Jan2026), the Academy worked with partners at pace to establish a system wide intervention.

## A SYSTEM-LEVEL INTERVENTION

Thrive at Work was designed not as a service, but as a system intervention focused on workforce sustainability, equity and productivity.

It recognises that workforce wellbeing is shaped by:

Job design

Organisational culture

Manager capability

Wider social and economic factors

**Its purpose was to enable staff to:**

Stay in work

Return safely after absence

Transition where needed

**The Thrive at Work model brought together a multi-layered approach to workforce support, including:**

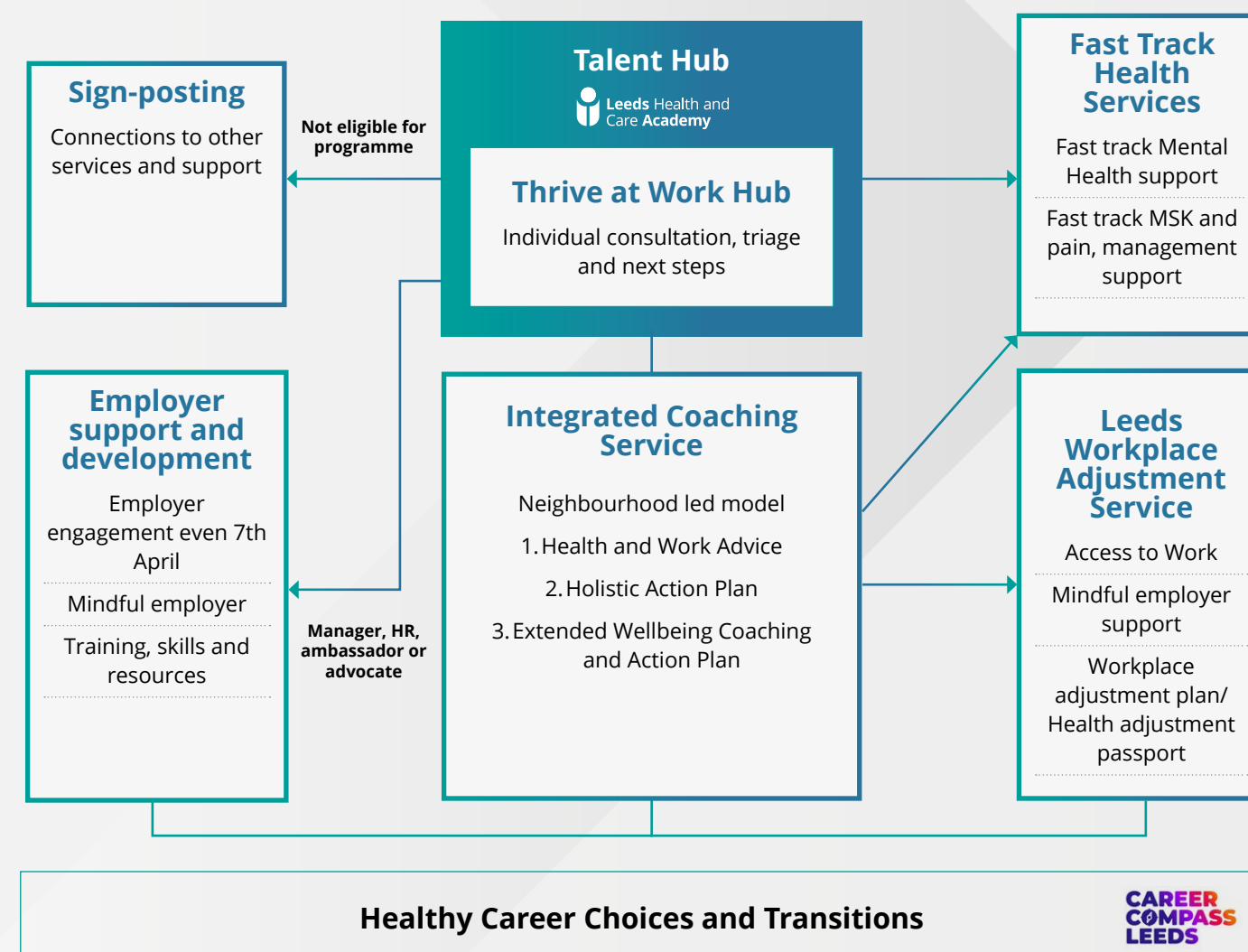
Fast-Track Mental Health Support

Fast-Track MSK Support

Integrated Coaching

Workplace Adjustments & Adaptation

Delivered through a single front door (Thrive Hub) with multiple referral routes.



# IMPACT: THRIVE@WORK

In its first year, Thrive@ Work demonstrated that a whole person, integrated model can deliver measurable workforce and economic impact at scale.

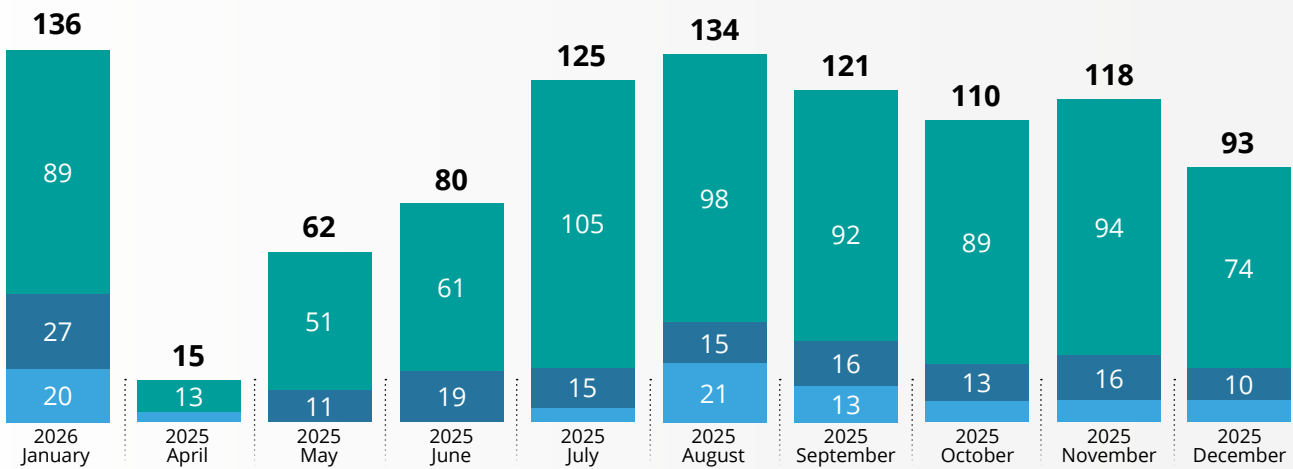
**994**  
referrals into the Thrive Hub

**295**  
economic outcomes delivered

- Economic outcomes include:
- Supporting staff to stay in work
  - Enabling return to work after absence
  - Reducing sickness absence
  - Supporting individuals to secure alternative employment

# DELIVERING IMPACT AT SCALE

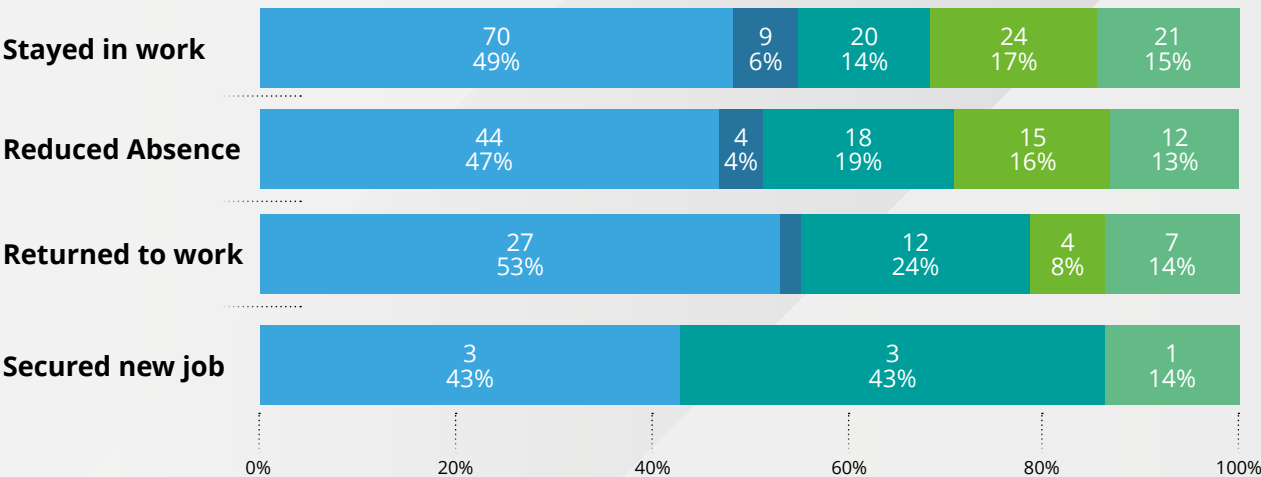
Total number of refferals



Referrer

- GP/Health Professional
- Manager
- Self

Proportion of outcomes per service (Completion of intervention)



- Fast Track Mental Health
- Workplace Adjustment Service
- Multiple interventions accessed
- MSK
- Integrated Coaching Service

# IMPACT: THRIVE@WORK

## A HEALTH EQUITY LENS: WHAT THE DATA SHOWS

### ACCESS

**41.7%** of users from most deprived communities

**74.4%** anticipated financial or emotional negative impact

### EXPERIENCE

High overlap of physical and mental health need

**Only ~46%**

of managers aware of referrals

**Only ~57%**

of staff felt supported

**Over 50%** met Equality Act criteria, **but only ~20% had adjustments**

### OUTCOMES

**93.8%** uptake of onward support

**Greater drop-off where complexity increases:**

Trauma

Neurodivergence

Deprivation

Job insecurity

## WHAT THIS MEANS



**The data is clear:**

**Access is a structural issue - not a behavioural one.**

As inequality increases, so does:

Complexity

Late presentation

Risk of workforce exit

### LEARNING

A single front door to the service with multiple tailored pathways is critical to equitable access.

*"It was a great service and was very quick to access.... Support included practical tips and strategies to help the staff member and advice for me as a line manager."*

Connecting and simplifying access to existing provision, we don't need to create more services.

*"I started EMDR treatment within weeks of my first call... the average NHS wait time is two years. I can't thank you enough."*

Workforce health requires integrated support across mental, physical and workplace factors.

*"I've had shoulder pain for four years and been misdiagnosed twice. Now I've been diagnosed correctly, given exercises that are working, and I've been able to restart my hobbies which has improved my mental health"*

Supporting individuals needs strong systems, confident managers, and organisation-wide skills.

### LEGACY AND NEXT STEPS

A key legacy of Thrive @ Work was the insight it generated. The programme provided a detailed picture of how deprivation, disability, job design, and workplace culture shape people's ability to stay in work. These insights are now being used to shape and strengthen the Talent Hub itself, ensuring that the learning from the programme continues to influence how the system supports staff long after the funded project has ended.

This includes building more equity focused pathways, improving navigation, strengthening manager capability, and embedding a disability first approach across the wider workforce system. By integrating Thrive @ Work's learning into the Talent Hub's ongoing design, the benefits of the programme will extend well beyond its delivery window, supporting a fairer, more resilient workforce for years to come.

Health inequalities are the unfair and avoidable differences in people's health that exist between different groups or communities. These differences are shaped by the social, economic, and environmental conditions in which we live and work. Health inequalities can show up in lots of different ways, not just in the populations we support, but amongst our colleagues and in our health and care teams.

Around one in four people in Leeds (just over 210,000 residents) live in areas that are classified amongst the most deprived 10% in England. In some of these areas, life expectancy is on average 12 years less for men and 14 years less for women compared to our least deprived areas.

While people are living longer overall, many are spending more of their later years in poor health and are living with multiple long-term conditions.

This year the Academy and the Public Health Team have worked in partnership with colleagues across the Leeds One Workforce to develop and deliver a city-wide training programme for staff to increase their Health Equity knowledge, skills, and confidence and by doing so improve access, experience, and outcomes for patients and reduce inequities within the workforce itself. The programme comprises of 4 different levels.

## Level 1 – Essential Health Equity

**Knowledge e-learning:** Understanding what health inequalities are, which groups are most affected, how Leeds is working towards health equity, and the simple everyday actions that can help make health fairer for everyone.

## Level 2 – Health Equity (Public-Facing Roles) 1 day in person training:

Builds awareness of how health inequalities impact workplaces and communities, strengthens confidence in handling sensitive conversations, and equips staff with simple, practical skills to make a meaningful difference in everyday interactions without requiring significant time or resources.

## Level 3 – Health Equity for Leaders and Managers 1 day in person:

This training explores how we make services more accessible for diverse populations, use local data to inform decisions, and share good practice across the Leeds health and care system. It also focuses on supporting staff wellbeing, fostering a culture of fairness and equality, and developing a practical plan to apply learning in the workplace.

## Level 4 – Health Equity for service and system change:

This training aims to build understanding of where and why health inequalities occur, while strengthening confidence and capability to apply equity-focused improvements in practice. It supports the adoption of practical changes, fosters stronger collaboration across the system, and provides a foundation for sustained, long-term improvement in health equity across Leeds.

**We are honored to announce that Sir Michael Marmot has endorsed our program, confirming its alignment with top-tier health equity standards.**

This first phase of the programme has focused on co-designing both our approach and content and during the next phase our focus is on upscaling delivery and embedding the training consistently across the Leeds Health & Care system.

In July 2025 the Government published its 10 Year Health Plan for England. Introducing three radical shifts:

- Hospital to community
- Analogue to digital
- Sickness to prevention.

The Plan describes a shift to continuous, accessible and integrated care by bringing more integrated services into local communities, supported by creating a new workforce model with staff genuinely aligned with the future direction of reform.

This year, the Academy was awarded £285K of funding from the NHS England (NHSE) Service Development Fund (allocated by the West Yorkshire Integrated Care Board) to support two programmes of work:

## Optimising Integrated Neighbourhood Workforce Ecosystems:

research and identify the evidence and policy landscape around neighbourhood workforce ecosystems

critically evaluate the evidence base and work with an Integrated Neighbourhood Team in Leeds to identify the necessary and sufficient conditions required for successful neighbourhood workforce ecosystems

## Partnerships Leading Care:

Developing and delivering a comprehensive Organisational Development (OD) support package designed to build Integrated Neighbourhood Teams. Fostering inter-professional collaboration, promoting cross-sector teamwork across health, social care, and the voluntary sector, and aligning diverse professional cultures.

## Optimising Integrated Neighbourhood Workforce Ecosystems:

Neighbourhood health workforce ecosystems are collaborative networks of professionals across health, social care, voluntary, and community sectors. These ecosystems aim to improve access, reduce inequalities, and deliver care closer to home.

The Academy was tasked with helping Leeds understand the policy landscape, identifying and appraising the available evidence to support successful neighbourhood workforce ecosystems, and applying these insights in Leeds to develop a series of practical tools which can be used to optimise workforce in a neighbourhood setting.

## Policy and Evidence Landscape

The Academy worked with Leeds Beckett University to undertake a **Rapid Policy & Evidence Review** to explore how neighbourhood health workforce ecosystems can be optimised to support integrated, person-centred, and preventative care. Drawing on a broad range of literature and sources of evidence, the review identified only moderate quality evidence of direct relevance to the UK context but did identify a range of key enablers which are required in order to develop effective neighbourhood workforce ecosystems.

The review concluded that neighbourhood health workforce ecosystems offer a promising route to integrated care, but require strategic investment, local adaptability, and sustained collaboration across sectors.

# IMPACT

## NEIGHBOURHOOD HEALTH WORKFORCE

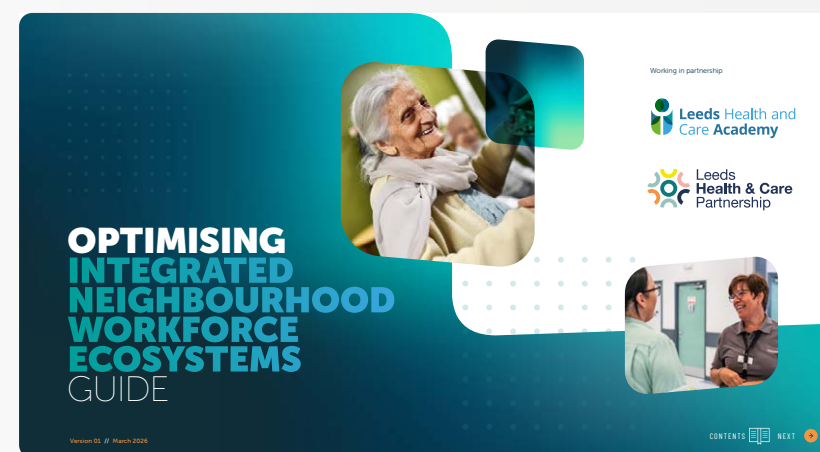
### Developing a Local Integrated Neighbourhood Workforce Ecosystem

After reviewing the policy context, we teamed up with the East Leeds collaborative and partners to translate the policy and evidence into action. Together, we co-designed a set of practical resources:

**An Interactive Guide** on optimising integrated workforce ecosystems

**A Maturity Matrix** for neighbourhood workforce ecosystems

**A Case Study** showing the successful implementation of these ecosystems here in Leeds



These resources are designed to be used across health and care systems, regionally & nationally, by everyone involved in neighbourhood health. They expand beyond the traditional definition of Multi Disciplinary Teams and look at how to optimise the entire workforce in a neighbourhood, considering how the collaborative workforce is defined, how the workforce is shaped, organised and interacts across all partners in the system.

Most importantly, the work identified fourteen factors which need to be leveraged and addressed to different extents in a neighbourhood to optimise the workforce ecosystem.



Of these fourteen factors - **systems thinking** and a **collaborative culture** emerged as the fundamental prerequisites, serving as the essential bedrock upon which all other factors depend.

# IMPACT

## NEIGHBOURHOOD HEALTH WORKFORCE

### PARTNERSHIPS LEADING CARE

Building on the Neighbourhood Workforce Ecosystem insights, Partnerships Leading Care (PLC) focuses on the two foundational success factors for the Neighbourhood Health model:

System thinking

Collaborative culture and communication

PLC offers a range of support to individuals, groups and teams who are engaged in structures to deliver greater integration of services and workforce across the Leeds Health & Care system.

#### Over the past year we have developed:

A structured facilitation programme to support Neighbourhood teams and the Leeds Provider Partnership,

A skills development and knowledge acquisition package

A 12 month development “Fellowship” built on our Team Leeds Values and Behaviours.

#### Key Objectives:

Develop knowledge and understanding of the local health and care system, including its assets, challenges, interdependencies, and drivers of change. Building shared vision and collective action.

Develop and strengthen collaborative leadership skills, building trust, relationships, and collaborative practices across organisational boundaries.

Strengthen systems thinking- increasing capability to manage complexity and change

Enhance communication and influencing skills (negotiation, facilitation, conflict resolution)

Support innovation and problem solving

Create networks and peer learning communities

### INNER SOUTH LOCAL CARE PARTNERSHIP: CASE STUDY

#### Background

A diverse group from Primary Care, NHS Trusts, Adult Social Care, and the Voluntary Sector collaborated with the ICB and Leeds Community Health to identify priority patients for proactive care. This new approach required new processes and ways of working.

#### THE APPROACH

The team participated in three in-person, LHCA and Leeds ICB-facilitated sessions using the Partnerships Leading Care (PLC) programme recognising that partnership and relationship development would be a useful aspect of implementing new ways of working.

#### THE JOURNEY & IMPACT

In the first facilitated session the group were asked to map their “system”- identifying the partners and agents who need to be involved in implementing this new way of working.

Interestingly this did identify some gaps and the group had to consider how best to address this.

The process of system mapping also created a curiosity amongst the group. Group members realised they had limited understanding of each others organisations/ services and ways of working and this led to them creating more space to better understand the pressures and priorities they all face. These insights were instrumental in developing the “**collaborative culture**” necessary for this new model of Neighbourhood Health.

**Building Trust:** While aiming to design new processes, the group realised they first needed to understand each other’s unique roles and pressures.

**Strengthening Relationships:** The PLC programme helped repair inter-organisational relationships, fostering a culture where every voice is valued.

**Better Patient Care:** Patients now benefit from a cohesive, whole-system approach to their care.

**Accelerated Progress:** Group members now collaborate effectively and challenge each other supportively, rapidly advancing targeted work within the Local Care Partnership (LCP).

# IMPACT

## EXPANSION AND DIVERSIFICATION OF CLINICAL PLACEMENTS

We know that if we are to overcome workforce shortages and prepare students for integrated community led care - the need to expand and diversify clinical placements in health and social care is essential. By broadening placement locations, the sector can meet rising healthcare demands and build a resilient, future-ready workforce.

This year, the Leeds Health and Care Academy delivered a pioneering placement expansion pilot that generated **1,957.5 additional clinical placement hours**, increasing Private Independent & Voluntary Organisation (PIVO) placement capacity by **15% compared with the same period in 2024**.

This impact has now been recognised nationally winning the **2026 Occupational Therapy Excellence Award for Community Service and Peer support**.

#### The pilot placed multi professional health and care students directly into mainstream primary schools:

Supporting 20 students across Occupational Therapy and Nursing, diversifying placement settings and strengthening readiness for neighbourhood based models of care.

The Academy acted as a connector, catalyst, partner, and innovator, fast-tracking delivery, coordinating HEIs and schools, and providing long arm supervision to ensure quality and consistency.

Students reported significant growth in leadership, adaptability, and professional identity, skills essential for the future integrated workforce. Schools benefited from public health projects, wellbeing initiatives, and strengthened links between education and health.

In addition, we found that these school placements strengthened future workforce supply by inspiring school pupils to consider careers in health and care, creating a virtuous cycle of aspiration, exposure, and opportunity.

#### OUTCOME

The pilot demonstrates that mainstream schools can serve as high value, multi professional placement environments, broadening the city’s placement circuit and reducing reliance on traditional secondary care settings and its success provides a clear mandate for expansion. Leeds has opened a new, sustainable pipeline for community based workforce development.

#### Recommendations:

scaling placements across more schools, broadening professional inclusion, strengthening supervisory infrastructure, embedding public health projects as a core feature of the model.



### FULL IMPACT REPORT: MAINSTREAM SCHOOL PLACEMENTS

[Click here](#)

# EVALUATION: SPRINGBOARD

Springboard is one of the Academy's flagship programmes, delivered since 2020 to support women working across health and care in Leeds. Since launch, 428 women across 46 organisations have completed this 3 month programme.

## LEARNING TOGETHER: TEAM LEADS AND WIDER SYSTEM IMPACT

### The programme supports women to:

- Take greater control of their lives
- Make positive changes to their health and wellbeing
- Develop their careers (where they choose to)
- Build confidence
- Strengthen relationships

### UNDERSTANDING IMPACT

Feedback from learners is always positive and broadly captures the impact of the programme. However, given the broad reach of the programme's objectives, its full impact can take time to emerge as participants embed the changes and continue to apply the tools introduced to them beyond the programme itself.

It was evident to us that there was more to explore, learn and share.

Working in partnership with Leeds Beckett University, this one-off study used a mixed-methods approach, including focus groups and surveys, to capture the longer-term impact of the programme. The evaluation placed women's experiences at its centre, exploring how learning together shaped their journeys and supported growth in their confidence.

### Key insights:

Women told us that the programme directly contributed to **increased confidence, empowerment and new opportunities**. It helped them to recognise their strengths, articulate their value, and build confidence in their existing skills. Women learnt to define career success on their terms- which was hugely empowering.

*"After the programme, I applied for a more senior position and was successful and I don't think I would have done this without Springboard"*

They recognised the need to prioritise their **Health & Wellbeing** which had a beneficial impact on all areas of their life. Many participants made meaningful life changes — reducing work hours, requesting workplace adjustments, or finally pursuing long desired activities that brought them joy. In addition the programme helped them to set and maintain boundaries -separating work from personal time had a significant, positive impact on their overall wellbeing.

Women improved their **communication skills** both in the workplace and in their personal lives. They navigated difficult conversations, set clear professional and personal boundaries. 72% of survey participants reported that their personal or professional relationships had improved as a direct result of the programme.

Springboard is built on a group approach of "learning together". Cohorts of c25 women connect together through workshops and coaching groups over the 3 months of the programme- creating space for women to reflect, grow and connect across organisations. We wanted to better understand the impact of this "learning together" approach as it was identified by participants as being especially meaningful.

One of the most valued aspects of Springboard was connecting with other women, sharing life experiences and challenges, peer support and validation. Some women formed friendships that continued years later.

**Through the evaluation we were able to better understand how and why this aspect of the programme was valued so highly:**

Diversity of participants – ranging from frontline staff to managerial roles – including different ages, backgrounds, and roles helped create a more integrated, system-wide approach to health and care in Leeds. Springboard attracts high representation from minoritised groups (including those identifying as Black, Asian or Mixed ethnic background, as well as those with disabilities, mental health conditions and neurodiversity)

Women told us how important the Guest Speakers were to the experience. By inviting senior female leaders from the health and care sector to share their career journeys, the program uncovers deeply shared experiences. Overwhelmingly, these sessions reveal that challenges, fears, and doubts are nearly universal. Participants are often surprised—and reassured—to hear their personal anxieties echoed by both peers and senior women leaders.

*"..the group sessions made me realise that we are all struggling and trying and we should lean on each other. It makes you realise you're not alone and there are lots of women going through the same things, my shoulders felt lighter having people on the same page to talk to."*

Springboard is uniquely positioned to create widespread positive change - not only acting as a catalyst for the women who take part in the programme, but also for the wider health and care system in Leeds.

*"There is a ripple effect with Springboard that should not be underestimated"*



### FULL IMPACT REPORT: FINDING VALUE, DISCOVERING POTENTIAL.

[Click here](#)

# LOOKING FORWARD TO 26/27

## NEIGHBOURHOOD HEALTH

A key priority over the coming year is our continued work to support the Integrated Neighbourhood Health (INH) workforce. The insights and outcomes of the ecosystems work are being communicated across the system and plugged into INH development activity to inform the workforce elements of the shift to integrated neighbourhood health. Alongside this, we will be extending support to Neighbourhood Teams through the Partnerships Leading Care programme as they implement new models of integrated care. We are also an integral enabler of the establishment of the Leeds Provider Partnership (LPP), supporting workstreams to ensure that Partnership OD is embedded in the foundations of the LPP.

## THRIVE YR 2 TO WORKWELL

We are thrilled to secure funding for Thrive Year 2, marking our transition from the *Thrive@Work* pilot to the *WorkWell* rollout. We are moving from testing concepts to scaling real-world impact. Thrive proved that targeted, clinical interventions keep people in employment. *WorkWell* scales this insight into a national, early-intervention service. By integrating health, employment, and skills support into a single pathway, we are shifting from reactive care to proactive, population-level prevention that sustains good work.

## FAIRER, HEALTHIER LEEDS

The next phase of the Fairer Health Leeds programme will focus on embedding and upscaling delivery across the whole system, ensuring that successful approaches are consistently implemented and sustained. This will involve strengthening partnerships, aligning resources, and integrating initiatives into routine practice. A key element of this phase will be the systematic review of evaluation and impact, using data and learning to refine interventions, demonstrate outcomes, and guide future priorities, ensuring that progress towards reducing health inequalities is both measurable and meaningful.

## CAREERS INFRASTRUCTURE

We are continuing to develop, embed and expand access to our digital careers infrastructure, building on the legacy of work in Leeds and across West Yorkshire.

Our careers platform Career Compass has evolved over the past year with the development of Your Health, Your Career, a tool to support people with health conditions make career decisions. We will be working with partners to explore how AI can give users an even more personalised and bespoke experience, and incorporate referral routes to in-person careers and employment support. By joining up people's digital and in-person careers activity, we can support even more people to make proactive, positive career choices which support their career aspirations and enable them to stay healthy in the workplace.

Following the reorganisation of WY ICB, we will manage the Aspiring Allies virtual work experience programme. Developed by the ICB's West Yorkshire AHP Faculty, this high impact programme has supported 1800 young people to gain insights into the breadth of AHP roles. Delivered virtually, the programme includes live sessions with AHPs from across the region and modules covering an introduction to AHP roles, as well as in-depth modules on physiotherapy, occupational therapy, dietetics and ODP. We see this as an extension of our work to support Children and Young People and we are especially keen to explore additional virtual work experience programmes.

# FULFILLING POTENTIAL



Website **[leedshealthandcareacademy.org](https://leedshealthandcareacademy.org)**

Email **[LHCA@nhs.net](mailto:LHCA@nhs.net)**