



Prevention and Early Intervention

Why should this be a core Wellbeing Strategy for companies to safeguard their employees?



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to Kooth**

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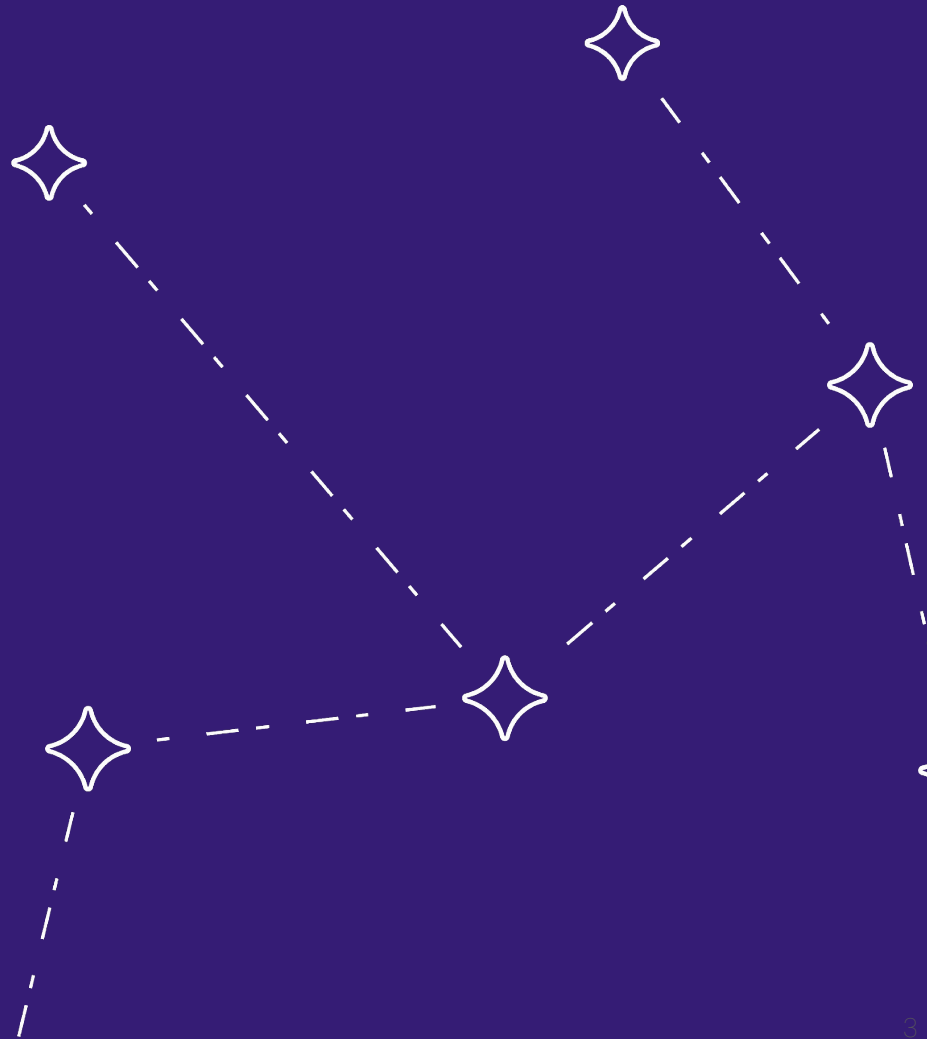
**The research
from the Flourish
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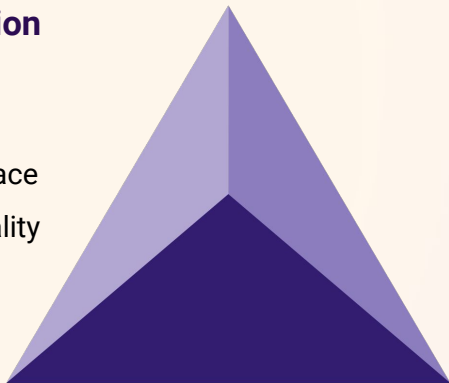
An introduction to Kooth



Kooth was founded in 2001 to digitally transform mental health care

Grow access & enhance prevention

Remove barriers
Welcoming, safe space
Tackle health inequality



Early intervention & responsive support

Self-determination
Person-centric
Strengths-focused

Innovation in outcomes

Clinical, social, and economic outcomes




80% of NHS regions contract with Kooth

~16.7 million people have access

460+ staff incl **260+** practitioners & clinicians

50 + research papers produced


Providing NHS services

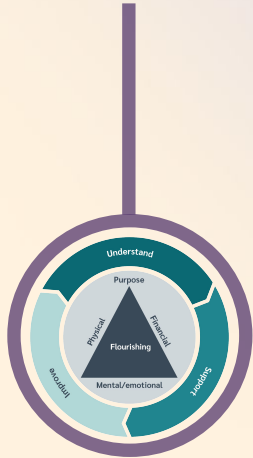
 | Accredited Service



Kooth Work helps employers to form the digital backbone of a prevention and early intervention mental wellbeing strategy



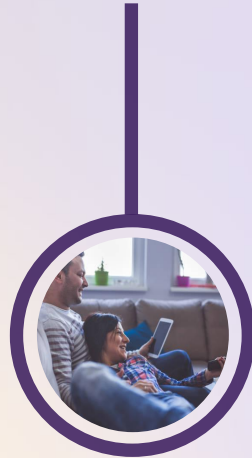
Benchmark
status, risks & gaps



Guidance & fit
support & investment



At work
employee



At home
employee & family



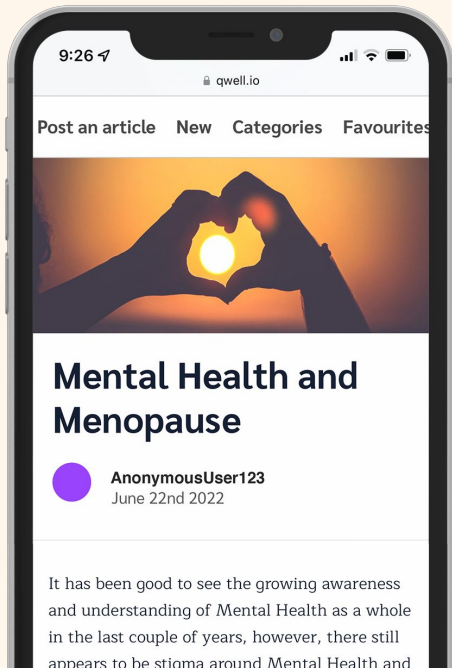
KPIs & insights
forward-looking



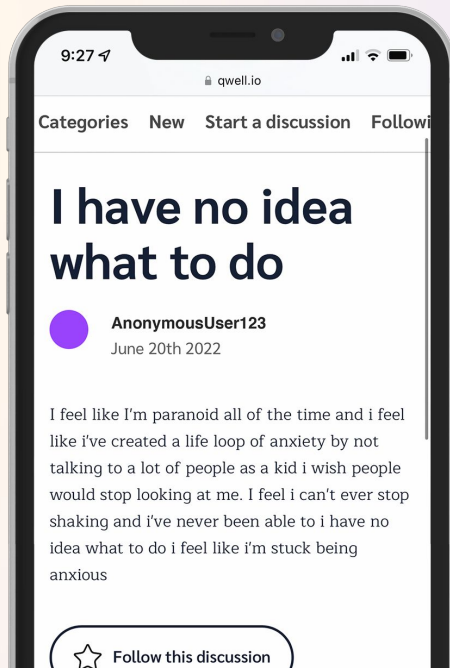
Engagement comms
leadership & staff

We provide an integrated platform for personalised mental health care. Anonymous by default.

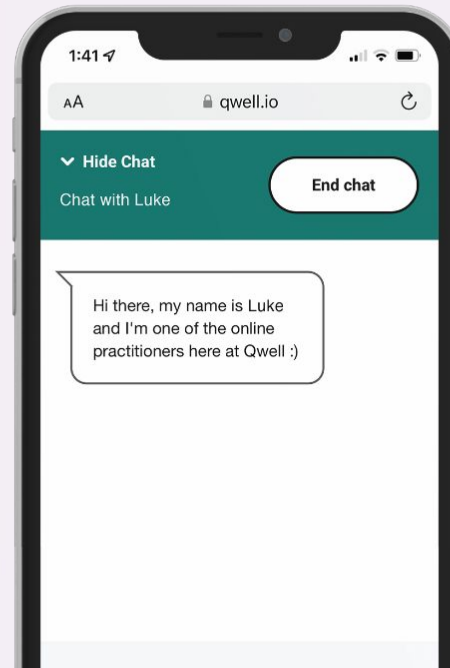
Self-Help



Content and Community

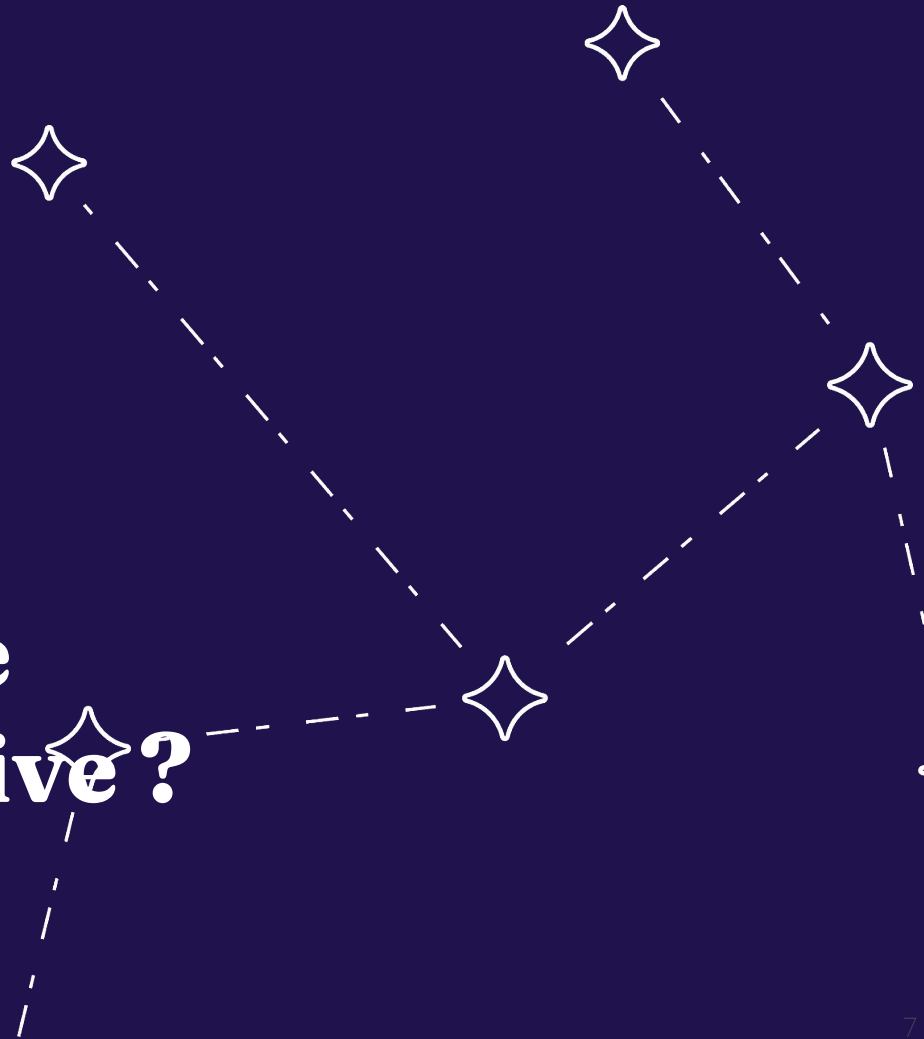


Professional Support



2

**Why preventative
rather than reactive?**



“Business as usual” cannot address the growing demand and impact of poor mental health in the workplace

1-in-5 of the population have a diagnosable mental health condition every year

Poor Mental Health

- Costs UK employers up to **£56 billion every year**,
- Is the **#1 reason for absenteeism**

To tackle this, organisations & healthcare systems need to move “upstream” to tackle issues before they escalate

Downstream Treatment-focused

Reactive, late intervention
Condition-centric
Episodic
Expensive



Upstream Prevention-focused

Proactive, early and responsive help
Person-centric
Ongoing, alongside you
Economic. £1:£5 ROI¹

What should key 'prevention' based wellbeing targets be?

To reduce **human** and **financial** cost and bring other positive outcomes:

- Reduce absence and sickness rates & presenteeism caused by Mental Health
- To improve workforce resilience and productivity via a thriving culture (Psychologically safe space)
- Reduce poor retention and attrition of employees
- Increase recruitment of talent and diversity of employees (to increase profit and productivity)
- Prevent suicide and depression
- Fulfil your duty of care as employers and reduce the risk to your organisation
- Wellbeing and ESG (see Deloitte report*)
- To meet coming statutory changes - Occupational Health requirements & possibly MHA training and more

• [:Deloitte Report on ESG](#)

Kooth Work/Qwell

EAP

Prevention and Early Intervention

Reactive - acute and crisis cover

Qwell: Accessible to all your Employees. Up to 10x EAP usage.

EAP 4% usage

1. BACP accredited specialist mental wellbeing support
2. Easy access to single flexible mental wellbeing platform
3. Anonymous and confidential
4. Supported population and usage pricing model
5. Senior clinical team and professional counsellors
6. Pick up with the same counsellor
7. Counselling available to all your staff
8. Discreet and secure text-chat focused
9. No restrictions or waitlist
10. Prevention and early intervention counselling
11. A range of 20% to 44% average workforce uptake
12. Detailed evidence based and anonymised insights to inform strategy
13. Return on investment: minimum 5:1+

1. Aggregation of wellbeing services and providers
2. General apps available to support mentally healthy
3. Not anonymous or confidential
4. Insurance based pricing model
5. Junior therapists
6. Can't guarantee same person each time
7. Need to qualify for professional support
8. Phone and in-person focused
9. Waitlist and pre-existing conditions dependent
10. Reactive treatment
11. 4% of workforce uptake
12. Limited reporting - not evidence based and reliable
13. Hard to prove ROI but only supporting a small percentage of your employees.

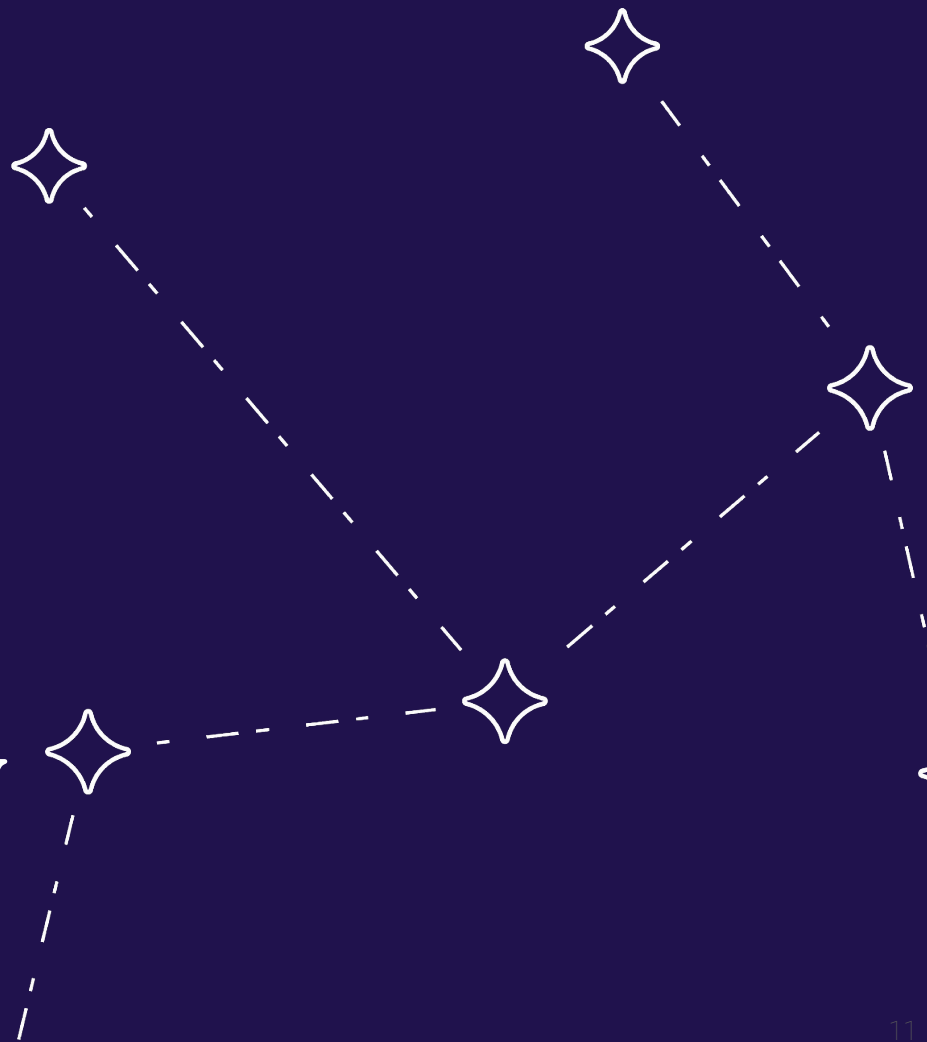


Key purpose: The most cost effective way to provide support and counselling for all your staff who fall outside of the 4% of your EAP coverage.

Key purpose: Insurance to provide staff with acute needs access to expensive in-person professional treatments.

3

**Wellbeing is a
Business strategy**



Recent BITC and Mckinsey report - Economic Value Proposition *

The Negative -

The cost of sickness and absenteeism, presenteeism and attrition (from Mental Health) is £150bn per year or £5,000 per employee.

The Positive +

The positive returns from improved productivity , attraction and retention (by investing in prevention) could be £120bn per year or £4,000 - £7,000 per employee.

The Cost - some key numbers and how to calculate them:

Estimating the cost of your Sickness and absenteeism from Mental Health

STEP 1: Take your annual average Salary divided by assumed working days per annum:

★ IE: **COMPANY A** - £33,000 / 260 = £126.92 cost of sickness and absenteeism per day

STEP 2: Take this cost and multiply by actual average sick days in your organisation and then multiply by number of staff

★ IE: **COMPANY A** - £126.92 X 7.8 X 3,800 = £3,761,908 = Annual cost of Sickness and absenteeism

*STEP 3: 50% relate to MH * = £1,880,954*

Presenteeism is 1.5 times the cost of sickness and absenteeism:

£1,880,954x1.5 = **£2,821,431**

Employee attrition: it costs on average £30,614 per employee lost after recruitment *1

112 x £30,614 = **£3,428,768 cost of attrition**

72% of employees worked whilst unwell *2

*1 - Source: Oxford Economics and Income protection provided Unum 2014 *2 - Flourish Assessment benchmark Kooth 2022

Different ways of calculating Return on Investment

COMPANY A: A generic view of investing in prevention based on core Kooth Product cost for 3,800 employees

Accumulated savings if sickness and Absenteeism plus presenteeism is reduced costs by 5% = **£309,765**
= **ROI 7:1**

Accumulated savings if sickness and Absenteeism plus presenteeism is reduced costs by 10% = **£619,531**
= **ROI 14:1**

Accumulated savings if sickness and Absenteeism plus presenteeism is reduced costs by 15% =
£929,297.85
= **ROI 20:1**

COMPANY A : A specific view - working with the Kooth/Qwell platform:

Cost of sickness and absenteeism from MH in 2022 is: **£1,880,954**

Employee population is: **3,800**

Average engagement with Qwell in 2022: **20% = 760 employees**

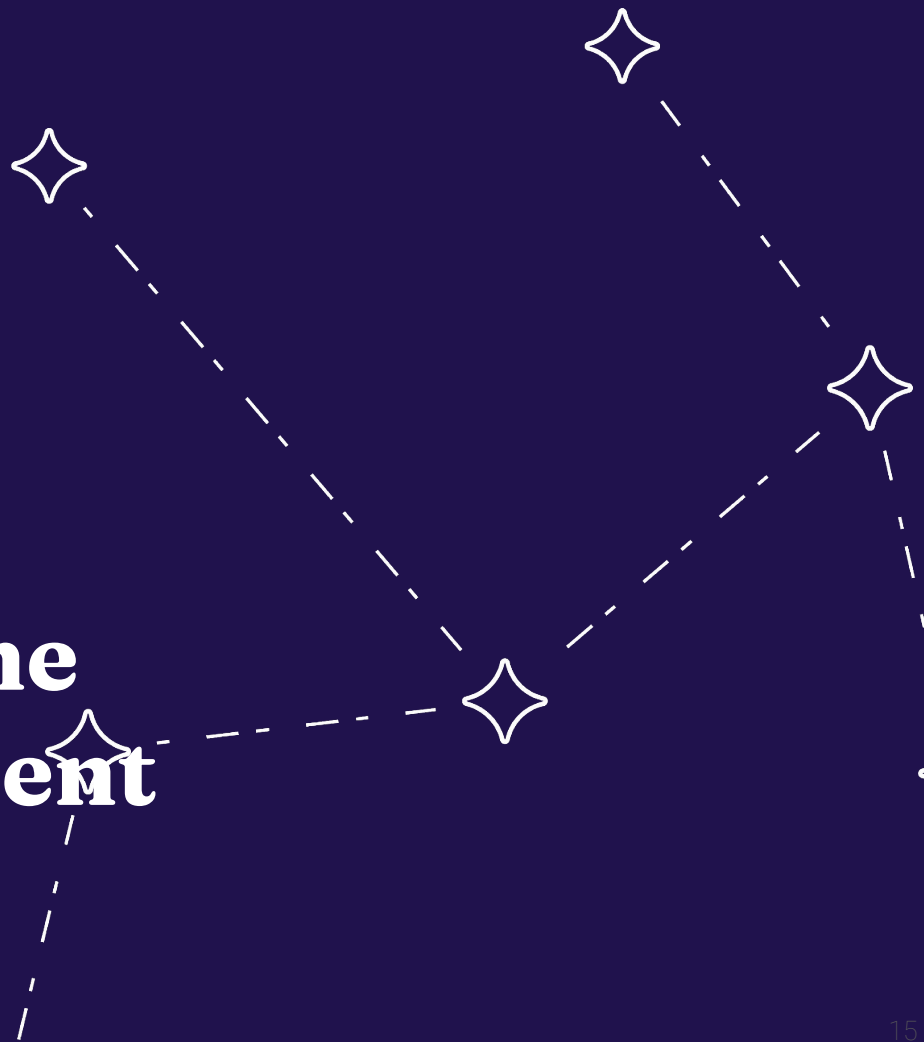
Significant improvement in MH on the platform is: **72% in 2022**

760 employees (20%) are responsible for **5,928** sick days costing **£752,381**. If reduced by **72%** this would equate to a saving of **£541,714**



4

The Research - The Flourish Assessment data 2022



Flourish workforce mental health check tool

Assessment tool & clinical recommendations report

Benchmark your workforce's mental health and understand the hidden risks. Optimise your mental wellbeing support strategies and options.

Flourish is **ethics committee approved** and participation is **anonymous** - no personal data is requested as part of the assessment. Visit [Flourish](#)

Key clinical measurements:

- **Flourishing Index**
- **WHO-5 Index**
- **Copenhagen Burnout**
- **ACE**
- **GAD-7**
- **WSAS**

Areas of assessment

Context: Individual, homelife, workplace

Effectiveness: Workplace wellbeing support options and effectiveness

Key risks: Anxiety, workload, burnout, risk of depression, traumatic life events, risk of leaving

Your department receives anonymised insights into the overall mental health of your workforce and underlying risks.

Professional clinical mental wellbeing recommendations report for you to improve and optimise your workforce mental health support framework.

Participating employees receive their own confidential mental health score profile, to help them understand their own mental wellbeing status and make use of appropriate signposted support.



Scan here to **check your mental health score**



 **kooth** | Work

What does the Flourish research data say ?

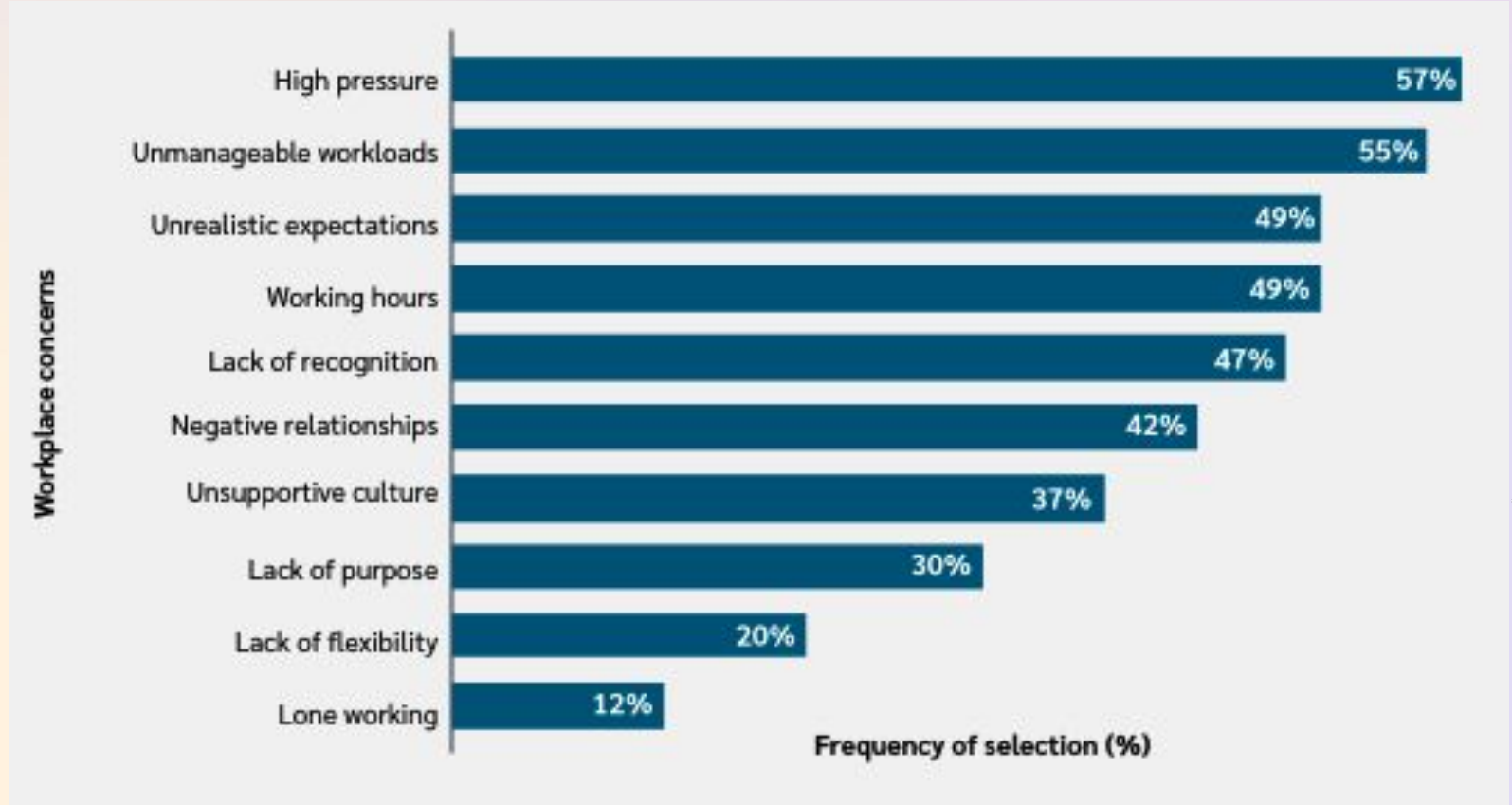
40% of employees do not know what wellbeing provisions their companies offer

1 in 3 Employees think work negatively impacts their mental health

37% of people show moderate to high levels of burnout

1 in 4 Employees would consider **leaving to work for another company** with better mental health support⁴

The top factors that impacted employees mental health



Employee mental health is never simply 9-5



Where available, 58% of employee support is accessed out of work hrs



Mental wellbeing at work and home life are interlinked



Financial and relationship issues dominated

Discriminated against groups are a high risk cohort

74% of those who experienced discrimination agreed it negatively impacted their mental health”

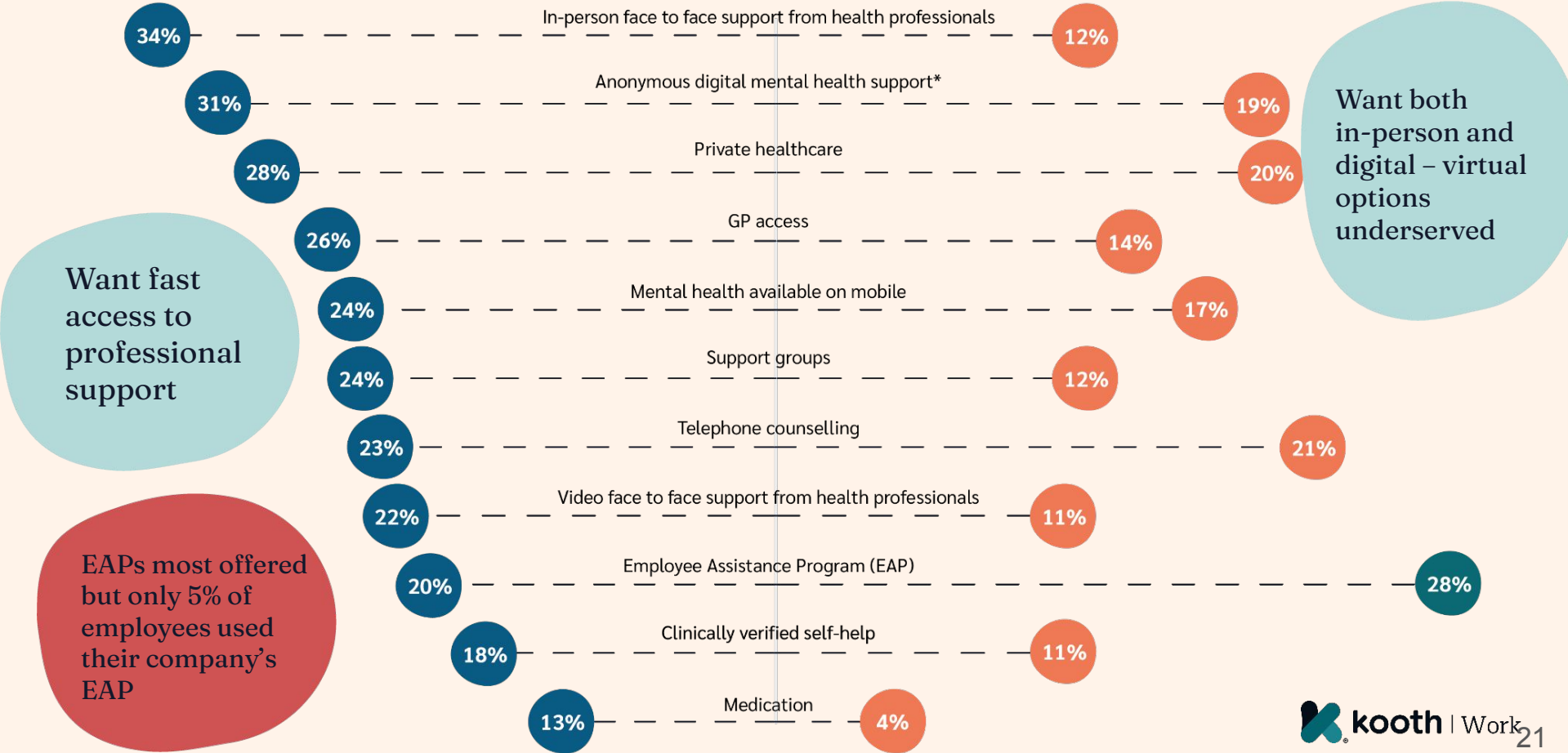


BAME and LGBTQ+ employees consistently showed higher levels of stress, anxiety and depression

Support employees want

Vs

Support offered



As a person-centered service, we support individuals across a broad range of mental wellbeing issues. Data from the Qwell platform shows



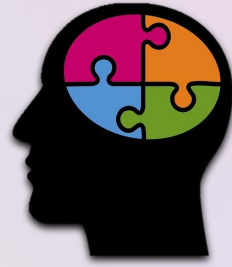
It's not just about anxiety and depression.

Top challenges we are aware of from the Qwell data in 2022

- Increased anxiety/stress/Depression
- Impact of Trauma/PTSD/CPTSD
- Increase in loneliness/isolation
- Cost of living crisis
- Work/life balance challenges
- Increase in burnout
- Increase in public abuse

Conclusion

Prevention and early intervention is a 'No Brainer'



Better for All. The business AND their employees

So why is it not standard practice in 'wellbeing strategies'?

- **Following the crowd**
- **Lack of visibility - these numbers are not seen as they are Off Balance sheet profit and loss.**
- **It's not mandatory**

BUT times are changing.....

5 Q&A

