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HEALTH AND WELLBEING AT WORK 2022

Implications and recommendations for practitioners

Health and Wellbeing

The CIPD is the professional body for HR and people development. The registered charity champions better work and working lives and has been setting the benchmark for excellence in people and organisation development for more than 100 years. It has more than 160,000 members across the world, provides thought leadership through independent research on the world of work, and offers professional training and accreditation for those working in HR and learning and development.

Guide

Health and wellbeing at work: Implications and recommendations for practitioners

About the guide

This guide is based on the findings of our latest *Health and wellbeing at work* survey, produced in partnership with Simplyhealth. It explores the key challenges employees face related to the pandemic and outlines the practical steps organisations can take to support their physical and mental health.

HR practitioners can use the guide to help ensure they focus action where it's most needed. This means taking a systematic approach to help prevent ill health, as well as providing support for people when they need it.

Implications and recommendations

Don't underestimate the ongoing impact of COVID-19

Even though we have hopefully emerged from the acute phase of the pandemic, COVID-19's long-term health impacts on the working population will be felt for many years. This includes those individuals who continue to experience ongoing symptoms after catching COVID-19, known as long COVID.

The National Institute for Health and Care Excellence (NICE) defines post-COVID syndrome or long COVID as *'signs and symptoms that develop during or following an infection consistent with COVID-19, which continue for more than 12 weeks and are not explained by an alternative diagnosis'.*

There's still a lack of comprehensive evidence showing the prevalence of people experiencing long COVID, partly because diagnosis of this new condition is not always straightforward. Even so, our survey shows almost half (46%) of organisations have employees who have suffered from long COVID in the last 12 months. A further one in four organisations (26%) include long COVID among their main causes of long-term absence.

We are still learning about the real impact of long COVID on people's physical and mental health, but it's clearly a significant concern and needs attention from HR professionals. It's vital that organisations, working with occupational health services, are as informed as possible about this potentially debilitating condition, so that they can effectively manage and support affected employees. If individuals don't receive appropriate understanding and support, the risk is that work could exacerbate their symptoms, and many employees could even fall out of work.

Recommendations

- Understand the extent and impact of employees experiencing long COVID in your organisation by gathering information such as occupational health and sickness absence data. Use employee survey feedback to identify presenteeism, in case any individuals are working when they are ill with long COVID.

- Learn about long COVID and its potential impact on people and their interaction with work. This new condition shares characteristics with many chronic health conditions. (See the CIPD's practical guidance for HR and line managers on *Managing and Supporting Employees with Long-Term Health Conditions*.) However, there are some differences that organisations need to be aware of. Our research report has specific evidence-based advice for supporting people with long COVID, and its key findings will be translated into CIPD practical guidance for HR and line managers.
- Equip line managers with the knowledge and skills to effectively manage and support any team members experiencing long COVID. Check out our Long COVID hub for further information. See the CIPD guides for HR, line managers, employees with long COVID and colleagues on how to support people with this condition. This guidance by the Society of Occupational Medicine outlines how managers can best help an employee with long COVID return to work.
- Embed support for people with long-lasting symptoms of COVID-19 within the organisation's wider health and wellbeing framework, to help to ensure that it's sustainable. This will also help to ensure that the organisation's guidance and support continues to reflect evolving NHS and other clinical advice for long COVID.
- Recovery from long COVID can be slow and the fluctuation of symptoms means that employees often need to increase their work activity slowly over time. See the CIPD's guidance for HR professionals and managers for managing a return to work after long-term absence to ensure employees can make a safe and sustained return.

Consider health and wellbeing priorities throughout the employee lifecycle

Over the past few years, our findings show more organisations taking a strategic approach to wellbeing. To optimise its impact, a health and wellbeing strategy should be based on the health risks and needs of its workforce, including approaches to help prevent or mitigate illness. This includes analysing its people demographics to highlight the potential health and wellbeing challenges individuals can potentially experience throughout the employee lifecycle as they age.

This approach doesn't mean making assumptions about an individual's health profile because of their sex, age or other characteristics, but having an awareness about the potential health issues that could be a concern for certain groups of people at certain stages of their life. For example, there are common health conditions associated with ageing and, as people age, they are more likely to experience several conditions at the same time. Employers can play a significant role in helping to reduce the barriers employees can encounter in managing a health condition or disability in relation to their job.

Our 2022 survey explores the extent to which organisations' health and wellbeing activity includes provision (for example, policies, guidance, awareness-raising or line manager training) for a wide range of life-stage health matters, ranging from reproductive and women's health concerns, such as fertility treatment or pregnancy loss, to wider wellbeing issues that can affect people regardless of their age, such as domestic abuse.

Recommendations
- Incorporate an understanding of employee lifecycle health issues as part of your organisation's health and wellbeing strategy, so you can educate your workforce and develop appropriate interventions to support people at key stages of their employee journey.
- Use the CIPD's resources to develop or improve your organisation's support for key life-stage and other health and wellbeing issues, including alcohol or drug misuse, bereavement, domestic abuse, the menopause transition, suicide risk and prevention, and caring responsibilities.

- Use opportunities such as national wellbeing calendar events and campaigns, your organisation's wellbeing activities and communications, and senior leaders' messaging to promote awareness and available support. For example, in 2022, October is World Menopause Month, 10 June is the start of Men's Health Week, and World Suicide Prevention Day is on 10 September every year.
- Promote and embed flexible working practices across the organisation so that people with caring responsibilities, a health condition or disability can flex their hours and responsibilities to suit any fluctuating needs. Ensure you have a policy and/or guidance to help managers and individuals agree supportive workplace adjustments.
- Support a climate where people can share their health concerns and needs. Create an open culture around health and disability issues – this is a key step in fostering an environment where people feel comfortable to talk about their condition and seek support.
- Provide training and guidance for line managers. Line managers are not medical experts, but they can develop an understanding of someone's condition – and how it impacts on their ability to perform their role at certain times. Check out the CIPD and Department for Work and Pensions' guide for line managers on recruiting, managing and developing people with a disability or health condition.

> HR professionals have continued to help lead their organisation's response to COVID-19 for more than two years now, including the weight of responsibility for people's wellbeing during a very challenging time. Do be mindful of the ongoing risks to your own wellbeing and seek support if needed. Check out our Wellbeing offering for CIPD members.

Take an evidence-based approach to tackle 'presenteeism' and 'leaveism'

Over the last few years, our survey has found the vast majority of respondents have observed people coming into work when unwell (presenteeism). Our findings show that presenteeism remains prevalent, with just 14% of respondents not observing any form of this behaviour. However, it's more likely to be observed among employees based at home (81%) compared with those in the workplace (65%) – perhaps not surprising given the considerable increase in homeworking during the pandemic.

These findings are a reminder that organisations need to look much deeper than absence levels to understand the underlying factors influencing people's attendance and behaviour. Unhealthy practices like presenteeism can have long-term consequences for people's health, performance and productivity. If employees work when unwell, it can be damaging to themselves and the organisation, not only because they could transmit infection but because their illness could worsen. The impacts of an illness, such as impaired cognitive ability, could result in unwise decision-making or even unsafe or costly mistakes.

The survey findings also identify 'leaveism' as another unhealthy trend, involving employees using allocated time off inappropriately, such as working when on holiday.

If presenteeism or leaveism are evident in an organisation, these are likely to be signs of wider organisational issues affecting people's health and wellbeing. For example, our findings show once again that workload is by far the main cause of stress at work. This could be one reason why some employees feel they can't complete their work in the time available and need to work when they shouldn't be.

Recommendations

- Find out the nature and extent of the problem. Gather and analyse employee survey data and other people analytics to gain an evidence-based understanding of any incidence and patterns of presenteeism or leaveism in your organisation. Use information from other sources such as occupational health to understand if, how and when employees are working when they should be on sick leave or holiday.
- Understand the specific organisational factors influencing people's behaviour and attendance patterns and take remedial action. Presenteeism can be a complex phenomenon, but it can be tackled.
- Work with senior leaders and managers to understand the risk factors and causes of presenteeism and leaveism in particular departments and teams. Are workloads, targets, deadlines and management expectations realistic?
- Check out this report for the Society of Occupational Medicine on *Presenteeism during the COVID-19 Pandemic: Risk factors and solutions for employers* to understand how to reduce presenteeism in your organisation; for example, review absence management policies and practices, consult staff about their experiences and implement an employee wellness programme to highlight the importance of self-care.
- Consider other strategies to tackle presenteeism and leaveism, including:
  - guidance for managers to help them spot the warning signs
  - positive employee communications, for example to encourage people to take annual leave
  - healthy role-modelling by senior leaders, for example not working when ill
  - a culture based more on outputs than inputs
  - encouraging healthy use of digital technology so that people can 'switch off' out of work hours.

Develop a supportive and flexible approach to absence management

It's been another demanding year for organisations and people's health due to the impact of the pandemic. There's been extensive disruption to business operations due to sickness absence and self-isolation, and for the second year running the CIPD has been unable to provide a reliable headline absence rate for benchmarking purposes. However, we can report that one in 12 organisations (8%) lost more than 25% of working time to COVID-19-related absence in the 12 months prior to the survey.

Significant sickness levels can undoubtedly be a tremendous challenge for employers, and they need to take a proactive approach to absence management. However, the high levels of presenteeism observed in the survey also show that many people are working when they are unwell. There could be many causes of presenteeism, but too-rigid absence procedures and a lack of confidence by employees to share details of a health issue could be contributing factors.

Employers should develop an absence management framework and culture that encourages genuine reporting of the reasons for sickness absence, whereby people feel able to disclose the real reason for taking sick leave. Feeling able to be open about the need to take time off for illness, such as symptoms of a long-term health condition or disability, is a necessary step in employees accessing support and potential adjustments from work.

Absence management policies and procedures should be flexible and highlight health issues such as the menopause and long COVID as potential long-term fluctuating health conditions that should be treated as such. If symptoms affect an individual's capacity to work and their attendance, it's appropriate to treat this type of non-attendance outside of the normal absence reporting procedures. Being flexible in its approach doesn't mean an organisation can't be fair and consistent in how it manages sickness absence across the workforce.

Recommendations

- Review the organisation's absence management policies and framework to ensure they are flexible enough to support employees with chronic health conditions or disabilities, such as mental ill health, the menopause and long COVID. Browse through our Managing absence Q&As for further guidance.
- Beware of using the Bradford Factor to measure the number of absence spells to identify persistent short-term absence. This approach, like a trigger system, could penalise an employee who needs to take sick leave to deal with their symptoms. The reasons for an employee taking frequent periods of absence should be discussed with the employee.
- Consider how short spells of sick leave related to a disability or chronic health condition could be recorded separately, for example by having distinct codes for specific conditions in the absence reporting system.
- Ensure that line managers are confident to keep in touch with absent team members in a sensitive and supportive manner, and are able to conduct effective return-to-work interviews. See the CIPD guide for line managers on *Managing a Return to Work after Long-term Absence*.
- Provide training and guidance for line managers. Check out the CIPD and Department for Work and Pensions *Guide for Line Managers: Recruiting, managing and developing people with a disability or health condition*.
- Remember, it's good practice to consider making adjustments for any individual experiencing difficulties at work because of a long-term health condition. Promote and embed flexible working practices across the organisation so people with a health condition and/or disability can flex their hours and responsibilities to suit any fluctuating health needs.

Focus action on 'good work' to prevent stress and improve mental health outcomes

Year on year, our survey findings show that organisations put more emphasis on providing support when people become ill than on preventing poor health, including mental ill health and stress. We need both approaches, and want to see every organisation taking a proactive approach to employee wellbeing. This means creating the working conditions and environment that manage and mitigate the main health risks and provide 'good work' to support good wellbeing. It has long been proven that good work is good for health and can reduce health and economic inequalities.

The CIPD's latest Good Work Index (GWI) shows that job quality in the UK has been surprisingly unaffected by the pandemic so far, but continues to fall short in a number of key areas. For example, one in four workers said that work is bad for their physical (23%) or mental (25%) wellbeing.

There is much work to do to improve job quality to ensure it improves mental health outcomes. Employers should design jobs with realistic workloads and targets, and put enough resources in place to avoid overwork. They should ensure managers are trained and capable to set realistic performance objectives, monitor workloads and manage by outcomes.

Recommendations

- Implement a systematic framework to improve mental health outcomes for people such as the Mental Health at Work Commitment, a framework of six standards with key actions linking to practical tools and guidance. We have developed our own hub with CIPD resources to support the Commitment.

- Check out Business in the Community's report, *What if Your Job was Good for You?*, supported by the CIPD. The report's calls for action emphasise that *'now is the time to address the systematic causes of mental ill health at work, focusing on prevention and creating good work that is good for wellbeing'.* It sets out how business leaders can achieve good jobs for all, that drive sustainable positive mental health outcomes.
- Focus on the actions under Standard 2 of the Mental Health at Work Commitment (*to proactively ensure work design and organisational culture drive positive mental health outcomes*) and use the CIPD resources to achieve Standard 2 through ways of working that enhance mental health and wellbeing.
- Manage the risks of stress and poor mental health. See the Health and Safety Executive's range of practical tools to help managers start a conversation with team members (see its *Stress Risk Assessment*, including the Stress Talking Toolkits).
- 'Management style' continues to be a major cause of work-related stress, showing how harmful the health impact can be if organisations don't equip line managers to perform their people management role in the right way. Ensure they are supported and trained to be an effective people manager and to look after health and wellbeing in their teams.

Ensure employee wellbeing remains a boardroom priority and a core management capability

Overall, our findings reflect employers' growing commitment over the past few years to improving people's health. However, there is not quite the same top-level focus that was evident last year, when COVID-19 threw so many organisations into crisis and made people's health, safety and wellbeing a critical business continuity issue. For example, this year 70% of respondents agree that employee wellbeing is on senior leaders' agendas compared with 75% last year, and 60% report that line managers have bought in to the importance of wellbeing, compared with 67% last year.

We could never assume that employee wellbeing would remain centre stage in organisations post-pandemic, but the CIPD is determined to ensure it receives the attention it deserves and is seen as a key driver of business success.

Authentic and visible leadership, combined with strong management capability, are the pillars that support a healthy workplace. Without both, an organisation's efforts to create an inclusive culture and support employee wellbeing will be short-lived. Line managers are under considerable pressure in the current climate, and they will also be experiencing many of the same concerns as those they manage. The continuing impact of COVID-19 means they will be managing a potentially complex mix of personal situations in their teams. To meet the considerable expectations on them to support health and wellbeing, employers need to ensure line managers have the training, competence and time to manage people.

Recommendations
- Develop a strategic and holistic approach to ensure health and wellbeing priorities are integrated across the business. A standalone plan is an opportunity to set out your organisation's aims and communicate the responsibilities of different groups, including a senior-level sponsor, HR, occupational health, managers and employees.
- Monitor and evaluate the outcomes of your health and wellbeing programme to secure ongoing commitment from senior leaders. What difference does it make to employee outcomes, such as attendance, engagement and performance?
- Ensure line managers are checking in regularly with people, spotting any early warning signs of poor wellbeing and referring to expert sources of help where needed. Use the CIPD and Mind *People Managers' Guide to Mental Health* to help managers facilitate conversations about stress and mental health.

- How line managers behave and the relationships they build will be instrumental in how effectively they support employee wellbeing. The CIPD has developed these resources to help managers explore and develop their management capability.

Next steps

Download *Health and wellbeing at work,* in partnership with Simplyhealth, to read the full 2022 report, including forewords from the CIPD and Simplyhealth, case studies from different organisations and detailed analyses.

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