

THE NHS WORKPLACE WELLBEING RIPPLE

References and resources

INDIVIDUAL

STATISTICS

Only 39% of organisations have mental health support systems: Thriving at Work: Stevenson/Farmer review of mental health and employers, 2017

32.4% NHS staff sickness was attributed to mental health issues: <https://digital.nhs.uk/data-and-information/publications/statistical/nhs-sickness-absence-rates/july-2020>

46.6% of NHS people reported coming to work despite not feeling well enough to perform their duties: NHS staff survey 2020

44.1% of NHS people felt unwell because of work-related stress: NHS staff survey 2020

RECOMMENDATIONS

Integrate wellbeing across all systems and practices rather than only provide individual wellbeing support

Prioritise basic essential needs; food, rest, sleep, childcare, breaks etc.

Address unsupportive environments and recognise that lack of control and toxic cultures are as damaging to mental health as trauma exposure

Recommendations from Care Under Pressure 2: workplace psychological ill-health for nurses, midwives and paramedics. Available at: <https://workforceresearchsurrey.health/projects-resources/cup2/>

TEAM LEADERSHIP

STATISTICS

55.2% of NHS staff worked unpaid overtime: NHS staff survey 2020

69% of employees say manager behaviour increased their stress: <https://workplaceinsight.net/behaviour-managers-increasing-workplace-stress-claims-study>

Only 24% of managers have received some form of mental health training at work: Thriving at Work: Stevenson/Farmer review of mental health and employers, 2017

RECOMMENDATIONS

Recognise early signs of poor mental health among staff and challenge ‘serve and sacrifice’ culture

Encourage peer validation and leader empathy to reduce shame and isolation of individuals

Give psychological harm parity with physical injury

Build learning cultures and reduce blame cultures to foster wellbeing

Develop compassionate leaders and support psychological safety

Recommendations from Care Under Pressure 2: workplace psychological ill-health for nurses, midwives and paramedics. Available at: <https://workforceresearchsurrey.health/projects-resources/cup2/>

Leader wellbeing is the single most powerful driver of organisational wellbeing: Statement from the WorkWell Leaders Impact Measure, 2025, <https://www.workwellleaders.org/wp-content/uploads/2025/04/WWL-Impact-Measure-White-Paper-v1.0.pdf>

ORGANISATION

STATISTICS

Improving wellbeing reduces staff sickness and the annual c.£10 billion agency spend: <https://www.bps.org.uk/news/nhs-spending-temporary-staff-highlights-need-investment-staff-wellbeing-services>

Staff are 13% more productive when happy: Saïd Business School WP 2019-13: Bellet, Clement and De Neve, Jan-Emmanuel and Ward, George, Does Employee Happiness have an Impact on Productivity? (October 14, 2019). Saïd Business School WP 2019-13, Available at SSRN: <https://ssrn.com/abstract=3470734> or <http://dx.doi.org/10.2139/ssrn.3470734>

26.5% of NHS workers often feel like leaving the organisation: NHS staff survey 2020

61.6% of NHS staff felt that there weren’t enough staff in their organisation to do their job properly: Stress, overwork and poor work-life balance undermine UK job quality | CIPD

RECOMMENDATIONS

Involve staff in developing wellbeing solutions to build engagement and autonomy

Contain anxiety and manage collective stress to improve organisational performance

Invest in staff wellbeing to improve care quality and safety

Prioritise improvements in working environments, instead of wellbeing ‘add-on’s that can actually increase stress and frustration for staff

Recommendations from Care Under Pressure 2: workplace psychological ill-health for nurses, midwives and paramedics. Available at: <https://workforceresearchsurrey.health/projects-resources/cup2/>