



The value of creating a culture of trust

Insights from the healthcare sector

Executive summary

Healthcare workforce wellbeing and productivity challenges

Key findings include:

- 80–86% of employees reported continuing to work while unwell despite reduced effectiveness
- 47% reported leaving a role or taking extended leave due to mental health challenges
- 57% disagreed that employer support helps them continue working despite health challenges
- Mental health and neurodiversity present the greatest risks to retention and long-term workforce sustainability
- Line managers are consistently trusted more than HR or senior leadership when discussing wellbeing concerns

Healthcare organizations are operating under sustained workforce pressure, with growing concerns around burnout, absenteeism, retention and presenteeism. Across the sector, employees frequently continue working while unwell, often with reduced effectiveness, highlighting the gap between support provision and day-to-day employee experience.

Our healthcare sector research insights show that confidence plays a critical role in determining how healthcare workers respond when facing health and wellbeing challenges. Employees who feel confident raising concerns and accessing support are more likely to remain engaged, productive and in the workforce.

For healthcare organizations, the findings reinforce that wellbeing support is not simply an employee benefit issue; it is directly linked to workforce resilience, productivity and sustainable care delivery.

Building trust through structured support

In healthcare environments, where healthcare workers operate under sustained emotional, physical and operational pressure, consistency in support is critical.



Structured wellbeing standards can help translate policy into practice, ensuring employees experience meaningful and reliable support. Workplace standards such as ISO 45001 and ISO 45003 provide a framework for:

- psychological safety and open conversations
- consistent manager response and accountability
- inclusive workplace adjustments
- early identification and intervention

ISO 7101 complements ISO 45001 and ISO 45003 by embedding workforce wellbeing within a broader healthcare quality management system, recognizing that staff experience, patient outcomes, safety and organizational performance are fundamentally interconnected.

However, a gap remains between awareness and perceived value:

- Only 28% are very familiar with workplace standards
- 72% believe they are valuable

This indicates a significant opportunity for healthcare organizations to improve visibility, communication and implementation, turning standards into practical tools that build trust and confidence.

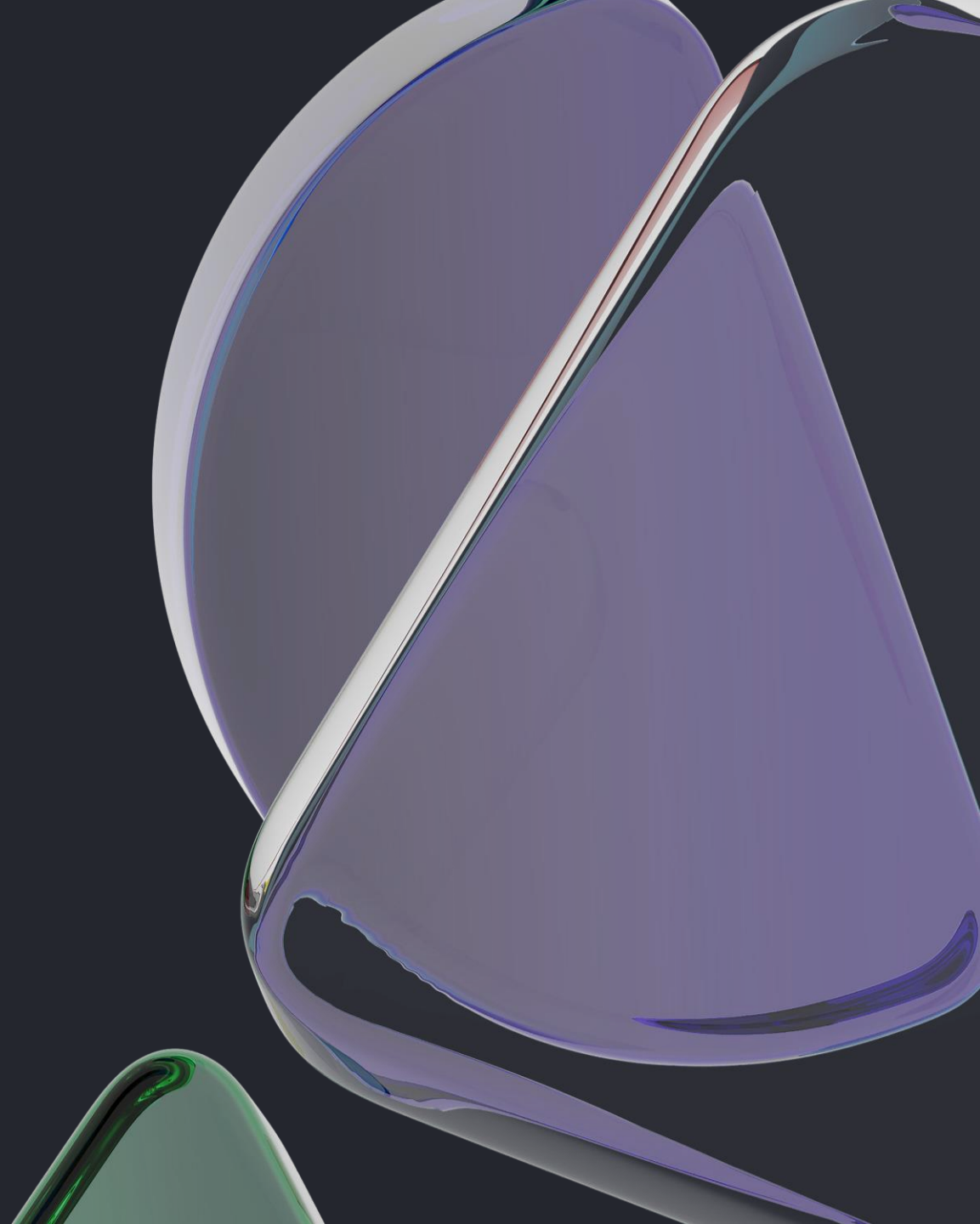
Conclusion and insights

- Confidence in support is a key driver of workforce retention and engagement in healthcare
- Early intervention prevents escalation and reduces long-term workforce risk
- Consistent delivery of support (not just policy) improves trust and employee confidence
- Embedding wellbeing standards into day-to-day operations helps create psychologically safe and sustainable healthcare workplaces

For healthcare organizations, strengthening wellbeing standards is a practical way to build trust and ensure support is consistently delivered in practice.



Insights from the Healthcare Sector



Key findings

A workforce under sustained strain

Healthcare employees face unique pressures, including high workloads, emotional labour, long shifts and constant service demand. These challenges are having a direct impact on wellbeing, engagement and retention across the sector.

The data highlights a strong culture of presenteeism.

- 80% continued working through mental health challenges
- 86% continued through menopause-related challenges
- 86% continued through neurodiversity-related challenges

While this may maintain short-term operational continuity, it creates hidden productivity loss and increases long-term workforce risk. In healthcare environments, reduced wellbeing affects not only individual performance, but also team resilience, consistency and sustainability of care delivery.

Workforce wellbeing directly impacts team resilience, continuity and consistency of care.



The role of confidence



Confidence determines workforce outcomes

Healthcare worker confidence has a direct impact on whether individuals seek support, remain engaged, and continue working within healthcare organizations.

Where confidence is low, employees are more likely to:

- delay or avoid seeking support
- continue working while unwell
- experience prolonged absence
- disengage from their role
- leave the organization altogether.

The research also shows that trust is relationship-driven:

- Line managers are consistently more trusted than HR or leadership
- Confidence drops when employees are uncertain support will lead to action
- Gender plays a role in comfort for certain discussions (e.g. menopause)

For healthcare organizations, building trust requires more than policy; it requires consistent, empathetic and visible support at the point of need.

Wellbeing and the healthcare workforce

Wellbeing challenges are shaping workforce sustainability

Healthcare employees are navigating multiple overlapping wellbeing challenges, with significant impacts on performance, confidence and long-term retention.

Mental health

- 61% report negative impact on career progression
- 35% report reduced confidence in their role
- 47% have left roles or taken extended leave

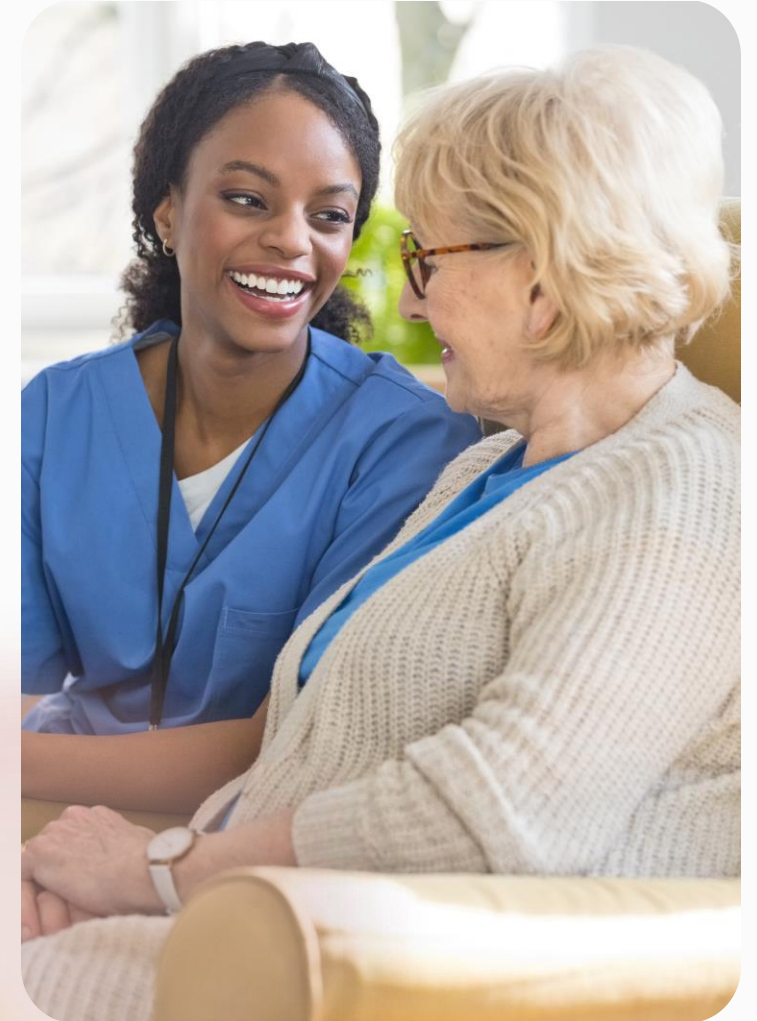
Neurodiversity

- 59% report reduced confidence in their ability to perform
- 57% report reduced motivation
- 47% have left roles or taken extended leave

Menstrual and menopause health

- 63% report reduced motivation
- 50% report reduced confidence
- 48% report no workplace support

These findings show that wellbeing challenges are not isolated issues; they are directly influencing workforce retention, performance and long-term sustainability in healthcare settings.



Productivity impacts

The hidden productivity impact of wellbeing

Health and wellbeing challenges affect productivity in multiple ways across healthcare organizations:

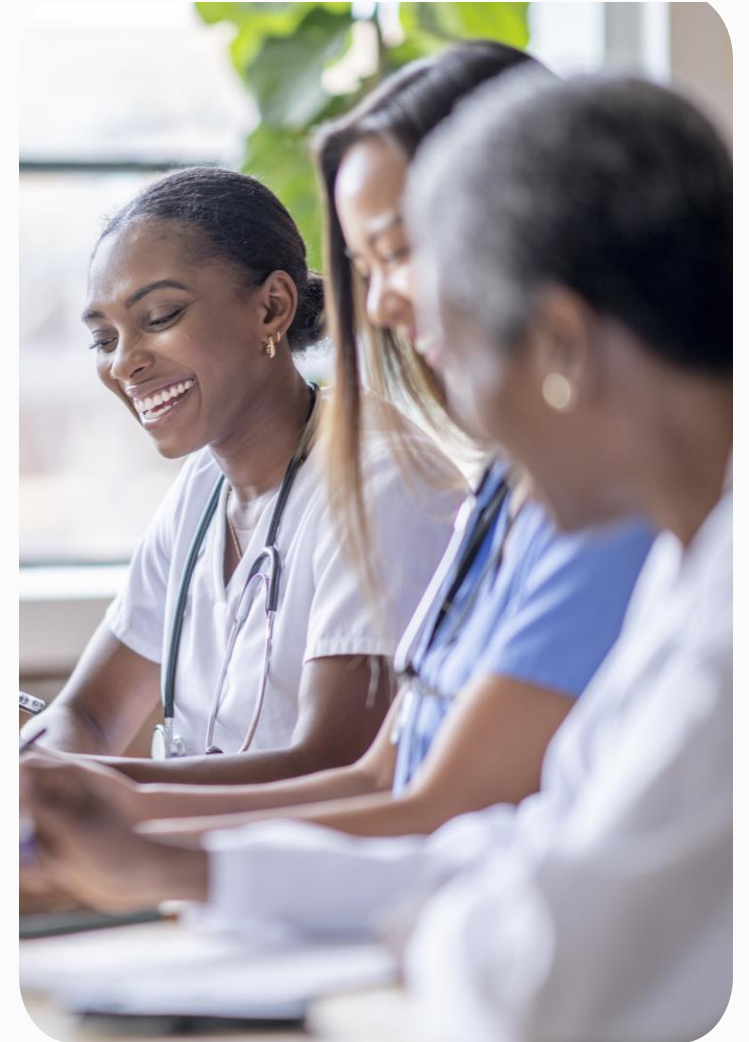
- absenteeism (time away from work)
- presenteeism (working while unwell)
- reduced efficiency and longer task completion
- increased likelihood of leaving the workforce

Presenteeism represents a particularly significant, and often hidden, challenge:

- 31% report mental health challenges cause tasks to take 1–2 hours longer
- Other conditions also result in measurable reductions in performance

In high-pressure healthcare environments, employees often continue working deteriorating wellbeing due to operational demands, amplifying the impact on productivity and wellbeing.

This reinforces the importance of early intervention, manager support and workplace adjustments in maintaining both workforce performance and resilience.



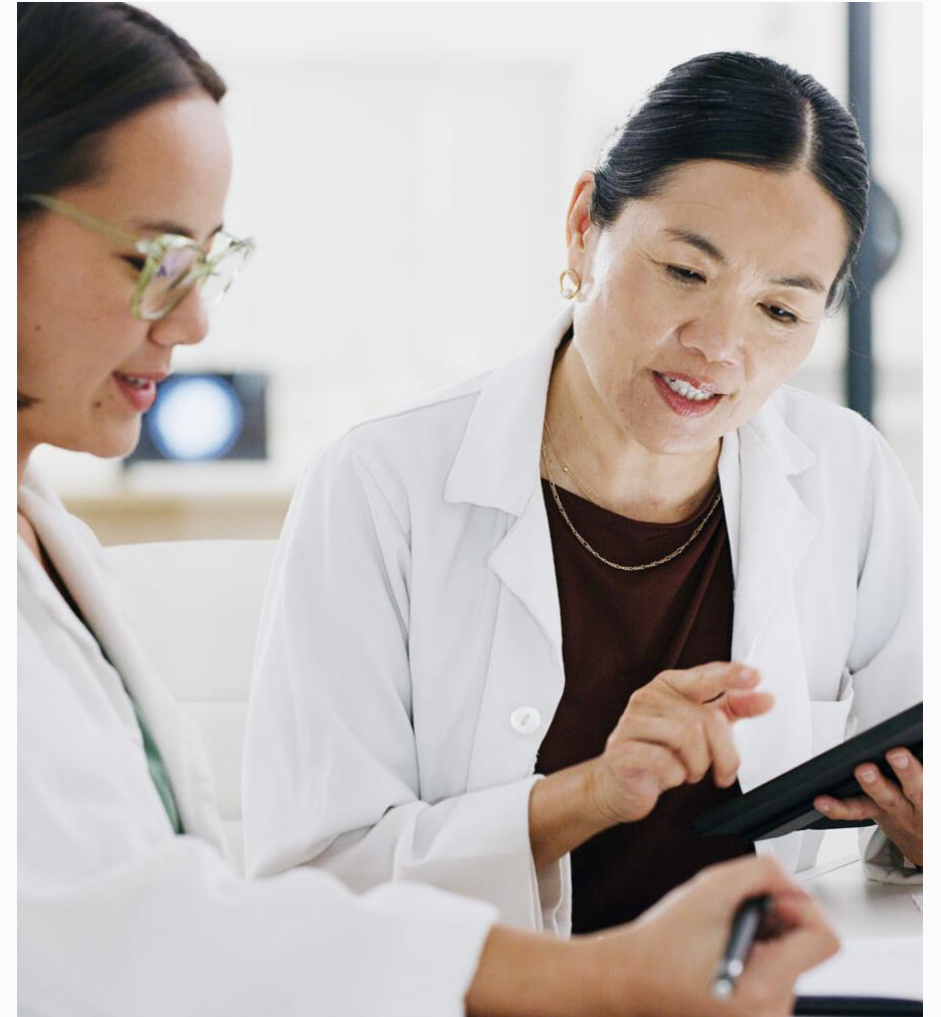
Insights overview

In the healthcare sector, wellbeing has become an increasingly prominent topic. Policies exist, conversations are growing, and organizations are making visible efforts to improve support.

And yet, the data tells a more complex story; one that reveals a profound gap between intent and experience.

This survey highlights a clear mismatch between healthcare employee need, confidence, and employer support across workplace wellbeing in the healthcare sector.

“This report highlights a growing challenge for healthcare leaders: workforce wellbeing is no longer solely a people issue; it’s a quality, safety and sustainability issue. Organizations that create cultures of trust, where people feel confident raising concerns and accessing support, will be better positioned to retain talent, improve resilience and deliver consistently high-quality care. The opportunity now is to move beyond policy and create systems that make support visible, reliable and embedded in everyday practice.” Angus Metcalfe, Managing Director, Healthcare, BSI



Physical health is the strongest-performing area

Employees are significantly more comfortable raising physical health issues (55% confident vs 26% not confident) and more confident in receiving support (52%). This contrasts with mental health, menstrual health, and neurodiversity, where confidence is lower and more evenly split.

Confidence drops from “speaking up” to “being supported”

Across all areas - particularly menstrual/menopause and neurodiversity - employees are less confident that their employer will help resolve issues than they are to raise them. This indicates a perceived gap between policy and action.

Support provision is inconsistent and uneven

- Nearly half (48%) report no support for menstrual/menopause health
- 36% report no support for mental health

Support is primarily delivered via workplace adjustments, with limited environmental or systemic interventions



Trust in support depends on who you speak to

- Line managers are consistently more trusted than HR or leadership
- For menstrual/menopause health, gender is highly influential (41% confident with female managers vs 10% with male)
- Formal structures (HR, directors) show persistently low confidence levels

Presenteeism is widespread and costly

Mental health challenges in particular lead to significant productivity loss, with 31% reporting tasks taking 1-2 hours longer.

80-86% of respondents report continuing to work while unwell, with reduced effectiveness.



Mental health and neurodiversity pose the greatest business risks

- Both are linked to 47% of employees leaving roles or taking extended leave
- Mental health has the highest average absence (27.4 days/year)
- Both significantly impact career progression, confidence, and motivation

Awareness of wellbeing standards is low despite high perceived value

- Only 28% are very familiar with workplace standards
- However, 72% consider them valuable

There is a critical disconnect between support and outcomes

Most notably, 57% disagree that employer support enables them to continue working despite health challenges, despite relatively high engagement and short-term retention intentions.



Barriers preventing employees from seeking support

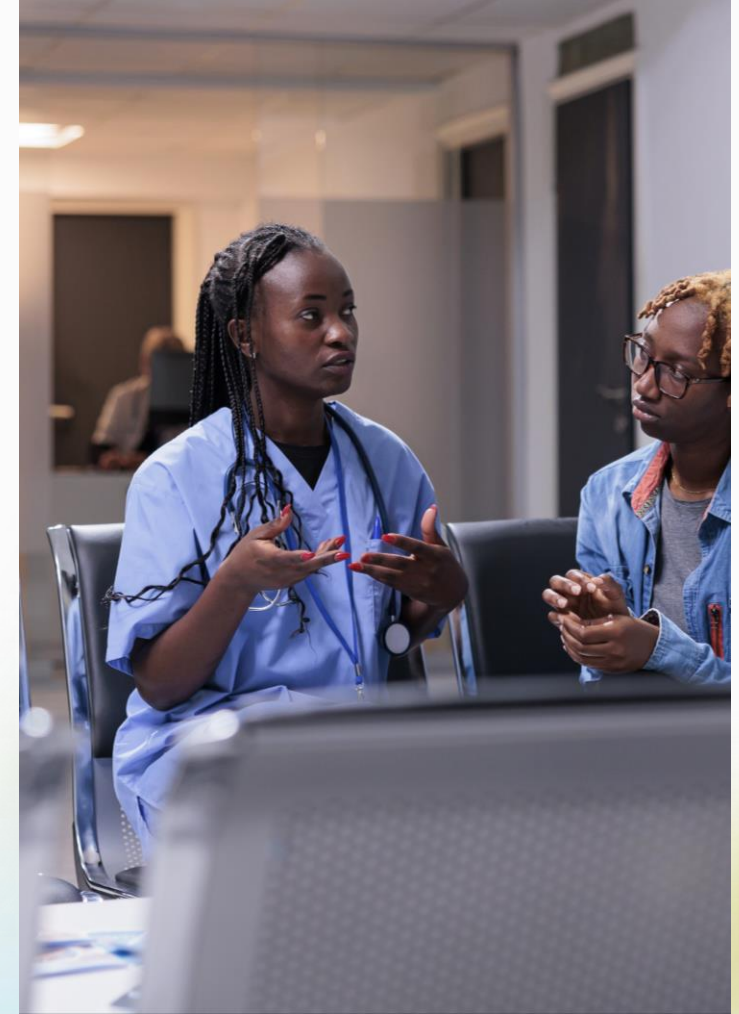
Despite increasing focus on wellbeing, many healthcare employees still face significant barriers when seeking support or raising challenges. Key barriers include:

- Fear of negative repercussions
- Lack of confidence that support will lead to action
- Inconsistent manager capability
- Greater trust in individuals than systems
- Operational pressures limiting time to seek help
- Stigma around mental health, menopause and neurodiversity

The trust gap is clear

- Only 17% strongly agree they can discuss mental health without repercussions
- Only 13% strongly agree employers communicate regularly on wellbeing
- 60% are not comfortable discussing menopause with male line managers
- HR and leadership are trusted less than line managers

Closing this gap requires moving beyond policies to create genuinely safe, trusted and accessible support environments.



Key takeaways & recommendations

1. Shift from policy presence to delivery and trust

- Focus on operationalizing support, not just defining it
- Track employee confidence in outcomes, not just awareness
- Ensure clear, visible pathways from disclosure → action → resolution

2. Prioritize underserved areas: menstrual health and neurodiversity

- Address gap in menstrual/menopause support by introducing: Dedicated policies, Manager training (with gender sensitivity), Physical workplace adjustments (e.g. private/quiet spaces)
- For neurodiversity: Improve workspace design (quiet zones, reduced sensory environments), Standardize adjustments rather than relying on case-by-case requests



3. Equip line managers as the frontline of wellbeing

- Invest in manager capability, not just HR policy
- Provide: Training in sensitive conversations, clear escalation routes, authority to implement flexible adjustments

4. Tackle presenteeism as a core productivity issue

- Recognize reduced performance is more prevalent than absence
- Introduce: flexible working by default (61% say this would improve retention), Work design adjustments (scheduling, pacing, workload modulation)

5. Close gap between provision and employee priorities

- Expand:
 - o Flexible working (currently 47% vs 61% demand)
 - o Hybrid working (23% vs 36% demand)
 - o Trust-based culture (27% vs 32% demand)



6. Improve visibility and understanding of wellbeing standards

- Move beyond documentation to active communication and embedding by using: Regular internal campaigns, manager-led discussions, clear examples of how policies translate into support

7. Address retention risks directly

- Target interventions at: mental health and neurodiversity
- Measure: Exit rates linked to health and confidence in staying beyond 2 – 5 years

8. Redesign the workplace environment for wellbeing

Increase investment in quiet spaces, flexible layouts and inclusive design features

- Particularly critical given 46% report non-inclusive neurodiverse environments



The role of workplace wellbeing standards

Workplace wellbeing standards provide a structured approach to delivering consistent and reliable support across healthcare environments.

While awareness varies across markets, perceived value remains consistently high, highlighting a clear opportunity to strengthen visibility and implementation.

There is a consistent gap between awareness and value. Healthcare workers recognize the importance of wellbeing standards, but many lack clarity on what they include and how they are applied in practice.

Implication for healthcare organizations

Improving visibility, communication and practical implementation can help:

- build confidence in available support
- reduce inconsistency across teams
- strengthen workforce resilience

	DE	UK	US	Total
Very familiar	25%	30%	35%	28%
Heard of them, but not sure what they include	42%	51%	41%	46%
Not familiar at all	26%	18%	21%	22%

Table 1: Familiarity with workplace wellbeing standards / best practice guidance implemented by your employer

	DE	UK	US
Very valuable	32%	37%	48%
Somewhat valuable	33%	40%	32%
Neither valuable nor invaluable	18%	11%	8%
Not very / not at all valuable	10%	10%	7%

Table 2 Perceptions of value of workplace standards / best practice guidance for employee wellbeing and performance

Conclusions

Trust drives workforce sustainability

Healthcare employees who feel confident raising wellbeing concerns are more likely to:

- remain engaged
- maintain productivity
- continue working within the organization

Where confidence is low, the impact is significant – leading to increased presenteeism, prolonged absence and higher rates of workforce exit.

Building trust is therefore critical to sustaining workforce resilience.

Presenteeism is a hidden but critical challenge

The majority of healthcare employees continue working while unwell, often with reduced effectiveness.

This creates:

- hidden productivity loss
- increased long-term health risk
- reduced team resilience

While presenteeism may maintain short-term continuity, it increases longer-term workforce pressure and risk.



Building sustainable healthcare workplaces

Healthcare organizations have a clear opportunity to strengthen workforce resilience by closing the gap between support provision and healthcare worker experience.

Key priorities include:

- embedding psychologically safe cultures
- strengthening the role of frontline managers
- addressing gaps in mental health, menopause and neurodiversity support
- improving consistency of workplace adjustments
- increasing visibility and application of wellbeing standards

Moving from policy to practice will be critical in building a more resilient, supported and sustainable healthcare workforce.





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