PRACTICAL APPROACHES FOR MEASURING WORKPLACE HEALTH AND WELLBEING

A report from The National Forum for Health and Wellbeing at Work

MANCHESTER 1824
The University of Manchester
Alliance Manchester Business School

The National Forum for Health and Wellbeing at Work

"Good health and wellbeing require consistent measurement, shared accountability and ownership with the discipline to turn insight into action. When we bring data together across the business, we can spot emerging risks earlier, target support where it matters most, and continuously improve outcomes for colleagues which helps drive productivity and performance for the organisation."

Neil Davies,
Director Of Operations
UK Ireland & South Africa,
Aon

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What is the National Forum for Health and Wellbeing at Work?

In 2016 a group of Chief Medical Officers and HR directors of leading global companies and major public sector institutions created the Forum with a central mission to improve workplace health and wellbeing. Today, dozens of major global organisations are members of the Forum representing a vast range of business sectors including retail, banking, oil and gas, healthcare, IT, construction and media.

The Forum's vision is to reinforce the evidence and belief that good health is good for business, and good business is good for health. It aims to inspire people and organisations to challenge their thinking about the opportunities that healthy high-performing people bring to work, while also creating shared values that both business and employees can realise.

The Forum aims to bring the most innovative evidence-based thinking to organisations, and integrate the 'psychosocial determinants' of health that create a healthy work culture. These include productivity, leadership, decision-making, behavioural safety, performance indicators, diversity and inclusion, financial wellbeing and the impact of digitisation.

In recent years the Forum has produced a number of position papers, run high profile networking events, and contributed to government policy papers and consultation exercises.

Find out more at **www.alliancembs.manchester.ac.uk/ research/health-wellbeing-forum/**

FOREWORD

With increasing recognition of health and wellbeing as a driver of business resilience and performance, effective measurement is becoming an essential component of health and wellbeing strategy. Measurement enables employers to identify the real issues impacting health and wellbeing in their organisation in order to prioritise resources and ensure optimal impact.

However, knowing exactly where to start is one of the most common challenges in workplace wellbeing measurement. With so many possible metrics it can feel difficult to know what will actually be useful.

Also, health and wellbeing data only creates value when it is used. For reporting to have impact, organisations need to be clear about what is shared, how often, and for what purpose. Being explicit about expectations helps ensure that data does not become a passive report.

Let me be clear, there is no single right way to look at wellbeing data and that isn't the purpose of this report. Instead, what we are offering here is practical guidance to organisations starting out on their wellbeing measurement journey in terms of how they might think about shaping and structuring wellbeing metrics.

In fact, the most effective approaches begin not with a simple list of indicators but with a clear understanding of what the organisation needs to know and why. These questions help focus measurement on what is within the organisation's control and what will genuinely inform decisions.

Effective measurement is rarely just about collecting more and more data. Instead, it is about using the right information consistently. As the approach towards wellbeing measurement matures, so it typically becomes more joined up and draws on multiple data sources.

Also, wellbeing measurement is not a one-time exercise and most organisations develop their approach incrementally. What matters is that measurement develops in a way that is useful, proportionate, and connected to action. And, crucially, in a way that shows employees that their input leads to visible change. Our case studies in this report, which you can read from page 42, amply demonstrate this principle.

Finally, health and wellbeing metrics also extend well beyond HR and health and safety. They are relevant across the whole organisation because wellbeing underpins key business outcomes including productivity, culture, risk management, financial performance and employer reputation.

Professor Sir Cary Cooper CBE

50th Anniversary Professor of Organisational Psychology and Health, Alliance Manchester Business School

This report is aimed at medium to large employers with sufficient scale to access health and wellbeing data without compromising individual data privacy. It is designed as a practical resource for anyone with an interest in gaining insight into the health and wellbeing of individuals and teams in the work context.

It builds on *Measuring Wellbeing for Healthy Workers and Organisations* published by the National Forum for Health and Wellbeing at Work in 2022 **https://www.alliancembs.manchester.ac.uk/news/business-leaders-urged-to-measure-employee-wellbeing/**. This report provided perspectives from members of the Forum on the practical steps taken to measure health and wellbeing in their organisations, the varied approaches taken, the stakeholders involved, the lessons learnt, and opportunities to advance practice.

This guide doesn't aim to replicate the numerous publications on measuring health and wellbeing. The work of expert authors, academia, NGOs and commercial organisations is acknowledged, referenced where applicable, and listed as optional reading.

Acknowledgements

We would like to thank the following members of the National Forum for Health and Wellbeing at Work that helped put together this report:

- Charles Alberts
- Amanda Hammond
- Laura Sartin
- James Thurman
- Karla Wellington

We would also like to thank the following employers for contributing to this report:

- Aon
- BP
- Canada Life UK
- GSK
- Mace
- Mars
- National Police Wellbeing Service – Oscar Kilo
- Philips
- Shell
- Wave

We would also like to thank those who supported the launch event of this report at the House of Commons in June 2026:

- Sir Charlie Mayfield
- Karl Simons OBE
- Sir Desmond Swayne
- Alliance Manchester Business School

Editorial and Design:

- Jim Pendrill, University of Manchester
- Nectar Creative

EXECUTIVE SUMMARY

WHY
measure health and wellbeing

- With increasing recognition of health and wellbeing as a driver of business resilience and performance, and more demand from various stakeholders for employers to demonstrate the impact of their investment, effective measurement is fast becoming an essential component of health and wellbeing strategy.
- Measurement enables employers to identify the real issues impacting health and wellbeing to prioritise resources and ensure optimal impact.
- Measurement provides the foundation for strategic action, accountability and continuous improvement leading to a healthier, more engaged workforce and improved organisational performance.

WHAT
to measure

- For reporting to have impact, organisations should be deliberate about what is shared, how often, and for what purpose.
- Agree upfront who needs to see which metrics, the cadence of reporting, and the decisions or actions the data is intended to inform.
- CEOs and boards typically benefit from a small number of well-chosen indicators, supported by a clear narrative on implications and recommended actions. However operational and practitioner groups need more detailed breakdowns to enable targeted interventions and continuous improvement.
- Being explicit about expectations helps ensure that data does not become a passive report but a tool that drives accountability, informs decision-making and improves health and wellbeing outcomes across the organisation.

WHERE
to start

- The most effective approaches to measuring health and wellbeing begin not with a list of indicators but with a clear understanding of what the organisation needs to know and why.
- Identify the risks in your organisation. What does existing data – absence, incidents, occupational health referrals – suggest about where wellbeing may be under pressure?
- Be specific about whether the goal is to reduce absence, improve retention, address burnout, or strengthen the employee offer.
- Assess what data you already have to avoid building complexity before it is needed. Most organisations hold more relevant information than they realise.

HOW
to measure

Adopt a six-step approach to measurement:

- **One: Define the purpose of measurement**
  Be clear about what you are measuring and why. A defined purpose keeps measurement focused and ensures the data will be actually used.

- **Two: Map existing data**
  Take stock of what your organisation already collects. Mapping existing data helps to identify gaps in quality, frequency or ownership.

- **Three: Identify meaningful indicators**
  Agree on the indicators that are most relevant to your workforce and strategy. A small number of well-chosen measures is more useful than a comprehensive but unwieldy set.

- **Four: Establish a baseline**
  If starting out on a wellbeing measurement journey, the priority is to establish a baseline rather than building a sophisticated measurement system straightaway.

- **Five: Collect insight regularly**
  Combining qualitative data with employee feedback provides a more complete picture of wellbeing. Clear communication about how data is collected, stored and used is essential.

- **Six: Use data to inform action**
  Organisations that use wellbeing data well make it visible to decision-makers and connect it explicitly to action. For instance, present a small set of wellbeing indicators through simple, accessible dashboards for line managers and senior managers.

WHY MEASURE HEALTH AND WELLBEING?

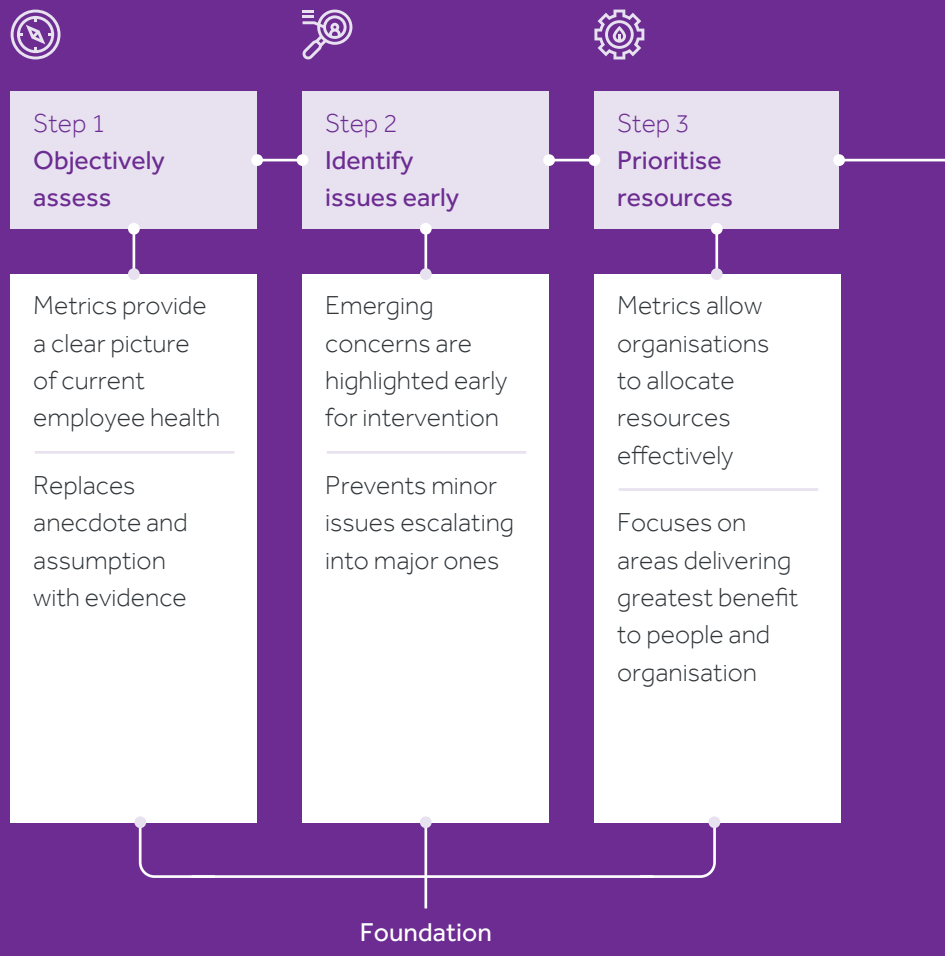
"If you can't measure it, you can't improve it."

This quote adapted from a speech by the physicist Lord Kelvin in 1883 gets to the heart of health and wellbeing metrics as powerful tools for employers to understand, manage and improve the health and wellbeing of employees.

With increasing recognition of health and wellbeing as a driver of business resilience and performance, and more demand from various stakeholders for employers to demonstrate the impact of their investment in this area, effective measurement is fast becoming an essential component of health and wellbeing strategy.

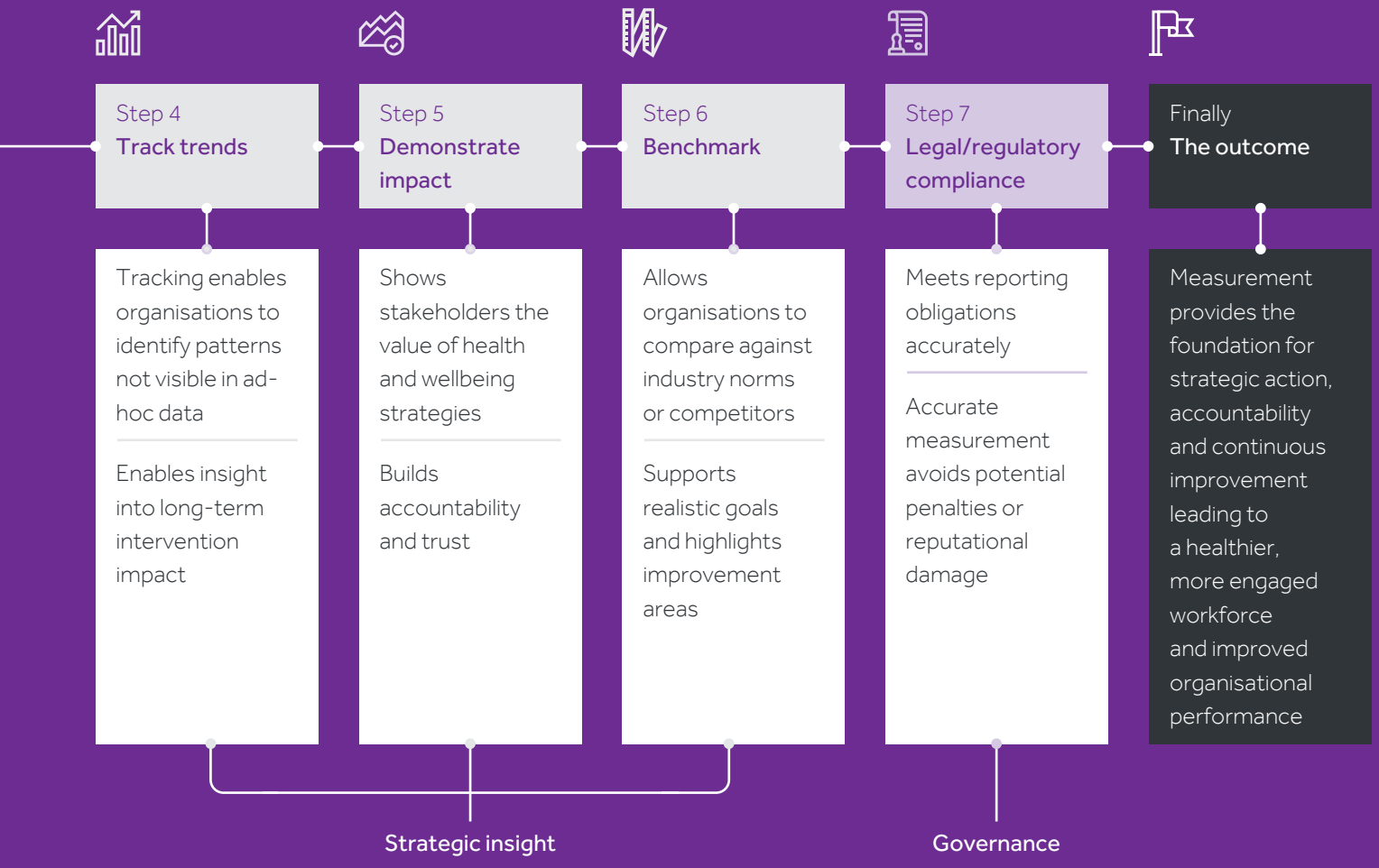
Measurement enables employers to identify the real issues impacting health and wellbeing to prioritise resources and ensure optimal impact. It can also serve to protect investment in health and wellbeing during periods of economic headwinds and uncertainty, when employers face difficult decisions to cut spend that does not have a credible return on investment.

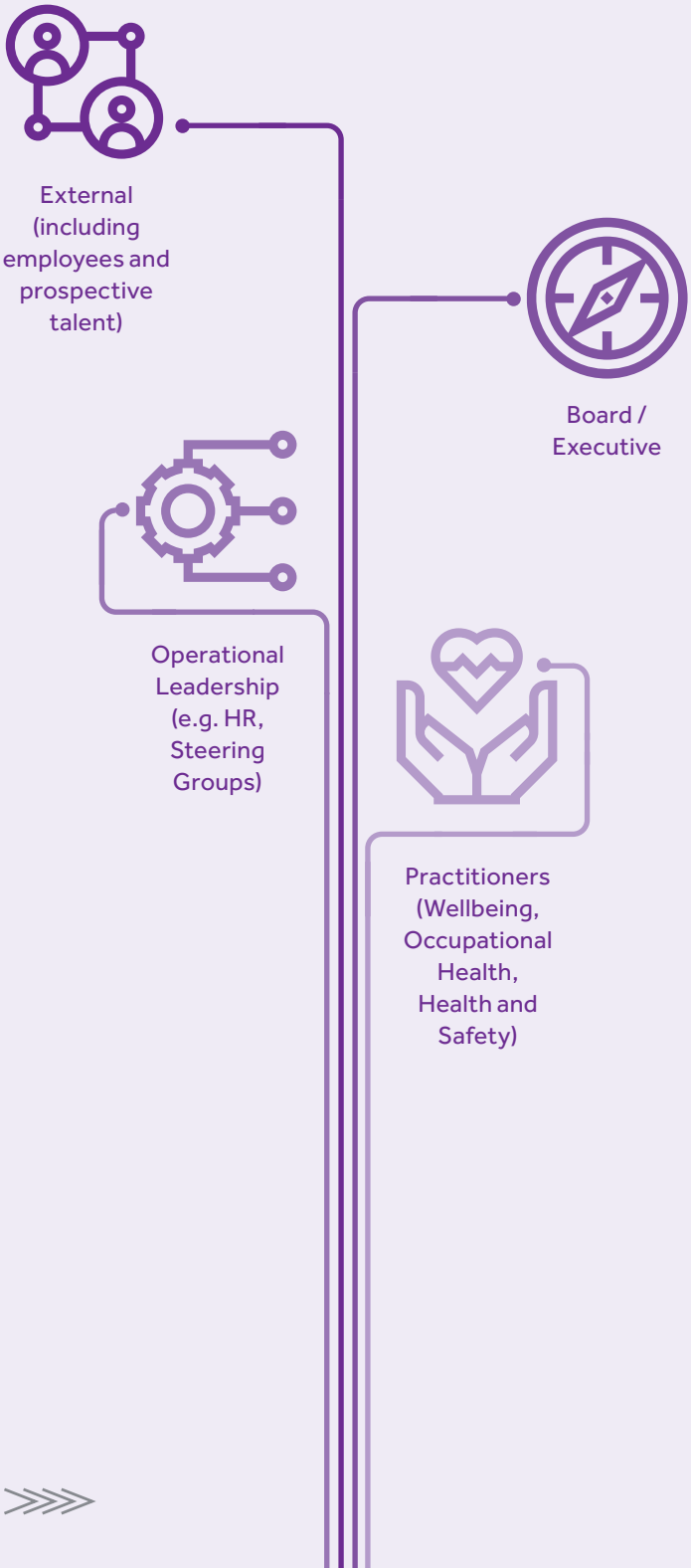
Seven ways measurement drives workplace health and wellbeing



"Without data, you're just another person with an opinion."

W. Edwards Deming


Step 4
Track trends
Step 5
Demonstrate impact
Step 6
Benchmark
Step 7
Legal/regulatory compliance
Finally
The outcome
Tracking enables organisations to identify patterns not visible in ad-hoc data
Enables insight into long-term intervention impact
Shows stakeholders the value of health and wellbeing strategies
Builds accountability and trust
Allows organisations to compare against industry norms or competitors
Supports realistic goals and highlights improvement areas
Meets reporting obligations accurately
Accurate measurement avoids potential penalties or reputational damage
Measurement provides the foundation for strategic action, accountability and continuous improvement leading to a healthier, more engaged workforce and improved organisational performance
Strategic insight
Governance



WHAT TO MEASURE?

Tailored reporting based on the audience

Health and wellbeing data only creates value when it is used, and that depends on how well it is aligned to the audience receiving it. Different stakeholders have very different interests, levels of detail, and decision-making responsibilities.

External audiences may be looking for clear, credible indicators of organisational responsibility and culture, whereas boards require concise, strategic insight into performance, risk, and progress against objectives. Operational leaders and committees need more regular, action-oriented reporting that highlights trends, risks, and opportunities, while practitioners require granular data to manage delivery, implementation, and compliance. Treating all four audiences the same risks either overwhelming senior stakeholders with unnecessary detail or under-equipping those responsible for day-to-day action.

For reporting to have impact, organisations should be deliberate about what is shared, how often, and for what purpose. This means agreeing upfront who needs to see which metrics, the cadence of reporting, and the decisions or actions the data is intended to inform. Senior audiences, such as CEOs and boards, typically benefit from a small number of well-chosen indicators, supported by a clear narrative on implications and recommended actions. In contrast, operational and practitioner groups need more detailed breakdowns to enable targeted interventions and continuous improvement.

Being explicit about expectations helps ensure that data does not become a passive report, but a tool that drives accountability, informs decision-making, and ultimately improves health and wellbeing outcomes across the organisation.

This table sets out how health and wellbeing data could be tailored to different audiences, showing the level of detail required, what should be reported, and how it is expected to be used to inform decisions and action.

Audience Level	What they see	What they do with it
 **External** (including employees and prospective talent)	High-level health and wellbeing metrics in annual reports, ESG disclosures, and careers content. Focus on headline indicators, commitments, and progress.	Form a view of the organisation's credibility, culture, and responsibility. Influence decisions to join, stay, or work with the organisation.
 **Board / Executive**	Concise, strategic view of key metrics (KPIs), trends, and risks. Regular dashboard (e.g. monthly/quarterly) plus an annual deep dive on performance and progress against objectives.	Set direction, challenge performance, allocate resources, and ensure risks are understood and managed.
 **Operational Leadership** (e.g. HR, Steering Groups)	More detailed, regular reporting on trends, hotspots, and progress against plans. Clear links to business areas and priorities.	Translate insight into action. Prioritise interventions, sponsor initiatives, and escalate key risks or themes.
 **Practitioners** (Wellbeing, Occupational Health, Health and Safety)	Granular data on implementation, activity, incidents, and outcomes. Real-time or frequent operational reporting.	Manage delivery, identify issues early, adjust interventions, and ensure compliance and continuous improvement.

"Health and wellbeing data only creates value when it is used — and that depends on how well it is aligned to its audience."

Example – **Large retail financial services organisation**

Annual Report

Includes headline health and wellbeing metrics, such as:

- Year-on-year Wellbeing Index score
- Number of trained wellbeing champions globally
- Completion rates for mental health training (employees and people leaders)
- Proportion of employees registered on the organisation's wellbeing platform

Fair Pay Report

Includes similar indicators, with a stronger emphasis on financial wellbeing. This may include:

- Activities and campaigns to support financial wellbeing
- Employee engagement with financial education or support initiatives

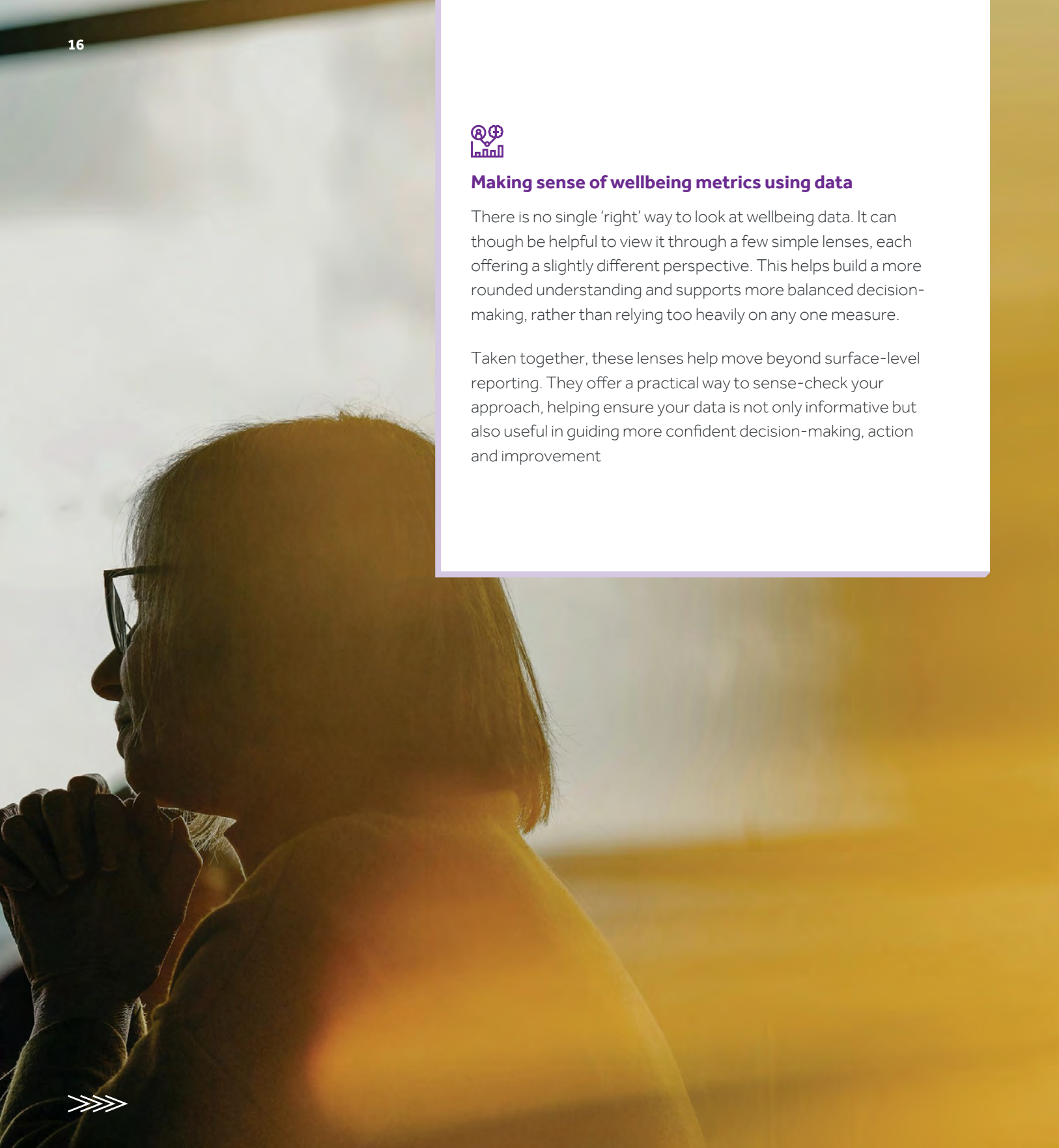
Social media (e.g. LinkedIn)

- Campaign-led communications (for example, World Mental Health Day) highlighting culture, support, and employee experience

Corporate website and careers pages

- Information on wellbeing strategy and employee value proposition, including flexible working and work–life balance
- Case studies and examples of community and employee wellbeing initiatives (e.g. financial education or mentoring programmes)
- Public statements on health, safety, and wellbeing commitments
- Senior leadership messages reinforcing the importance of wellbeing

These disclosures are also used as supporting evidence for external benchmarking and assessments (e.g. investor-led wellbeing benchmarks such as the CCLA).



Making sense of wellbeing metrics using data

There is no single 'right' way to look at wellbeing data. It can though be helpful to view it through a few simple lenses, each offering a slightly different perspective. This helps build a more rounded understanding and supports more balanced decision-making, rather than relying too heavily on any one measure.

Taken together, these lenses help move beyond surface-level reporting. They offer a practical way to sense-check your approach, helping ensure your data is not only informative but also useful in guiding more confident decision-making, action and improvement

Lens 1 — Individual vs. composite

Individual:
Single measures
e.g. absence rate

Composite:
Combined indices
e.g. engagement score

Value of approach: **Brings together detail and the bigger picture so trends can be understood over time.**

Lens 2 — Leading vs. lagging

Leading:
Early signals/potential risk factors
e.g. training uptake

Lagging:
Outcomes occurred
e.g. turnover rate

Value of approach: **Balances responding to issues with identifying where early action may prevent them.**

Lens 3 — Subjective vs. objective

Subjective:
How people feel
e.g. surveys, focus groups

Objective:
Observable data
e.g. absence, attrition

Value of approach: **Both perspectives needed as experience and outcomes don't always align, especially for psychosocial risks.**

Lens 4 — Input vs. output

Input:
Activity delivered
e.g. programmes, training

Output:
Results achieved
e.g. wellbeing score change

Value of approach: **Distinguishes effort from impact, supporting more meaningful evaluation.**

Lens 5 — Individual vs. work factors

Individual:
e.g. personal health, resilience

Work:
e.g. engagement score

Value of approach: **Keeps attention on the role of the organisation and working environment, alongside individual factors.**

Lens 6 — Levels of analysis

Individual:
Person-level

Team:
Group-level

Organisation:
Workplace-level and wider context

Value of approach: **Makes it easier to identify where action is needed and who is best placed to take it.**

Lens 7 — Standardised and benchmarkable metrics

Use recognised or widely used measures wherever possible – this supports comparisons over time and, where relevant, against other organisations.

Value of approach: **Enables meaningful tracking of progress and external benchmarking.**

What to measure – where to start?

Knowing where to start is one of the most common challenges in workplace wellbeing measurement. With so many possible metrics, it can feel difficult to know what will actually be useful. In practice, the most effective approaches begin not with a list of indicators, but with a clear understanding of what the organisation needs to know — and why.

Three questions to guide your approach

1. **Where are the risks?**
   What does existing data — absence, incidents, occupational health referrals — suggest about where wellbeing may be under pressure?

2. **What are we trying to achieve?**
   Be specific about whether the goal is to reduce absence, improve retention, address burnout, or strengthen the employee offer.

3. **What data do we already have?**
   Most organisations hold more relevant information than they realise. Starting there avoids building complexity before it is needed.

These questions help focus measurement on what is within the organisation's control and what will genuinely inform decisions. The starting point will vary. Some organisations will begin with absence and incident data, others may already be tracking engagement or using occupational health insight. Neither is right or wrong. What matters is that measurement is proportionate, purposeful, and connected to action.

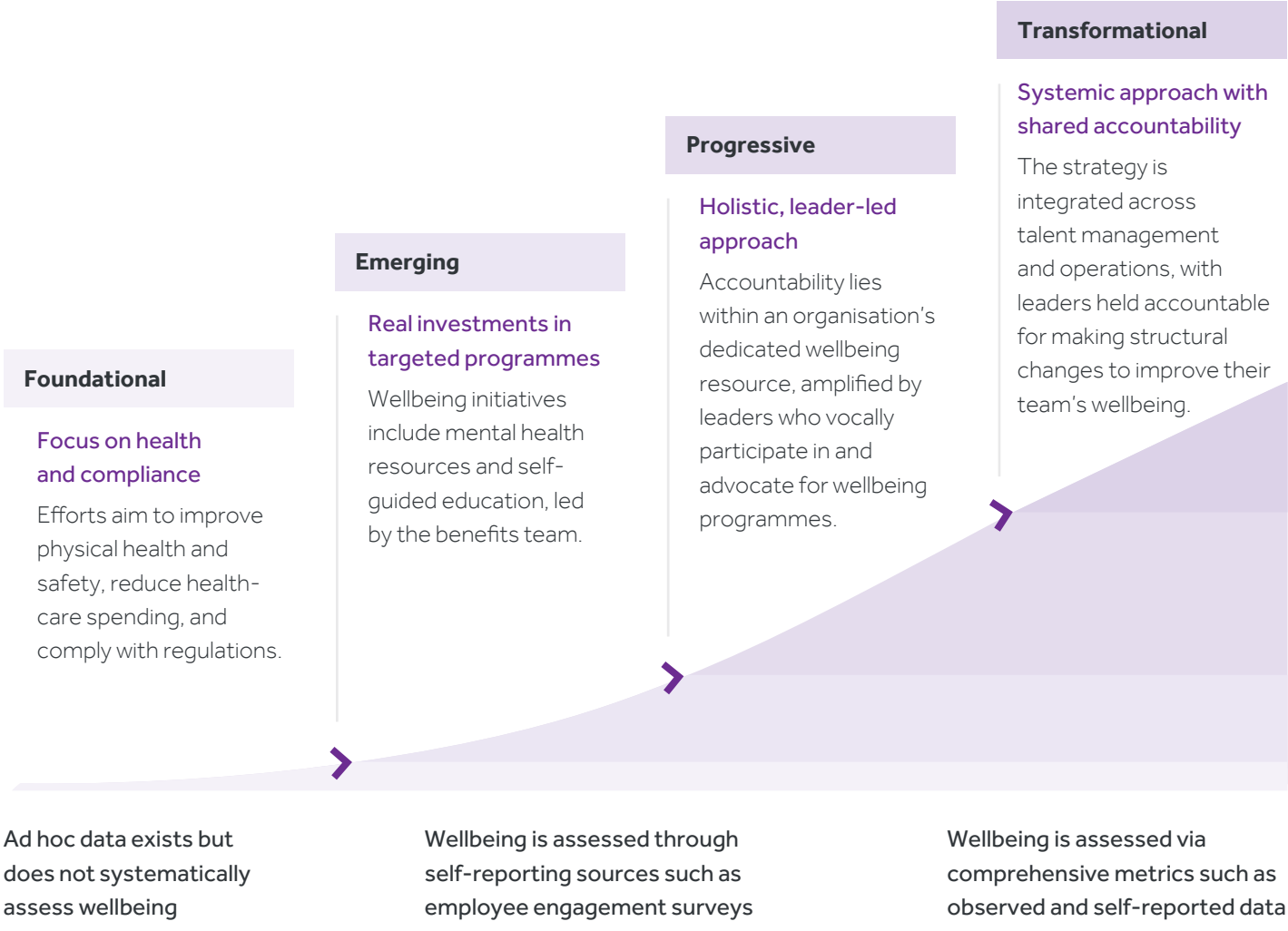
As the approach matures, measurement typically becomes more joined-up, drawing on multiple data sources and involving different functions, and creating a clearer line between insight and intervention.

"What matters is that measurement is proportionate, purposeful, and connected to action."

Organisations progress through four stages of wellbeing maturity

A report from Deloitte Insights, 'The Workforce Wellbeing Imperative', gives an excellent overview of how organisations progress through four stages of wellbeing maturity, as shown on the chart below.

Although organisations may collect reams of self-reported data about aspects of employee wellbeing, the report says that they may not connect those data points with empirical operational data and create a holistic, real-time measure of the state of wellbeing across an organisation.



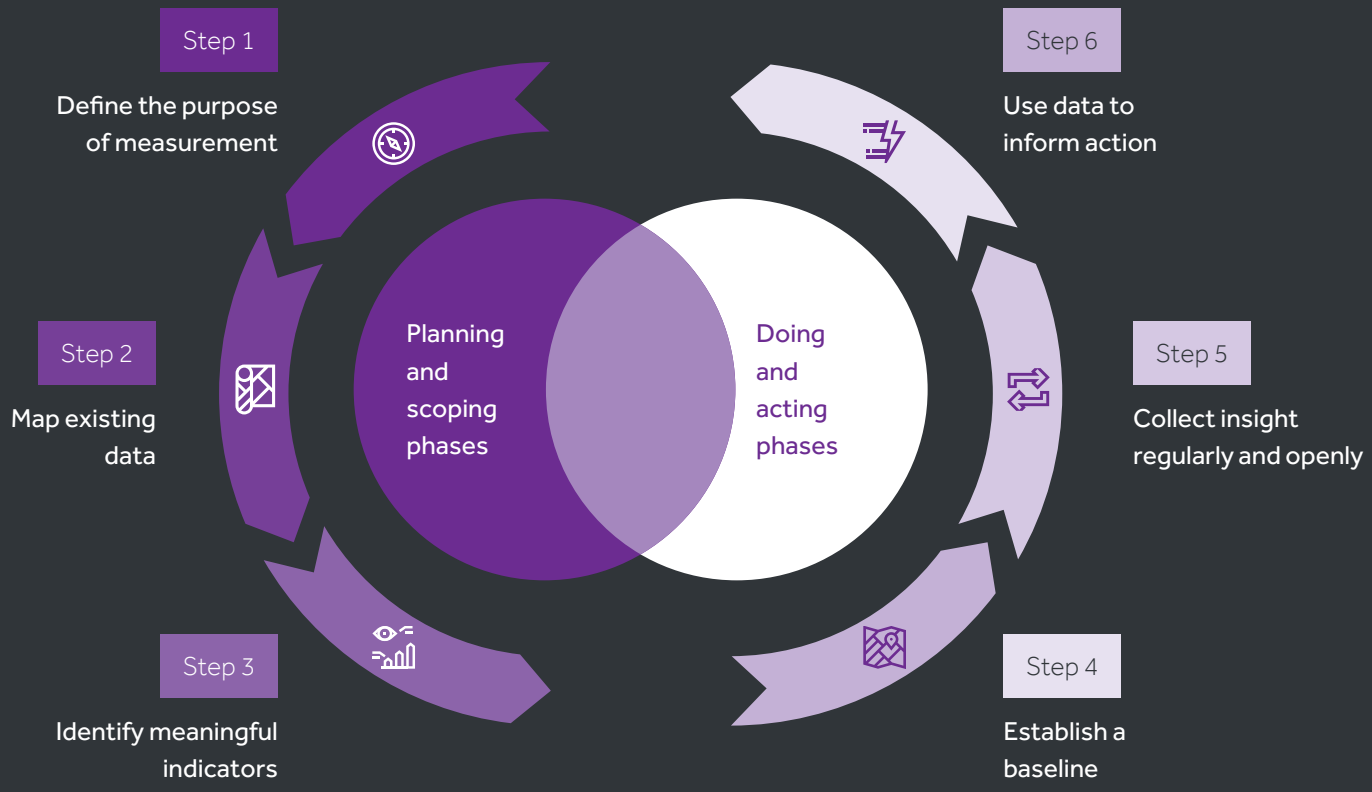
Source: Deloitte Analysis, Deloitte Insights | The workforce well-being imperative, March 2023

HOW
TO MEASURE - A PRACTICAL APPROACH

Organisations approach wellbeing measurement for different reasons. Some want to understand employee experience and improve support. Others are responding to growing expectations around workforce reporting, sustainability, or health and safety.

Many are simply trying to understand whether the things they are doing are making a difference. Whatever the starting point, measurement does not need to be complex. The steps below offer a practical framework - one that is designed to flex to your organisation's size, sector, and stage of maturity.

A six-step approach to measuring wellbeing



Step 1 **Define the purpose of measurement**

Before collecting any data, be clear about what you are measuring and why. A defined purpose keeps measurement focused and ensures the data you collect will actually be used.

Common objectives:

- Understand current state of employee wellbeing
- Identify workplace factors affecting performance
- Track trends over time
- Evaluate whether wellbeing initiatives are making a difference
- Inform leadership decisions and reporting requirements

"Whatever the starting point, measurement does not need to be complex."

Step 2 Map existing data

Before introducing new surveys or tools, take stock of what your organisation already collects. Most HR teams, health and safety functions, and benefits providers hold information that is directly relevant to wellbeing. It may just not have been brought together.

Mapping existing data helps to identify gaps in quality, frequency, or ownership – information that will shape any decisions about additional measurement.

Examples of data:

Workforce/HR	
Sickness absence and work-related ill health	Working hours and overtime patterns
Turnover	Occupational Health referrals

Health and support services	
EAP usage	Occupational Health or clinical insights
Health insurance or healthcare claims trends	Wellbeing platform engagement

Employee experience	
Engagement or employee voice survey results	Exit interview themes
Pulse surveys	Focus groups or listening sessions

Step 3 Identify meaningful indicators

Once data is mapped, agree on the indicators that are most relevant to your workforce and strategy. A small number of well-chosen measures is more useful than a comprehensive but unwieldy set.

Effective measurement typically includes two types of indicator:

Wellbeing outcomes

How employees feel and experience work e.g. job satisfaction, levels of stress or pressure, sense of purpose or belonging.

Drivers of wellbeing

Workplace factors that influence those outcomes e.g. workload and role clarity, quality of line management, autonomy and flexibility, access to development.

Tracking both reveals not just whether wellbeing is improving, but why – making the data actionable.

Steps 4-6

Step 4 **Establish a baseline**

For organisations early in their wellbeing journey, the priority is often establishing a baseline rather than building a sophisticated measurement system straightaway.

More mature organisations may already hold longitudinal data and can focus on refining their indicators, linking datasets together, or moving towards predictive insight. The aim is to develop confidence in measurement gradually, building on what works.

Practical starting points include:

- Track sickness absence trends alongside work-related ill health data
- Review employee survey results related to workload, stress or management support
- Examine EAP usage or Occupational Health referral patterns
- Identify themes from exit interviews or turnover data

Step 5 **Collect insight regularly and openly**

Different data sources offer different perspectives. Combining quantitative data with employee feedback provides a more complete picture of wellbeing — one that can distinguish between a workforce that looks healthy on paper and one that feels supported in practice.

Clear communication about how data is collected, stored and used is essential. Employees are more likely to engage honestly when they understand the purpose and trust that the information will be used constructively.

Common approaches include:

- Regular review of workforce metrics e.g. absence, turnover, work-related health issues
- Health service data e.g. EAP usage, Occupational Health referrals, healthcare claims trends
- Periodic employee surveys or pulse checks – short and targeted
- Focus groups or listening sessions – add context and depth
- Aggregated insights from digital wellbeing or health platforms

Step 6 Use data to inform action

The point of measurement is not the data itself; it is what happens as a result. Organisations that use wellbeing data well make it visible to decision-makers and connect it explicitly to action.

Practical ways to embed measurement into decision-making:

- Present a small set of wellbeing indicators through simple, accessible dashboards for line managers and senior leaders
- Identify patterns across teams, roles or locations — not just the overall picture
- Use data to evaluate whether specific initiatives are having the intended effect
- Report back to employees on what the data showed and what has changed as a result
- Include wellbeing indicators within broader workforce or sustainability reporting where relevant

Finally close the loop

Showing employees that their input leads to visible change is one of the most effective ways to sustain engagement with measurement over time.

Key principle

Effective measurement is rarely about collecting more data. It is about using the right information, consistently, to understand employee experience — and acting on what you find. Organisations that take a structured, proportionate approach are better placed to identify risks early, support their people, and make the case for wellbeing investment at board level.

What this looks like in practice

The way these steps are applied will vary considerably depending on an organisation's size, sector, and starting point. The two examples below illustrate how a structured approach can work at different levels of maturity.

Organisation establishing a baseline

An organisation with limited prior measurement brings together existing data for the first time:

- Sickness absence and work-related ill health data reviewed alongside occupational health referral patterns
- Employee engagement survey results examined for themes related to workload, management, and support
- EAP usage data reviewed to identify whether take-up reflects particular teams or time periods
- Exit interview feedback analysed for recurring themes

This provides an initial picture of where wellbeing challenges may be concentrated.

The organisation then adds a small number of wellbeing-specific questions to its next employee survey, giving it a baseline against which to track change over time.

Organisation with a more developed approach

An organisation with established measurement processes combines multiple datasets to identify underlying patterns:

- Absence trends analysed alongside workload and resourcing data to understand whether spikes reflect operational pressure
- Wellbeing survey results linked with engagement scores to identify teams where both are under pressure simultaneously
- EAP and occupational health data monitored quarterly to identify emerging risk areas before they escalate
- Wellbeing indicators included within senior leadership and board reporting as part of a broader workforce dashboard

This allows the organisation to go beyond describing what is happening and begin to understand why — and to evaluate whether specific interventions are making a measurable difference.

Creating a dashboard

A recent report from Business in the Community, with research from the McKinsey Health Institute, looked at how to implement effective metrics and interventions on health and wellbeing, and the importance of a good KPI dashboard in this context.

The report illustrated how a good KPI dashboard (report example see right) should include a broad range of metrics that cover the minimum reporting standards, the business case and underlying drivers of health, as well as leading and lagging indicators.

A balanced KPI dashboard gives employers a well-rounded overview of the health and wellbeing of their employees and allows them to track the effectiveness and value on investment of any initiatives they choose to implement.

For full report go to:

https://www.bitc.org.uk/report/prioritise-people-the-next-step-report/

Outcome	Metric	KPI type	Trend vs. last quarter	Performance vs. benchmark
Attrition	Incidents of work-related injury or ill-health	→	↑	↑
	Employee turnover due to wellbeing	←	→	→
Absenteeism	Days lost to work-related injuries or ill-health	←	→	→
	Occurrence of individual health risks linked to poor wellbeing	→	↓	↓
Presenteeism and Productivity	Participation in performance reviews	→	↑	↑
	Hours worked vs. total revenue	←	↓	↓
	High work pressure (self-reported)	←	↓	↓
Retention	Accrued paid time off taken	→	→	→
Attraction	Employer Net Promotor Score	→	↑	↑
	Sense of belonging (self-reported)	→	↑	↑
Employee wellbeing outcomes	Symptoms of burnout (self-reported)	←	→	→
	Good holistic health (self-reported)	←	↓	↓

This sample KPI dashboard tracks data across all the value pools

Key

- Business Case
- Minimum reporting standards
- Underlying drivers of health

Indicator for wellbeing

- ← Lagging (reactive)
- → Leading (proactive)

- ↑ Positive
- → Neutral
- ↓ Negative

How measurement typically develops over time

Wellbeing measurement is not a one-time exercise, and most organisations develop their approach incrementally.

The maturity model here describes four levels of development — not as a benchmark to be judged against, but as a practical reference point for understanding where the organisation is now and where it might focus next.

There is no expectation that every organisation should be at Level 4. What matters is that measurement is appropriate to its own context and continues to develop in a direction that is useful.

Level 1
Initial insight
Establishing the basics

Absence rates or engagement scores – few metrics in use

Data held in separate systems with limited coordination

Initiatives evaluated through attendance or informal feedback

Priority focus:
Map what data exists and who owns it

Identify early indicators of wellbeing pressure

Agree a simple baseline to measure against

Level 2
Structured measurement
Introducing consistent indicators

Wellbeing questions integrated into regular employee surveys

Absence, turnover and support service data reviewed together

Clear ownership of wellbeing metrics within HR or dedicated wellbeing function

Priority focus:
Define a manageable set of wellbeing indicators

Track trends over time, not just single data points

Use findings to shape priorities and interventions

Level 3
Integrated insight
Combining multiple data sources

Workforce metrics, health data and employee feedback reviewed together

Dashboards supporting leadership-level discussions

Analytical focus on understanding drivers behind wellbeing outcomes

Priority focus:
Identify patterns across teams, locations or roles

Understand factors most likely driving wellbeing outcomes

Evaluate initiative impact with greater rigour

Level 4
Strategic insight
Embedded in organisational decision-making

Wellbeing indicators in leadership and board reporting

Data used proactively to identify organisational risks and allocate resources

Wellbeing insights informing ESG and sustainability reporting

Priority focus:
Link wellbeing data to broader organisational performance

Monitor long-term trends to guide strategic decisions

Build a compelling evidence base for continued investment

Key principle

Most organisations begin at Level 1 or 2. What matters is not where one starts, but that measurement continues to develop in a way that is useful, proportionate, and connected to action. Building on what an organisation already has — step by step — is the most sustainable path forward.

WELLBEING IN PRACTICE

Common challenges

When determining what wellbeing measures your organisation might want to use, it may be useful to consider some of the common challenges that employers commonly face:

1. **Wellbeing data is not global –** even within global organisations with well embedded workforce policies and practices, it may not always be possible to collect wellbeing data on a global basis. This could be due to local jurisdictional legal requirements that prevent certain data sets from being recorded e.g., absence data not being recorded in certain countries due to local data privacy requirements. It is important to understand any geographic limitations when considering your choice of wellbeing data.

2. **Accuracy of wellbeing data –** even where data is collected and readily available to use, some data may not be 100% accurate and therefore the confidence level in the data needs to be considered and understood prior to use. As an example, an organisation may ask their employees to enter a reason for absence when ill. Some employees may decide not to select the real reason for their absence, but rather select a reason that they are more comfortable with disclosing e.g., choosing 'virus' rather than 'mental health' which they feel is the 'safer' option. Take time to consider where your data may not be fully reflective and evaluate whether it is feasible to use (with appropriate caveats).

3. **Completeness of wellbeing data –** even within the same organisation and within the same jurisdiction, the approach to collecting wellbeing data may vary significantly. By way of example, any absence in a contact centre environment is likely to be meticulously recorded (for workforce planning) but in a function such as finance there is greater flexibility and less governance around reporting processes. Employees who are able to work remotely may be more likely not to record a day of absence but rather adjust how they work to accommodate a period of illness. As a result, levels of absence may be significantly under-reported in some areas.

4. **Unavailability of required wellbeing data –** there may be valuable wellbeing measures where the infrastructure is not in place to collect the data, and significant resource (including budget) may be required to get to a position where reporting could be feasible (for instance, investment in an absence recording system). Or it may be the case that whilst there is some high-level wellbeing data available, it's not possible to cut the data further and at the detailed reporting level that your organisation would require to get the most value from (for instance, total days lost to absence, but not the reasons).

5. **Interpretation based on low numbers –** some data sets may contain lower numbers, introducing the need to be more cautious from both a data privacy perspective and drawing any strong conclusions. For instance, if EAP utilisation is low overall but the majority of people call in because of stress, that doesn't necessarily indicate an organisation-wide stress concern.

6. **Correlation v causation –** when analysing data it's worth considering that correlation does not necessarily prove causation — a relationship between two metrics can reflect a direct effect, a shared cause, or reverse causality. For example, if it's observed that teams with higher average overtime also show higher sickness absence there are a range of possible interpretations:

Causal: Excessive overtime increases fatigue and illness, raising absence.

Reverse causation: High absence forces remaining employees to work overtime.

Confounding: Both overtime and absence are driven by understaffing or seasonal demand.

In this scenario, it would be valuable to conduct deeper analysis based on possible hypotheses and review additional data sets before acting.

In conclusion, there may be a number of challenges when collecting and interpreting data. Some data may be more aspirational with no realistic means of ever being able to report upon them, and others more readily available. It's important therefore to consider what data is essential and build this into the data strategy.

The importance of organisation-wide collaboration

Health and wellbeing metrics extend well beyond HR and health and safety. They are relevant across the whole organisation because wellbeing underpins key business outcomes, including productivity, culture, risk management, financial performance and employer reputation.

For this reason, visibility of wellbeing data should sit with all functions, not just specialist teams. In practice, this creates stronger decision-making across the business. For example, in inclusion, wellbeing often differs across demographic groups. Measuring these differences helps identify where targeted support is needed and ensures more equitable outcomes. Similarly, in real estate, the design and quality of the physical environment has a direct and measurable impact on wellbeing, making it essential to track and act on relevant indicators.

Rather than being viewed as an HR-led initiative, health and wellbeing should be treated as a cross-functional driver of performance. Given their influence on overall organisational outcomes, wellbeing metrics should also be reviewed at board level on a regular basis. These are core business indicators, and accountability should sit clearly at senior level, whether through a designated Executive Sponsor for Wellbeing or the Chief People Officer.

Health, safety and wellbeing – a joined-up approach?

Health, safety, occupational health and wellbeing are most effective when they are connected rather than operating in silos. Where possible, organisations should consider how these functions can be brought together more intentionally, either structurally or through clearer ways of working. This creates a more coordinated approach and helps ensure that risks and opportunities are understood in the round.

A practical way to support this is through a cross-functional wellbeing group or committee. This brings together the relevant stakeholders who have an interest in health, safety and wellbeing data, enabling shared priorities, joined-up planning and a more consistent approach to measurement and action.

This joined-up approach matters because physical and mental health are closely linked. They influence each other in ways that are often underestimated in workplace settings.

For example, stress and poor mental health can increase the likelihood of physical health issues, while fatigue, injury or chronic illness can also impact mental wellbeing. Both can contribute to a higher risk of workplace accidents. This makes prevention particularly important.

A helpful shift is to treat mental health and wellbeing hazards with the same level of rigour as physical safety risks. When this happens, organisations are better placed to identify issues early, assess risk consistently and take appropriate action. This should include developing aligned policies, delivering relevant training, and ensuring responsibilities are clearly understood across teams.

To support this effectively organisations should aim to work from a single, shared set of wellbeing metrics. This creates a consistent evidence base for decision-making and helps different functions work towards the same outcomes.

Further reading: **Joining the dots – why health, safety and wellbeing form a virtuous circle | British Safety Council**

Example: **Retail financial services organisation**

This large organisation has developed a structured governance framework that embeds health, safety and wellbeing into everyday ways of working, rather than treating them as separate or compliance-led activities.

At the centre of this approach is a quarterly Group Health and Safety Forum. This brings together premises, people and physical security teams, creating a single point of coordination for managing and monitoring global health, safety and wellbeing risks.

Importantly, this is not limited to operational teams alone. Senior representatives from across the business also attend, ensuring there is visibility and shared ownership at a leadership level. The forum is supported by a consistent set of data, which is reviewed collectively to provide oversight of the organisation's health, safety and wellbeing risk profile and control environment.

What makes this approach effective is the alignment of functions that might otherwise operate independently. By bringing them together under one framework, the organisation is able to build a clearer, more joined-up understanding of risk, strengthen accountability and support more consistent decision-making across the business.

Recommendations

Strengthen senior accountability for wellbeing

Ensure health, safety and wellbeing have clear visibility at board level, typically through an Executive Sponsor and/or the Chief People Officer. This helps embed wellbeing as a leadership priority, not just an operational one.

Build a genuinely joined-up strategy

Develop a health and wellbeing strategy that is co-created across relevant functions, rather than owned in isolation. Aim for a shared framework supported by one overarching dashboard, alongside more detailed metrics for individual areas such as health and safety, occupational health, inclusion and real estate.

Integrate wellbeing into core risk and performance conversations

Treat health and wellbeing data as part of the organisation's wider risk and performance picture. It should sit alongside other key business metrics and be reviewed regularly at board level, not as a standalone report.

Focus on connection

Metrics only add value when they are used together. The real impact comes from linking data across functions to identify patterns early, guide decisions and support more preventative action.

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Importance of metrics for governance of health risk

Employers have a responsibility to put in place effective arrangements for planning, organising, controlling, monitoring and reviewing the measures needed to protect the health and safety of employees, including mental health. Wellbeing metrics are a key part of making this practical and measurable.

When used well, data does more than report on activity. Regular review of health and wellbeing information helps organisations track progress over time, understand what is working, and spot areas where further action is needed. This creates a stronger evidence base for decision-making and supports more effective management of risk.

A clear governance framework is what brings this to life. It should set out who is responsible for what, and how different roles work together to oversee both health and safety and wellbeing, as illustrated in the table (see right).

In many organisations, existing health and safety governance structures can be extended to include wellbeing, rather than creating something entirely separate. Where organisations are earlier in their journey, the structure can be built incrementally by assigning key roles from a simple governance model and expanding over time as maturity develops.

The aim is not complexity, but clarity. Achieving clear ownership, clear accountability, and a consistent way of using data to guide action and improvement.

Role	Responsibility	What could you do?
CEO	> Sets the strategic direction and culture of the organisation	Implement new health and wellbeing policy or expand your current health and safety policy to explicitly cover wellbeing
Board of directors	> Sets strategic direction and ensures compliance > Allocates resources	Appoint a named board member who has responsibility for health and wellbeing
Delegated senior leader	> Responsible for implementing a health and wellbeing management system or framework and for reporting performance to the board	Optional: In large organisations it may be practical to delegate the day to day duties
Competent person	> Lead the health and wellbeing strategy and implement the management framework > Develop and maintain policies > Collect and analyse metrics	Appoint an internal or external resource to give competent advice
Health and Wellbeing Committee	> Senior managers and employee representatives participate in the planning, operation, performance evaluation and continual improvement of the management framework	Appoint a committee with management and worker representatives, establish terms of reference, agenda, and hold periodic meetings
Managers/ supervisors	> Responsible for day-to-day safety, wellbeing, and mental health practices for those whom they have responsibility > To ensure policies are followed and incidents are reported > Monitor employee wellbeing and escalate issues identified > Support employees to access wellbeing resources	Ensure the health and safety policy refers to wellbeing and is communicated to managers and workers Provide periodic training and information to managers
Employees/ workers	> Expected to follow safety procedures and report hazards or wellbeing concerns	Engage employees in awareness of support services to encourage utilisation

Example:

Governance model in a retail financial services organisation

This organisation has a well-established framework for managing health, safety and wellbeing risk across a complex, multi-entity structure. Accountability sits first at legal entity level, with each entity responsible for managing its own risk profile across all risk categories. Ultimate accountability rests with the entity CEO, ensuring clear ownership within each part of the business.

Alongside this, each risk category has a horizontal risk owner. Their role is to monitor the organisation-wide risk profile in aggregate and provide a consolidated view across all entities. These roles are typically held at board level, strengthening senior oversight and visibility.

Within this structure, health, safety and wellbeing risks are grouped into three core categories: physical, premises and people. Each category owns its relevant hazards, policies, standards and key risk indicators, providing clear accountability for both management and measurement.

Performance is reviewed quarterly in two ways. It is assessed vertically at entity level to ensure local accountability, and horizontally at risk category level to provide an organisation-wide view of trends and performance. In addition, these three risk categories come together in a single Group Health and Safety Forum. This forum brings together aggregated data from across the business to monitor the overall health, safety and wellbeing risk environment. It also includes representation from legal entities, ensuring both local and group-wide perspectives are considered. A single Executive is ultimately accountable for health and safety through this forum, providing a clear line of leadership and oversight across the framework.

Example:

Governance approach in a global professional services organisation

The company established a Health, Safety and Wellbeing (HSW) committee where senior leaders and colleagues come together to monitor and review HSW performance. Metrics are reviewed to identify trends and emerging needs so that objectives can be designed to continually improve HSW performance and realise opportunities to further support colleagues. Objectives are measurable or capable of performance evaluation and are the result of regular assessment of risks and opportunities identified during the monitoring of performance metrics.

CASE STUDY - **SHELL**

Shell is a global group of energy and petrochemical companies, employing around 85,000 people* across more than 70 countries. Its global Mental Wellbeing Programme is structured around three pillars: Promote – supporting individual mental wellbeing and resilience; Protect – addressing organisational and psychosocial risk factors (e.g., job demands, control, relationships; and Access – ensuring employees can find and use appropriate mental health benefits and support.

Alongside this it runs a network of champions which includes senior leader sponsors who sign up to sponsor the programme in their business or function. Each senior leader then designates a programme lead (often a non-HR professional such as an engineer or finance leader) to support implementation. Programme leads are embedded in the business and often build their own local mental wellbeing teams.

Measurement

Measurement is still evolving but Shell says the foundation is robust and getting stronger every year. Its central evaluation tool is an annual employee survey, and after six years the programme now has two years of longitudinal data and approximately 45,000 responses across the first two years of participation. The company is also expanding its evaluation strategy by connecting survey data to other metrics such as organisational change, HR engagement, and safety outcomes (e.g. linking mental wellbeing data to safety metrics). The company also collects some data directly from the Employee Assistance Programme, but stress that no confidential data is shared.

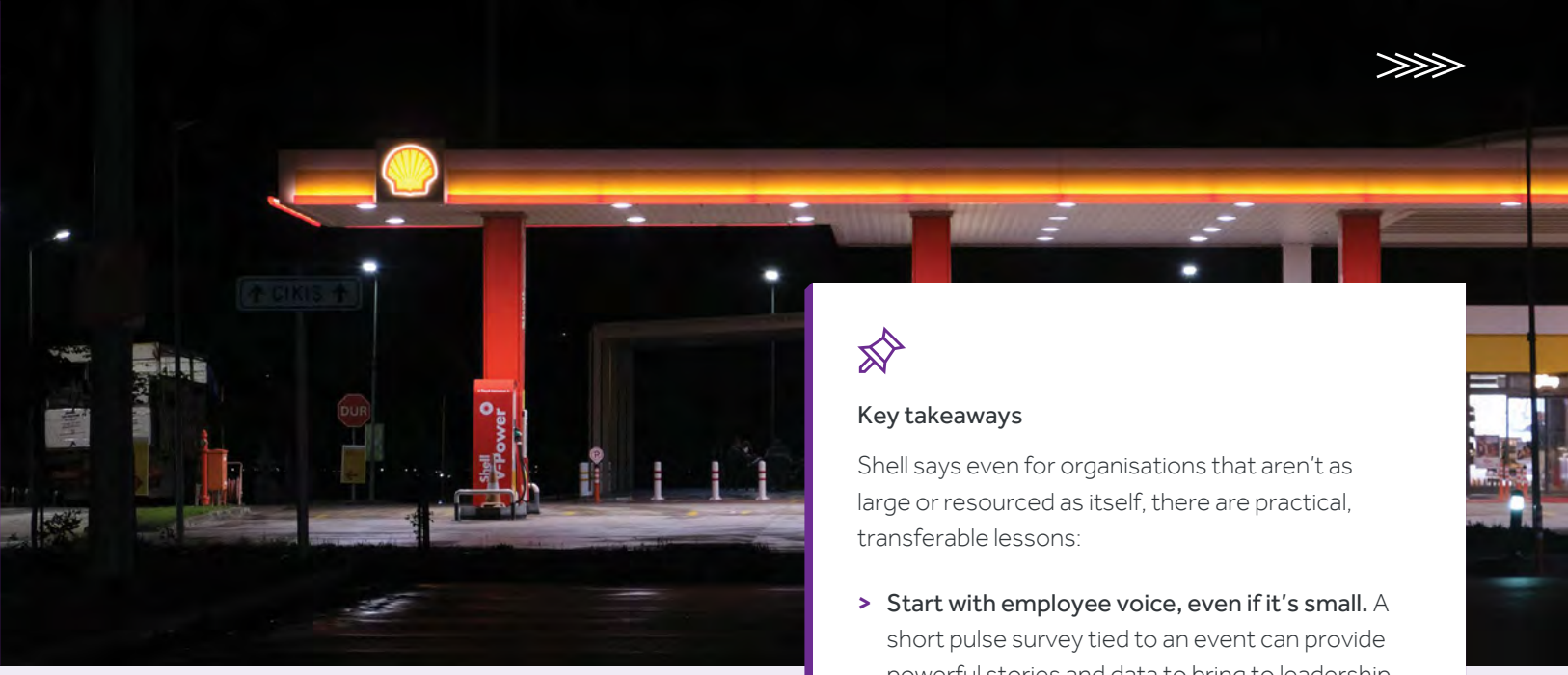
Shell also conducts an annual Continuous Improvement Survey that captures feedback on specific tools and interventions, assesses which resources are being used and how, and identifies gaps, improvement ideas, and success stories. It also undertakes qualitative evaluation via interviews and focus groups, which complements the survey data and is actively used in communications, presentations and leadership engagement.

*as at December 31st 2025, and including portfolio companies

Tangible change

Findings from the measurement work have already led to tangible changes in programmes and resources. For instance, data and interviews highlighted the pivotal role of line managers in mental wellbeing and psychological safety. The original two-hour, in-person line manager training was reimagined as a one-hour adaptive e-learning module available on demand.

Another finding was the need to integrate mental wellbeing more deeply into frontline operations and safety culture. Early feedback from pilots has been very positive, with frontline teams recognising that mental wellbeing is a natural part of everyday safety conversation.



Challenges

Shell says its experience highlights several challenges that will resonate with many employers, especially in terms of balancing data ambition with burden. For instance, how much more data can it ask for without overburdening programme leads, HR, and employees? It says collecting detailed intervention-level data across a 85,000-person workforce is difficult without adding substantial workload, so the company is continuously looking for low-effort, high-value ways to track intervention reach and impact.

Over the next few years the company aims to sustain and deepen the existing programme and says it will also look to leverage new digital tools, exploring how AI can help route employees to the right resources quickly and safely, while ensuring any digital solutions are implemented with strong safeguards, privacy protections, and clear guardrails.

Key takeaways

Shell says even for organisations that aren't as large or resourced as itself, there are practical, transferable lessons:

- **Start with employee voice, even if it's small.** A short pulse survey tied to an event can provide powerful stories and data to bring to leadership.
- **Build a champion network, not a one-person show.** Empowering distributed programme leads (with training and tools) helps embed mental wellbeing into real work, not just HR.
- **Use data to tell stories, not just show charts.** Combining survey results with quotes, anecdotes, and focus group insights makes the case for investment and change much stronger.
- **Focus on what you can measure well.** You don't need an ROI model on day one. Start with simple, meaningful metrics: awareness, access, perceived support, and key work factors.
- **Don't forget the 'protect' side.** Programmes that only ask workers to be more resilient will stall. Measuring and acting on organisational drivers like workload and control makes change sustainable.
- **Keep burden low and privacy high.** Choose methods that respect time and capacity and always put data privacy and ethical use at the forefront.

CASE STUDY - **MACE**

Mace operates in a complex, fast-paced and evolving construction and consultancy environment. In recent years, both the organisational and external landscape have shifted significantly, with increasing market volatility, sustained growth and rising pressure across the sector.

Against this backdrop the firm recognised the importance of ensuring that its approach to health, wellbeing and engagement remained relevant, proportionate and aligned to business priorities. From the outset its ambition was to move beyond surface-level sentiment and use employee listening and health data as a strategic decision-making tool supporting sustainable performance, inclusion and organisational resilience rather than as a reactive or initiative-led activity.

Listening to employees

Mace has deliberately evolved its employee listening approach, building a strong foundation of quantitative insight through validated wellbeing measures and engagement data. This enabled consistent trend analysis and supported the identification of organisational risks, opportunities and priority focus areas. It focused on understanding the drivers of wellbeing and how these interacted with engagement, retention and performance. Its approach consistently considered inputs, outputs and outcomes, with a clear emphasis on business impact.

This insight was complemented by qualitative exploration such as targeted one-to-one conversations, interviews and focus groups with colleagues and stakeholders. This allowed the business to validate themes emerging from the data, understand lived experience in practice, and ensure that recommendations were grounded in reality rather than assumption.

The business grounded its wellbeing approach in four key areas:

Measuring what matters: wellbeing, presenteeism and leadership: Early insight highlighted that absence alone did not provide a complete picture of health risk. The company explored presenteeism, recognising the impact of fatigue and sustained pressure within its operating context. It introduced an evidence-based psychological wellbeing measure focused on sense of purpose and positive emotions. This was embedded at the highest level of the organisation and reported through director scorecards, reinforcing that wellbeing was a business issue rather than a peripheral concern.

Inclusion, equity and targeted support: By segmenting wellbeing outcomes across inclusion demographics including disability, long-term health conditions and neurodivergence, the company was able to identify where experiences differed and where additional support was required. This insight informed the development of a Disability and Health Pathway, designed to provide joined-up, proactive support across the employee lifecycle.

Predictive insight: attrition, burnout and recognition: Listening data was also used to explore predictive indicators of attrition, identifying themes and trigger points commonly associated with increased likelihood of leaving. By combining survey insight with internal analysis, the company was able to target high-risk areas, run focused deep dives and support earlier, safer conversations at a local level.

Integrated health management and sickness absence: To deepen its understanding of health capability, the company triangulated sickness absence data, occupational health and private medical insurance insight. This revealed that while Mace had a wide range of tools, policies and pathways in place, these were not always sufficiently connected or activated early enough.

Continued focus

While Mace is increasingly data-rich, it recognises that insight alone does not automatically translate into action. A key area of continued focus is building the confidence, capability and maturity of its line managers and leaders to interpret insight meaningfully and turn it into practical, local action.

To date, it has seen strong impact from the use of listening and health data at an organisational and strategic level. Its next phase is focused at the local level equipping leaders and line managers to engage their teams in open dialogue, making sense of insight together and co-creating actions that sit within their control and reflect local context.

Employee listening, when used thoughtfully and integrated with broader health and inclusion insight, can support better decision-making, more equitable outcomes and sustainable performance while remaining responsive to a changing organisational and sector context.

CASE STUDY - **WAVE**

Wave is a SME B2B water retailer which has gained a national reputation for its wellbeing approach and has advised some of its large customers on wellbeing.

The company has a Health, Safety and Wellbeing strategy that underpins the overall business strategy and which focuses on four intertwined elements - mental wellbeing, physical wellbeing, financial wellbeing and - a new pillar added in 2025 - social wellbeing.

Early intervention

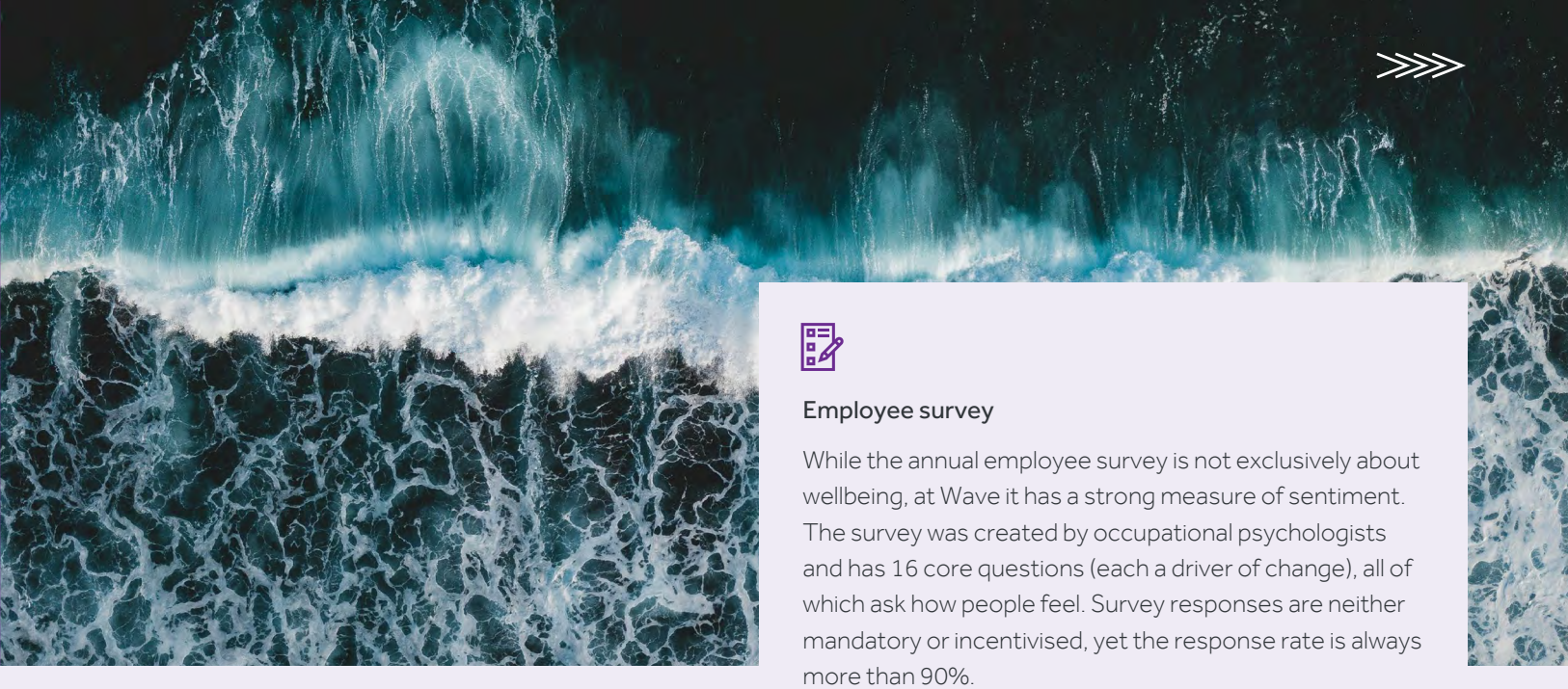
For Wave the MetLife early intervention medical scheme allows the company to triage employees, in many cases before they might even go off sick. With only small budgets, Wave could not afford a full occupational health provider but has free of charge access to MetLife through its group income protection policy provider. Wave monitors how many referrals are made to this scheme which provides fast access to qualified nurses and in some cases specialist psychiatric nurses, to assess a struggling employee and make recommendations both for the employer and the employee.

Qualitative feedback suggests that these MetLife interventions do keep people in work and supported in an individualised way. The company says the use of Metlife for referrals on both mental and physical health conditions prevents absence, but activities in its wellbeing strategy pillars also play a clear role.

Wellbeing campaigns

Wave also runs comprehensive wellbeing campaigns which employees say makes a big difference to how happy they feel in work. For instance, Wave take customer phone lines down to give every employee the ability to attend external events on topics like gambling, sleep and domestic abuse.

All of these talks are voluntary, yet attendee numbers have been as high as almost 50% of the workforce with employees saying these can make them realise they're not alone and they get tips on how to deal with situations that might otherwise negatively affect their wellbeing. Wave also has a 'living library' where employees volunteer to write a short synopsis of their lived experience on topics such as ADHD, fertility, grief, and addiction.



Financial education

Financial education has been paramount to the company's overall wellbeing strategy and it has provided financial awareness sessions for three years, achieving significant take-up rates and attendance. The company measures the employee's knowledge of the financial topic in each webinar before and after attending the sessions and these always show a marked improvement. The company also captures anecdotal information on how the provision of financial education impacts on overall wellbeing among employees.

Last year the company also offered employees a new benefit of a funded financial wellbeing app for their personal finances that could give savings tips and offer monthly topic resources.

Employee survey

While the annual employee survey is not exclusively about wellbeing, at Wave it has a strong measure of sentiment. The survey was created by occupational psychologists and has 16 core questions (each a driver of change), all of which ask how people feel. Survey responses are neither mandatory or incentivised, yet the response rate is always more than 90%.

Wave also look at the activity of, and engagement in, their employee support groups when considering how embedded wellbeing is in the organisation. The groups have produced a range of actions including regular meetings, input to company-wide wellbeing campaigns, podcasts, one-off special focus meetings and raising money for wellbeing related charities. Groups include Hot Flashes (menopause group), Go With the Flow (women's health) and Talking BS (men's health).

Metrics

The metrics highlighted in this case study are a combination of quantitative and qualitative wellbeing indicators. The quantitative measures include attendance levels (with a focus on the positive not on the negative sickness score), employee turnover, and employee engagement scores. The metrics also cover attendance at wellbeing events, including the key wellbeing campaign external speakers and financial awareness webinars, and data is also obtained on the increase in awareness of each financial topic pre and post learning.

CASE STUDY - NATIONAL POLICE WELLBEING SERVICE

The National Police Wellbeing Service - Oscar Kilo – has developed as a national capability to support all 43 police forces in England and Wales providing guidance, policy, training, deployable assets in crisis and an annual workforce survey. The total workforce exceeds 300,000 staff and it is essential to prioritise activity which is scalable, affordable and evidence-based.

Over the last decade there has been well intentioned mission creep created by a lack of clarity about the employer's role versus individual responsibility. To resolve this, a new Workforce Prioritisation Guidance (WPG) sets out the six activities required to meet the legal duty of care given the occupational risks inherent in police work.

Ranging from trauma support to fatigue risk management, the status of the guidance will be raised through the Police Reform Act resulting in the first mandated, sector specific wellbeing guidance in UK policing. In parallel, significant effort has been made to collect and track metrics which allow stakeholders to gauge workforce sentiment whilst also capturing 'effort' in all six areas.

National oversight

Oscar Kilo's analytics capability provides national oversight of workforce health and wellbeing and enables it to monitor and track WPG as a proxy refection of legal duty of care, as well as understand workforce experience and wellbeing outcomes, and generate actionable insight to target intervention and improve impact. Oscar Kilo also has a consolidated national dashboard which enables consistent, comparable insight across all 43 forces and can identify national trends and systemic risks.

Oscar Kilo has also developed a combined operational and tactical analytics layer that integrates more detailed self-assessment data from forces with real-world traction data on the usage of its products and services. This enables: comparison of perceived capability (self-assessment) with actual activity (usage data); identification of gaps between intention and delivery, and variation in adoption, capability and outcomes across forces; better understanding of which interventions are being used, where and by whom; and a move beyond 'what is happening' to 'why it is happening'.

Coherent view

Oscar Kilo's data and analytics capability provides a single, coherent view of workforce health and wellbeing at a national level. It also links wellbeing to operational risk and sustainability, and is a mechanism to drive consistency across a federated policing model. Crucially, it also provides evidence to support policy, investment and reform decisions. In doing so it positions Oscar Kilo not only as a service provider, but as a national insight and assurance function for workforce wellbeing.

"It is essential to prioritise activity which is scalable, affordable and evidence-based."

CASE STUDY - **CANADA LIFE UK**

Canada Life UK provides provides retirement, investment and protection solutions. Its wellbeing strategy is based on a preventative and proactive approach which helps support all colleagues to feel empowered, thrive and deliver for its customers. By adopting a data-led approach, the company has been able to prioritise key areas within the business to evolve.

The business reviewed and defined its wellbeing metrics, helping it to understand where to focus its wellbeing strategy and how to shape its wellbeing benefit offering. The company has a multi-generational workforce, so it's important that it doesn't take a 'one size fits all' approach to wellbeing.

Gaining a deeper understanding of colleagues' needs enabled the firm to shape interventions and provide personalised wellbeing support. For instance, the business now offers menopause support, emergency back-up care for carers, and neurodiversity pathways through its private medical insurance.

A collaborative approach

The firm says it took a collaborative approach to measuring wellbeing. Health and safety and wellbeing sit within the people strategy function and work closely together. Monthly meetings take place between health and safety and wellbeing to review health and wellbeing measures such as: absence levels and reasons for absence; PMI claims data such as the number and reasons for claims; colleague engagement survey data (annually); Employee Assistance Programme usage; and Mental Health First Aider insights.

The meetings are used to discuss potential health risks, agree focus areas and actions. The two functions work closely together on topics such as mental wellbeing, neurodiversity and physical wellbeing - particularly musculoskeletal health - to take a preventative and proactive approach.

An executive sponsor for wellbeing has also recently been appointed. Their role will be to help drive and embed the wellbeing strategy and ensure that wellbeing is a leadership and business priority across the whole organisation.

CASE STUDY - **MARS**

Site Health Fundamentals is Mars' internal, global, healthy worksite certification process. It measures progress against ten evidence-based fundamentals of a healthy, energising site culture.

The Mars Associate Health and Wellbeing team reviews and updates the criteria above every cycle (conducted every two years) to ensure they are aligned with evolving global standards of workplace health and wellbeing and can be applied mutually across all its diverse worksites.

Sites with more than 100 associates (KPI sites) are required to participate in the assessment, while smaller sites are encouraged to participate. Information is collected via self-assessment completed by local site representatives. A review process helps verify the robustness of submissions, and results are used to celebrate successes and identify areas for support or intervention.

Latest results

The most recent assessment period was June 2024, and through their submissions sites could attain Silver, Gold or Platinum Healthy Worksite Status for 2024-2025. In 2024, 94% of large, KPI sites achieved Gold or Platinum Status, up from 8% seven years ago.

The company says it has made this progress while both evolving its standards as to what makes a Gold site, and including more sites in its KPI. Its ambition is for all Mars associates to work in a Gold or Platinum Site, as it is confident these environments support health and wellbeing at work. Assessments now take place every two years and the next cycle begins in June 2026.

CASE STUDY - **GSK**

With a diverse global workforce of almost 70,000 spanning R&D, manufacturing, and commercial environments, the global biopharma company has long invested in supporting its employees' health and wellbeing.

The company takes a deliberate science-based, evidence-informed, decision-focused approach to measurement – one that supports prevention of ill-health, targets effort where it is most needed, and builds trust through strong governance and confidentiality when using the supporting ecosystem.

GSK uses a triangulated model of business metrics, combining lagging outcomes, leading indicators, and contextual maturity measures, rather than relying on a single wellbeing metric. It tracks a variety of data points to understand the multifaceted nature of employee health:

HR data: Aggregated, anonymised health-related absence trends and other relevant data are analysed. This helps understand patterns of illness and the financial impact of varied health conditions, informing targeted interventions and policy adjustments.

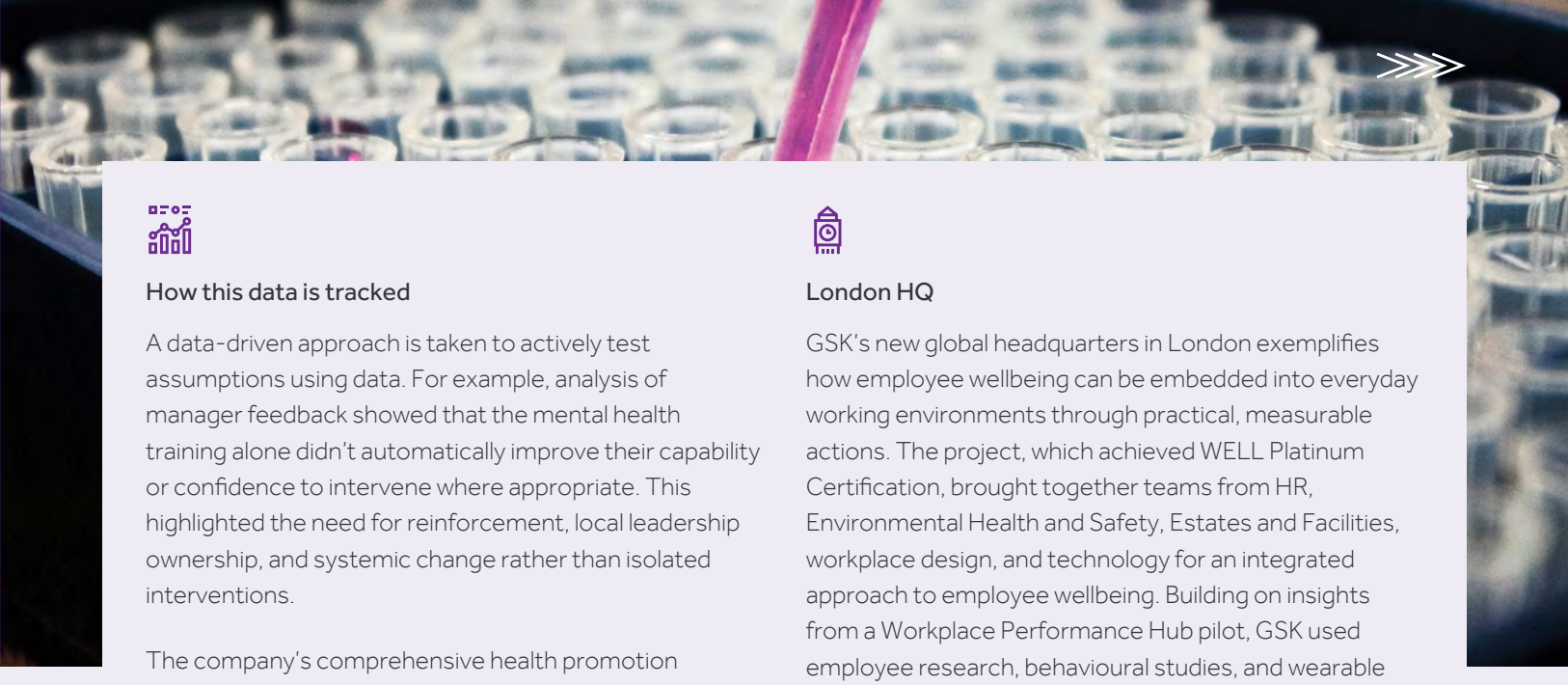
Occupational Health and Environment, Health and Safety: Anonymised data from OH services, workplace injury and safety records, and workplace adjustments provide insights into physical health risks and the effectiveness of preventative measures.

Workplace experience: Insights are gathered from healthy workplace standards, and workplace experience indices which include internal pulse surveys as well as externally benchmarked surveys at key sites.

Organisational listening: Annual engagement surveys, pulse surveys, and targeted listening initiatives help understand employee perceptions of organisational support, identify 'hotspots' or areas of concern, and track progress over time.

Line manager effectiveness: Insights from line manager appraisals are used to understand employee day-to-day experiences, especially how supported and psychologically safe they feel within their teams. Effective line management is a key driver of employee wellbeing.

Wellbeing programme data: This includes aggregated global Employee Assistance Programme (EAP) utilisation trends, engagement with wellbeing platforms (supporting healthy habits and financial literacy), and uptake of core learning such as the GSK proprietary line manager mental health training.



How this data is tracked

A data-driven approach is taken to actively test assumptions using data. For example, analysis of manager feedback showed that the mental health training alone didn't automatically improve their capability or confidence to intervene where appropriate. This highlighted the need for reinforcement, local leadership ownership, and systemic change rather than isolated interventions.

The company's comprehensive health promotion strategy plays a critical role, with a dedicated team managing communications and engagement through channels such as the internal social media platform, on-site digital screens, and a full health promotion plan.

Challenges

Collecting robust wellbeing data across a global organisation like GSK presents significant challenges. The company says there are complex data privacy regulations and other legal requirements to navigate across diverse regions, while also accounting for cultural nuances that shape perceptions of wellbeing and impact programme engagement.

Ensuring data standardisation and comparability across different systems and geographies is also difficult, making it hard to draw consistent conclusions. Furthermore, attributing specific outcomes to wellbeing interventions is complex due to numerous external factors, and securing open, honest feedback on sensitive topics requires sustained trust and confidentiality. All these factors demand substantial resources for effective data collection, analysis, and insight implementation.

London HQ

GSK's new global headquarters in London exemplifies how employee wellbeing can be embedded into everyday working environments through practical, measurable actions. The project, which achieved WELL Platinum Certification, brought together teams from HR, Environmental Health and Safety, Estates and Facilities, workplace design, and technology for an integrated approach to employee wellbeing. Building on insights from a Workplace Performance Hub pilot, GSK used employee research, behavioural studies, and wearable technology to understand how different environments affected stress, concentration, and productivity. This ensured design decisions were evidence-based and not made on assumptions. Workplace data and employee feedback also informed the creation of a neuroinclusive environment, offering a variety of work settings designed to support different sensory and cognitive needs.

Takeaways

GSK's experience highlights that effective wellbeing measurement requires multiple complementary data sources, designed to inform decisions and prevention. It demands clear minimum global standards and business accountability, while it also benefits from testing assumptions and acknowledging evolving practices. GSK's approach demonstrates how organisations can use wellbeing metrics responsibly, combining insight, collaboration, and continuous learning to support healthier, more sustainable ways of working. These outcomes depend on shared ownership and collaboration across functions, rather than the efforts of any single team, reinforcing that meaningful progress in wellbeing is a whole business endeavour.

CASE STUDY - **BP**

Global oil and gas company BP is evolving its approach to workforce wellbeing by recognising brain health as a key driver of safe, focused and sustainable performance. This reflects a broader shift from reactive wellbeing initiatives towards proactive, measurable interventions embedded in the flow of work.

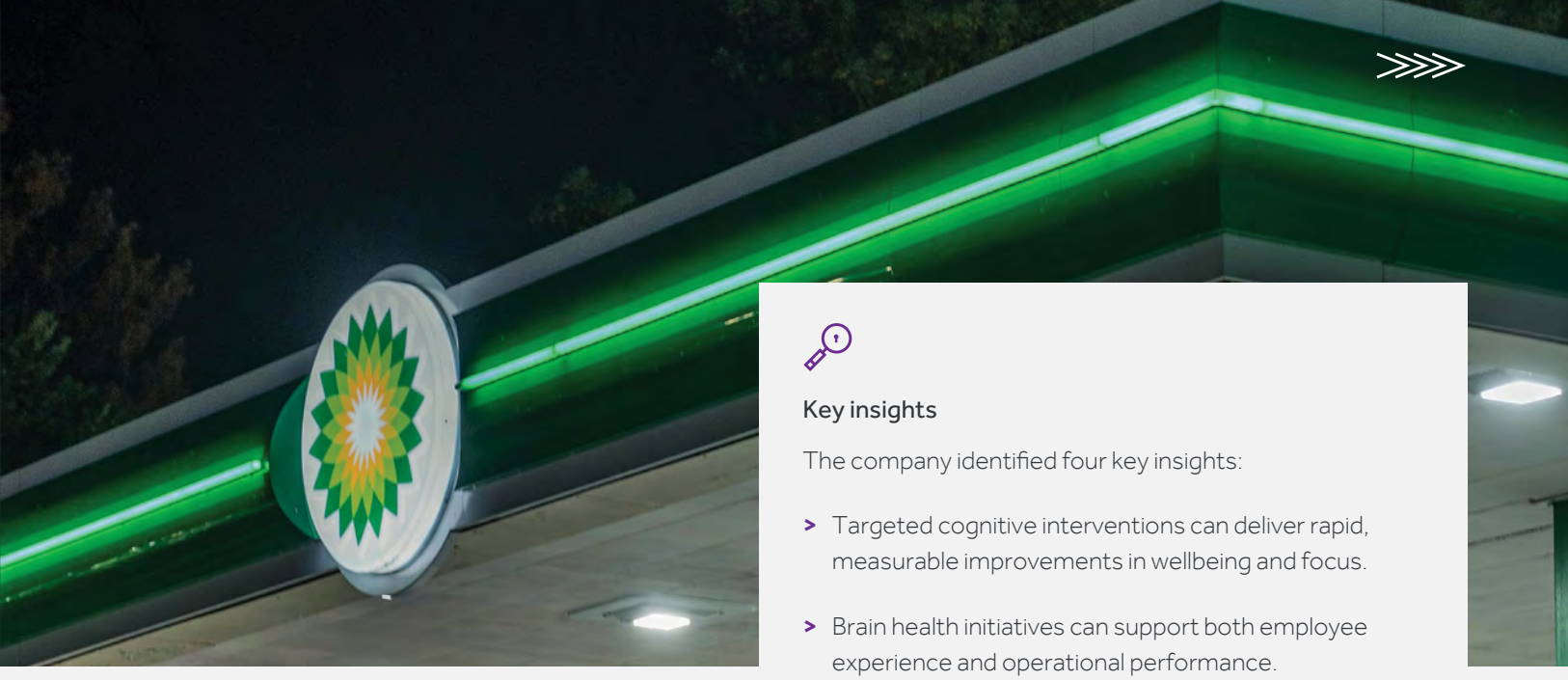
To support this the company piloted a Brain Gym at its location in Pune, India, an interactive, on-site experience designed to strengthen cognitive capability through short, guided sessions. The Brain Gym combines cognitive training activities to improve focus and reaction time, facilitated sessions to build awareness of brain health, and pre and post session measurement to assess impact. Sessions were designed to be accessible, engaging, and easy to integrate into the working day.

The pilot focused on a small set of indicators, including energy and vitality, emotional regulation, presence and mindfulness, and physical confidence. Data was captured through pre- and post-session surveys, participation tracking, and qualitative employee feedback. This enabled both real-time insight (engagement and experience) and evidence of impact (change in cognitive and wellbeing measures).

Findings

Results from the first phase of the pilot demonstrate strong engagement and measurable outcomes, based on employee participant self-reported data. In terms of participation and engagement, more than 250 employees participated during Phase 1, 56% of participants attended more than once, and peak usage aligned with midday fatigue periods. Regards employee experience, 79% of participants rated sessions as "excellent", and feedback highlighted improved focus and enjoyment.

Post-session improvements were observed across all tracked areas including emotional regulation, improvements in energy and physical confidence, and improvements in mindfulness and sense of purpose. Employees also reported reduced mental fatigue and improved ability to focus.



What worked well

BP say the simplicity of measurement worked well. A small number of clear indicators enabled easy tracking and communication of impact.

What also worked was integration into the working day whereby short, accessible sessions supported strong participation.

The company also points to the combination of data types with quantitative measures reinforced by consistent positive feedback. And the immediate feedback loop worked well - pre/post comparisons made impact visible to both employees and stakeholders.

Key insights

The company identified four key insights:

- Targeted cognitive interventions can deliver rapid, measurable improvements in wellbeing and focus.
- Brain health initiatives can support both employee experience and operational performance.
- High engagement is driven by experience-led interventions, rather than awareness alone.
- Simple, structured measurement is sufficient to demonstrate value and support scaling decisions.

Next steps

BP plans to expand the Brain Gym to additional locations, while integrating Brain Health initiatives into its broader wellbeing programme. It will also continue to evaluate outcomes to inform long-term implementation.

In terms of a key takeaway, it says the Brain Gym pilot demonstrates how practical, measurable interventions can embed brain health into everyday work, supporting a safer, more focused and higher-performing workforce.

CASE STUDY - **PHILIPS**

Philips is a leader in health technology with over 64,000 employees across more than 100 countries. Its purpose is to improve people's health and wellbeing through meaningful innovation.

For Philips UK and Ireland (UKI) the importance of wellbeing measurement grew out of a need to capture, track and manage absences within its manufacturing. Over the past 15 years, Philips UKI has grown in wellbeing maturity from a foundational level through to a dedicated strategy for wellbeing, meaningful resources for employees, and to creating leadership level sponsorship and advocacy.

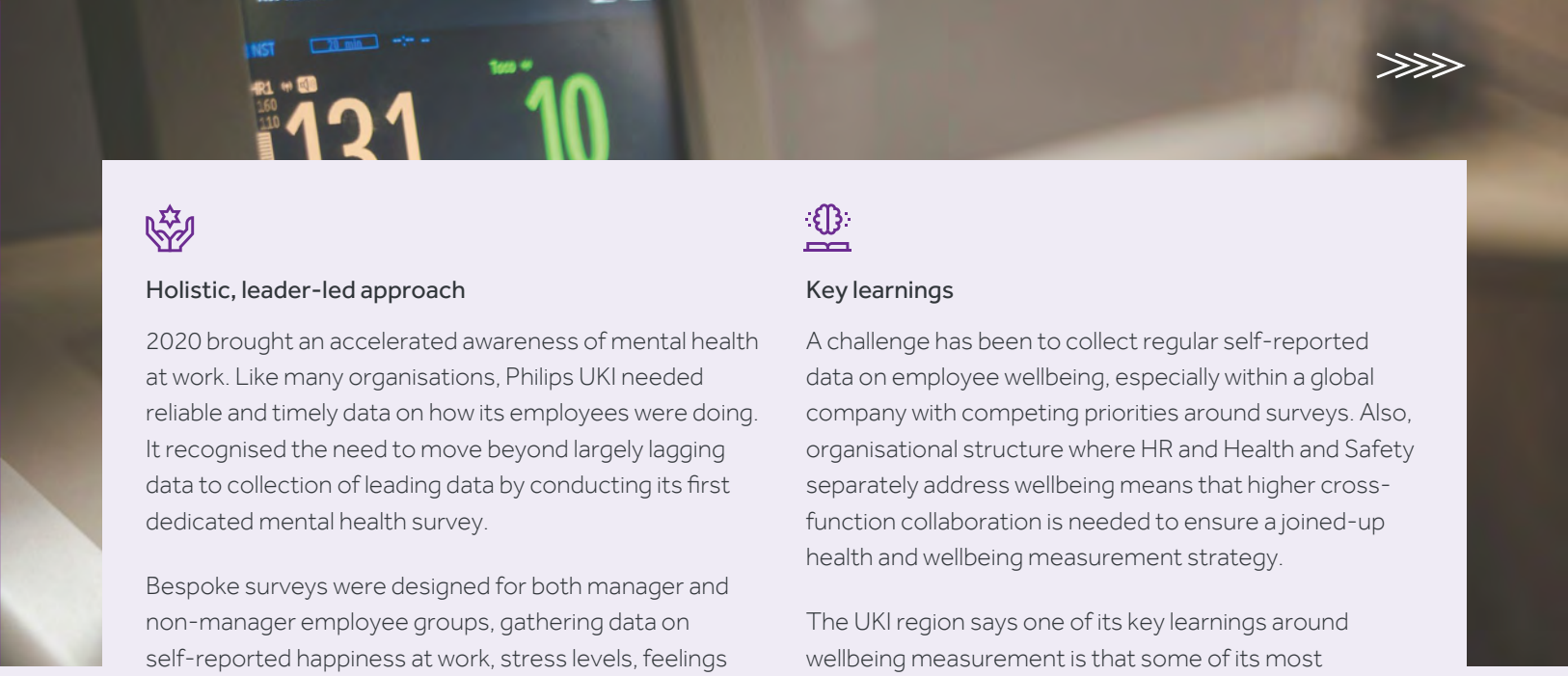
Measurement strategy

For Philips UKI, an increased focus on the health and wellbeing of its people drove a need to evolve measurement, using robust and reliable data to inform and drive wellbeing strategy and justify long-term investment.

The UKI region utilises global employee engagement survey data to inform on the wellbeing of its people through tracking results related to work-life rhythm, psychological safety, and inclusion and diversity. This offers longitudinal data that is benchmarked internally and externally. The region was the first globally to create a Wellbeing Champions network which has become not only a valuable peer to peer resource, but also a trusted group to provide insight on the wellbeing needs of its people.

Over the last decade the company has also created governance and systems around wellbeing data by including absence data within its HR Daily Management process, establishing targets for absence rates and tracking region-wide absence reasons.

Daily Management boards also enabled the company to look at absence data beside metrics connected to employee wellbeing such as attraction, retention and attrition, allowing it to have a broader HR view of the organisational 'health.' Over time, it also included tracking of work-related mental health absences to identify health issues early, address workplace risks, and provide timely support to help prevent these moving into long term absences.



Holistic, leader-led approach

2020 brought an accelerated awareness of mental health at work. Like many organisations, Philips UKI needed reliable and timely data on how its employees were doing. It recognised the need to move beyond largely lagging data to collection of leading data by conducting its first dedicated mental health survey.

Bespoke surveys were designed for both manager and non-manager employee groups, gathering data on self-reported happiness at work, stress levels, feelings of anxiousness, overall health and perceived support. The company was able to use this data beside existing data on dimensions of employee wellbeing (such as purpose and job satisfaction) collected via global employee engagement surveys.

Health and wellbeing measurement has developed to encompass tracking of employee engagement survey data points related to employee wellbeing, wellbeing programme engagement rates, and aggregated data from its Employee Assistance Programme (EAP), occupational health and health screening programmes. This is supported by pulse surveys and employee listening to gather employee sentiment.

Sponsors have been appointed in the senior leadership team to increase oversight and accountability for health and wellbeing metrics and programmes. A simple wellbeing dashboard tracks key data points, and this is shared at regular intervals with the senior leadership team to demonstrate the link to business outcomes, ensure continued advocacy and participation in the programme, and to reinforce the business case for wellbeing.

Key learnings

A challenge has been to collect regular self-reported data on employee wellbeing, especially within a global company with competing priorities around surveys. Also, organisational structure where HR and Health and Safety separately address wellbeing means that higher cross-function collaboration is needed to ensure a joined-up health and wellbeing measurement strategy.

The UKI region says one of its key learnings around wellbeing measurement is that some of its most successful and appreciated wellbeing initiatives have not arisen out of its 'standard' quantitative health and wellbeing data, but rather through a deliberate integration of deep employee listening and observation of external broader population health trends.

Lived experience related to menopause, fertility and neurodiversity have brought powerful employee stories that have helped the company develop wellbeing initiatives pitched appropriately and sensitively for its employees on these topics. It says these initiatives have seen hugely positive and affirming responses from employees where they feel connected and supported.

APPENDIX

Further reading

This appendix brings together a selection of key publications, frameworks and standards that informed the development of this guide. It is not intended to be exhaustive, but to signpost further reading for those who wish to explore the topic in more depth. It also reflects the wide and growing body of work from academia, NGOs, and specialist organisations in this field, which has been acknowledged and referenced throughout where relevant.

1. Key reports, frameworks and playbooks

- Business in the Community x McKinsey Health Institute (2024)
  Prioritise People: The Next Step – Implementing effective metrics and interventions on health and wellbeing
  https://www.bitc.org.uk/report/prioritise-people-the-next-step-report/

- World Wellbeing Movement / Oxford Wellbeing Research Centre – Playbook and workplace wellbeing measurement
  https://worldwellbeingmovement.org/wp-content/uploads/2024/11/Work-Wellbeing-Playbook.pdf
  https://wellbeing.hmc.ox.ac.uk/wp-content/uploads/2023/05/2303-WP-Measuring-Workplace-Wellbeing-DOI.pdf
  https://wellbeing.hmc.ox.ac.uk/papers/wp-2303-measuring-workplace-wellbeing/
  WWM - How to measure workplace wellbeing – World Wellbeing Movement
  https://worldwellbeingmovement.org

- McKinsey Health Institute (Nov 2023)
  Reframing employee health: Moving beyond burnout to holistic health
  https://www.mckinsey.de/en/mhi/our-insights/reframing-employee-health-moving-beyond-burnout-to-holistic-health

- OECD – Measuring wellbeing and progress
  https://www.oecd.org/en/topics/sub-issues/measuring-well-being-and-progress.html

- New Economics Foundation – Measuring wellbeing
  https://neweconomics.org/uploads/files/measuring-wellbeing.pdf

- Measure Wellbeing
  https://measure-wellbeing.org/

- ResearchGate – Measuring wellbeing: how and why
  https://www.researchgate.net/publication/332102443_Measuring_Wellbeing_How_and_Why

2. Academic research and publications

- De Neve, J-E. & Ward, G. (2023)
  Measuring Workplace Wellbeing (Wellbeing Research Centre Working Paper WP-2303)
  https://wellbeing.hmc.ox.ac.uk/wp-content/uploads/2023/05/2303-WP-Measuring-Workplace-Wellbeing-DOI.pdf

- De Neve, J-E. & Ward, G. (2025)
  Why Workplace Wellbeing Matters: The Science behind employee happiness and organisational performance

- Regier, C. et al. (2025)
  Work Wellbeing Playbook: A Systematic Review of Evidence-Based Interventions to Improve Employee Wellbeing
  World Wellbeing Movement

3. Books

- Hesketh, I. & Cooper, C. L. (2023)
  Wellbeing at Work: How to Design, Implement and Evaluate an Effective Strategy
  Kogan Page (London & New York)

- Misra, M. & Cooper, C. L. (2025)
  Healthy High Performance: Unlocking Business Success Through Employee Wellbeing
  Routledge (London & New York)

4. Standards, accreditation and benchmarking frameworks

- ISO 45001 – Occupational health and safety management systems
  https://www.iso.org/standard/63787.html

- ISO 45003 – Psychological health and safety at work
  https://www.iso.org/standard/64283.html

- HSE Management Standards (UK stress risk management framework)
  https://www.hse.gov.uk/stress/standards/

- Copenhagen Psychosocial Questionnaire (COPSOQ)
  https://bmjopen.bmj.com/content/bmjopen/13/11/e074384/DC2/embed/inline-supplementary-material-2.pdf

- CCLA Corporate Mental Health Benchmark
  https://www.ccla.co.uk/mental-health

- S&P Global Corporate Sustainability Assessment
  https://www.spglobal.com/esg/csa/

- Investors in People – Wellbeing accreditation and guidance
  https://www.investorsinpeople.com/accreditations/we-invest-in-wellbeing/
  https://www.investorsinpeople.com/knowledge/how-to-measure-wellbeing-at-work/

- Global Centre for Healthy Workplaces
  https://www.globalhealthyworkplace.org/

5. Additional resources

- World Wellbeing Movement – Insights and workplace measures
  https://worldwellbeingmovement.org/wp-content/uploads/2023/05/WWM-Insights-Workplace-Measures.pdf

- The NHS health and wellbeing framework is a toolkit aimed at health and wellbeing staff, HR and organisational development directors, and any managers and leaders with an interest in health and wellbeing
  https://www.england.nhs.uk/publication/nhs-health-and-wellbeing-framework/

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