



Creating the Conditions for Good Work and Better Health

Learning from Pillar 1:

Health and Care Workforce Collective Insights
for Policy and Practice from West Yorkshire

Prepared by:
New Light Insights
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**New
Light**
insights

Healthy
Working
Life

West Yorkshire
Health and Care Partnership





Foreword

By Kate O'Connell, Director of the
Leeds Health and Care Academy

Health and work are deeply connected. For those working across health, care and community services, good work can support health through purpose, connection, security and belonging, while poor health can create significant barriers to participation and wellbeing.

Healthy Working Life was developed through the West Yorkshire Health and Growth Accelerator to explore how we can create healthier working lives through prevention/early intervention, partnership and place-based action. This report brings together the learning from Pillar 1: Health and Care Workforce, drawing on experiences from across Bradford District and Craven, Calderdale and Kirklees, Leeds and Wakefield.

While approaches varied across places, the findings tell a consistent story. Workforce wellbeing is shaped not only by individual circumstances, but also by workplace culture, leadership, access to support and the wider systems in which people work. Creating healthier working lives requires collective action across organisations, sectors and communities.

A consistent theme throughout the learning is the importance of prevention and early intervention. Creating opportunities for earlier conversations, timely support and compassionate workplace practices can make a significant difference to workforce wellbeing, retention and long-term health outcomes. The findings reinforce the role that good work plays in creating better health outcomes for individuals, organisations and communities alike, while highlighting the importance of equitable access to support and strong partnership working across the system.

I would like to thank all the workforce leads, delivery partners, employers, practitioners and staff who contributed their experiences, insights and learning throughout the programme. Their contributions have helped shape a richer understanding of what supports people to remain healthy in work and will inform future policy and practice across West Yorkshire. The opportunity now is to build on this learning and continue creating the conditions in which good work and better health go hand in hand.



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Executive Summary

Why this report matters

Work is one of the most significant influences on health. It provides far more than income alone. For many people, work offers purpose, identity, social connection, routine and a sense of contribution. When work is experienced positively, it can support both physical and mental wellbeing.

At the same time, poor health remains one of the most significant barriers to workforce participation across the UK. Rising levels of long-term sickness, increasing economic inactivity and growing complexity of need have focused national attention on the relationship between work and health.

Within health and care systems, these challenges are particularly important. The workforce is central to service delivery, population health and economic prosperity. Supporting workforce wellbeing is therefore not simply a workforce issue. It is a public health issue, a service sustainability issue and an economic issue.

The Healthy Working Life Programme was developed as part of the West Yorkshire Health and Growth Accelerator to explore how healthier working lives can be created across health and care systems. New Light Insights was commissioned as the independent insight and research partner for the Pillar 1 element of the programme, bringing together learning from across West Yorkshire to identify implications for future policy and practice within the health and care workforce.



How We Developed These Insights

New Light Insights synthesised learning from programme documentation, place delivery reports, stakeholder interviews, workforce feedback, learning workshops and relevant national evidence.

What we learned

Despite differences in delivery models across places, six consistent insights emerged.



1. Workforce health is a system issue

Workforce wellbeing is shaped by the interaction between individual circumstances, workplace conditions and wider system infrastructure. Improving outcomes requires action across all three levels rather than focusing solely on individual behaviour or access to services.



2. Good work actively creates health

The findings reinforce growing evidence that good work contributes positively to physical health, mental wellbeing and quality of life. Supportive workplaces, flexibility, autonomy, positive relationships and compassionate leadership all play an important role in creating healthier working lives.



3. People's experiences are complex

Mental health concerns and musculoskeletal conditions were common reasons for accessing support. However, these often sat alongside caring responsibilities, menopause, disability, neurodivergence, financial pressures and wider life challenges. Whole-person approaches are therefore essential.



4. Prevention and Early Intervention matters

Many people sought support only after challenges had escalated. Creating opportunities for earlier conversations, timely intervention support and preventative approaches offers significant opportunities to improve workforce outcomes.



5. Place-based approaches improve equity of access

The programme demonstrated how place-based partnerships can improve access to support, particularly for workforce groups and organisations that may otherwise have limited wellbeing infrastructure. This was especially important across social care, primary care, voluntary and community organisations i.e. smaller providers.



6. Partnership creates value

The strongest outcomes emerged where organisations worked together. Collaboration enabled places to share expertise, improve coordination and create opportunities that would have been difficult to achieve independently.

What this means for policy and practice

The findings suggest that future workforce strategies should move beyond a focus on just managing sickness and instead focus on creating the conditions that support healthy working lives.

This includes:

- Investing in prevention and early intervention.
- Strengthening leadership capability and workplace culture.
- Improving equity of access to support.
- Developing integrated and navigable support pathways.
- Investing in place-based workforce infrastructure.
- Embedding health creation within workforce policy and commissioning decisions.

Ultimately, workforce wellbeing should be understood as health-creating infrastructure. Supporting people to remain healthy in work benefits individuals, organisations, communities and the wider economy.

About Healthy Working Life

Healthy Working Life is the West Yorkshire programme developed through the Health and Growth Accelerator to strengthen the relationship between work, health and economic participation. Within West Yorkshire, the programme was delivered through two interconnected pillars:

Pillar 1 – Health and Care Workforce

Focused on supporting healthier working lives for those working in health, care and community services and understanding the conditions that influence workforce wellbeing, retention and participation.

Pillar 2 – Work and Health

Focused on supporting wider work and health outcomes across the population, including reducing barriers to employment and improving economic participation. This report focuses exclusively on Pillar 1: Health and Care Workforce.

The learning generated through this work extends beyond individual projects or interventions. It provides insight into how organisations, partnerships and systems can work together to create the conditions that support healthier working lives.

Importantly, this report is not a formal evaluation of programme performance. Instead, it is an applied insight report. Led by New Light Insights as the independent insight and research partner, it brings together learning from programme delivery, stakeholder experiences, place-based innovation and wider evidence relating to work, health and workforce wellbeing.

The report seeks to answer a simple but important question:

**How do we collectively
create the conditions for
good work, better health
and healthier working lives?**



What Pillar 1 Tested

Pillar 1 explored a range of approaches to supporting workforce health and wellbeing across West Yorkshire. While delivery varied by place, activity broadly included:

Workforce wellbeing assessments and health checks

Mental health and emotional wellbeing support

Musculoskeletal support and advice

Health and wellbeing coaching

Physical activity and lifestyle interventions

Training and development for managers and leaders

Workforce wellbeing resources and signposting

Navigation and referral into wider support services

Partnership development and workforce wellbeing infrastructure

The programme deliberately enabled places to adapt delivery to local workforce needs, recognising that no single model would be appropriate across all contexts.

While the specific interventions differed, the programme provided a valuable opportunity to understand what helps people remain healthy in work and what conditions support healthier working lives.

About This Report

This report was commissioned by West Yorkshire Health and Care Partnership and developed by New Light Insights as the independent insight and research partner for the Healthy Working Life Programme.

The purpose of the work was not to undertake a formal evaluation of programme performance. Instead, it sought to capture, synthesise and interpret learning generated through programme delivery across West Yorkshire and identify implications for future workforce policy and practice.

The analysis drew upon programme documentation, delivery reports, place-based learning, stakeholder interviews, facilitated sense-making discussions and wider evidence relating to work, health and workforce wellbeing.

The report brings together learning from Bradford District and Craven, Calderdale and Kirklees, Leeds and Wakefield. Rather than focusing on individual interventions, it explores the wider conditions that influence workforce wellbeing and considers how policy, commissioning and organisational practice can collectively create healthier working lives.

1. Why Good Work and Health Creation Matter

For much of the last decade, discussions about workforce wellbeing have focused on reducing sickness absence, supporting people back into work and managing the consequences of poor health. While these remain important priorities, the learning from Healthy Working Life points towards a broader and more ambitious agenda. Good work does more than prevent ill health. It actively creates health.

When people experience work that is meaningful, supportive, flexible and inclusive, the benefits extend far beyond employment alone. Good work can improve mental wellbeing, strengthen social connections, increase financial security and contribute to a greater sense of purpose and belonging. These factors are closely associated with improved health outcomes and quality of life.

This perspective is particularly important within health and care. The workforce plays a critical role in supporting population health, yet workforce wellbeing is often discussed separately from wider health improvement agendas. The programme suggests that these conversations should be more closely connected.

Supporting healthier working lives should be understood as an investment in workforce sustainability, service resilience, population health and economic prosperity. In this sense, workforce wellbeing is not simply a workforce initiative. It is a health-creating infrastructure.

The Healthy Working Life Programme provides an opportunity to better understand what this means in practice and what conditions are needed to support healthier working lives across complex health and care systems.



2. What We Learned: The Conditions That Create Healthy Working Lives

One of the clearest messages emerging from the Healthy Working Life Programme is that workforce wellbeing cannot be understood through a single lens.

Across every place, participants described experiences shaped by the interaction between personal circumstances, workplace environments and wider system factors. While support services are often organised around specific conditions or issues, people's lives rarely fit neatly into these categories. Instead, workforce wellbeing is influenced by a combination of health, work, relationships, financial circumstances, caring responsibilities and wider social factors.

This learning highlights the importance of moving beyond a narrow focus on individual resilience or service provision. Healthier working lives are created through the interaction between people, workplaces and systems. Understanding this relationship is essential if workforce strategies are to deliver meaningful and sustainable change.

Workforce Health is Complex and Interconnected

Across West Yorkshire, mental health and musculoskeletal conditions were among the most common reasons people sought support. However, these issues rarely existed in isolation.

Many individuals were simultaneously managing caring responsibilities, menopause, disability, neurodivergence, financial pressures, workplace stress or significant life transitions. For some, these experiences had developed gradually over time. Others described periods where multiple challenges emerged simultaneously, affecting both their wellbeing and their ability to work.

This complexity reinforces the need for workforce support that recognises the whole person rather than focusing solely on individual conditions. People do not experience separate pathways for physical health, mental wellbeing and workplace pressures. They experience life as a connected whole.

The strongest examples of support recognised this reality and responded flexibly to people's changing circumstances. Rather than focusing exclusively on a particular condition, they sought to understand the broader context within which people were living and working.



This has important implications for future workforce policy and practice. Workforce support systems are most effective when they are able to respond to complexity rather than assuming that challenges can be addressed through single interventions or isolated services.

Prevention is More Effective Than Crisis Response

A consistent theme throughout the programme was the importance of prevention and early intervention. Many participants described continuing to work whilst managing significant pressures. Often, support was only accessed when challenges had become difficult to sustain or had begun to affect health, wellbeing or work performance.

This reflects a wider challenge across workforce wellbeing. People frequently prioritise the needs of others before their own, particularly within caring professions. Concerns about stigma, workload pressures or simply finding the time to seek support can all delay access to help.

The programme demonstrated the value of creating opportunities for earlier conversations and earlier access to support. This does not always require specialist services. Often, prevention begins with supportive leadership, flexible working arrangements, workplace adjustments,

access to information or simply creating environments where people feel able to speak openly about challenges.

The findings suggest that prevention should not be viewed as a standalone intervention. Instead, it should be understood as a principle that shapes how workplaces, services and systems are designed. Creating healthier working lives means making it easier for people to access support before challenges become crises.

Good Work Creates Health

Perhaps the most significant insight emerging from the programme is the recognition that work itself can be a powerful contributor to health. Too often, workforce wellbeing conversations focus on reducing harm. While this remains important, the learning from Healthy Working Life points towards a more positive and ambitious perspective. Good work creates health.

Participants consistently described the importance of meaningful work, supportive relationships, flexibility, trust and opportunities to contribute. These experiences influenced not only workplace satisfaction but also confidence, wellbeing, resilience and quality of life.



Several key workplace factors emerged as particularly important.

Autonomy and Influence

People value having influence over how work is organised and delivered. Where individuals felt trusted to make decisions, use professional judgement and shape aspects of their working lives, they were more likely to describe positive experiences of work. Autonomy contributed to engagement, confidence and a sense of ownership.

However, the programme also highlighted that autonomy is most effective when accompanied by appropriate support. Responsibility without adequate resources or support can sometimes increase pressure rather than reduce it.

Flexibility

Flexibility emerged as one of the most significant enablers of healthy working lives. For many people, flexible working arrangements made it possible to remain in work whilst managing health conditions, caring responsibilities or other life commitments. Flexibility was often associated with increased trust, greater inclusion and improved wellbeing.

Importantly, flexibility was not simply viewed as a workplace benefit. It was frequently described as a practical mechanism that enabled people to balance the realities of life and work more effectively.

Relationships and Belonging

Healthy working lives are shaped by the quality of workplace relationships. Participants repeatedly highlighted the importance of supportive colleagues, trusted managers and positive team cultures. These relationships influenced whether people felt able to seek support, discuss

challenges or access available services.

Belonging also emerged as a powerful theme. People are more likely to thrive when they feel valued, respected and connected to others. This reinforces the importance of workplace cultures that prioritise inclusion, compassion and psychological safety.

Leadership and Culture

Across all places, leadership emerged as one of the most influential determinants of workforce wellbeing. Supportive leaders created environments where people felt able to speak openly, seek support and explore adjustments when needed. Compassionate leadership helped shape workplace cultures where wellbeing was viewed as a shared responsibility rather than an individual concern.

Importantly, leadership was not solely associated with senior roles. Everyday interactions between managers and staff frequently shaped workforce experiences.

The programme suggests that investment in leadership capability may represent one of the most effective opportunities for improving workforce wellbeing at scale.

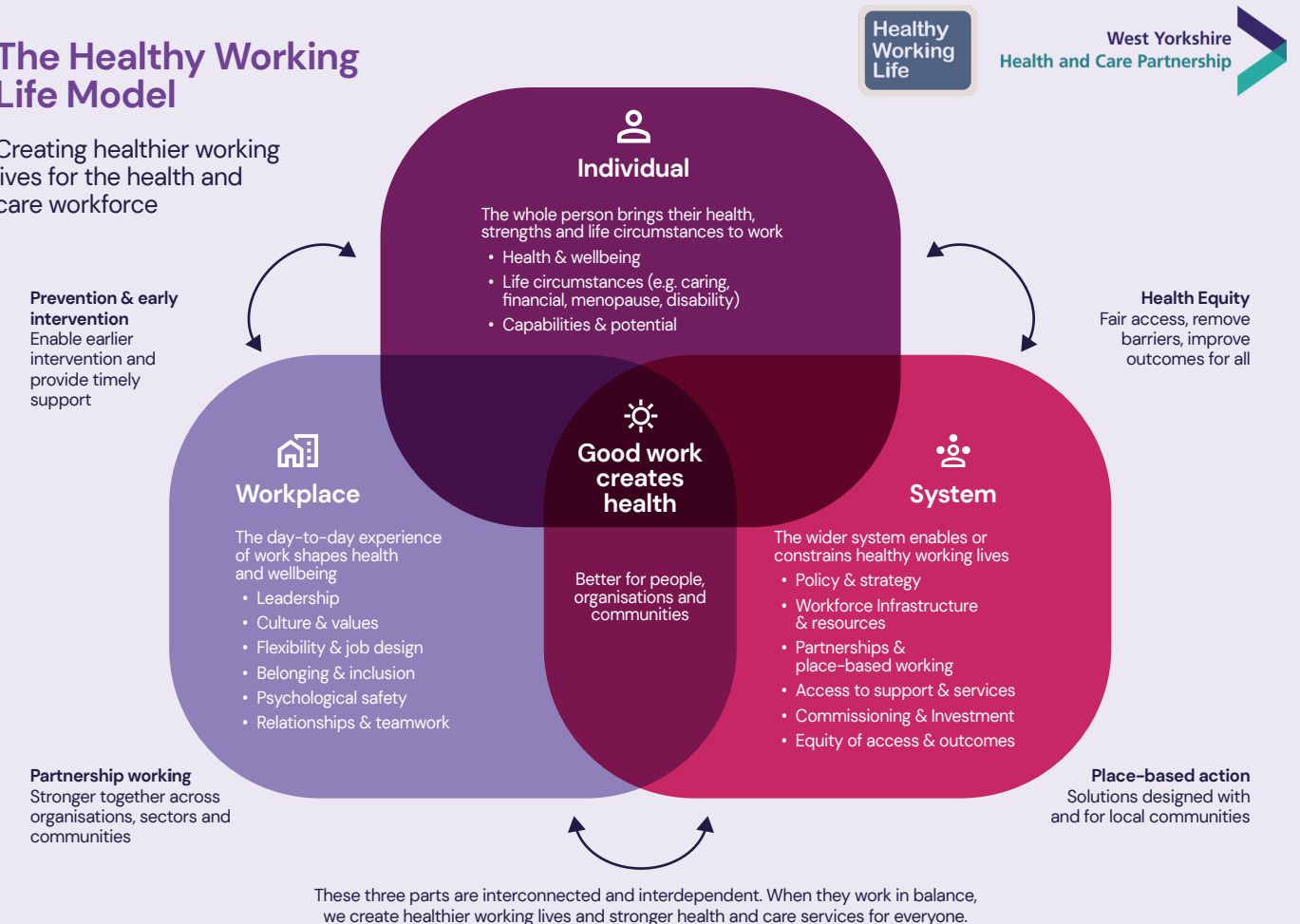
Workforce Wellbeing is a System Issue

While individual and workplace factors are important, the programme consistently demonstrated that workforce wellbeing is also shaped by wider system conditions. Access to support, workforce infrastructure, partnership arrangements and service coordination all influence workforce experience.

This is particularly important within health and care systems where people work across multiple sectors, organisations and settings.

The Healthy Working Life Model

Creating healthier working lives for the health and care workforce



Individuals do not experience organisational boundaries. They simply seek support when they need it.

One of the strongest findings from the programme was that coordinated, integrated and navigable support is often more effective than fragmented approaches. People benefit when pathways are clear, services work together and support can be accessed without unnecessary complexity.

This insight shifts the conversation away from individual programmes and towards the wider systems that enable those programmes to succeed.

It is Not If People Need Support, But When

Across every place, there was a shared recognition that needing support at some point during a working life is normal. Health conditions,

life transitions, caring responsibilities, bereavement, workplace pressures and unexpected events are all part of the reality of being human. The question is not whether people will need support. The question is whether systems are designed to respond when they do. This represents an important shift in perspective.

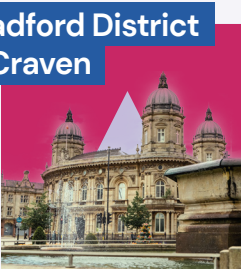
Rather than viewing workforce support as a response to failure or crisis, the programme encourages us to see it as part of the infrastructure that enables people to remain healthy, productive and engaged throughout their working lives.

This is where the concepts of good work and health creation become particularly important. Healthy working lives are not created through isolated interventions. They are created through environments, cultures and systems that recognise people's humanity and provide support when it is needed.

3. What Different Places Showed Us

One of the strengths of the Healthy Working Life Programme was its place-based approach. While all places worked towards a shared ambition, delivery models reflected local contexts, existing partnerships and workforce priorities. This variation provided valuable insight into the different conditions that enable healthier working lives. Importantly, the learning is not about identifying a single model to replicate. Instead, it demonstrates how different places contributed different pieces of the wider picture.

Although all places worked towards a shared ambition of supporting healthier working lives, delivery reflected local workforce needs, existing partnerships and available infrastructure. This variation was a strength of the programme, enabling different approaches to be tested and generating richer learning about what works, for whom and in what context.

Leeds 	Focus of Delivery Integrated navigation, workforce wellbeing support and partnership working	What it Demonstrated The value of mature workforce infrastructure, coordinated pathways and strong partnership arrangements in helping people access support more easily.
Bradford District & Craven 	Extending access to support across sectors and workforce groups	How place-based approaches can reduce inequalities by reaching staff who may previously have had limited access to wellbeing support.
Calderdale & Kirklees 	Collaborative delivery and locally tailored / targeted approaches	The importance of partnership-led delivery, adaptability and shared ownership in responding to workforce needs.
Wakefield 	Aligning support with existing workforce and organisational development structures	How workforce wellbeing can be embedded within wider organisational priorities, creating opportunities for sustainability and long-term impact.



The experiences of different places also brought the learning to life. In Leeds, stakeholders reflected on the importance of recognising the whole person behind the role, noting that “we often say you bring your whole self to work... but when we’re designing services, we forget that concept.” In Bradford District and Craven, partners highlighted “huge differences in access to support services” across sectors and organisations. In Calderdale and Kirklees, learning reinforced the importance of workplace culture, with one partner observing that “you can’t just give someone 12 sessions of therapy and put them back into the same environment.” Similarly, in Wakefield, stakeholders reflected that “one of the big lessons early on was that you have to deal with the work environment as well... otherwise people just end up back in the same situation.”

Together, these perspectives illustrate that creating healthier working lives requires attention not only to individual support, but also to equity of access, organisational culture and the wider conditions in which people work. Despite the different approaches adopted across places, several common themes emerged.

First, partnership matters. Places with strong collaborative relationships were often better able to coordinate support, respond to challenges and sustain momentum.

Second, infrastructure matters. Existing workforce networks, leadership arrangements and delivery capacity influenced what could be achieved and how quickly progress could be made.

Third, context matters. Effective workforce wellbeing strategies are rarely copied and pasted from elsewhere. Instead, they are adapted to reflect local circumstances whilst remaining grounded in shared principles.

Perhaps most importantly, the programme demonstrated the value of learning together. Different places revealed different strengths, challenges and opportunities. Collectively, these experiences provide a richer understanding of what creates healthier working lives than any single place could have generated alone.

4. Emerging Value and System Impact

The Healthy Working Life Programme was designed to improve workforce health and wellbeing, but its value extends beyond individual interventions or services.

Across West Yorkshire, the programme helped strengthen conversations about workforce health as a strategic issue rather than solely an individual responsibility. It created opportunities for organisations to work together, share learning and develop a more joined-up understanding of the factors that influence healthy working lives. While the programme was not designed as a formal impact evaluation, several areas of value emerged consistently across places.

The programme also helped shift conversations towards workforce retention, recognising that supporting people to remain healthy in work is an important component of retaining skills, experience and capacity within the health and care system.

The programme has also demonstrated the value of creating workforce wellbeing infrastructure that extends beyond individual organisations. By bringing partners together around a shared ambition, Healthy Working Life has helped create relationships, knowledge and approaches that can continue to support workforce health long after individual interventions have ended. These foundations provide an opportunity to build a more preventative, equitable and sustainable approach to workforce wellbeing across West Yorkshire.

Improving Access to Support

The programme helped increase access to workforce wellbeing support across sectors and organisations, particularly for workforce groups that may previously have had limited access to dedicated wellbeing infrastructure.

This included people working within social care, primary care, voluntary and community organisations i.e. smaller providers, helping to reduce some of the structural inequalities that exist across the workforce.

Strengthening Early Intervention and Prevention

The programme contributed to a shift in emphasis from responding to sickness and absence towards earlier intervention and prevention. Partners increasingly recognised the importance of creating opportunities for earlier conversations, timely support and workplace environments that enable people to remain healthy and well.

Building Stronger Partnerships

One of the most significant outcomes was the strengthening of relationships between organisations. Place-based delivery created opportunities for partners to share expertise, coordinate activity and develop a collective understanding of workforce wellbeing challenges. These relationships represent an important legacy that extends beyond the life of the programme itself.

Increasing Understanding of Workforce Health

The programme generated valuable insight into the complexity of workforce experience and the interaction between health, work and wider life circumstances. This learning has helped strengthen understanding of workforce health as a system issue and provides an important foundation for future policy, commissioning and organisational development.

Creating the Conditions for Sustainable Change

Perhaps the most significant value of the programme lies in the learning it has generated. The findings reinforce that healthier working lives are not created through isolated interventions alone. They are created through supportive workplaces, equitable access to support, effective leadership, strong partnerships and systems that enable people to thrive. The programme has helped identify these conditions and provides a platform for future action across West Yorkshire.

5. Health Equity: The Golden Thread Running Through the Programme

While the Healthy Working Life Programme explored a wide range of workforce wellbeing challenges, one theme consistently connected the learning across all places: health equity.

Health equity was not a separate workstream or a standalone objective. It was woven throughout programme design, delivery and implementation. Although places adopted different approaches, they shared a common recognition that access to workforce wellbeing support is not distributed equally across the health and care system. This matters because workforce experiences are not uniform.

Individuals working within large NHS organisations often have access to occupational health services, wellbeing teams, employee assistance programmes and dedicated workforce support infrastructure. By contrast, many people working within social care, primary care, voluntary and community organisations, independent providers as smaller employers may have fewer opportunities to access similar support.

The programme recognised that creating healthier working lives requires more than making support available. It requires active consideration of who can access support, who may face barriers to engagement and how services can be designed to reach those who may otherwise be excluded.

Across West Yorkshire, places sought to address these challenges in different ways. Some focused on extending access to workforce groups who had traditionally received less support. Others prioritised creating shared offers across sectors or strengthening collaboration between organisations with different levels of workforce infrastructure.

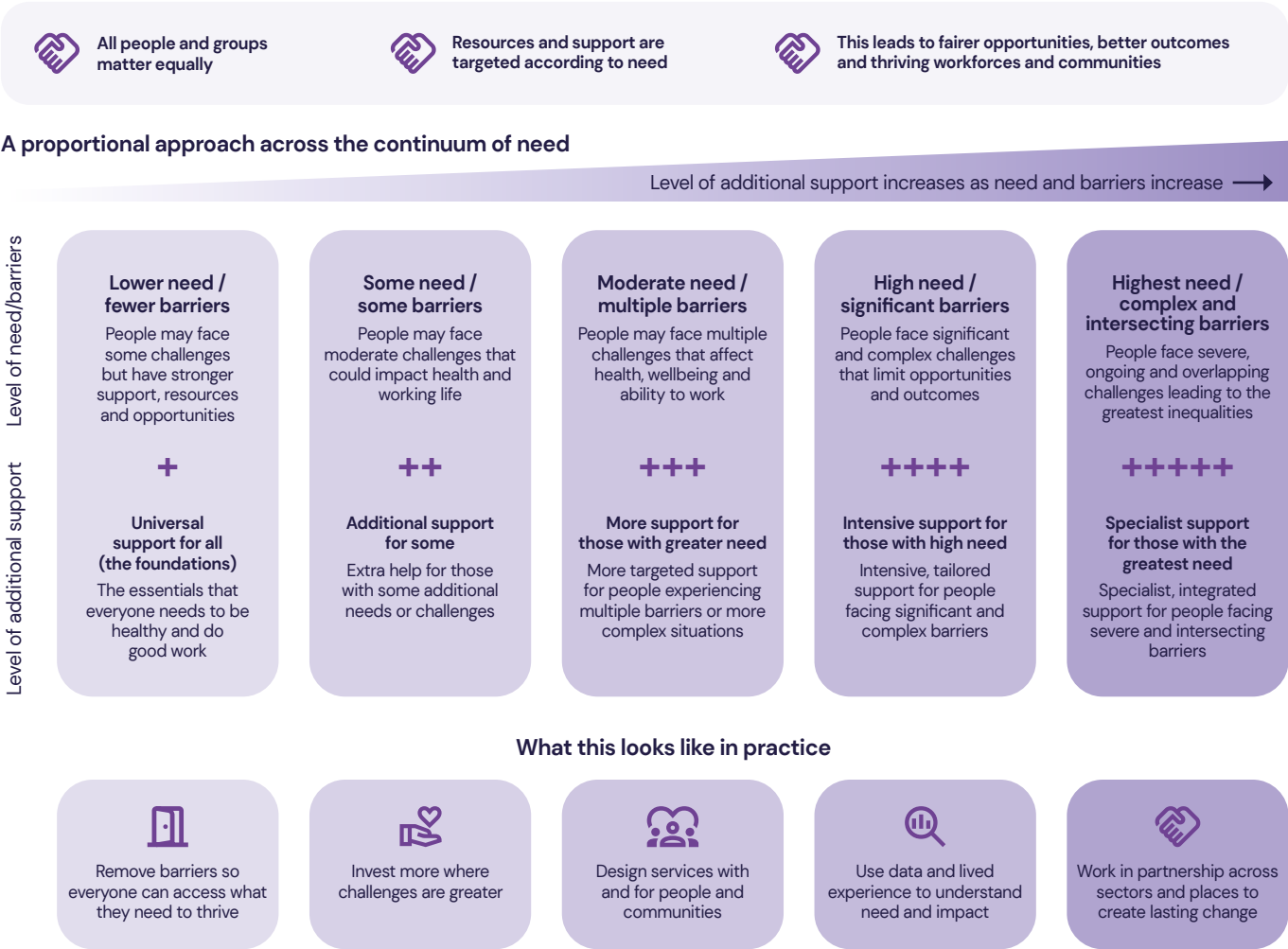
Although approaches varied, the underlying principle remained consistent. Everyone should have the opportunity to access support that enables them to remain healthy in work, regardless of where they work, what role they perform or which sector they belong to. This reflects the principle of universal proportionalism.

Universal proportionalism recognises that while support should be available to everyone, some groups require additional support in order to achieve equitable outcomes. Equality involves offering the same thing to everyone. Equity involves recognising different starting points and responding accordingly.

The programme demonstrated how this principle can be applied in practice. Rather than assuming that a universal offer alone would address workforce inequalities, places sought to understand where gaps existed and how support could be targeted to those who were less likely to access existing provision. Importantly, health equity is not only a matter of fairness. It is also a matter of effectiveness.

Health Equity & Universal Proportionalism

Fair for all. Focused on those who need more. Universal proportionalism means everyone has access to the foundations for good health and good work, with proportionally more support for those facing greater barriers or disadvantage.



Health equity is everyone having a fair opportunity to be healthy and to experience good work. Universal proportionalism ensures support is fair, targeted and proportionate to need.

Workforce wellbeing strategies are unlikely to achieve their full potential if they primarily benefit those who already have access to support. By focusing on equity, the programme helped ensure that investment reached a broader range of workforce groups and contributed to a more inclusive approach to workforce wellbeing.

The learning suggests that health equity should remain a central consideration within future workforce policy, commissioning and

service design. If healthier working lives are to become a reality for all, equity must remain a guiding principle rather than an afterthought.

Ultimately, the programme demonstrated that place-based partnership working can act as a powerful levelling mechanism. By bringing organisations together around a shared ambition, West Yorkshire has begun to create a more consistent and equitable approach to workforce support across the region.

6. From Learning to Action: Implications for Policy and Practice

The Healthy Working Life Programme generated valuable insight into what supports healthier working lives. The challenge now is how that learning is translated into future policy and practice.

While individual interventions delivered benefits, the most significant lessons relate to the wider conditions that enable workforce wellbeing to flourish. The findings suggest that improving workforce health is not simply about expanding services. It is about creating environments, systems and cultures that make healthy working lives possible. This requires action at multiple levels.

For Policymakers

The findings reinforce the need to position workforce health as a strategic priority that sits at the intersection of health, employment and economic policy.

Workforce wellbeing should not be viewed solely through the lens of sickness absence or workforce retention. It should be recognised as an important contributor to population health, service sustainability and economic productivity.

Future policy development should continue to strengthen connections between work and health agendas, recognising that good work is both a health outcome and a driver of health improvement.

The findings also support continued investment in prevention and early intervention. Supporting people earlier is often more effective, more sustainable and more cost-effective than responding once challenges have escalated.



For Commissioners

The programme highlights the importance of commissioning approaches that reflect the complexity of workforce experience. People do not experience their lives through separate service pathways. As a result, integrated and coordinated approaches are often more effective than fragmented interventions.

Commissioning decisions should therefore consider how services connect with one another, how people navigate support and how different elements of the workforce wellbeing system work together.

The findings also reinforce the importance of commissioning for equity. Future investment decisions should actively consider who can access support, where gaps exist and how resources can be used to reduce inequalities across the workforce.

For Employers

Employers play a critical role in creating the conditions that support healthy working lives. The programme demonstrates that workforce wellbeing is shaped not only by the support services available to staff but also by workplace culture, leadership behaviours, flexibility and organisational practices.

This means wellbeing should not sit solely within a dedicated wellbeing strategy or programme. Instead, it should be embedded within organisational decision-making, workforce planning, leadership development and day-to-day management practice.

Employers have an opportunity to move beyond reactive approaches and create environments where wellbeing is woven into the fabric of organisational culture.



For Workforce Leaders

Workforce leaders are uniquely positioned to connect workforce wellbeing with wider organisational and system priorities. The findings suggest that healthier working lives are more likely to be achieved when workforce wellbeing is viewed as a strategic issue rather than a standalone initiative.

This includes strengthening partnerships, sharing learning across organisational boundaries and creating opportunities for collaboration between sectors.

The programme demonstrated the value of collective action. Future progress is likely to depend on maintaining and strengthening these relationships.

For Managers

Managers often have the greatest day-to-day influence on workforce experience. The presence and quality of conversations, relationships and support provided by managers frequently shapes whether people feel valued, heard and able to access help when needed.

The programme reinforces the importance of compassionate leadership, active listening and psychologically safe working environments. Small actions can make a significant difference. Creating space for conversations, offering flexibility where possible and recognising the whole person behind the role can all contribute to healthier working lives.



For the System as a Whole

Perhaps the most important implication is that no single organisation can achieve this alone. The workforce moves across organisational boundaries. Health challenges do not stop at sector boundaries. Workforce wellbeing therefore requires collective solutions.

The Healthy Working Life Programme demonstrated the value of shared ambition, partnership working and place-based collaboration. Future success will depend on continuing to build these relationships and using them to create more connected, equitable and sustainable approaches to workforce wellbeing.

The opportunity now is not simply to sustain individual programmes. It is to embed the principles and learning generated through Healthy Working Life into the way the system thinks, plans and acts.

7. A Collective Call to Action

The Healthy Working Life Programme began with a simple ambition: to better understand how people can be supported to remain healthy in work. Over time, it became clear that the answer extends far beyond individual services or interventions.

The learning generated across West Yorkshire points towards something much bigger. It highlights the importance of good work, supportive workplaces, equitable access to support, strong partnerships and systems that recognise the complexity of people's lives. Most importantly, it demonstrates that healthier working lives are created collectively, through sustainable, long-term programmes of support.

No single organisation can create the conditions for workforce wellbeing on its own. It requires policymakers who recognise the relationship between work and health. Commissioners who invest in prevention and equity. Employers who prioritise culture and inclusion. Leaders who create psychologically safe environments. Managers who support people with compassion and understanding. The question is not whether support will be needed. The question is whether the systems we create are ready to respond when it is.

As one stakeholder observed, "Health and social care workers don't want to help themselves because they're too busy helping everyone else." This simple insight reminds us that behind the workforce data are people supporting others every day, often at the expense of their own wellbeing. Creating the conditions for healthier working lives is therefore essential if we are to build stronger services, healthier communities and a more prosperous future for everyone.

The Healthy Working Life Programme has shown what can be achieved when

organisations come together around a shared ambition. It has strengthened partnerships, improved access to support and generated valuable insight into the conditions that enable people to thrive. The opportunity now is to build on that foundation.

By continuing to work together, West Yorkshire can help create a future in which every member of the health and care workforce, regardless of organisation, role or sector, has access to the opportunities, support and conditions they need to live healthier working lives. Because creating good work is not simply about improving work. It is about creating health. When we create health for our workforce, we create stronger services, healthier communities and a more prosperous future for everyone.

The Healthy Working Life Programme has provided more than a series of interventions. It has generated insight, strengthened partnerships and demonstrated what can be achieved when organisations work together to support healthier working lives.

At a time when health and care systems continue to face significant workforce challenges, the learning from this programme offers an important opportunity. The evidence suggests that supporting workforce health is not an optional addition to service delivery. It is a critical component of workforce sustainability, service resilience and population health. The challenge now is not whether this learning has value. The challenge is how it can be embedded, sustained and built upon.

The foundations have been established. The opportunity is to use this learning to continue creating the conditions in which good work, better health and healthier working lives can flourish across West Yorkshire.

