

The current state of UK primary healthcare and the impact on workplace wellbeing and productivity



How to create the foundations for a happy, healthy
and thriving workforce; inclusive of everyone,
wherever they live and work

Suzanne Clarkson

What questions will this White Paper answer?

- **Business and primary healthcare:**
What is the impact of access to primary healthcare on workplace wellbeing and productivity? And what is the benefit to business of managing this risk?
- **Employees and primary healthcare:**
What is the impact of access to primary healthcare on individuals? And what is the benefit of giving all employees – whatever their age, location or pay grade – access to the everyday health and wellbeing support they need, when they need it?
- **Society and primary healthcare:**
How can employers better support people with long-term health conditions and disabilities to start, stay and succeed in work, in line with latest government thinking and challenges?

Contents

The current state of UK primary healthcare

The impact on employees

The impact on business

Creating the foundations for a happy, healthy and thriving workforce

How people and business would benefit from a new solution

Summary

Research sources



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The current state of UK primary healthcare

UK labour productivity has remained sluggish for the past decade; add a global pandemic to that picture and the situation seems cemented for the foreseeable future.

This situation is underscored by an ever-rising tide of corporate absenteeism and presenteeism, often as a result of long-waits for essential primary care services; all of which ultimately impacts on organisational reputation and performance.

In short, supporting the everyday health and happiness of entire workforces – or, put another way, their ability to thrive at work – represents an urgent essential, not a nice to have.

Long-waits for essential primary care services



Under half (45.7%) of all GP practice appointments took place on the same day they were booked.*



1 in 8 (12.8%) people had to wait up to **2 weeks** for an appointment.*



1 in 5 (20.4%) appointments were carried out by nurses, instead of GPs.*



Nearly **1 in 20** (4.6%) people waited at least **4 weeks** for an appointment.*



The proportion of the NHS budget spent on general practice has fallen to an **8-year low**. (HSJ)



Fewer doctors are looking after greater numbers of patients. A single, full-time GP is now responsible for an average of 2,295 patients. (BMA)



GP referrals are getting ever more difficult: **7.6 million** patients are waiting for NHS non-urgent, consultant-led treatment. Around **3.3 million** have been waiting over 18 weeks (the NHS targeted maximum wait time). (BMJ)

* Official NHS reported data for December 2023 (see sources); the latest data available at the time of drafting this White Paper. The next NHS update is due to be published on 28 March.

The impact on employees

Waits for primary healthcare*

- Delays are not only stressful, they can lead to ongoing pain and sometimes make people's condition worse.
- There are concerns that serious illnesses might be missed by diverting patients to non-doctors, such as nurses in GP surgeries or the new Pharmacy First scheme. (BMJ)
- Delays in diagnostic tests mean people are left waiting to know whether they have a condition or the next steps.
- People often feel pressured to find out for themselves what is wrong, rather than wait.
- Searching for answers can lead to frustration, uncertainty and anxiety.
- Life can be put on hold if waiting for procedures related to mobility.

*Healthwatch (see sources)

Waits for treatment*

- 16% of employed or self-employed people have been waiting 12 months or longer for a hospital appointment, test, or to start receiving medical treatment through the NHS.
- A quarter (24%) say this has strongly impacted their life. Of those:
 - 65% said it had impacted their wellbeing (i.e. boredom, loneliness, anxiety and stress)
 - 37% said their ability to exercise had been affected
 - 32% said it had made their condition worse
 - 29% said their relationships had been affected
- 4 in 10 (40%) said their work has been affected. Of those:
 - 58% had to change the tasks they do
 - 31% had to reduce their working hours
 - 21% said it prevented them going for promotion or training opportunities
 - 14% ended up long-term sick
 - 7% had to find new employment

*ONS data on winter pressures (see sources)

The impact on business



Short-term sickness is up

Levels of sickness absence are the highest in a decade at an average 7.8 days per employee per year, up from 5.8 days pre-pandemic. (CIPD)

Long-term sickness is up

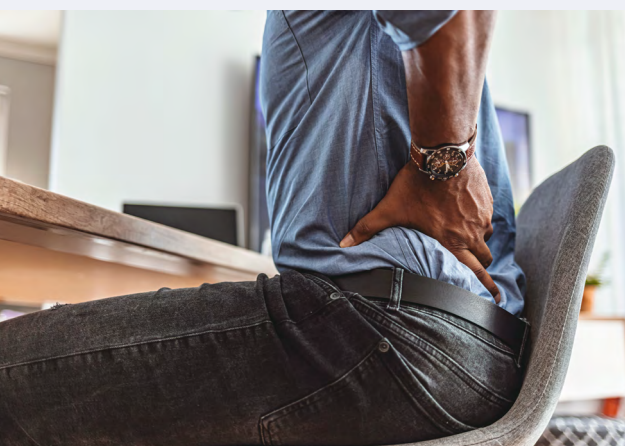
Over 2.5 million people are economically inactive due to long-term sickness. (ONS)

Stress remains a top cause of absence (short- and long-term)

92% of organisations with more than 250 employees reported some stress-related absence in their organisation over the last year. (CIPD)

Mental health issues are up

Depression, bad nerves or anxiety are on the increase – 53% in 2023, up from 40% in 2019 – and represent the largest contributors to long-term sickness. Plus, a top cause of short-term sickness. (ONS / CIPD)



Musculoskeletal (MSK) issues are up

MSK issues are on the increase 18.4% in 2023, up from 17.6% in 2022. This represents the second highest contributor to long-term sickness. Plus, a top cause of short term sickness. (GOV.UK / ONS / CIPD)

Presenteeism remains prevalent

Around 3 in 4 employers have observed presenteeism among employees working at home and in a workplace. (CIPD)

Creating the foundations for a happy, healthy and thriving workforce

What would help?

With 76% of the UK's 16 to 64 year olds (33.17m people) in work, the workplace represents the ideal place to reach vast audiences. Indeed, the government is increasingly placing the onus on employers to help with various societal pressures, such as economic inactivity due to long-term sickness absence. Also, improving health and wellbeing equity of access, regardless of where in the UK an individual lives and works.

However, to date, workplace wellbeing solutions are often siloed, they might not be evidence-based and / or only available at certain pay grades.



Equity of access necessitates a whole of workforce solution...

one that is streamlined, robust and bespoke to everyone's needs, so that it is also highly inclusive.



Steps that would help improve people's experience of waiting for primary healthcare include:



Bespoke guidance and signposting to appropriate help and support, according to individual symptoms.



Better access to GP and primary care services.

Unlimited 24/7 access to remote GP consultations – including prescriptions and specialist referrals – via video or phone; eliminating constraints on access, consultation length or frequency.



Swift access to qualified physiotherapy to help prevent minor injuries and symptoms worsening.



Swift access to expert mental health support to prevent issues deteriorating.

Clear and timely communication between GPs and patients.



Access to insights – from fitness to sleep and moods – to help people with proactive health management.

All of this accessible from one convenient place, so it's always to hand; whenever, wherever and however the need arises.

How employees and businesses would benefit from a new solution

Organisational productivity

While there does not necessarily need a “business case” to treat employees well, evidence shows that higher levels of employee wellbeing generally predict higher firm valuations, higher return on assets, higher gross profits and better stock market performance. *(University of Oxford Wellbeing Research Centre)*

Organisational reputation

When employees are healthy, happy and thriving, they are more likely to be engaged with their work and the organisations. Therefore, they are more likely to say good things about their organisation. In other words, reputations can be made or broken by employees. And organisations are becoming ever more transparent.

Diversity Equity Inclusion (DEI)

All-of-workforce access to primary healthcare services will help support an organisation’s DEI goals. No barriers to essential everyday health and wellbeing support, whatever someone’s age, location or pay grade. Or, indeed, whether they have a long-term health condition or disability.

Environmental Social Governance (ESG)

There are increasing calls for wellbeing to be considered the measurable foundation of S in ESG strategy, as opposed to an adjunct of Health & Safety, where many organisations currently place it. The thinking goes that this is needed to underpin the success of business strategy, which then enables other layers of ‘S’ activity and initiatives to be developed.

(MindForward Alliance)

Employee health and happiness = organisational performance, profits and reputation.

(University of Oxford Wellbeing Research Centre)

Summary

This white paper set out to investigate...

Business and primary healthcare

The foundation of not only a productive organisation but, importantly, a well-regarded organisation (because 'sustainable' productivity rests on reputation) is a happy, healthy and thriving workforce. However, the ongoing problem of accessing primary healthcare is likely contributing to ever-growing workplace absence and presenteeism issues.

Employers have a Duty of Care to look after the wellbeing of all their employees. Doing so is not only the right thing to do for people, it's the right thing to do for business, bringing benefits in the shape of productivity, reputation, DEI and ESG.

Employees and primary healthcare

Waiting for diagnostics and treatment can be frustrating and stressful. For a start, it represents a massive juxtaposition against the on-demand aspect to every other part of life these days. But, even more importantly, it can lead to small niggles becoming much bigger problems, leading to a potential downward spiral impacting life and work.

Some organisations provide wellbeing support in the shape of education and awareness campaigns. Some provide access to standalone wellbeing apps and employee assistance programmes. Some provide Private Medical Insurance to certain cohorts within the workforce.

Very few, however, provide access to primary care support and services to all employees, all in one place and on demand – from fitness and sleep tracking, symptom checkers, GP access and diagnostics to support from qualified experts in physiotherapy and mental health. This is the key to equipping employees to take control of their own, very individual, health and happiness needs.

Society and primary healthcare

Economic inactivity due to long-term sickness absence is a big problem for everyone – the National Health Service (NHS), the UK government and employers, but, more importantly, it's a problem for the individuals directly impacted and their families. Work can be the driving force for wellbeing. Aside from the obvious financial aspect to this, work can provide a sense of purpose and self-worth, opportunities to meet people and make friends, to contribute and gain skills; all of which are important contributors to wellbeing.

So, equipping people to support their everyday health and wellbeing, helping prevent small problems becoming worse and maintaining day-to-day health and happiness, seems crucial to stemming the tide of long-term sickness absence in the UK. It's crucial to helping ensure that thriving at work is not only possible, but that it's also sustainable at a time when the NHS is struggling.



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