A better way to do Occupational Health

Clear human-centred occupational health.
Better health outcomes.
Better work outcomes.

hcml
At the heart of healthier lives

Workplace health is changing

Work-related ill health is increasing at pace, and many organisations are struggling to keep up. For HR teams, the challenge is no longer just managing absence, it's preventing it and supporting earlier intervention.

Across the UK, the scale of health-related work absence is growing:

2.8 million
working-age people are economically inactive due to health conditions (+800,000 since 2019)*

On current trends, a further
600,000
people could leave work by 2030*

Sickness absence is at a
15-year
high around 50% higher than in 2019*

Poor workplace health is costing employers an estimated
£85bn
annually*

For HR leaders, this creates a clear challenge.
How do you support employees earlier, more effectively, and in a way that is sustainable for the business?

The true cost of absence isn't just time

Behind every absence is a wider story. The recent Keep Britain Working Review tells of increased workloads, missed deadlines, and teams under pressure to compensate.

Operational impact

Delays and disruption

Increased workload on teams

Financial impact

£120 lost per absence day*

£11,000+ replacement cost per employee*

Productivity impact

Presenteeism =4–9 lost days per employee per year*

~150 million absence days annually*

For the individual, time away from work can further impact their health, confidence, and overall sense of purpose, making it harder to recover and return. Over time, these hidden costs can erode productivity and employee wellbeing.

Absence is often treated as a short-term issue, but poorly managed cases frequently become long-term challenges, particularly in revenue-generating and frontline roles, where the impact extends far beyond salary costs.

For example, if a boiler engineer is off sick, the cost is not just the salary for the days lost. There's also:

- Lost or delayed revenue from jobs that can't be completed
- Increased agency or overtime costs when cover is needed for critical work
- Higher operational and safety risk when less experienced staff are used
- Knock-on pressure on teams and management who are already stretched

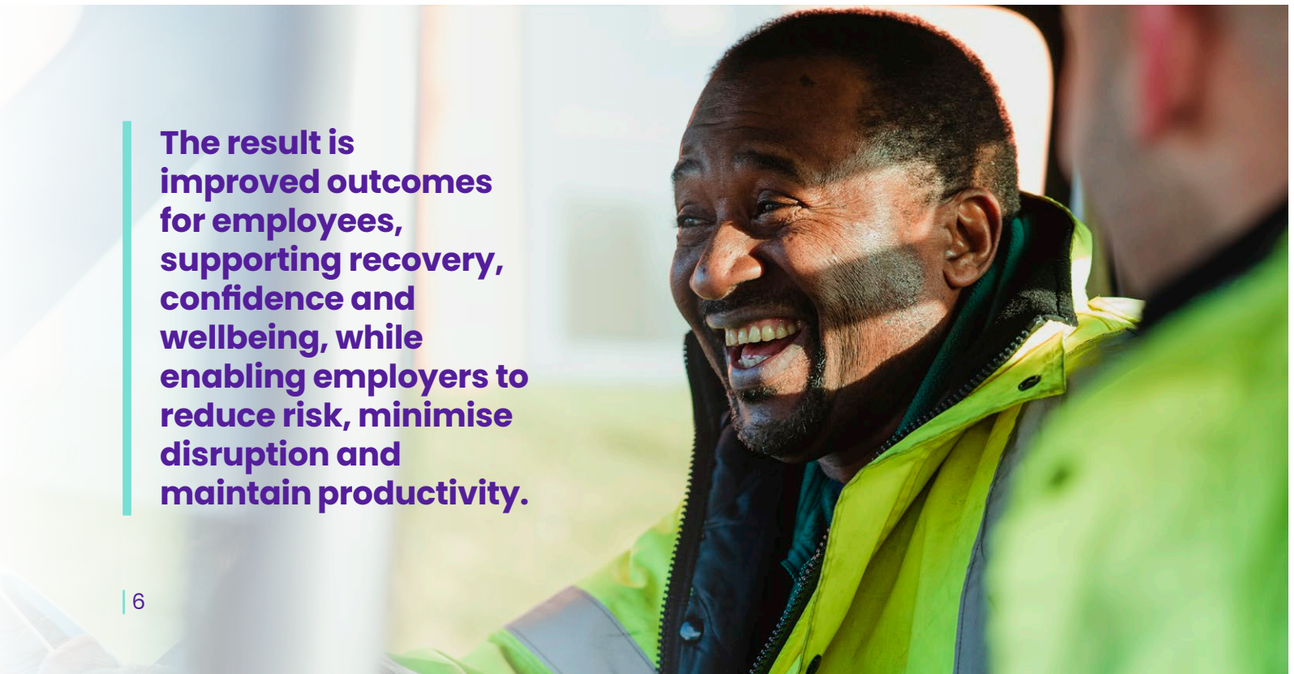
By taking a proactive approach to absence management, organisations can reduce disruption, support employee health, and build a more resilient workforce.

Timing changes outcomes

Early intervention is proven to improve return-to-work outcomes and reduce the risk of long-term absence, with occupational health playing a critical role at this stage.

By engaging occupational health early, organisations can take a clinically informed approach to absence, identifying risks sooner, addressing underlying health issues, and understanding individual needs. This supports the development of structured, safe and sustainable return-to-work plans tailored to each employee.

The recent *Keep Britain Working* report reinforces this approach, recommending the widespread adoption of Workplace Health Provision: a non-clinical case management service that supports employees and line managers across the Healthy Working Lifecycle. By focusing on early intervention, effective case management and targeted support, it helps people remain in or return to work more quickly.



The result is improved outcomes for employees, supporting recovery, confidence and wellbeing, while enabling employers to reduce risk, minimise disruption and maintain productivity.

Why traditional Occupational Health misses the mark

Many Occupational Health pathways still follow a simple referral, appointment and report model, with little meaningful engagement with the employer. Without wider context, assessments can miss underlying issues, produce fewer practical recommendations and create delays that extend absence unnecessarily.

They can also default to physician escalation for issues that may be better addressed through multidisciplinary support, manager context and a more complete understanding of the person's situation.

Traditional approach	Impact
Focus on symptoms only	Missed root causes
Limited workplace context	Unrealistic advice
Generic recommendations	Low implementation
Slow turnaround	Extended absence

The result is often repeat assessments, rising cost and avoidable long-term absence.

From assessment to active support. A better way to do Occupational Health

We work with organisations to support occupational health, but we take a slightly different approach to what many HR teams may be used to.

Our 5-day end-to-end model is designed to move faster and work more effectively. We involve the right clinician at the right time, look at the whole person, and make sure recommendations are realistic for the manager, the employee and the organisation.

We speak with managers before the assessment to understand the role, pressures and business context.

We look at the full picture behind absence, including physical, mental, emotional and social factors, so people feel heard and underlying issues are identified.

We use a multidisciplinary model bringing together OH specialists, therapists, counsellors, functional health practitioners, MSK experts and others. Rather than escalating by default.

We review multiple issues in one assessment where appropriate.

We follow up after the assessment to make sure recommendations are realistic and practical.

And we have evidence that this works, reducing unnecessary absence by more than 50 hours per case.

Referral to outcome in 5 days

One of the core recommendations of the Keep Britain Working report is case management to provide guidance and support for employees and line managers from the first signs of difficulty through to return to work or redeployment support.

HCML already delivers it.

5 questions to assess your current approach

If you're reviewing your current approach, consider:

1

Are you intervening early enough?

- Are referrals happening within the first few weeks of absence?
- Could earlier conversations prevent escalation?
- Are your long term absence numbers increasing?

2

Are you addressing the full picture?

- Do assessments consider physical, mental, emotional and social factors – not just the presenting condition?
- Does your current OH service address more than one issue?

3

Are managers actively involved?

- Are they engaged pre-assessment to provide workplace context?
- Do they understand recommendations and how to apply them?
- Do all your managers refer in a consistent way?

4

Are outcomes being measured?

- Absence duration
- Return-to-work success
- Repeat referrals

5

Is your model scalable and cost-effective?

- Does it work for all parts of your workforce? Not just complex cases.
- Does it provide a complete view of how absence specifically affects revenue-generating and frontline roles?

Keeping people in work starts with how you support them

The UK workforce health challenge is significant, but it is also addressable. Occupational health is no longer just about compliance or assessment.

It's about taking a proactive, human-centred approach that helps people stay in work, recover well, and return with confidence.

Ready to discuss a more effective occupational health model?

Learn how HCML helps employers shorten absence, support managers and improve return-to-work outcomes.

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*Keep Britain Working Review, UK Government 2025