



# Quality Standards for Wellbeing Initiatives and Services for Employees

First Edition

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**First edition:** March 2026

**Review date:** March 2027

**Publication number:** CCQI534

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# Introduction

## What is the WISE-QM?

The WISE Quality Mark is a joint initiative between the **Society of Occupational Medicine (SOM)** and the **Royal College of Psychiatrists (RCPsych)**. It is a subscription-based quality improvement programme designed to assess and recognise providers delivering wellbeing services and initiatives to employees. These may include in-person services, digital platforms, apps, therapeutic interventions, coaching, lifestyle support, and other wellbeing products purchased by employers.

The WISE-QM ensures that wellbeing providers demonstrate:

- Safe and ethical practice
- High-quality delivery
- Effective service design
- Transparent communication
- Meaningful outcomes for employees
- Robust governance appropriate to their scale.

WISE-QM is run by a central team at the College Centre for Quality Improvement (CCQI) at the Royal College of Psychiatrists, in partnership with the Society of Occupational Medicine. The QM project team provide year-round support to help members maximise opportunities for learning and development.

## How have the WISE-QM standards been developed?

The standards against which services are measured have been developed with reference to the literature, current guidance on best practice, and in consultation with key stakeholders including practitioners, service leads and professional organisations.

## Who is it for?

WISE-QM is suitable for:

- Wellbeing service providers
- Digital wellbeing and mental health platforms
- EAP providers
- Training and development organisations
- Health charities, social enterprises, and community providers
- Any organisation offering wellbeing-related products or interventions.

# The Standards

## Service design and delivery

No.	Standard
1	An organisational, whole-systems approach is used, aligned and linked to other relevant services, e.g. occupational health. <i>Guidance: Consider models such as IGLOO to address wellbeing at individual, team, organisational, and leadership levels.</i>
2	Providers offer services which are informed by independent research/evidence, e.g. from behavioural science, and aligned with evidence-based practice. <i>Guidance: Interventions are informed by a primary, secondary and tertiary strategic approach. Consider NESTA principles and SOM advice.</i>
3	Providers communicate the scope of the offer, benefits and outcomes expected, including any specific needs being met (e.g. menopause; trauma).
4	Providers clearly communicate who delivers the offer, including their relevant professional qualifications and registrations.
5	Higher-risk interventions are delivered only by appropriately trained clinicians (diagnostic activity is out of scope for non-clinical providers).

## Information and communication

No.	Standard
6	Transparent pricing and contract terms are provided to all purchasers.
7	There is a mechanism for purchasers to ask questions or receive tailored advice.
8	There is a process in place for purchasers to agree on their preferred frequency and modality for progress updates and evaluation findings (without compromising confidentiality).
9	There are clear intended evidenced-based outcomes specified for interventions e.g. improved wellbeing, reduced burnout, increased engagement and performance metrics.
10	Providers share guidance to purchasers on how to implement and evaluate the intervention effectively.
11	There are procedures for collecting and responding to user complaints, with defined response times. Complaint themes and remedial actions are shared with purchasers.
12	Marketing claims are accurate, current, and verifiable. Outcomes claims (e.g. “reduces burnout”) must specify the measure(s) and

	observed effect, with a citation to independent or internal evaluation and date of last evidence review.
13	Providers publish a conflict of interest statement with transparency on commercial interests, partnerships, and incentives.
14	A clear implementation and communication plan shares information about how to access and make best use of the service to users.

## Accessibility of services

No.	Standard
15	<p>Delivery methods are accessible and tailored to users' needs and preferences.</p> <p><i>Guidance: Providers consider the needs of neurodiverse users, those with additional needs, and those with atypical working patterns (e.g. shift workers; remote workers) through, for example, flexible scheduling; alternative formats; accessible platforms.</i></p>
16	Providers tailor services to the sector and workforce they serve, with consideration of cultural, occupational, and demographic factors.
17	<p>Materials are accessible to a wide range of audiences by using plain language, avoiding jargon, and ensuring inclusivity for those with diverse communication needs.</p> <p><i>Guidance: Practices are aligned with PIF TICK to support accessibility and clarity.</i></p>

## Quality of delivery

No.	Standard
18	<p>The impact of providers can be demonstrated e.g. through outcomes, return on investment, or social value data.</p> <p><i>Guidance: Psychometric measurement tools can be used to measure the impact of services on mental health, wellbeing, or behavioural change. Return on investment can be measured using an ROI calculator, such as <a href="https://evolveworkplacewellbeing.org/business-calculator/">https://evolveworkplacewellbeing.org/business-calculator/</a>.</i></p>
19	Providers collect structured user feedback after each intervention on delivery quality (e.g. relevance, facilitation, accessibility, logistics) and share anonymised summary findings with purchasers.
20	Providers conduct formal evaluations using appropriate methodologies and demonstrably act on the evaluation findings.
21	Providers have systems for continuous quality improvement, including routine data monitoring and feedback loops.

## Outcomes and impact

No.	Standard
22	Data are collected on user engagement, such as uptake of interventions. <i>Guidance: Data should be shared with purchasers to inform decision-making, and advice should be available on ways to improve user engagement.</i>
23	Effectiveness of the intervention is demonstrated through appropriate outcome measures, such as validated wellbeing tools, skills or knowledge assessments, engagement/adherence metrics, workplace indicators, and qualitative feedback. <i>Guidance: Outcome measurement tools could include the WEMWBS, WHO-5, or Work and Social Adjustment Scale, for example.</i>
24	Providers share examples of impact (e.g. absenteeism/presenteeism definitions, brief pulse surveys, culture/environment assessments) and reporting timeframes at contract outset.
25	Providers supply an outcomes report post programme or quarterly, whichever is sooner, covering delivery quality, outcomes, engagement, and changes made.
26	Where psychometric measurement tools are used, these are applied by qualified/trained practitioners.

## Governance

No.	Standard
27	Professional and business indemnity insurance is in place.
28	Providers are able to demonstrate that they work within ethical codes (e.g. BPS, EMCC).
29	Interventions are delivered by competent personnel, evidenced by relevant qualifications/registrations, role-specific training, and regular supervision by an appropriately qualified supervisor. Supervision records are available to purchasers on request.
30	Governance structures are in place to ensure safe and compliant delivery, including safeguarding policies, DBS checks, and processes for maintaining professional registrations.
31	There are robust processes in place for onboarding practitioners, including supporting continuous professional development
32	Onward clinical referral pathways are in place where needed.
33	Clear risk detection and escalation pathways are defined, and staff are trained to follow these procedures to ensure timely and appropriate responses to potential issues.

34	The provider is compliant with data protection legislation and confidentiality requirements. <i>Guidance: Compliance should include digital intervention tools.</i>
35	Equity, diversity, and inclusion is promoted and sustained through service provision. <i>Guidance: This should include service design, delivery and evaluation.</i>
36	Environmental sustainability principles are considered in the delivery of services, including the minimisation of unnecessary travel, waste etc.
37	The provider aligns with relevant regulatory and quality frameworks, including MHRA/UKCA requirements and standards such as DTAC, ISO 13485 and ISO 27001.

# Acknowledgements

We extend our sincere thanks to the professionals, services and organisations who contributed their expertise to the development of these standards. Their engagement, constructive feedback and participation throughout the consultation period have been invaluable in ensuring the relevance and quality of the final version. The individuals and organisations who contributed are listed below.

Dr Suzanne Barr, Hercuwise

Zoe Brooke, March on Stress

Kevin Daniels, University of East Anglia

Annelies Franklin, Cambridge University Hospitals NHS Foundation Trust

Dr Rachel Gibson, King's College London

Claire Goodwin-Fee, Frontline-19

Kirstin Hay, March on Stress

Victoria Howell, Victoria Howell Health and Wellbeing

Dr Lali Japaridze, BP

Rachel Lewis, Affinity Health At Work

Dr Amanda Mwale, Resourced to Thrive

Dr Hannah Nearney, Flow Neuroscience

Angela Steel, Superwellness

Samantha Wathen, Frontline-19

Francoise Woodley, Affinity Health At Work

Jo Yarker, Affinity Health At Work

Dr Nupur Yogarajah, Dr NY



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## **WISE-QM**

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