

Call Centre in a Crisis: The Role of Wellbeing Strategies in Supporting People

A Case-Based Discussion of Havencares' Cardiff Call Centre



Prifysgol Cymru
Y Drindod Dewi Sant
University of Wales
Trinity Saint David

Student Name: Yaxuan Dai

Student Number: 2420047

Programme: International Business Management

Module: Leading and Developing People (BMBM6023)

Lecturer: Julie Thomas

Submission Date: 30/04/2026

University of Wales Trinity Saint David Swansea Business School

Introduction

Havencares' Cardiff call centre operates in a high volume, closely monitored and emotionally demanding service environment. In the case scenario, pressure on frontline staff is linked not only to normal call centre demands, but also to wider organisational challenges such as service consistency, employee wellbeing, retention, skills development, digital transformation and rising customer expectations. This means that wellbeing should not be treated as a soft HR issue. For Havencares, it is directly connected to absence, presenteeism, turnover, customer experience and operational performance (CCMA, 2023; Bellet, De Neve and Ward, 2024).

This essay argues that the most useful response for Havencares' Cardiff call centre is not a narrow focus on resilience workshops or general wellbeing campaigns. A more convincing response would address how work is organised, how team leaders support staff, whether employees are heard, and whether people have enough time and resources to recover. The discussion evaluates which wellbeing strategies are likely to work in this specific call centre context, which may have limited impact, and why leadership and implementation are central to success.

Havencares and the Cardiff Call Centre Crisis Context

Havencares' Cardiff call centre brings together several conditions that can damage wellbeing. The work is repetitive, target-driven and heavily measured, while employees are expected to remain polite and emotionally controlled during difficult customer interactions. This is particularly important in insurance, where customers may be anxious, frustrated or confused, and where trust, fairness and service consistency matter. The case therefore combines operational pressure with a people-management challenge: Havencares needs service quality and efficiency, but these

outcomes are difficult to sustain if frontline staff feel overworked, under-supported or unable to influence the way work is organised.

Evaluating Wellbeing Strategies for Havencare's Cardiff Call

Centre

Job Design, Workload and Schedule Control

Supportive Line Management, Communication and Employee Voice

Recovery, Flexibility and Targeted Support

The strongest starting point is job design. This is less visible than a wellbeing app or awareness campaign, but the evidence is more convincing. Fleming (2024) found little evidence that individual-level mental health interventions, on their own, improve employee wellbeing in a meaningful way. In Havencares' Cardiff call centre, this matters because asking agents to be more resilient would have limited value if unrealistic targets, inadequate staffing, awkward systems or inflexible schedules remain untouched.

Systematic evidence points in a different direction. Fox et al. (2022) show that organisational- and group-level interventions can improve several dimensions of worker wellbeing, particularly when they change working conditions rather than only individual behaviour. Aust et al. (2023) reach a similar conclusion, finding that organisational-level interventions can improve the psychosocial work environment and some health outcomes, although the strength of evidence varies. For Havencares, this points towards reviewing staffing levels, call pressure, break structures, script rigidity, system usability and the way performance measures are used in the Cardiff call centre. If employees have no real chance to recover between difficult calls, wellbeing problems will continue regardless of how many wellness messages the organisation sends. Not every structural change is

costly. Protecting breaks, clarifying priorities during peak demand, reducing unnecessary monitoring and giving staff more influence over scheduling are all realistic steps. Subramaniam et al. (2024), in a recent Delphi study on contact centre retention, found that leadership quality, transparent communication, flexibility and support services were central to long-term retention. In a crisis, redesigning work is therefore part of stabilising the workforce, not a side issue.

Supportive line management, communication and employee voice

A second strategy is to strengthen line management. Employees usually experience the organisation through their immediate manager rather than through HR policy. This is especially true in call centres, where team leaders shape pace, tone and day-to-day expectations. The Work Wellbeing Playbook identifies management, support, stress and trust as core drivers of wellbeing and argues that interventions work best when employees are involved at each stage and managers have the capacity to act on what they hear (Cunningham et al., 2024).

Recent research supports that view. Leger et al. (2022) found that a workplace intervention aimed at increasing supervisor support and schedule control reduced employees' daily stressor reactivity. Alan, Corekcioglu and Sutter (2023) found that a clustered intervention designed to improve workplace climate reduced toxic behaviour and strengthened support networks. Kleynhans et al. (2022) show that authentic leadership supports employee flourishing through trust, while Mazzetti and Schaufeli (2022) demonstrate that engaging leadership contributes to employee engagement and team effectiveness through personal and team resources.

For Havencares' Cardiff call centre, this means team leaders need to do more than push targets. They need to communicate clearly, close the feedback loop and remain accessible. The CCMA (2023) report makes this practical, stressing the value of recognising early signs of strain, setting expectations properly, being careful with out-of-hours communication and acting on colleague

feedback. Employee voice matters here. If staff repeatedly report failing systems, unrealistic after-call work or escalating customer abuse, wellbeing strategy should begin with listening and acting. A feedback process that changes nothing may deepen cynicism rather than reduce stress.

Recovery, flexibility and targeted support

A third area involves recovery and targeted support. This should include psychological support, but it should not stop there. Work in Havencares' Cardiff call centre can be emotionally draining, particularly when employees are dealing with anxious or dissatisfied insurance customers, so recovery opportunities matter. The CCMA report notes that taking breaks has become harder in practice, even though breaks are one of the simplest protections against accumulated strain (CCMA, 2023). Bell et al. (2024) and Brakenridge et al. (2025) both point out that participation in wellbeing initiatives is often undermined by heavy workloads and limited offline time. If Havencares wants Cardiff staff to use supportive resources, it has to create enough space in the working day for them to do so.

Flexibility can also help, though it is not a universal fix. In some call centres, giving employees more influence over shift patterns, swaps, start times or hybrid arrangements may ease pressure and improve retention. The value of flexibility lies in reducing avoidable strain where possible, not in looking progressive. Financial wellbeing and recognition also matter. Sayre and Conroy (2024) argue that pay and health should not be treated as separate topics, which is relevant in low-control service roles where difficult work may feel undervalued. Recognition is also useful when it is genuine and fair. Scherbaum, Naidoo and Saunderson (2022) found that manager recognition

training improved recognition behaviour and performance. Recognition is not a substitute for decent work, but it can reinforce support in a pressured environment.

Fatigue is another neglected issue. Robbins et al. (2022) found positive outcomes from a workplace sleep programme in relation to sleep, health, energy and productivity. In a shift-based or emotionally draining environment, this matters. However, such targeted supports should complement structural change, not replace it.

Leadership and Implementation challenges

It is easy to list wellbeing strategies. The harder question is why some fail. One reason is poor alignment between the intervention and the actual problem. Bell et al. (2024) found that the evidence base on contact centre interventions is still limited, and Brakenridge et al. (2025) show that implementation is shaped by barriers such as workload, culture, low participation opportunities and weak managerial support. A call centre cannot simply borrow fashionable wellbeing initiatives from another sector and assume they will work.

A second challenge is leadership capacity. Managers are often expected to support wellbeing while also being judged on speed, cost and performance metrics. If they are over-stretched themselves, implementation becomes superficial. CIPD (2023) notes that people professionals are working in a context shaped by digital change, cost pressure and rising expectations, while also needing to support line managers more effectively. In practice, HR cannot just launch a policy and leave local managers to cope. Manager training, realistic spans of control and clear escalation routes are part of the strategy. Transformational leadership is also relevant because Havencares needs team leaders to support change, encourage staff confidence and maintain commitment during pressure, rather than only monitor short-term targets (Jun and Lee, 2023).

There is also a risk of wellbeing symbolism: highly visible initiatives that are easy to publicise but weak in effect. Fleming (2024) is useful here because it challenges the popularity of standalone mental health and resilience interventions when the work itself remains harmful. That does not mean such initiatives are worthless, but it does mean the organisation should be honest about their limits.

Practical Recommendations for Havencares' Cardiff Call Centre

The first recommendation for Havencares is to begin with a short operational wellbeing audit of the Cardiff call centre. This should identify where pressure is being produced in the system: staffing gaps, queue pressure, break compliance, system delays, abusive customer contact and unrealistic performance measures. The aim is not another survey for its own sake, but a clear view of which work factors are driving strain and service problems.

The second recommendation is to treat Cardiff team leaders as the main delivery mechanism for wellbeing. Team leaders should receive focused support in communication, recognition, workload conversations and early intervention. Staff need regular one-to-ones, visible feedback loops and confidence that concerns will be heard. This is more likely to improve day-to-day experience than relying mainly on centralised wellbeing campaigns.

The third recommendation is that Havencares should build a layered wellbeing strategy rather than rely on a single programme. Structural measures should come first: workload review, protected recovery time, schedule control where feasible, better systems and fairer performance management. Around that core, the organisation can add targeted supports such as counselling, financial wellbeing guidance, sleep support, peer support and recognition practices. This reflects

the argument in the Work Wellbeing Playbook that sustainable change usually comes from combining interventions across different levels and drivers of wellbeing (Cunningham et al., 2024).

These recommendations also need evaluation measures. The organisation should track absence, attrition, customer complaints, break compliance, employee voice themes and short wellbeing pulse data over time. This matters because a call centre under pressure can easily confuse activity with impact. A manager training session, for example, may look positive on paper but achieve little if employees still report poor communication or if attrition remains high. Using simple, repeated measures would make the strategy more evidence-based and would help HR adjust interventions quickly if the crisis changes shape.

Conclusion

In the case of Havencares' Cardiff call centre, wellbeing strategy should be understood as part of operational recovery rather than as a separate employee benefit. The evidence suggests that wellbeing affects retention, service quality and productivity, and this is particularly important where frontline employees face high monitoring, emotional labour and customer pressure. The most credible response is therefore not a single wellbeing campaign, but a combination of job design, supportive line management, employee voice, recovery opportunities and targeted support. For Havencares, supporting people is not a distraction from performance; it is one of the conditions for sustaining service quality in the Cardiff call centre.

References

Alan, S., Corekcioglu, G. and Sutter, M. (2023) 'Improving workplace climate in large corporations: A clustered randomized intervention', *The Quarterly Journal of Economics*, 138(1), pp. 151-203. doi: 10.1093/qje/qjac034.

Aust, B., Møller, J.L., Nordentoft, M., Frydendall, K.B., Bengtsen, E., Jensen, A.B., Garde, A.H., Kompier, M., Semmer, N., Rugulies, R. and Jaspers, S.Ø. (2023) 'How effective are organizational-level interventions in improving the psychosocial work environment, health, and retention of workers? A systematic overview of systematic reviews', *Scandinavian Journal of Work, Environment & Health*, 49(5), pp. 315-329. doi: 10.5271/sjweh.4097.

Bell, Z., Porcellato, L., Holland, P., Morris, A., Smith, C., Haines, C. and Graves, L. (2024) 'A systematic scoping review of health-promoting interventions for contact centre employees examined through a behaviour change wheel lens', *PLOS ONE*, 19(3), e0298150. doi: 10.1371/journal.pone.0298150.

Bellet, C.S., De Neve, J.-E. and Ward, G. (2024) 'Does employee happiness have an impact on productivity?', *Management Science*, 70(3), pp. 1656-1679. doi: 10.1287/mnsc.2023.4766.

Brakenridge, C.L., Silverwood, A., Potter, R.E., Oakman, J., Hadgraft, N., Goode, A.D., Mulcahy, S.K. and Healy, G.N. (2025) 'Barriers, facilitators and acceptability of health promotion initiatives and behaviours in contact centre workers: A systematic review', *Safety Science*, 191, 106945. doi: 10.1016/j.ssci.2025.106945.

CCMA (2023) *Wellbeing in the Contact Centre*. UK: Customer Contact Management Association.

CIPD (2023) *People Profession 2023: International survey report*. London: Chartered Institute of Personnel and Development.

Cunningham, S., Fleming, W., Regier, C., Kaats, M. and De Neve, J.-E. (2024) *Work Wellbeing Playbook: A Systematic Review of Evidence-Based Interventions to Improve Employee Wellbeing*. World Wellbeing Movement.

du Plessis, M. and Rabie, C. (2025) 'Workplace wellness initiatives and service quality in customer-facing industries: A systematic review', *South African Journal of Economic and Management Sciences*, 28(1), a6428. doi: 10.4102/sajems.v28i1.6428.

Fleming, W.J. (2024) 'Employee well-being outcomes from individual-level mental health interventions: Cross-sectional evidence from the United Kingdom', *Industrial Relations Journal*, 55, pp. 162-182. doi: 10.1111/irj.12418.

Fox, K.E., Johnson, S.T., Berkman, L.F., Sianoja, M., Soh, Y., Kubzansky, L.D. and Kelly, E.L. (2022) 'Organisational- and group-level workplace interventions and their effect on multiple domains of worker well-being: A systematic review', *Work & Stress*, 36(1), pp. 30-59. doi: 10.1080/02678373.2021.1969476.

Jun, K. and Lee, J. (2023) 'Transformational leadership and followers' innovative behavior: Roles of commitment to change and organizational support for creativity', *Behavioral Sciences*, 13(4), 320. doi: 10.3390/bs13040320.

Kleynhans, D.J., Heyns, M.M., Stander, M.W. and de Beer, L.T. (2022) 'Authentic leadership, trust (in the leader), and flourishing: Does precariousness matter?', *Frontiers in Psychology*, 13, 798759. doi: 10.3389/fpsyg.2022.798759.

Leger, K.A., Lee, S., Chandler, K.D. and Almeida, D.M. (2022) 'Effects of a workplace intervention on daily stressor reactivity', *Journal of Occupational Health Psychology*, 27(1), pp. 152-163. doi: 10.1037/ocp0000297.

Mazzetti, G. and Schaufeli, W.B. (2022) 'The impact of engaging leadership on employee engagement and team effectiveness: A longitudinal, multi-level study on the mediating role of personal- and team resources', *PLOS ONE*, 17(6), e0269433. doi: 10.1371/journal.pone.0269433.

Pandey, A., Maheshwari, M. and Malik, N. (2025) 'A systematic literature review on employee well-being: Mapping multi-level antecedents, moderators, mediators and future research agenda',

Acta Psychologica, 258, 105080. doi: 10.1016/j.actpsy.2025.105080.

Robbins, R., Yi, F., Chobotar, T., Hawkins, S., Putt, D., Pepe, J. and Manoucheri, M. (2022) 'Evaluating “The REST of Your Life,” a workplace health program to improve employee sleep, health, energy, and productivity', *American Journal of Health Promotion*, 36(5), pp. 781-788. doi: 10.1177/08901171211069357.

Sayre, G.M. and Conroy, S.A. (2024) 'The other side of the coin: An integrative review connecting pay and health', *Journal of Applied Psychology*, 109(8), pp. 1178-1203. doi: 10.1037/apl0001151.

Scherbaum, C.A., Naidoo, L.J. and Saunderson, R. (2022) 'The impact of manager recognition training on performance: A quasi-experimental field study', *Leadership & Organization Development Journal*, 43(1), pp. 57-70. doi: 10.1108/LODJ-03-2021-0126.

Subramaniam, S.H., Wider, W., Tanucan, J.C.M., Lim, K.Y., Jiang, L. and Prompanyo, M. (2024) 'Key factors influencing long-term retention among contact centre employee in Malaysia: A Delphi method study', *Cogent Business & Management*, 11(1), 2370444. doi: 10.1080/23311975.2024.2370444.