

Reconnecting HR to the Frontline: How Leader Standard Work Translates People Strategy into Results



Table of Contents

Welcome	2
Introduction The need for HR to lead the way in a new era of relational leadership	3
Overview of the CHRO and executive leadership interviews	7
First priority Align the C-suite and HR on Leader Standard Work as a “relationship engine”	8
Second priority Save managers and HR time to focus on people, not processes	10
Third priority Reduce the variation in leadership among frontline managers	11
Fourth priority Prioritize workforce and career development to stabilize the talent pipeline	12
Conclusion	13
Contributors	14
About ASHHRA and Laudio	15

Welcome

The American Society for Healthcare Human Resources Administration (ASHHRA) is the only national membership organization focused exclusively on supporting Human Resources (HR) professionals within the healthcare sector. As the leading authority in this area, ASHHRA delivers essential guidance through research, education, knowledge sharing, professional development, specialized tools, and opportunities for networking and collaboration.

As part of this effort, ASHHRA has partnered with Laudio, a purpose-built software and analytics company whose mission is to inspire and amplify the people who deliver great healthcare. Frontline leaders and executives use Laudio to streamline managerial work and drive large-scale change through small, everyday human actions.

This is an Executive Summary of the inaugural report, *Reconnecting HR to the Frontline: How Leader Standard Work Translates People Strategy into Results*.

The report provides new insights into how innovative CHROs, HR leaders, and other people leaders partner with both their executive colleagues and frontline managers to meet organizational goals. The following is an executive summary of the full report.

Become an ASHHRA member at <https://ashhra.org/join/> to access the complete report, along with many other resources. Use the promotional code "Laudio" to get 25% off the first year of membership if you are new to ASHHRA.

Introduction

The need for HR to lead the way in a new era of relational leadership

Healthcare systems today face intense financial pressure, rising operational costs, and increasing complexity in patient care. At the same time, workforce shortages continue to challenge organizations across the country. Early tenure turnover remains elevated, and nursing gaps are projected to worsen. These challenges are pushing organizations to rapidly reorganize and seek innovative ways to improve system efficiency, but such efforts can unintentionally weaken the critical connections between executive teams and frontline leaders.

Executive interviews conducted for this report consistently underscored that frontline managers are the most powerful amplifiers of the organization's people strategy. And executives clearly understand the critical connection between people strategy and overall organization performance. Leaders also agreed that the solution is not adding complexity or extra tasks to managers' already full plates, but rather that it is time to get back to the basics of human connections, with a renewed focus on foundational relational leadership behaviors: strengthening trust, communication, authentic presence, and support in leaders' daily work. Direct managers' frequent, meaningful interactions with team members are the primary way culture, expectations, and organizational values are demonstrated in daily work.

HR teams have an essential role to play in partnering with frontline managers to help them prioritize these meaningful activities to support relationship leadership or streamline distracting practices. In this environment, advancing a people strategy means empowering managers, strengthening alignment, reducing complexity, eliminating non-valued tasks, and focusing on the critical behaviors that shape culture and performance every day.

To do this, HR leaders first need to partner with their executive colleagues to create organization-wide alignment on the behaviors, tasks, responsibilities, and processes that are core to a frontline manager's daily work. The Leader Standard Work framework provided in this report, which evolved from conversations with over a hundred healthcare leaders, can be a starting point for establishing that clarity.

The leaders interviewed for this report reflected that, despite the innovations emerging across HR functions to better support frontline tasks, sustainable workforce stability still depends on the strength of human connections. They emphasized that real progress has resulted from closer collaboration between HR, nursing, operations, and executive teams, all anchored in a shared understanding of frontline managers' standard work. People strategies depend on leadership, culture, systems, and trust, all of which are built on human connection.

Frontline managers are the most powerful amplifiers of people strategy

Frontline managers juggle complex responsibilities across teams, patients, and departments while balancing quality, safety, experience, and financial performance. Many also manage exceptionally large spans of control, often across 24/7 operations. Nationally, a quarter of support services managers oversee 44 or more direct reports, with some departments reaching 90+, levels far higher than those seen in most other industries.¹

The most important retention factor remains the relationship team members have with their direct supervisor. And in an environment where the typical operating model includes large spans of control, it is especially critical to enable managers to prioritize their relational leadership practices and activities.

As shown in Figure 1, three meaningful manager-employee interactions per quarter (i.e., one per month) are associated with a seven-percentage point improvement in retention. Similar associations are also observed with non-clinical roles. In other words, freeing up manager time and redirecting that time to purposefully recognize and coach team members on an ongoing basis is highly impactful to employee experiences.

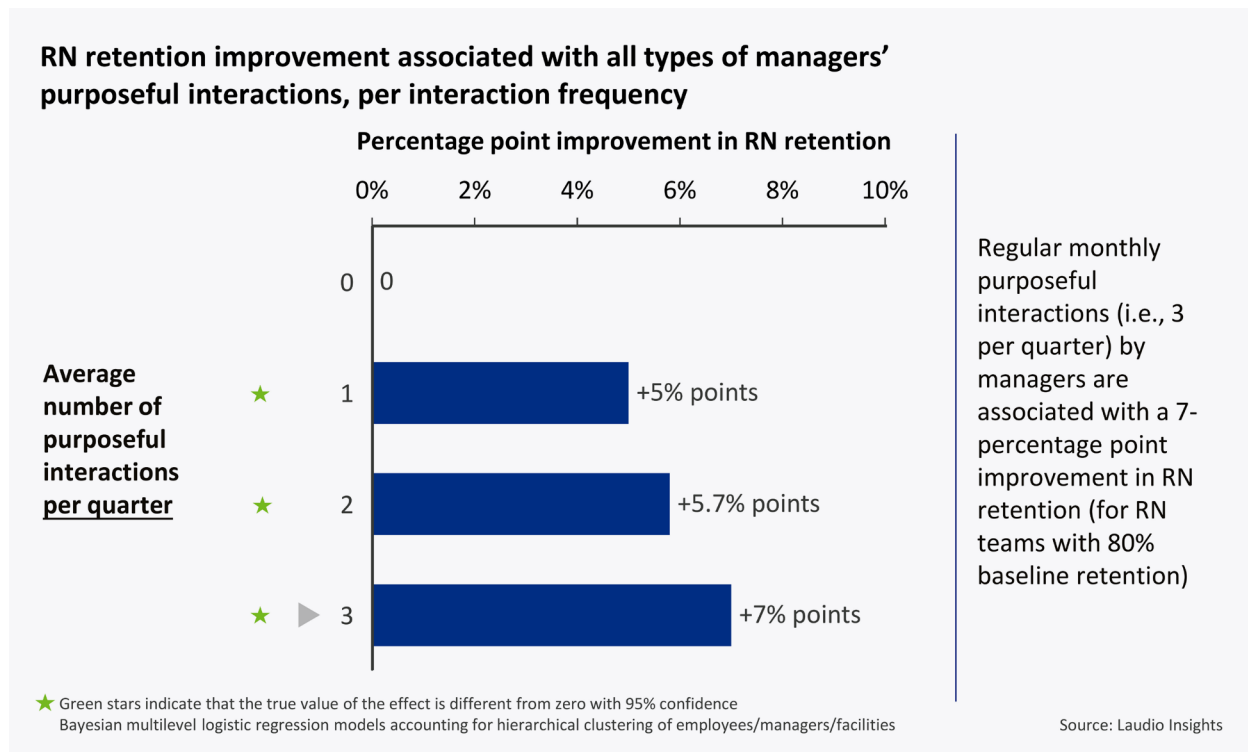


Figure 1

A manager catching a team member in the hallway and saying something such as: “I heard what you did with that family earlier and you did a wonderful job,” is an example of a timely, valuable interaction managers can have with their team members on a consistent basis. Managers may need to be coached in how to use thoughtful words to connect and communicate in a meaningful way, even when they only have a moment in the hallway. Team members’ days may be filled with stress and crisis; the data shows that simple moments of hope, help, and appreciation can go a long way.

¹ References are included in the full report but are skipped in this Executive Summary

This is more relevant now than ever as Gen Z employees (i.e., those born between 1997 and 2012) enter the workforce. More than ever, early-career team members expect that their managers will provide consistent coaching, meaningful interactions, and direct connections from their work to broader organizational goals.

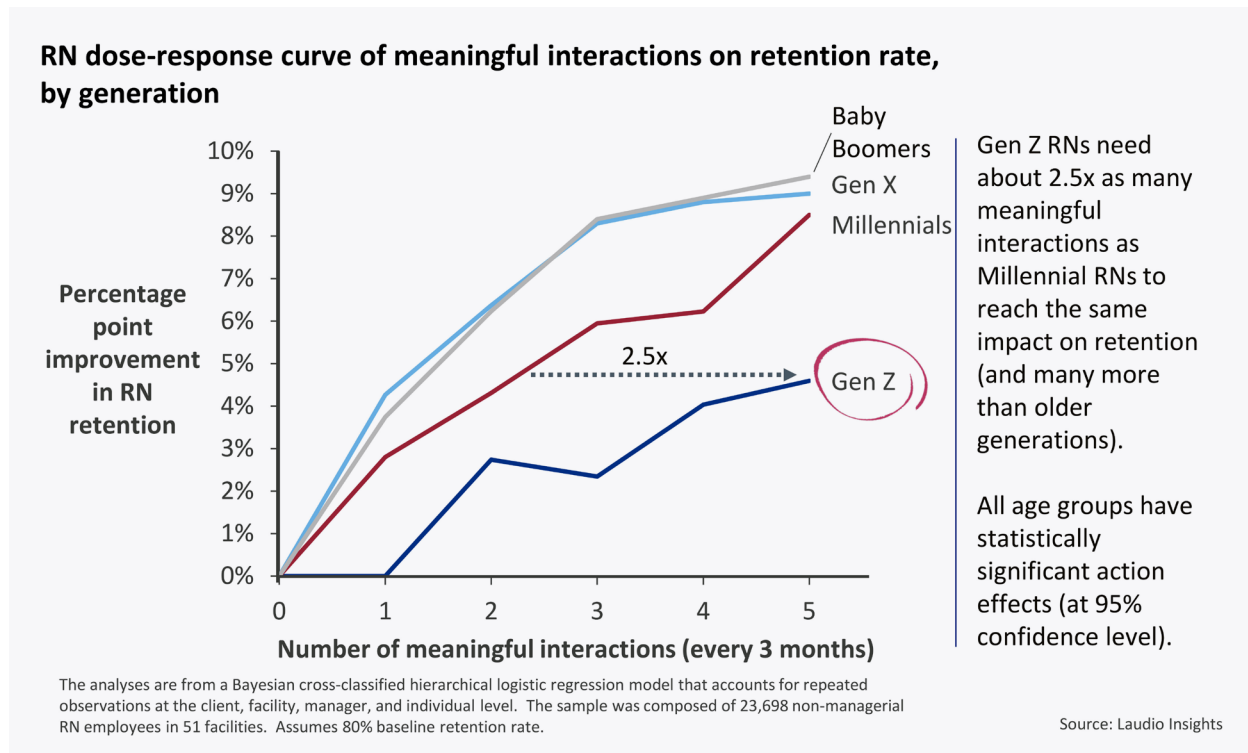


Figure 2

As shown in Figure 2, Gen Z Registered Nurses (RNs) require five meaningful interactions every three months to reach about a 5-percentage point improvement in retention; in contrast, millennials only need about two such interactions and older generations about one. In other words, this research shows that Gen Z team members need 2.5 times more meaningful interactions with their managers than older generations to reach similar levels of retention.

Variation is increasing among frontline managers as they respond to the challenges and as more new leaders step into the role

There are now more new leaders in healthcare than ever before. Nearly half of support services managers have no more than four years’ tenure leading a team. A similar distribution exists for nurse managers and other clinical roles. Those with limited leadership experience are actively learning how to keep their department’s day-to-day operations running smoothly. At the same time, they are forming or refining their own leadership identity and need support to authentically build relational leadership practices that have the potential to create strong individual and team relationships.

At a time when health systems are rapidly growing through mergers and acquisitions, manager role complexity and spans of control increase while more inexperienced managers enter the role. There are also fewer experienced managers and onsite HR business partners (HRBPs) to coach and guide them in real time. The result is wide variations in leadership practices and behaviors. In an effort to align and create a positive, shared employee experience, organizations are moving with more intentionality in creating, communicating, and supporting standard work for these frontline managers.

To address these challenges, HR needs strong partnerships with clinical leaders

In the interviews conducted for the report, HR leadership expressed the criticality of a strong relationship with C-suite operational leaders, particularly the Chief Nurse Executive (CNE). Although the people strategy pertains to all staff, nursing comprises the largest number of employees and has a significant impact on patient care, therefore, it influences overall organization performance at scale.

Strong HR-clinical leader partnerships, both at a manager and an executive level, accelerate trust and execution. However, HRBP and clinical manager connection is strained given the increased ratio of HRBPs to the number of leaders they support, and by the reduction in co-location in the clinical setting for day-to-day support. This reality indicates that creative solutions are needed to help ensure HR teams have the capacity to align with, support, and invest in frontline leaders.

Innovative HR departments are responding to reduced HR resources by using technology-based automation to augment staffing in high-volume areas such as recruitment. By shifting manual or transactional tasks like sourcing, candidate scheduling, and onboarding tasks to automated systems, recruiters are regaining valuable time that they can reallocate to meaningful work like partnering with managers on creating long-term staffing forecasts.

These immediate challenges and opportunities require CHROs to be the architects of human-centric leadership

In a resource constrained environment, CHROs must carefully evaluate the return on investment of HR initiatives. For example, while signing bonuses are often used to address staffing shortages, research shows a minor difference in nurse retention beyond early tenure compared to those without bonuses, despite the inflated costs.

Time-limited, one-off bonus programs may appear to be the popular, proven solution to hiring in complex, highly competitive regions. In contrast, the innovative HR leaders interviewed for this report emphasized that their biggest competitive advantage is supporting the work of the frontline by getting “back to the basics” of relationship-building. In other words, finding new ways to bring HR leaders and executives, frontline managers, and HRBPs closer together can help attract new hires while creating an ideal environment to care for staff and patients.

While one time bonus programs can be used to compete for talent, innovative HR leaders emphasize relationship building as their true competitive advantage. By strengthening connections among HR leaders, executives, frontline managers, and HRBPs, organizations can attract new hires while creating a stronger environment for supporting staff and delivering patient care.

Overview of the CHRO and executive leadership interviews

Researchers interviewed 15 innovative HR and nursing leaders from diverse health systems to understand how HR is evolving to better support frontline managers in a virtual, automated environment. Across interviews, leaders agreed that human centered leadership is essential, requiring consistent relational practices alongside operational excellence. Organizations are increasingly teaching empathy, presence, authenticity, and intentional connection while they redefine leadership, accountability, and HR's frontline role.

Interviews revealed four priority actions for advancing the people strategy at the frontline:

FIRST

Align the C-suite and HR on Leader Standard Work as a "relationship engine"

SECOND

Save managers and HR time to focus on people, not processes

THIRD

Reduce the variation in leadership among frontline managers

FOURTH

Prioritize workforce and career development to stabilize the talent pipeline

First Priority

Align the C-suite and HR on Leader Standard Work as a “relationship engine”

In interviews, leaders repeatedly emphasized the deliberate, foundational work of aligning an organization's C-suite and HR teams around people strategy and supporting the operation's frontline leaders. Leaders often discussed a new focus in enumerating, supporting, and prioritizing standard behaviors and processes in the day-to-day work of frontline managers, understanding their challenges and providing meaningful support.

HR leaders are focused on creating a shared mission, building relationships with clinical and operational leaders, aligning the HRBP model with patient care services, creating consistent and accessible support, and reinforcing the primacy of frontline manager enablement. The human connections need more than “sitting at the same table” but for the HR and operations teams to work together using inclusive language and intentional collective action.

Various workflows were described in different terms across the interviews, but all outlined common principles of Leader Standard Work. Figure 3 shows the 25 areas of Leader Standard Work. This is a framework designed to describe the behaviors, tasks, responsibilities, and processes that are core to a frontline manager's daily work and helps ensure consistent, high-reliability leadership.

This framework was developed with the contribution of over a hundred clinical and non-clinical healthcare leaders; it offers HR leaders a comprehensive view of frontline manager work that can be used to build mutual progress on people strategy across all department types and care settings. It is important for managers to understand what is required of them as part of being a leader in the organization versus what responsibilities are at their discretion. There can be no room for critical actions to be viewed as optional, yet Leader Standard Work is not about rigidity; rather, it is about sharing a common language, clarifying roles, and identifying opportunities for meaningful human connection within the flow of daily work.

25 areas of healthcare leader standard work



Figure 3

audioINSIGHTS *Leader Inspired Work, 2026*

The Leader Standard Work framework begins with relational leadership and progresses to operational leadership, reflecting the principle that strong operations depend on strong relationships. In other words, achieving operational goals requires effective self leadership, teamwork, and collaboration. Several CHROs noted that Leader Standard Work is not merely an operational tool, but a way to rebuild trust and connection at the frontline.

Interview insights suggest that today's workforce pressures are concentrated in a small set of relational leadership behaviors: listening, clear communication, presence, trust building, and removing barriers to frontline work. Leaders understand their responsibilities but struggle to execute these behaviors consistently under sustained pressure. Culture is increasingly shaped through daily leadership practices at the department level, prompting HR leaders to redesign systems and tools to reinforce the most critical Leader Standard Work behaviors, including faster feedback, simpler processes, stronger relationships, and space for human centered leadership.

Organizational trust is central to the employee experience and is a direct function of managers' consistent alignment between their words and actions. Leader Standard Work provides a predictable, repeatable foundation for building trust at scale. HR plays a critical role in embedding this framework across the organization.

For more details on the 25 areas of Leader Standard Work along with tips and tricks for HRBPs and frontline managers to save time and achieve each one, see the book *Leader Inspired Work: 2nd Edition (2026)*.

Second Priority

Save managers and HR time to focus on people, not processes

Innovative CHROs are using AI and automation, along with centralized centers of excellence, to take on high volume work more efficiently and to free leaders' time to engage with staff, patients, and colleagues. HR leaders emphasized that the fastest path to improving engagement, retention, and team stability is giving managers back the time and mental space required for relational leadership like coaching, recognition, and problem-solving.

Many organizations have seen meaningful variation reduction improvements after centralizing and standardizing HR processes and policies, introducing automation, and redesigning workflows. The most notable improvements result from redesigning workflows to eliminate tasks that are high volume, time-consuming, and do not require operational input from managers. Leaders noted that much of the frontline manager burden comes from HR-related administrivia. Removing or streamlining this work unlocks significant capacity for both managers and HR and can be achieved through the Lean practices mentioned above. Removing nonvalue tasks from HRBPs allows them to play a more strategic role in enabling more consistent relational leadership across the organization.

Across all interviews, the consistent takeaway was that saving HR and frontline managers' time allows them to repurpose it for more meaningful activities that result in more effective, sustainable leadership.

Detailed examples of ways to save time are provided in the full report.

Third Priority

Reduce the variation in leadership among frontline managers

For CHROs, consistently executing the people strategy at the frontline is a defining strategic advantage. The interviews highlighted the importance of creating greater consistency in how frontline managers lead. Organizations are clear that their operations are only as reliable as the consistency of the teams delivering them. Frontline leaders play a critical role and are viewed as carriers of culture, keystones of engagement, and enablers of safety, quality, and retention outcomes.

HRO and Lean principles can be applied equally to leadership behavior, talent systems, and workforce processes as they are to operations. In high-performing organizations, leadership expectations are not assumed: they are defined, taught, and reinforced. Leadership development becomes cultural infrastructure, and HR's role shifts from a support role to the "architect of leaders." Multiple interviews discussed HR's design of standardized leadership systems to scale the impact, as opposed to only addressing individual leader performance.

Leaders noted that without shared routines and clear standards, frontline experiences vary significantly, leading to inconsistent engagement and results. Defining Leader Standard Work is the first step in reducing variation. An emerging goal of the people strategy is building consistency in leader practice without rigidity. HR and clinical executives emphasized the need to systematize foundational leadership behaviors so that all managers operate from a common playbook. They also reinforced the importance of regularly aligning leaders around culture and expectations to ensure clarity and reliability.

Collectively, these efforts create a more predictable, empathetic, and supportive leadership environment and strengthen the foundation needed for engagement, operational excellence, and culture to thrive.

Fourth Priority

Prioritize workforce and career development to stabilize the talent pipeline

A final theme from the interviews was the growing need to strengthen both the short- and long-term workforce pipeline through intentional investment in career and leadership development and early career pathways. Leaders consistently emphasized that traditional recruiting approaches and incentives, like signing bonuses, can no longer keep pace with workforce demands, particularly in clinical roles.

Proactive healthcare leaders are making a long-term investment in retraining and upskilling their existing workforce to meet future talent needs. There was broad agreement that supporting current employees through development and advancement opportunities is an essential component of building a sustainable workforce and strengthening staff loyalty and retention. Multiple organizations highlighted the importance of securing external funding and partnerships to support this work in a financially responsible way.

Specifically, the need to upskill staff as health systems embed more automation in their workflows emerged as a critical priority. The advent of AI has created a national debate about the impact on a sizable portion of the workforce, creating heightened anxiety and job security uncertainty across an already fragile employee base. Among healthcare executives, there is general agreement that the measure of automation effectiveness is not overall headcount reduction but new capacity to focus on the human connection with staff and patients. As part of today's rapid technology deployment, HR leaders are engaging early in workflow redesigns, using co-design teams to involve staff in the process, and creating upskilling programs aligned to the future of patient care.

Another priority is establishing reliable systems that help convert learners, trainees, and early career participants into long-term employees. HR executives described renewed focus on cultivating talent earlier, well before individuals formally enter the job market. Leaders also underscored the importance of presenting an authentic and compelling employer brand that reflects local culture and strengthens attraction. Finally, HR teams are evolving their own structures to better support this pipeline-focused future, shifting more effort toward relationship building and strategic talent development.

Conclusion

The insights shared throughout the report reinforce a consistent message: meaningful organizational progress does not always spring from novelties, but by strengthening the relational and operational foundations of frontline leadership. In today's environment, developing an organizational people strategy is no longer sufficient; the ability to execute consistently at the frontline through Leader Standard Work has become a defining strategic advantage.

Take Practical Actions

The executive interviews conducted for the report identified four practical priority actions with which innovative organizations are actively advancing their people strategies at the frontline:

1

Align the C-suite and HR on Leader Standard Work as a “relationship engine”

2

Save managers and HR time to focus on people, not processes

3

Reduce the variation in leadership among frontline managers

4

Prioritize workforce and career development to stabilize the talent pipeline

The lessons shared throughout the report reinforce a simple but enduring truth: leadership in healthcare is defined by human connection. Systems, analytics, and technology can strengthen execution, but they cannot replace the trust built through presence, consistency, and relationships at the frontline. Together, these efforts point toward a more agile, partnership-focused, and human-centered model of people strategy, one capable of sustaining both caregivers and the organizations that rely on them.

For CHROs, the opportunity is clear. The work requires intentional leadership: aligning the executive team, freeing leaders' time for meaningful engagement, reducing unnecessary variation in leadership behavior, and strengthening workforce development for the future. The organizations making progress today are not waiting for the next trend or policy shift. They are building leadership systems that make relational leadership possible every day at the frontline.

Relational leadership does not happen by chance: it happens when CHROs intentionally design the systems that make human connection the standard work of healthcare leadership.

Acknowledgements

Jeremy Sadlier, MAOL, CHHR
Executive Director and CEO, ASHHRA

Tim Darling
President, Audio Insights

Jill Ragsdale
Chief HR Advisor, Audio

Analytics and statistical team

Andy Johnson, PhD
Lead Statistician, Audio

Sudip Raj Koirala
Analytics Team Lead, Audio

Sandhya Shahi
Analytics Manager, Audio

Laxman Khati
Analytics and AI Engineer, Audio

Reviewers and advisors

Elizabeth Bruno MSN, RN
Learning and Development Consultant

Jennifer Faulkner, MSHC
Founder, Innovate Culture Lab, LLC

Tonya Jackman Hampton, EdD
Founder, CEO, Consultant and Executive Coach,
Sequel Consulting Group

Joel D. Ray, MSN, RN, NEA-BC
CNO (retired) UNC REX; Colonel, (Ret.) USAF, NC
Chief Clinical Advisor, Audio

Catherine Wilkosz, MSc, BSN, RN
VP of Strategic Content Development, Audio

Erin Winn
Vice President, Human Resources Operations,
WellSpan Health

Executive contributors

The authors gratefully acknowledge the healthcare and HR executives who contributed their perspectives through interviews that informed this article. Individual contributors do not necessarily endorse the conclusions presented.

Tom Ahr
SVP, Chief Human Resource Officer, Hospital Sisters Health System

Clara Blitch
Chief Human Resources Officer, Children's of Alabama

Rhonda Brandon
SVP, Chief Human Resources Officer, Duke University Health System

Sondra Davis
Chief Human Resources Officer, North Mississippi Health Services

Deanna W. Dudley, JD, MBA
Chief Human Resources, El Camino Health

Tristan Hall
SVP, Chief Human Resources Officer, OhioHealth

Gareth Holdstock
VP, Talent Acquisition, Acadia Healthcare

Brion Lieberman
Chief Human Resources Officer, Geisinger

Kristen Long, DNP, RN
VP, Chief Nursing Executive, North Mississippi Health Services

Nakesha Lopez
Senior Executive Vice President, Chief People & Culture Officer, Advocate Health

Megan McGrath
Sr. Director, Total Rewards, WelbeHealth

Felicia Miller
EVP, Chief Talent Officer, Parkland Health

LouAnn Scheelhaase
HR Talent Relations Program Manager, Carle Health

Rosemary Sheehan
EVP, Chief People Officer, Hartford HealthCare

Margie Zyble
Chief Human Resources Officer, UC Health

About ASHHRA and Laudio

About the American Society for Healthcare Human Resources Administration (ASHHRA)

ASHHRA is the nation's only membership organization dedicated to meeting the needs of human resources professionals in healthcare.

Founded in 1964, the ASHHRA leads the way for members to become more effective, valued and credible leaders in healthcare human resources. As the foremost resource for healthcare human resources, ASHHRA provides timely and critical support through research, learning and knowledge sharing, professional development, products and resources and opportunities for networking and collaboration. ASHHRA offers the only certification distinguishing healthcare human resources professionals, the Certified in Healthcare Human Resources (CHHR). For more information, visit ASHHRA.org.

About Laudio

Laudio's mission is to amplify and inspire the people who deliver great healthcare. Through its purpose-built platform for frontline leaders, Laudio enables health systems to drive large-scale change through everyday human actions. The company's AI-enhanced platform streamlines workflows for frontline leaders, strengthens interpersonal connections, and aligns C-suite objectives with frontline efforts, enhancing leader efficiency, employee engagement, and patient experience. Laudio makes it possible for patients, frontline team members, and health system leaders to thrive together. Discover how at laudio.com.

About Laudio Insights

Laudio Insights is Laudio's analytics, research, and publications division. Managers' use of the Laudio platform enables the collection of unique detailed work environment data from leaders who manage over 300,000 health system clinical and non-clinical employees in 150+ hospital and health system sites in the United States. From the data, Laudio Insights creates actionable and independent analytics. Laudio Insights publishes quarterly reports, articles and other content that provide decision-making support to frontline leaders and their executives.