

Well-being at Work – New Innovations and Good Practices



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Well-being at Work - New Innovations and Good Practices

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1 Introduction

The Finnish Institute of Occupational Health (FIOH) co-ordinated the Well-Being at Work project from 1 Jan to 31 Dec 2008. This project was part of the EU's Progress funding programme. Its main target was to produce a completely new European concept of well-being at work that is based on consistent co-operation and dialogue between different partners and groups at the workplace. This involves a shift from a multidisciplinary to an interdisciplinary operating method, and merging the perspectives of Health Promotion, Occupational Health Services (OHS), Safety Management, Human Resources and Productivity in order to ensure their simultaneous and effective impact at the workplace.

The targets of the project were based on the Forum for well-being at work established by the Ministry of Social Affairs and Health, with the aim of strengthening national and local networking for the promotion of well-being. The guiding principles of the Forum are to activate the operating methods in organizations which promote well-being, and to disseminate good practices. The goal is to promote the development of individuals, organizations and work environments, and to improve work and the quality of working life. By promoting well-being at work, the Forum aims to increase the appeal and productivity of working life, as well as the capacity of individuals to adapt to changes. The promotion of occupational safety and health has an important role in the process of reforming Finnish working life.

Developing a new, integrated concept of well-being at work from the viewpoint of the workplace is particularly important, because until now many of the concepts have been devised by experts in different fields, such as occupational health services, occupational safety, and organizational consultancy. As they have been imported from outside of companies, they have often remained fragmented and isolated actions with no real link to the daily activities of the workplace. The new integrated approach is also suitable for SMEs.

The following figure describes the main focus of the project, i.e. to gain a better understanding and improved management of work. We need to operate at the workplace through more focused OSH-management practices. To avoid the confusion at workplaces caused by the many different concepts of various expert groups, we should put into practice the good practices and tools they have developed, into one integrated concept, which is proactive, preventive and suitable for SMEs. This means changing from multidisciplinary to interdisciplinary actions.

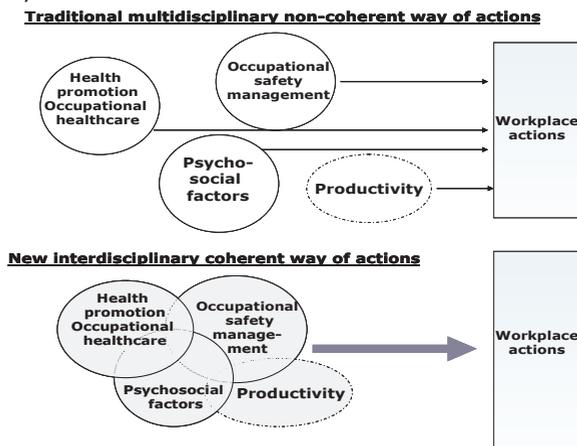


Figure 1. Design of the project: change from multidisciplinary to interdisciplinary action - from non-coherent actions to coherent actions.

2 EU and well-being at work policy - well-being at work in partner countries

2.1. Concepts and actions in well-being at work in partner countries

The challenges of well-being at work (W-BW) are connected to continuous changes in working life. More effective co-operation between different actors (e.g. researchers, occupational doctors, labour inspectors, the Local Health Agencies) is needed.

The promotion of well-being at work in the EU Member States has developed through national policies and the joint initiatives and strategies of the EU. The main background contexts of the development of well-being at work policies may be identified as followed:

1. Occupational Health Services (OHS) and Work Place Health Promotion (WHP), as described especially in the World Health Organization (WHO) policies and strategies. OHS has a background in the prevention of occupational and work-related diseases in companies and enterprises. Occupational health physicians, the International Commission on Occupational Health (ICOH), national labour, and/or health ministries have been the key initiators and actors in this development.
2. Occupational Safety and Health (OS&H) strategies and activities following the tradition of occupational safety and the prevention of accidents at work. The International Labour Organization (ILO) and the social partners have been most prominent actors in the EU in this domain.
3. Enterprises and organizations themselves have also been in the heart of the recent development of W-BW. New management and leadership principles have mainly been developed to assure the competitiveness and success of companies and enterprises. The role of Human Resource Development (HRD) and of the promotion of productivity in companies has been in particular focus in this field. HRD specialists have recognized the importance of the well-being of the workforce as a prerequisite for the success of a company.

Increasing emphasis is presently being placed on the integration of the OS&H and well-being policies described above, both at the national and the company level. At national policy level, the collaboration between different policy sectors reflects the trend of the co-operation and interdependence between OS&H, OHS, HRD and Business Management. In Europe, the launch of the Luxembourg Declaration on WHP (1997) by the European Network for Workplace Health Promotion (ENWHP) has been the key initiator and activator in this domain.

Increasing collaboration has been identified between OS&H, OHS and HRD strategies in companies in particular, but also in the following:

- productivity and competitiveness of the business
- employment and labour policies
- trade and industrial policies
- educational and competence policies
- public health and social security policies
- consumer protection and product safety policies
- environment policies
- demographic policies
- family policies
- traffic and transportation policies
- equity policies
- work ability and rehabilitation policies and activities
- quality of working life policies and programmes
- social responsibility of companies policies.

Well-being at Work aims for comprehensive actions for promoting the better health, safety, and well-being of the workforce, simultaneously with the productivity and success of the company and enterprise (Figure 2).

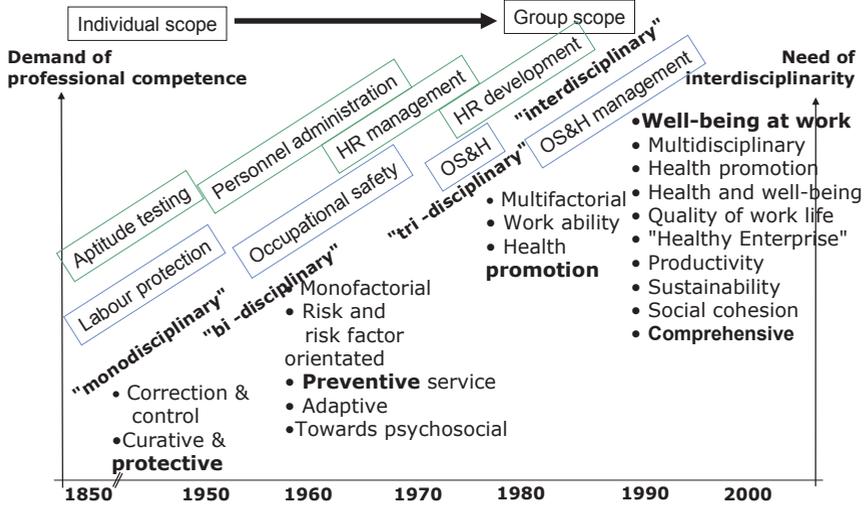


Figure 2. Development stages of well-being at work in OS&H.

Development of well-being at work in different EU countries*

The concept and actions of W-BW were earlier generally described in different EU countries based on the concept of Workplace Health Promotion (WHP), defined in 1997 in the Luxembourg Declaration of the European Network for Workplace Health Promotion (ENWHP). However, depending on each country, there are also variations in the interpretation of the concept and the inclusion of different types of activities with wider scopes. The Quality of Working Life (QWL) approach and the concept of the "Healthy Enterprise" have now been developed to cover this domain.

This chapter, updates and summarizes the results of a recent study (Hämäläinen 2007) on workplace health promotion in Europe in the partner countries (Belgium, Finland, Germany, Italy, Ireland, Romania) of the current project. The themes found in the WHP concepts of the countries concerned are classified as presented in Table 1 (Hämäläinen 2007, Ylikoski et al. 2006). Some countries can be allocated several themes.

The concept of WHP in **Belgium** covers the comprehensive concept of **well-being** at work. It is widespread, since it has been defined in the most important legislation protecting employees at work. Well-being, as described in the legislation, comprises aspects of occupational safety, occupational health, psycho-social factors (including job stress, mental health, bullying and sexual harassment), occupational hygiene, workplace design, and the environmental measures taken by companies that affect aspects of well-being. The definitions of health promotion used in Public Health legislation are clearly based on the concept of health promotion used by WHO, i.e. health promotion is the process of enabling people to increase control over health determinants.

*) References:

- Hämäläinen R-M. Workplace Health Promotion in Europe - the role of national health policies and strategies. Finnish Institute of Occupational Health, Helsinki 2007 (203 pages).
 Ylikoski M. et al. Workplace Health Promotion as a Tool for Improving and Extending Work Life. Ministry of Social Affairs and Health (Fi). Report 2006:62. Helsinki 2006 (137 pages).

Table 1. Main WHP themes in partner countries.

Major WHP theme	Country
Well-being at work	Belgium, Ireland
Work ability	Finland
Tripartite agreements on WHP	Finland, Italy
Collective approach to WHP	Germany (health at work groups and health circle)
Workplace culture as supporting factor for health	Ireland
Decrease in sickness rates	Italy
Corporate social responsibility	Italy
Employee involvement in company development	Romania

In *Finland*, the equivalent of the WHP definition is the concept of **promoting and maintaining work ability**. This concept defines workplace activities aimed at maintaining the ability to work, including all measures that the employer, employees, and the co-operative organizations at the workplace take in a united effort to promote and support the ability to work and to enhance the functional capacity of all persons active in working life throughout their careers.

In *Germany*, the legislation recognizes the recommendations for modern and comprehensive health promotion made by the Ottawa Charter. The main elements for WHP are health for work groups, company health reports and **health circles** at workplaces based on the context of Quality Management.

In *Ireland*, WHP is a major element of public health policy. However, although there is no formal definition of WHP, the concept has evolved towards including the workplace environment as a supporter of the health and well-being of employees in the **culture** and policies of the workplace. Consideration is given to the wider determinants of health, and other factors that have an impact on the health and well-being of people at work, such as working conditions and job design. The culture and policies of an organization refer primarily to the active support of top management in a **health-promoting workplace**. The support can take the form of an infrastructure being set up, such as well-being steering groups, or existing structures being used to address WHP or improve internal communication. WHP can also be an integral part of personnel and health and safety policies concerning such issues as smoking, bullying and family. More recently in 2008, the national Health and Safety Authority launched a 'Workplace Wellbeing Strategy'. This seeks to build on best practice in Ireland and elsewhere and to build support amongst the major stakeholders for improving wellbeing at work.

In *Italy*, the Charter 2000 on safety in the workplace is part of the programmes of national and local governments, institutions, and social organizations for promoting safety at work, preventing occupational hazards, and protecting health at workplaces. The Charter identifies shared and alternative lines to help the various parties follow a common path towards improving safety. It offers substantial support for increasing quality, which workers and owners, trade unions and institutions must strive towards in order to change the current situation. Therefore, health and safety at work, and the development of employment through protection are now considered necessary to improve the **quality of life** in workplaces. The legislation on Safety and Health (2008) also includes WHP, and an obligation on the part of employers to create a system in which employees are not only safe but can also improve safety.

In *Romania*, taking into account how recently the WHP concept has been introduced (2000), W-BW is fairly unknown except for a small minority of public health and occupational health experts, working mainly in research and training. As for WHP, the Romanian approach was to fully implement the meaning given by the Luxembourg definition, with a slight change; that is, introducing professional determinants the definition. Thus, in Romania, health promotion represents the combined effort of employees, employers and society as a whole to improve the health of people associated with professional determinants. WHP represents a collective strategy aimed at better **health at work and economic growth** for the company.

In summary, most countries base their W-BW and WHP on either the Ottawa Charter on health promotion, on the Luxembourg Declaration on WHP by the ENWHP, or on both. However, the Ottawa Charter is a well-known and scientifically based charter that has evolved over the years into the new Bangkok Charter on health in a globalized world. The Bangkok Charter emphasizes **Corporate Social Responsibility** (CSR) in health promotion and health and safety at work. The Luxembourg Declaration complements the health promotion efforts at workplaces as an expert declaration by a network within the European countries.

2.2 Work and well-being models in different EU countries

Finnish well-being at work model - the Finnish national Forum for WB-W*

The Ministry of Social Affairs and Health (Finland) has started a Forum for well-being at work in order to expand co-operation in the promotion of W-BW. The Forum provides a natural and reliable foundation for extensive co-operation by all actors. Social partners, insurance and research organizations, and ministries are all represented in the steering group of the forum. It provides a platform to which these and other organizations can bring their ideas and proposals and promote new initiatives.

The forum co-ordinates the actions of organizations promoting well-being at work and for example, disseminates good ideas and practices. The objective is to boost network co-operation and partnerships so as to make the actions more effective and to achieve common goals. All people at a given workplace, including experts in the management and planning of work, supervisors responsible for well-being at work, occupational safety and health managers, occupational safety and health representatives, the occupational health care system, and other stakeholders play important roles in promoting well-being at work.

The Forum for well-being at work is a component of the Government's Policy Programme for Employment, Entrepreneurship and Work Life. Furthermore, it particularly promotes the development of occupational health care and rehabilitation together with the Policy Programme for Health Promotion. The Forum makes use of the achievements and good practices of previous working life programmes.

Typical activities include campaigns, expert meetings, training, joint open settings for learning, publications, web services, guidance, relevant projects, and co-ordination of the various partners' activities.

The Forum for well-being at work will promote:

- the health and safety of work, working methods and the work environment
- employees' physical, psychological and social well-being
- the meaningfulness of work
- healthy and safe ways of organizing work
- risk assessment and management
- the control of exposure, strain and stress
- the development of occupational health care and rehabilitation
- the balance between work and leisure
- the role of occupational health and safety at work as a productive factor, and its role in business
- information and influencing attitudes
- the impact of work as a health-promoting factor
- the dissemination of good practices.

*) This paragraph is modified by Hannu Jokiluoma, Ministry of Social Affairs and Health, Finland.

The following four themes of activity are based on the needs of working life and stakeholders:

1. Good practices
2. Control over work strain and stress
3. Occupational safety
4. Occupational health services.

German well-being at work model*

Due to the modification of §20, SGB V, the health insurance funds got more opportunities to influence activities especially in primary prevention and health promotion. Health promotion is now an obligation for health insurance funds in Germany; they can spend money for health promotion and workplace health promotion activities.

The aim in general is to improve the health condition of members of the insurance and their families, **furthermore the reduction of social inequalities in health**. Moreover the implementation of outcome oriented prevention and health promotion should be stressed in order to achieve middle-term positive results on quality of life and productivity middle-term. Therefore only qualified providers of health activities are admitted by the insurance funds.

The Associations of Health Insurance Funds developed quality guidelines, which were modified and enlarged during the following years. The guidelines assure quality management of health promotion activities, documentation of all activities in this field and evaluation. And there are clear orientations for the qualification of providers of health promotion activities.

- There is a difference between individual approaches to change behaviour (Moving, nutrition, stress reduction, drug abuse)
- And setting oriented approaches by building structures and changing adverse conditions (i.e. for schools, municipalities/local activities, establishments and workplaces)
- Mental health promotion and prevention of ill health are clear targeted in this frame. Because of the legal base there is a clear commitment of all social security carriers to promotion and prevention.

In 2007 there have been 3014 documented workplace health promotion programmes which covered ca. 630 000 Persons at work; 77% of all programmes dealt with groups/persons at risk, 34% with stress management, 21 % with addiction oriented programmes. Other issues have been good leadership etc. Besides of the legal frame for WHP a lot of programmes and networks are dealing with wellbeing at work. The initiative INQA is organised by the Ministry of Labour and Social Order in Germany.

The EU Social Agenda of 2007 describes the overall goal as increasing the amount and the quality of workplaces, and improving social dialogue. Promoting better working life is an important task and a future challenge. INQA's goal is to combine employees' expectations of healthy and satisfying working conditions with the need to be competitive in today's economy. The basic idea is: "acting together – with individual responsibility".

Every sector has its own approach. The focus in these projects can be on for example, healthy work organization, a healthy enterprise, or back pain prevention. There are also networks such as the WPH network. One alternative is the INQA Mission, which emphasizes competitiveness and quality of work, and whose the principles include future challenges, acting together, individual responsibility and improvement of work quality.

*) This paragraph is modified by Karl Kuhn, BAuA, Germany.

Mental Health Promotion

Subjective well-being is defined as a person's cognitive and affective evaluations of his or her life. These evaluations include emotional reactions, low levels of negative mood, and high satisfaction. The positive experiences embodied in high subjective well-being are a core concept of positive psychology, because they make life rewarding.

The policy framework proposes five common principles: to expand the knowledge base for mental health, support effective implementation, build capacity, train the workforce, engage different actors, and to evaluate and monitor the impact of implemented policies and programmes.

Characteristics of healthy organizations

The drivers of healthy organizations are quality of leadership, workplace culture (common beliefs/convictions, values, rules) and participation in organizational decision-making (see figure 3). Workplace health determinants include transparency of decisions and processes, contact between members of staff in all departments of the organization, trust and co-operation between members of staff (atmosphere, sense of belonging) and alignment of employee values with organizational tasks and goals (commitment). The other characteristics of a healthy organization are social security (education, status and income), stability, quality of social contact at the workplace, rationality of tasks, empowerment at the workplace, professional qualifications of staff, and soft skills.

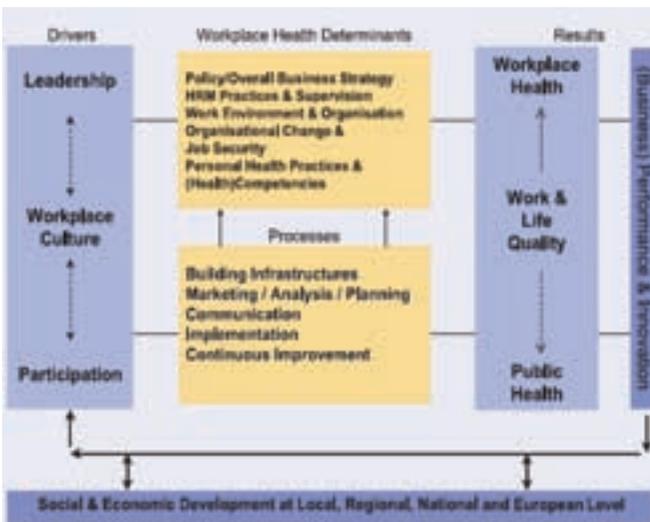


Figure 3. The European Approach to Promoting Workplace Health.

Romanian well-being at work model*

Romania does not have a legislative national basis for developing well-being at work related activities, or an established model among the public health and occupational safety & health communities. However, various working models have been used for separate workplace health promotion projects. These models have been adjusted and adapted for each and every case and accounted for differences amongst various companies (regarding the resources, responsible persons, expertise and commitment pertaining to WHP). The following example of a model includes activities grouped into four components: 1) health

*) This model is modified according to the seminar presentations of Theodor Haratau, Romtens Foundation, Romania.

education - collective sessions, 2) health education - individual counselling, 3) a Healthy exercise – company-financed building of a fitness centre on its premises. Canteen programme -providing healthy options every day in the canteen, in terms of menus, or displaying the nutritional information of the meals served and 4) physical exercise – company-financed building of a fitness centre on its premises.

Belgian well-being at work model*

The Belgian case of well-being at work from PREVENT (Institute for Occupational Safety and Health Belgium) focused on one or more of the following aspects: safety at work, health, psychosocial workload, ergonomics, industrial hygiene, workplace violence, and the work environment (based on the definition of well-being in the 1996 well-being at work act).

The actors in W-BW are line managers, who play an important role, and managers, who are responsible for the planning, execution and evaluation of the well-being policy. Several companies are looking to improve the health conditions of workers; to invest in human capital. Managers are aware of the costs companies face due to absenteeism (accidents, sickness, lack of motivation).

Future challenges include improving the well-being of vulnerable groups (subcontractors, migrants, older workers, temporary contracts, independent workers) and mainstreaming well-being into training/education. Mainstreaming work health and public health, and preventive actions in relation to psychosocial issues and cancer are also challenges, as is reintegration, which includes vocational training for disabled workers. Mainstreaming working life and private life, strengthening absence and holiday leave regulations, and qualitative and accessible child care are included in the future Belgian W-BW model.

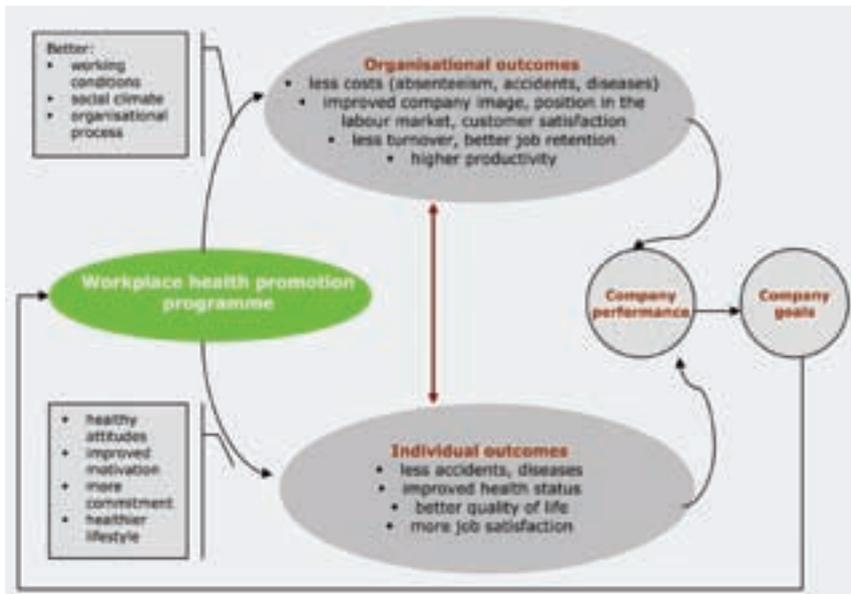


Figure 4. Linking well-being to the business strategy.

The mission of the strategy focuses on the improvement of prevention culture at all levels. The vision is concerned with the improvement of knowledge through research, the development of a national profile, co-ordination and support from different actors, the promotion of a self-supporting approach for companies, and the professionalization of communication and marketing. On the methodological level, this means the creation of an

*) This model is modified according to the seminar presentations of Karla van Den Broek, Prevent, Belgium.

observatory of working conditions to build a frame for a national survey, the development of an instrument for measuring the prevention level on national and company level, the development of "voluntary agreements" between sectors, social partners and government, and the stimulation of education and training.

Italian well-being at work model*

The Italian W-BW model is based on the Charter 2000 on safety in the workplace. According to this manifesto, prevention based only on technical measures is necessary but it is not sufficient. New production systems cut down the amount of "classic occupational diseases". Today, diseases are strongly influenced by dominant lifestyles. The importance of health costs, working days lost due accidents and disease, social costs (family) and quality is constantly increasing.

The objective is to create a "company system" in which all elements are part of one integrated structure, which is healthy, efficient, and promotes "sustainable development", and generally develops the respect of the environment and social context, in other words: quality of life. Organization for health and safety includes the protection and safety of the company, and the well-being and safety of the collaborators; not single preventive actions, but the creation of a safety and health "culture", building, in the meantime, a behavioural model which is repeatable in daily life, even outside the business context.

Workplace health and safety means clean workplaces, efficient production systems, constant checks of safety devices, and control of the degree of efficiency and safety of machines. The health and safety of the collaborator means the provision of clean and ergonomic spaces, the creation of "pleasant" break areas, a general training plan, a clear professional development plan, evaluation of social well-being and health, full health service and the promotion of sport activity through the organization of company.

The national project on well-being at work includes new company policy, full application of the current legislation on health, protection in the workplace, integration of all systems (quality, safety and health, etc.), training, and quality processes (ISO 9000, SA 8000, European Certification "model of good practice" ISO 14000).

The advantages for clients will be improved collaboration, greater trust and transparency, higher quality and uniformity of products and lower costs of production. Advantages for the entire system will be the improvement of physical, mental and social well-being of the collaborators, increased "vivibilità" in the workplace, a reduction in absenteeism and accidents, improved efficiency, better maintenance and lower energy consumption.

Irish well-being at work model**

The Irish model is based on the development of a national strategy on workplace health and well-being (2008). The objectives of this strategy are 1) to raise awareness of the importance of the health and well-being of our working-age population, and to recommend actions that will improve worker health 2) to create a workplace culture and environment that will promote health and well-being, to prevent ill health and support rehabilitation for the return to work of those who have been away due to ill health or disability, and inspired by changing demographics, to reduce the costs of absenteeism and the costs of ill health. This strategy is replacing a more piecemeal approach, where companies undertook wellbeing at work actions without the benefit of a national framework and where suppliers tended to provide only partial solutions to problems of wellbeing at work.

*) This model is modified according to the seminar presentations of Giuseppe Masanotti, Università di Perugia, Italia.

**) This paragraph is modified according to the seminar presentations of Richard Wynne, Ireland.

According to the Irish national strategy, workplace health and well-being is achieved through a combination of prevention, hazard identification, risk assessment, health surveillance, WHP, HRM, participation, communication, and rehabilitation. Core dimensions are the prevention of occupational accidents and diseases, the promotion of general health at the workplace, the rehabilitation of people with illness or injury, and the development of an information based intelligence.

2.3 Summary

Approaches to W-BW differ between EU countries. Systems and practices vary according to country-specific contexts. Actions are focused on both traditional health and safety issues and also on the effectiveness of the activities on health services such as sport activities, health education and counselling, quality systems and certification, and benefits for customers. Listed benefits were well-being, effectiveness, and the reduction of absenteeism.

Table 2. Legislation and implementation of W-BW strategy and models in partner countries.

Country	Concept mentioned in legislation?	Idea implemented on country level	Implemented on enterprise level
Belgium	yes	yes	yes
Finland	yes	yes	yes
Germany	yes	yes	yes
Ireland	no	yes	yes
Italy	no	no	yes
Romania	no	no	yes

3 Networks for well-being at work

3.1 European Network for Workplace Health Promotion

The European Network for Workplace Health Promotion (ENWHP) (www.enwhp.org) is an informal network of national occupational health and safety institutes, public health, health promotion and statutory social insurance institutions. In a joint effort, all the members and partners aim to improve workplace health and well-being and to reduce the impact of work-related ill health on the European workforce. ENWHP promotes good practice in workplace health promotion and advocates the adoption of such practice in all European workplaces.

With the support of the European Commission, DG Health and Consumer Protection, the ENWHP has carried out a number of important European initiatives over the past decade which have established workplace health promotion (WHP) as a field of action for public health at European and national level. The current 7th initiative focuses on life-style related Workplace Health Promotion (WHP), and especially on the combination of physical activity, healthy diet, mental health and prevention of smoking. The recently started 8th initiative focuses specifically on improving mental health at work.

The forums for WHP can take several forms, depending on the circumstances in each country. The aim of the ENWHP has been to establish national WHP forums with which to serve interested people and share knowledge and information concerning WHP practice and activities.

3.2 Other networks for well-being at work

The European Technology Platform on Industrial Safety, ETPIS recognizes that only an integrated approach to risk assessment and management will help introduce improved and integrated safety standards across the European industry, along with occupational practice that matches the objectives of industrial safety.

The Finnish Technology Platform for Industrial Safety, FITPIS aims to integrate the different approaches to risk assessment and management, and to promote co-operation between the different actors in this sector on the national level.

The Finnish Zero-Accident Forum is an ethically sustainable basis for aiming towards an accident-free workplace. Based on the national-level occupational accident prevention programme, the Zero-Accident Forum was established by the Finnish Institute of Occupational Health in 2003. It is a group of workplaces which are committed to sharing their successful practices with others, and spreading information to encourage other workplaces to aim for a high level of safety. Network activities include seminars, recognition schemes, campaign and training materials, extranet services, newsletters, and information services.

Another important national forum for well-being at work is The Finnish Well-being at Work Forum which includes a broad approach to W-BW: physical, mental and social well-being at work, safety and health at work, occupational hygiene, the functioning of work organizations and work communities, skills and competence; command of work, work/life balance, the attractiveness of working life, good quality work, and productivity.

The European Network on Education and Training on Occupational Health and Safety ENETOSH is a platform for knowledge-sharing on education and training issues in occupational health and safety.

European Occupational Safety and Health Manager (EurOSHM). The European Network of Safety and Health Professional Organizations (ENSHPO) brings together health and safety professional organizations from current EU Member States, new Member States, applicant countries, and other European countries.

The Promenpol project (www.mentalhealthpromotion.net) is seeking to disseminate mental health promotion at work through the provision of a database of tools and the description of good practice. Though not strictly a network, it does have a membership of around 500 people and it is intended that this will be built upon even after the lifetime of the project at the end of December 2009.

Table 3. Some European networks for well-being at work.

<p>European network for workplace health promotion (ENWHP) http://www.enwhp.org</p> <p>European Heart Health Initiative www.ehnheart.org</p> <p>European Network of Health Promotion Agencies www.EuroHealthNet.org</p> <p>European Network for Smoking Prevention www.ensp.org</p> <p>Mental Health Europe www.mhe-sme.org</p> <p>European Network of Health Promoting Schools http://www.euro.who.int/ENHPS</p> <p>European Masters Programme in Health Promotion (EUMAHP) www.brighton.ac.uk/eumahp</p> <p>Working Group on Alcohol and Health www.eurocare.org</p> <p>European Network on Health-Enhancing Physical Activity (HEPA)http://www.hepa.ch</p> <p>European Nutrition Network europa.eu.int/comm/health/ph_determinants/life_style/nutrition</p> <p>International Union for Health Promotion and Education (IUHPE) http://www.iuhpe.nyu.edu/</p> <p>Enterprise for Health www.enterprise-for-health.org/</p> <p>European Network on Education and Training on Occupational Health and Safety ENETOSH (http://www.enetosh.net)</p> <p>European Occupational Safety and Health Manager, ENSHPO (www.enshpo.org)</p> <p>Age Management Network www.livskompetens.com/competence50+/results/A_European_Age_Management_Network%20070614.pdf</p> <p>European Technology Platform on Industrial Safety, ETPIS (www.industrialsafety-tp.org)</p> <p>Zero Accidents Forum (Finland) (www.ttl.fi/zeroaccidentforum)</p> <p>Finnish Technology Platform for Industrial Safety, FITPIS (www.FITPIS.fi)</p> <p>The Finnish Well-being at Work Forum (www.tyohyvinvointifoorumi.fi)</p> <p>The SME Workplace Health Information Pack (www.workplacehealth.ie)</p> <p>The Promenpol project (www.mentalhealthpromotion.net)</p>

4 Definition of well-being at work

The concept of well-being has a long historical development. Well-being results from the fulfilment of the important needs of individuals and the realization of goals and plans set for one's life. Goal-orientated activity and commitment to tasks creates well-being. Compared to this, the history of well-being at work is short. The concept of quality and productivity of working life has only recently evolved, and includes, for example, learning and social activities. The main idea here is to produce a sustainable, more holistic development process for workplaces which is more systematic and includes the idea of "doing together". In this project we are not really concerned with the name of our concept, since according to the Progress Programme, we are bound to use the term "well-being at work".

Different countries use different names for activities, which are more or less similar concepts to our W-BW. The following names have been used:

- Quality and productivity of working life: Germany, Finland.
- Workplace as supporting health: Ireland, Netherlands, Sweden (attractive workplace).
- Well-being: Belgium, Sweden, Luxembourg, Norway, Poland, Ireland.
- Healthy living: Austria, Denmark, United Kingdom, Sweden.

- Decreasing sickness rates: Netherlands, Norway, Poland.
- Work ability: Finland.
- Inclusive working life: Norway.
- Work environment: Denmark, Netherlands, UK.
- Corporate social responsibility: Denmark, UK.
- Employee involvement in company development: Norway, Poland, Romania.
- WHP in health at work groups: Germany (health at work, company health report, and health circle).
- Tripartite agreements on WHP: Austria, Finland, Luxembourg, Sweden.
- Prevention: France, Luxembourg.

However, it is important to understand the historical need and development of these concepts (see Chapter 2). As the concept here is a function of individual risk strategies and organizational strategies, well-being at work is a more demanding, more holistic and integrated concept and more useful for SMEs than the concepts of control, safety management, workability and health promotion alone.

We can write the definition of well-being in many ways. Is it a question of mere experiences and feelings, or do the results depend on our actions? Who is responsible for our W-BW actions, who are the actors; workers, employers, authorities, partners of the labour market? How should it relate to the individual person, to the work organization or even to society?



Figure 5. Bases of W-BW actions.

4.1 Well-being at work in SMEs

According to the Finnish dictionary of occupational safety, W-BW is defined as: Employees' physical and mental state, resulting from the appropriate balance of work, environment and leisure time. Professional skills and work control are the most important factors which promote well-being at work.

In this project, we expanded the definition with three further versions.

1. Well-being at work means safe, healthy, and productive work in a well-led organization by competent workers and work communities who see their job as meaningful and rewarding, and see work as a factor that supports their life management.
2. Well-being at work refers to the experience of the worker that is influenced by how safe, healthy, well-led, and well-organized work is, how effectively the changes in work are managed, the level of community support to the individual, and how meaningful and rewarding a person finds work, accounting for the factors of competence and productivity.

3. Well-being at work describes the worker's experience of the safety and healthiness of work, good leadership, competence, change management and the organization of work, the support of the work community to the individual, and how meaningful and rewarding the person finds work.

Version 1 is based on doing, version 2 emphasizes experience, and version 3 is a description of experience. Moreover, the new contents such as productivity, life-long learning, reward and satisfaction, societal dimensions etc. are written in different ways. The definition could also include social interaction, goal-orientated activities on the level of the individual employee, future perspectives and well-managed business.

The next type of definition is also presented in the literature and we use it as an example of how demanding the description of the definition and the expected results can be. According to our perspective, these kinds of definitions are not suitable for SMEs.

Definition 4: Well-being at work initiatives need to balance the needs of the employee with those of the organization, which means creating an environment that promotes a state of contentment, allowing an employee to flourish and achieve their full potential for both their own benefit and that of their organization.

The project has come to the conclusion that version 1, based on doing and the new type of results, was the most popular.

Different countries suppose that W-BW actions influence the following parameters:

- Improvement of health and well-being both at and outside work
- Physical, psychological, and social well-being and work ability of the worker
- Healthiness and safety of the content of work tasks, work methods, and the work environment
- Healthy and safe ways of organizing work and good leadership
- Commitment of the worker and life-long learning
- Management methods and communication that support the well-being of organizations
- Work/life balance
- Occupational health and safety as a factor in productivity and business
- Societal structures that enhance occupational health and safety
- Productivity and economic success based on sustainable methods of operating
- Measurements and continuous improvement
- Change management.

For SMEs we can use the shorter list of actions, such as individual health and work ability, resources, occupational safety, and change management.

Our experts have also developed the following list during this project:

Work environment and assuring business activities, the functioning of the work community, management and communication, the organization of work tasks, the promotion of work ability and health at the workplace, competence development, and productivity.

According to lessons based on our project results, the benefits of the activities of WB-W can be seen at the national economy, individual, and company levels: in productivity, longer working life, later retirement, increase of presence (national), workplace image, learning, profit, quality, competitiveness, mutual respect, initiative (company), better careers, motivation, better work and free time, less stress (individuals).

5 Well-being at work- SME employees and entrepreneurs - Results from the Finnish Working Life Barometer (2006)*

The annual Working Life Barometer of the Finnish Ministry of Labour describes the quality and trends of working life based on the opinions of the wage and salary earners in the private sector. The number of persons interviewed was 1480, and the response rate of 83.2% was high. The Federation of Finnish Enterprises analyses the results of the Barometer on a regular basis by comparing large enterprises with SMEs.

The results of the Working Life Barometer show that working conditions are good in SMEs. Their salaries are at the same level as large enterprises', and employees are better able to influence work content and the workplace. Employees in microenterprises have less sickness absence than employees in other enterprises. Future challenges for SMEs are both safety at work and occupational health care.

In small enterprises, the relations between management and employees are clearly more open and confidential than in bigger enterprises. Mental workload is not clearly related to the size of the company.

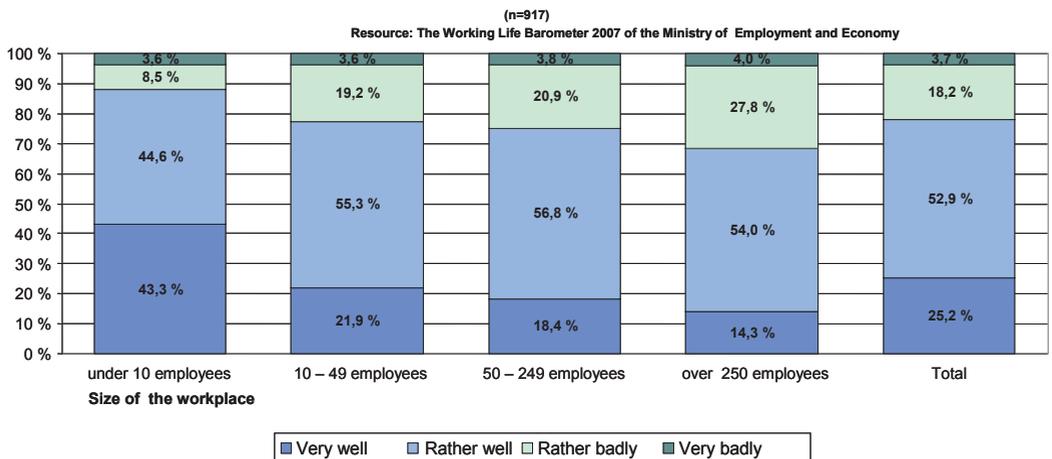


Figure 6. Relationship between management and employees.

(Question: How does the following describe your workplace: "Relations between management and employees are open and confidential...")

In Finland, 85 000 entrepreneurs are employers, and approximately 150 000 work as sole entrepreneurs. Sole entrepreneurs have no social support at work. Thus occupational health care is extremely important for sole entrepreneurs and micro enterprises.

Compared to employees, entrepreneurs have more risks; insecurity of livelihood, risk of losing invested capital or work, and risk of personal responsibility. Entrepreneurs do not pay enough attention to their own health, and do not arrange occupational health care often enough. Entrepreneurs have 20% longer working days than employees, and on average have approximately only two weeks' summer holiday and seven other days off per year.

Entrepreneurs should consider W-BW as part of productivity as this provides a means of making W-BW relevant to them. Improving awareness of the meaning of W-BW can have a great impact on work capacity. Productivity should be taken into account and awareness of both the costs of occupational health care and access to occupational health care should be improved.

*) This section is modified according to the seminar presentation of Outi Tähtinen, Federation of Finnish Enterprises.

6 Good practices

The aim of this project was to increase information on, improve knowledge of and promote actual W-BW activities in workplaces. It also seeks to identify innovations and good practices in co-operation with European countries. This section examines some action models and tools for increasing W-BW and productivity.

The participative inclusion of management is crucial in the interventions, while human resource experts, occupational safety and health personnel, and training experts play a special role in facilitating its development. As the healthy organization has many dimensions the intervention actions should be multilevel and should be implemented at the organizational and individual level and preferably also at group level.

Good experiences have resulted from co-operation between various workplaces, authorities, researchers, and funding organizations, and have achieved a common goal of W-BW in Finland. The Zero-Accident Forum, a voluntary network of Finnish workplaces, was established in 2003 with the aid of the Ministry of Social Affairs and Health. It is open to any workplace, regardless of sector or level of occupational safety. The common aspect is a genuine desire to improve safety and strive towards the goal of zero accidents. Membership of the forum means that the management and staff of the organization are committed to improving their own occupational safety and carrying out the work that this entails. Another similar W-BW forum has also been organized in Finland. This contains workshops that define the concept of well-being in a practical way for working life, for exchanging experiences and good practices and for jointly creating new innovations based on earlier results.

6.1 Descriptions of action models and tools used

In the following text we present four cases from our seminars as examples of the ongoing activities.

Case 1: Evaluation tool for entrepreneurs to promote own health and well-being (Y-STEP, Finland)*

The Y-STEP contains short and simple but comprehensive material for the promotion of entrepreneurs' own health. It is aimed at preparing, planning, realizing and evaluating well-being and health promotion activities. It is also readable and useful for employees, teams, foremen, and management of organizations in small and medium-sized enterprises, and entrepreneurs. The Y-STEP also contains a matrix for self-evaluation and rating practices.

The Y-STEP is based on five main steps in health promotion: preparation, self-evaluation, planning, execution, and evaluation. The goal is to make one's own plan for well-being and health promotion, and to make it work. The Y-STEP matrix contains evaluation for 1) entrepreneur's health and well-being, 2) organization of work, 3) professional skill development, and 4) work environment. Score ranges are ranked in terms of good practice, high standard practice and excellent practice.

One hundred entrepreneurs were involved in the pilot use of the matrix. Their self-evaluations were compiled using questionnaires, individual workplace visits, and courses arranged by the Finnish Institute of Occupational Health. The evaluations were made either in one group per workplace, or by one individual familiar with the workplace concerned. Entrepreneurs worked in industry (n=40) and services (n=60). The average of total points counted was 17.1, over a range of 8 to 29. Entrepreneurs estimated the feasibility of the Y-STEP as being very high.

*) This case is modified by Päivi Husman, FIOH.

Table 4. Y-Step evaluation matrix.

COMPETENCE DEVELOPMENT				WORK AND WORK ENVIRONMENT IN ENTERPRISE				HEALTH AND WORK ABILITY IN ENTERPRISE			
GOOD PRACTICE	realized	improvements	not realized	GOOD PRACTICE	realized	improvements	not realized	GOOD PRACTICE	realized	improvements	not realized
Basic competence level is realized				Hazards and loading at work are identified and assessed				Occupational health service is organized			
Knowledge of entrepreneurship				Competence and basic skills training??? at work are arranged				Factors influencing health and work ability are identified			
Values support entrepreneurship				Safety factors are considered in work planning and methods, choosing of machines and equipment				Employees are aware of possibilities for rehabilitation			
Ability to use required common skills (e.g. ICT, knowledge of language, knowledge of teamwork when needed)								Health and work ability of staff is promoted			
HIGH STANDARD PRACTICE				HIGH STANDARD PRACTICE				HIGH STANDARD PRACTICE			
Basic competence is developed and updated				Proactive and systematic identification and assessment of hazards and loading factors				Co-operation between the enterprise and occupational health service runs according to plan and is target-orientated			
Knowledge of entrepreneurship is developed				Dangerous work tasks are instructed. Own and staff's safety knowledge is updated and developed				Health risks are identified, assessed and eliminated together with staff			
Readiness to adopt the changes				Proactive creation of circumstances for safety work				Rehabilitation possibilities are clarified			
Management of new techniques which support entrepreneurship								Development of health, equality and fair treatment is documented			
EXCELLENT PRACTICE				EXCELLENT PRACTICE				EXCELLENT PRACTICE			
The best branch knowledge is aimed for in competence				Proactive identification and elimination of hazards at work or risks at acceptable level				Health and work ability are followed, assessed and promoted together with occupational health service			
Activities of enterprise followed-up extensively				Safety work methods are followed by the whole staff who are responsible for safety at work and it's continuous development				Health risks are predicted systematically			
Workings of the enterprise are known and developed				Zero accident policy is realized in enterprise. Workplace safety and conditions are developed continuously				Need for rehabilitation is predicted together with occupational health service			
New technique is utilized according to plan and HR management is developed								HR planning is realized			

Case 2: OIVA - professional rehabilitation home (Finland)*

OIVA is a professional rehabilitation home for young people who need psychiatric, social and professional rehabilitation. Oiva's different units are situated in Eastern Finland, and the first unit was established in 2001 in Kuopio. The challenges in the development of W-BW relate to factors such as the multi-professional personnel structure and the communal working method (demand for the social tolerance of personnel), young and rapidly growing enterprises, flexible responses to demand (allocation of resources), locations of activities being locally scattered, internal informing (common practices) and extremely demanding clients (mental and social loading).

The most important tools for improving work and the work environment are:

- participation of the all personnel in work development
- the quality manager, who co-ordinates the development group which is made up of the key persons from the units. The managers of different units participate in the group meetings and give the activity direction
- the persons in charge of processes in the units forming work teams for the key processes. Each work team will present considerations and proposals to the development group.

Tools for the development of W-BW:

- Regular evaluation of training needs and wishes
- The creation of tools according to needs – the extent of the work and the number of participants depend on the matters to be treated
- Flexible job descriptions of employees
- Follow-up of the methods and success of informing, and progress of activities in the sphere of responsibilities.

W-BW units:

- Employees in units actively and openly highlight the problems in their work in discussions
- Experts are given responsibility, trust, and space to do their own work
- Employee activities are understood as individual activities.

W-BW unit level:

- Problem-solving situations and considerations are part of a familiar and safe work practice of the work community, a normal routine of daily work. The goal is to promote consistency and clarity
- Personnel meet each other as individuals and are interested in each others' well-being. Fellow employees are acknowledged when they are sick or have a birthday.

Table 5. Targets of well-being at work in the OIVA workplace.

Well-being at work targets	Exists
Promotion of staff health and nursing	+
Promotion of safety in the work environment	+
Development of the content of work	+
Development of the operational practices of work community, joint responsibility and management	+
Promotion of professional competence	+
Clarification of work goals	+
Promotion of the work community's ability to manage changes	+

*) This model is modified according to the seminar presentation of Kosti Kejonen, Ammatillinen Kuntoutuskoti OIVA Oy, Finland.

Case 3: Large company model (Finland)*

The implementation of well-being and safety at work projects the ability to change the focus of work itself. The aim of broadening the concept of well-being at work should be to optimise both the physical and psychosocial workload and to develop a fluent, undisturbed, effective and productive work process. Well-being and safety at work will be implemented in the hard-core of work. Due to this, the starting point of the examination is the work itself, and the change developments that are required.

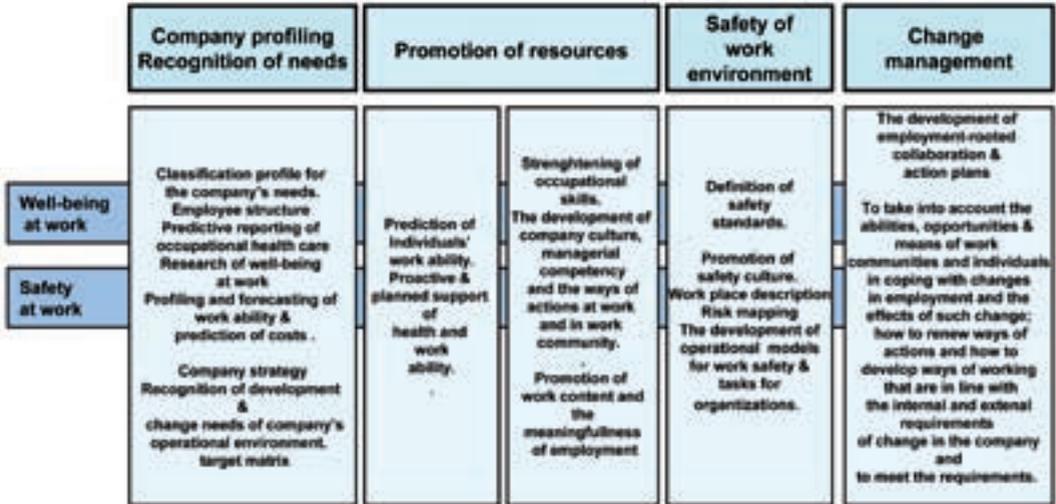


Figure 7. Systematic proactive development & promotion of well-being and safety at work.

The needs of the promotion of well-being and safety at work are based on the following four different elements:

1. The profiling of the enterprise and the workplace (strategy, targets of the outcome, usability of the personnel).
2. Individuals' personal and organizational resources (work ability, health, meaningful and well-led work).
3. Management of risks in the work environment (assessment of hazards, risk management, safety culture).
4. Management of change processes (the ability and opportunities for the individuals, work community, and organization to handle changes in work).

The *Change management workshop* is a systematic tool for promoting well-being at work and is based on the broadened definition of W-BW. The target of the examination is the work itself, and the meaning of changes in work to human beings. Changes in work appear as disturbances when work does not run according to plan. Repeated disturbances decrease W-BW, the meaningfulness of work, the co-operation of the work community, and safety. It should be noted that disturbances are connected to the changes in working practices. The main issue is how the organization is systematically able to treat the change and how the change is managed.

The Change management workshop is based on an action model in which the employees, together with the foremen, discuss the methods for increasing the fluency of work, which in turn increases meaningfulness and W-BW.

*) This model is modified according to the seminar presentation of Hannu Pursio, Metsäliitto Group, Finland.

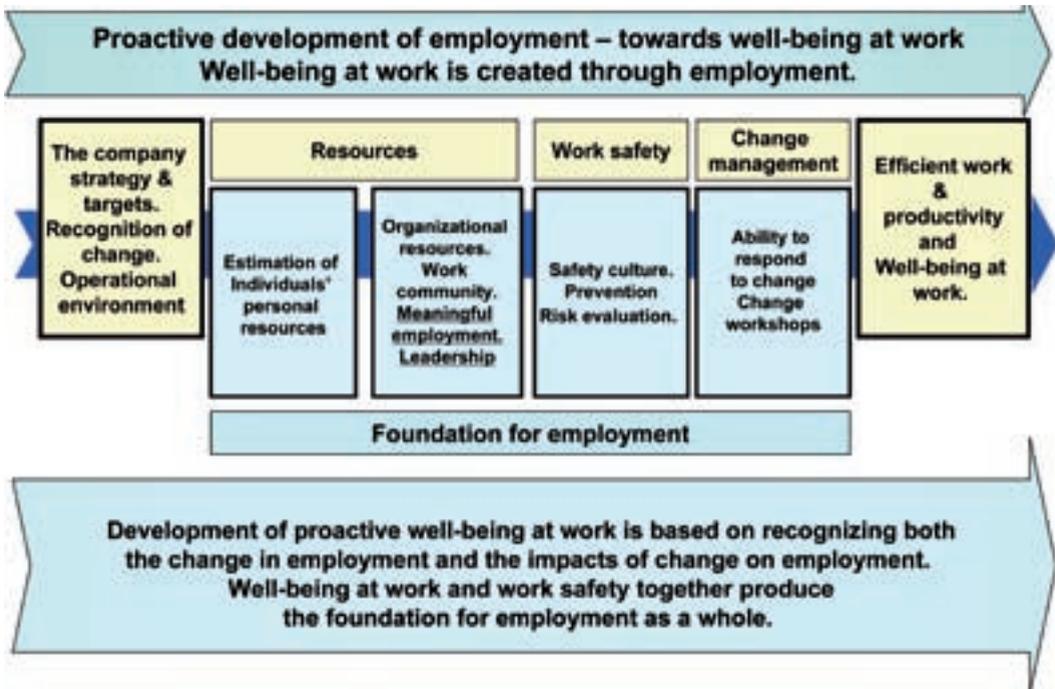


Figure 8. Description of development process of proactive well-being at work.

The Change management workshop is based on the collaborative development of work and the way in which the participants of the workshop participate in neutral communication. It includes five short 2-3 hour interrelated phases which lead to a common solution.

According to our experience, the workshop is a participative method which influences the positive development of well-being and work resources. It increases confidence and promotes psychological agreement in the context of big environmental changes. It also promotes safety and safety culture which increases the feeling of safety at work.

Case 4: A well-being project in Antwerp* (Belgium)**

The well-being project in the provincial government of Antwerp was initiated by the Human Resources Department. The department was faced with the challenge of adapting its operations and formulating a new vision and new objectives to suit the changing labour market and new trends in Human Resources (HR). The human factor is increasingly considered an element that can offer a company or organization a competitive advantage. Thus HRM's importance in a company's strategy is continuing to grow. If a company wants to reach its strategic goals, it will have to use its human capital correctly. During this process, ties with the Internal Service for Prevention and Protection were strengthened. After all, both departments have the same goal: the well-being of employees at work.

The most important long-term objective is to increase employee well-being and motivation. This is achieved indirectly by improving (daily) co-operation between both departments, and strengthening HRM and Prevention and Protection.

*) Contact information: Provincie Antwerpen, Departement HRM, Koningin Elisabethlei 22, 2018 Antwerpen.

***) This case is modified by Karla Van den Broek, Prevent, Belgium.

The joint vision as mentioned above targets three domains: competence management, balance between the supply and demand of employees, and safe and motivating labour conditions.

A *joint vision* for HRM and Prevention and Protection automatically resulted in the reworking and rewriting of the strategic and operational objectives, which mainly focus on:

- the implementation of the principles of competence management and the revaluation of the role of the line manager, among others, through a specific training course for executives
- striving towards the best possible approach to staffing requirements, recruitment and career planning by recruiting the right employee for the right job, by stimulating the principle of internal mobility and by rationalizing the number of holiday schemes
- strengthening team spirit by organizing activities such as an annual family day, a monthly happy hour, department group activities and other activities
- the reactive and proactive improvement of working conditions for personnel by means of a constructive approach to absenteeism, and a specific policy targeting older employees.

In addition to the alignment of their respective strategic policies, a structural bi-weekly consultation between both departments was also set up, and the Internal Department for Prevention and Protection was embedded in the organizational structure and moved to the same work floor as the HRM Department. *The collaboration* and relations between the two departments strengthened as a result.

Based on the overall joint strategy and vision, several joint actions were undertaken. An example is a specific programme to reduce the number of lost working days due to occupational accidents by 50%. The objective was to increase the safety of working conditions, to reduce absenteeism related to occupational accidents, and to accelerate return to work.

In the first phase, the project was presented to the management and discussed in the committee for prevention and protection. An ad-hoc working group consisting of line managers was established to follow up the programme. In a second phase, the ad-hoc working group drafted a scenario for the project. Phase three consisted of the implementation of the scenario. In the meantime, the registration of the number of absence days began. In the fourth phase of the project, a final evaluation was made, new actions planned and a new target determined, which consolidated the results obtained.

Another example of joint action is an absenteeism project. This project focuses on a preventive/proactive presence policy, without ignoring unjustified, black absenteeism. The role and responsibility of the people manager was essential. Line managers also need the support of the HRM department, through training, involvement of social services, personal advice and guidance on people management by the HR manager, etc.

Many of the results of the new joint strategic choices and related projects are visible in daily collaboration. Collaboration is growing spontaneously within the department of the Province of Antwerp and more attention is now paid to employee well-being. There are, however, no quantitative figures to illustrate this. The specific action for reducing occupational accidents shows positive results, since accident figures have dropped. A cost-benefit analysis confirmed this.

However, the effect on a cultural change within the organization regarding safety, well-being, prevention and protection is difficult to measure. Within the provincial government, people management strongly focuses on employee well-being, and W-BW is the basis of the HR policy. The growth process in people management and in HR policy will result in increased focus on the employee, his motivation and his efforts.

8 European network for well-being at work

Well-being at work is influenced by several actors and measures. These actors apply legislative and enforcement measures, information, guidance, and research and development activities. Many actors/authorities influence W-BW even though they do not directly intend to do so. A broad approach is a generally accepted approach for improving W-BW.

These kinds of activities lead to the increased need for networking, co-ordination and exchange of information and knowledge. It is necessary to intensify the co-operation and networking of organizations on and between workplace, regional, national, community, and international levels. There is a great need for stronger networking on the European level. In order to support this networking, there should be a widely-known platform where the organizations and experts who are interested in improving W-BW could come together and find useful contacts, partners and sources of information. Private and public workplaces should also have access to the network since employers and their workers are the key actors; W-BW depends on their decisions. The dissemination of good practices at all levels, particularly at the workplace level, is a key issue.

During this Progress project, a need for a network of networks in the area of W-BW has emerged. A new umbrella network could connect various actors and make other networks visible and identifiable. The well-being at work "umbrella network" could be started by forming an active home page/portal, to provide an open platform to facilitate networking. This would mainly take place by linking organizations interested in W-BW. The homepage should provide basic information about well-being at work, but the major part of the information would be on the websites of the network members.

The leading principles of the European network on W-BW could be as follows:

- The European network provides a sound and honest platform for broad participation.
- The network strengthens interaction between workplaces, experts, social partners and organizations in Member States and also in other countries.
- Any organization which works for W-BW may join and participate in the network according to their specific needs and aspirations.
- The network utilizes the knowledge and good practices developed in different organizations and both previous and ongoing working life programmes.
- Information is disseminated within the network.
- The network supports the implementation of community strategies, regulations and guidelines.
- The network activates innovative thinking and measures in the field of well-being at work.

9 Summary and Conclusions

The promotion of W-BW in the EU Member States has developed through national policies and the joint initiatives and strategies of the EU.

Presently, increasing emphasis is being placed on the integration of the OS&H and well-being policies described above both at the national and company level. At national policy level, the collaboration between different policy sectors reflects the trend of the co-operation and interdependence between OS&H, OHS, HRD and Business Management. In Europe, the European Network for Workplace Health Promotion (ENWHP), which launched the Luxembourg Declaration on WHP (1997), has been the key initiator and activator in this domain.

Well-being at Work is an approach of comprehensive actions concerning the promotion of better health, safety and well-being of the workforce, simultaneously with the promotion of the productivity and success of the company or enterprise.

These approaches differ between EU countries. Systems and practices vary in relation to differing approaches and country-specific contexts. The actions/projects are focused on both traditional health and safety issues and also on the effectiveness of activities in health services - sports activities, health education and counselling, quality systems and the reduction of absenteeism.

As a function of individual risk strategies and organizational strategies, W-BW is a more demanding, more holistic and integrated concept, and more useful for SMEs than the concepts of control, safety management, work ability and health promotion alone.

The best definitions borne from this project were as follows: W-BW means safe, healthy, and productive work in a well-led organization by competent workers and work communities who find their job meaningful and rewarding and see work as a factor that supports their life management.

Perhaps the most important factor in employee well-being is the relationships employees have with their immediate manager. The more capable these line managers are in identifying the personal interests and concerns of the individual, the more likely it is they will be able to create a team where employee well-being becomes an integral part of getting the job done. (Canadian Centre for Management Development, 2002).

Most European countries have accepted the project results of the benefits of WB-W seen at national economy, individual and company levels. The improvement can be seen in

- productivity, longer time in working life, later retirement, increased presence (national)
- image of workplace, learning, profit, quality, competitiveness, mutual respect, initiative (company)
- improved careers, motivation, better work and free time, less stress (individuals).

Moreover, the clear common conclusion was that we still need, at both national as well as European level; a network of W-BW, bringing together all its different topics.

Self-evaluation matrix for well-being at work activities

This matrix is designed for evaluating the level of W-BW activities. The sum of the scores calculated from each individual category gives a general view of the standard of the W-BW activities in the organization. However, the calculated scores have no absolute comparative value and are not recommended for benchmarking, as the needs of workplaces vary considerably. The matrix is best used as a basis for discussion to develop W-BW activities within an organization.

Use of matrix for assessing standard of actions of your workplace health promotion:

- In each of the categories, evaluate the level of activities that best match your organization
- Give a lower score if more activities are needed to match the criteria of a particular level, and a higher score if all or nearly all of the criteria is fulfilled at your workplace
- Add up the individual scores
- Compare the sum to the standard

Standard of well-being at work activities (sum of scores)

Good practice: 6-12 points
High standard practice: 18-24 points
Excellent practice: 30-36 points

Functional standard	Work environment and assuring business activities	Functioning of work community, management and communication	Organization of work
<p>Good practice</p> <p>Basics are under control, legislation is followed</p> <p>(1-2 points)</p>	<ul style="list-style-type: none"> Crucial Areas in occupational health and safety of personnel are identified (work environment risks are assessed) Company has a safety plan for actions in case of emergency Disaster risks and risks of other emergency and crisis situations are identified and mapped. Specific responsibilities in emergency situations are documented and personnel is trained. Workplace is clean and orderly Maintenance of machines is arranged and protective equipment is available 	<ul style="list-style-type: none"> Regular meetings arranged at workplace Interactive work community Social conflicts at work are solved by using common sense Personnel is treated justly and equally Fluency of work processes jointly discussed Company agreed on common rules for acquiring, processing and disseminating occupational health and safety-related information Documented procedures for ensuring occupational health and safety are used in projects and in major changes Well-being at work is measured regularly and measuring methods are both quantitative and qualitative 	<ul style="list-style-type: none"> Everyone has clear understanding of objectives of their work and tasks Employee needs are considered when planning working hours Monitoring of working hours is in use and regular breaks are arranged Guidelines for actions and required procedures for management of documentation exist Company is aware of principles and significance of regulations in its field
<p>High standard practice</p> <p>Proactive planning and implementation of programmes</p> <p>(3-4 points)</p>	<ul style="list-style-type: none"> Proactive identification of hazards and risk assessment at workplace Company has prepared for emergency and crisis situations by holding regular rehearsals and training at two to three year intervals and the plan is updated regularly Health and safety requirements for operations are defined by management and made known to personnel. Zero accidents policy is realized in the development and co-operation at the workplace (Actions promoting safety at workplace are planned and realized together with various personnel groups) 	<ul style="list-style-type: none"> Organizational climate is monitored regularly and leads to improvements Development of work community is target-orientated and common rules and guidelines are followed Changes in work are informed and discussed with employees in a good time Employee health and well-being is promoted by management Company has efficient method for acquiring, processing and communicating important health and safety information to all relevant parties A balance of the values of equality, and working and family life is arranged HR management is proactive and co-operative When needed, company is able to consult external experts 	<ul style="list-style-type: none"> Control over own job possible and guaranteed Employees are able to utilize their knowledge and skills at work Client feedback is used in workplace development Quantity of work is in balance with time allowed Possible disadvantages of working alone recognized and eliminated
<p>Excellent practice</p> <p>Comprehensive and systematic activities, best practices, use of quality system</p> <p>(5-6 points)</p>	<ul style="list-style-type: none"> Organization has a comprehensive system for development and control of quality of H&S (e.g. OHSAS 18001) Safety culture is analysed and developed together with employees Safety inspections are planned and made at regular intervals, management participates in inspections Major changes are always followed by inspection, where effects of change and success of its implementation are evaluated. Staff is committed to continuous H&S improvement at workplace. The results of the activities are compared to the results of the other companies (benchmarking) 	<ul style="list-style-type: none"> Work and work processes are developed systematically jointly, and the personnel is informed The successfulness of changes is evaluated systematically The results of evaluations are used as support for evaluation and development of management system Everyone has the opportunity to participate in and contribute to development of work Change management is organized at the workplace (established models) Staff reports are used systematically in strategic management (e.g. sick leave information) Changes in activities are informed and discussed together with different partners Fulfillment and enthusiasm for work are supported 	<ul style="list-style-type: none"> Job redesign is carried out in participatory way Organizational changes are anticipated and managed according to commonly accepted plan Actions taken to balance work and family life based on individual needs Fluency of work is followed, disturbing factors are identified and eliminated

Functional standard	Promotion of work ability and health at the workplace	Competence development	Productivity
<p>Good practice</p> <p>Basics are under control, legislation is followed</p> <p>(1-2 points)</p>	<ul style="list-style-type: none"> Staff recreation days are arranged Work ability activities are written in the OSH action plan of the workplace (also targets) Individual or group named responsible for promotion of work ability and health Company aims and individual aims in balance Problems in well-being at work are discussed and dealt with Psychosocial and physical condition of employees and workplace are monitored and actions are taken whenever problems occur OHS is provided Promotion of health, equality and fair treatment is documented Rehabilitation offered 	<ul style="list-style-type: none"> Required competence levels of different tasks are known Competence level of each individual is clarified Induction training is provided Learning on the job is possible Training is supported A job rotation programme is in use 	<ul style="list-style-type: none"> Productivity effects of health and safety of the work environment and well-being of personnel are understood Sick leaves, work accidents and their costs are followed up (e.g. information from insurance company)
<p>High standard practice</p> <p>Proactive planning and implementation of programmes</p> <p>(3-4 points)</p>	<ul style="list-style-type: none"> Objectives, resources and processes are set for work ability and health People in charge of work ability activities are enthusiastic, motivated and engaged Resources for development of work ability provided by management Work ability and health activities are connected to other development activities at workplace Work adjusted to employee's resources Work to be developed to support positive experiences such as work engagement Occupational rehabilitation programme is in place Different methods and tools have been used (this matrix) for measurement in order to gain an overview of level of well-being at work 	<ul style="list-style-type: none"> Induction training system is functional, persons in charge have been picked Training needs are anticipated and training programme is established and budgeted for Career development is available for all employees Tacit knowledge is transferred via systematic interaction between younger and older workers Safety managers and safety representatives have been trained 	<ul style="list-style-type: none"> Safety and ergonomics in investments and development considered /taken into account Costs of occupational health and safety are followed up (including costs of proactive activities and unwanted consequences e.g. occ. accidents and diseases, sick leaves, turnover caused by working conditions and early retirement)
<p>Excellent practice</p> <p>Comprehensive and systematic activities, best practices, use of quality system</p> <p>(5-6 points)</p>	<ul style="list-style-type: none"> Development activities carried out following comprehensive model of work ability activities in all sectors Support from colleagues and supervisor is clear and obvious Every employee has opportunity to develop their strength, thrives at work Healthy way of life is supported by workplace The need for development of work ability, rehabilitation and training is anticipated Follow-up of sick leaves 	<ul style="list-style-type: none"> Planning of training programme is based on skills assessment, need of personnel and strategy of company, proactive Additional training is tailored to meet needs of organization Career development and acquisition of new competences is supported Employees are committed and participate in workplace development - tacit knowledge Learning organization model is in use Work activities are evaluated and developed by employees together with safety personnel 	<ul style="list-style-type: none"> Occupational health and safety, and well-being at work are an elementary part of business, used to promote competitiveness Cost-effect analyses used in context of occupational health and safety investments

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