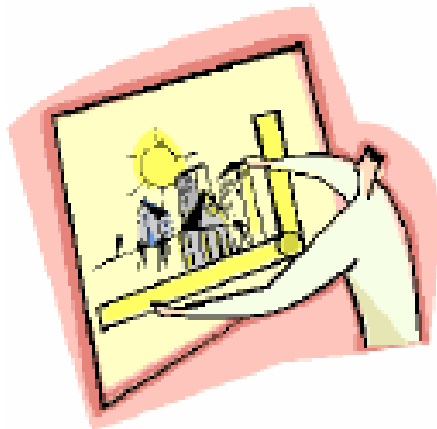


***How to Get Started:
Your Guide to Building a Healthy
Workplace***



Revised July 2006

How to Use This Guide...

This guide is for anyone interested in developing a healthy workplace. The guide contains suggestions and useful resources for getting started. To use this guide, you have a few options. If you want to read it like a book, you can scroll down the pages. If you are looking for information from a specific section, you can easily navigate through this document using the hyperlinks (click the bookmarks tab on the left of your screen for the hyperlinks).

Please note that:

- ❑ The guide is not an exhaustive collection of resources available.
- ❑ The information in this guide was revised in July 2006. Changes may occur following these revisions.
- ❑ Healthy Living Hamilton is funded in part by the Government of Ontario. The views expressed in these materials are the views of Healthy Living Hamilton and do not necessarily reflect those of the Government of Ontario. Healthy Living Hamilton does not necessarily endorse the information or services in the website links.

Why the Guide Was Created...

As a committee of Healthy Living Hamilton, the goal of the Workplace Workgroup is to train, educate, orient, mentor, and guide members to help them build and support workplace health and wellness in their own organizations.

A meeting of key stakeholders in workplace health held in Hamilton in March 2002 revealed the need for resources to help them along their journey to building a healthy workplace. The Workplace Workgroup committed to developing and distributing the guide. To date approximately 2,000 copies of the CD have been distributed.

The following people were instrumental in developing the original guide:

- Lisa Beaudoin, City of Hamilton Public Health Services (primary writer)
- Heather Champ, City of Hamilton Employee Health & Wellness Services
- Jan Chappel, Canadian Centre for Occupational Health & Safety
- Norma Gibson-MacDonald, Canadian Centre for Occupational Health & Safety
- Judi Goldsworthy, Hamilton-Wentworth District School Board
- Leah Lews, Medisys (Canada Post)

Glossary of Terms

Comprehensive Workplace Health Promotion (CHWP): Comprehensive workplace health promotion is an approach to protecting and enhancing the health of employees that relies and builds upon the efforts of employers to create a supportive management culture and upon the efforts of employees to care for their own well-being. CHWP is not a particular program or model. It is a philosophy, theory and practice of health promotion that is intended and designed to be incorporated into the Business Plan of organizations whose governors, owners and managers care about the well-being of their employees¹.

Business Case: The business case is the proposal you make to management, human resources, employees and unions to get commitment and participation to move forward with comprehensive workplace health promotion. The business case includes evidence that supports the benefits of doing comprehensive workplace health promotion and the costs of doing nothing.

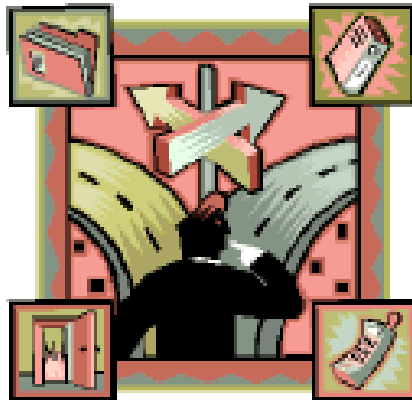
Buy-in: The term "buy-in" refers to obtaining support for comprehensive workplace health promotion. Obtaining buy-in is an ongoing endeavour that utilizes different strategies. Buy-in is required from key stakeholders in your workplace such as management, human resources, employees and unions.

Employee Assistance Programs (EAP): Employee Assistance Programs, or EAPs, are a benefit provided by employers to their employees and family members with the aim of improving employee health and organizational well-being while reducing costs associated with absenteeism, disability claims, workplace accidents or low productivity. EAP services typically include short-term counselling assistance provided by professionals, telephone and web-based information and support services, and wellness and training programs that focus upon prevention and health promotion. In addition, EAPs can offer specialized services such as on-site trauma response, management consultation, mediation/alternative dispute resolution, and outplacement services³⁶.

Needs Assessment (also referred to as situational assessment or gap analysis): A needs assessment is a process used to identify the gap between what exists and what is desired. This may also be called a gap analysis or situational assessment. The needs assessment process should reveal the actual needs, current practices and preferences of employees.

Return On Investment (ROI): Return On Investment refers to the income generated from investing in comprehensive workplace health promotion.

Chapter 1: Where Do I Begin?



Where Do I Begin?

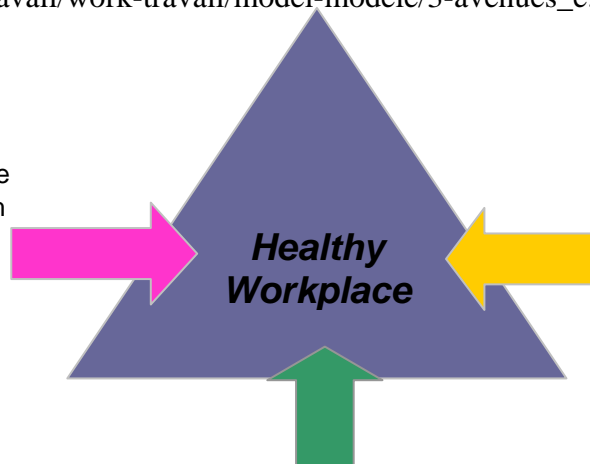
The purpose of this guide is to help you get started on your journey of building a healthy workplace. Where you begin depends on where you want to go. If optimizing the [health](http://www.who.int/about/definition/en/) of employees and productivity of the organization are your anticipated outcomes of a healthy workplace, than comprehensive workplace health promotion is for you. Comprehensive workplace health promotion is hard to define, but the concept is described below:

Comprehensive Workplace Health Promotion (CHWP) is an approach to protecting and enhancing the health of employees that relies and builds upon the efforts of employers to create a supportive management culture and upon the efforts of employees to care for their own well-being. CHWP is not a particular program or model. It is a philosophy, theory and practice of health promotion that is intended and designed to be incorporated into the Business Plan of organizations whose governors, owners and managers care about the well-being of their employees¹.

Influencing Employee Health through Comprehensive Workplace Health Promotion

Comprehensive workplace health promotion emphasizes that by focusing on employees' health practices, the social environment and employee's personal resources, and the physical environment in which they work can [influence employee health](http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/model-modele/3-avenues_e.html) ².

Health Practices are behaviours that affect health such as smoking, unhealthy eating, physical inactivity, and substance abuse.



Physical Environment can impact employee health through air quality, noise, and other workplace conditions.

Social Environment and Personal Resources are known to influence mental and physical health. The social environment is the culture of a workplace as experienced by its employees. The culture is made up of patterns of human relationships and communications that are strongly influenced by managerial decisions about the organization and design of work. Personal resources are the ways in which employees cope with stress and their sense of control over their work.

All three influences should be addressed in order to develop and sustain a healthy workplace.

Why Comprehensive Workplace Health Promotion?

There are approximately 298,000 people living in Hamilton who also work in Hamilton³. Hamilton's community is diverse. Immigration will be an important contributor to the growth of the City as its population growth is decreasing⁴. Manufacturing, retail, health and social services sectors dominate the economic landscape of Hamilton, with small businesses as the majority⁵.

The physical health status of Hamilton residents is not encouraging. According to 2002 Rapid Risk Factor Surveillance System (RFSS) data, 38.8% of Hamiltonians aged 18 years and older have a Body Mass Index (BMI) in the overweight range, and 18% have a BMI in the obese range⁶. Approximately 19% of Hamiltonians smoke daily⁷. Unfortunately, surveys show that only 30% of Hamiltonians over the age of 12 are considered physically active⁸.

If Hamiltonians are anything like their Canadian counterparts, their mental health status is not encouraging either. The World Health Organization has declared job stress a worldwide epidemic. Canadians are increasingly pressed for time, largely due to greater work demands⁹. As employees, Hamiltonians may find themselves in less satisfying jobs¹⁰ due to high demands and not enough recognition or control over their work¹⁰. The boundary between their job and their personal life becomes blurred with the advances in technology that make them available 24 hours a day¹⁰. Add balancing their roles as parent, spouse, eldercare giver to their role of employee, and one begins to understand why there is an increase in work-life conflict in Canada¹⁰.

The current physical and mental health status of Hamiltonians means that regardless of size or sector, Hamilton workplaces are facing imminent challenges. Absenteeism rates¹¹ and health costs are spiralling upwards¹². Furthermore, it is estimated that depression will rank second only to heart disease as the leading cause of disability by the year 2020¹³ and disability represents 4% to 12% of payroll costs in Canada¹⁴. Meanwhile, retention and recruitment issues will become paramount as the number of workers leaving the labour force every year will be larger than the number of new young workers entering for the first time⁴.

Hamilton workplaces can abate the negative impact of these challenges by promoting a healthy workplace through comprehensive workplace health promotion.

Does Comprehensive Workplace Health Promotion Really Work?

The evidence that comprehensive workplace health promotion programs are cost-effective and improve employee health is growing¹⁵. In a recent Canadian study, participants were able to reduce their cardiovascular risk factors by the end of a wellness program. Return On Investment (ROI) calculations for comprehensive workplace wellness programs ranged from \$1.64 to \$3.98 (for every dollar spent)¹⁶. Outside of the research literature, Canadian companies offering wellness programming have been measuring outcomes using human resource data and other means. Data from Canadian companies such as BC Hydro and Canada Life have demonstrated ROI's of \$3 and \$7 respectively for each dollar invested¹⁷. Benefits such as increased employee satisfaction and retention as well as decreased absenteeism and injuries have been demonstrated

in Canadian companies such as Amex, Celestica, Dofasco, MDS Nordion, NCR, and Telus BC¹⁸. Other reported benefits of comprehensive workplace health promotion programs include reduced health or insurance costs¹⁹ and improved employee health and wellness¹⁸.

The potential for improved health status and return-on-investment are not the only benefits of comprehensive workplace health promotion. Management at Chevron, an energy company in the United States, concur that workplace health promotion has added value to the company by helping them achieve their business goals²⁰. For more information on the benefits of comprehensive workplace health promotion, check out the links to Canadian examples listed below.

Canadian Examples

[Canadian Case Studies](http://www.clbc.ca/Research_and_Reports/Case_Studies.asp) (http://www.clbc.ca/Research_and_Reports/Case_Studies.asp)

This link gives you access to case studies of 12 Canadian companies on innovative workplace health initiatives.

[Summary of Canadian Organizational Outcomes](http://www.ccih.ca/docs/CCIH-Discuss_Workplace.pdf)
(http://www.ccih.ca/docs/CCIH-Discuss_Workplace.pdf)

Appendix C of the Discussion Paper on Workplace Health highlights the outcomes of Canadian companies that have won the [National Quality Institutes Healthy Workplace Award](http://www.nqi.ca/HealthyWorkplace/Recognition.aspx) (<http://www.nqi.ca/HealthyWorkplace/Recognition.aspx>)

How Do I Make Comprehensive Workplace Health Promotion Happen In My Workplace?

As an approach, comprehensive workplace health promotion is open-ended¹. Therefore, you will want to select a framework that is consistent with the philosophy of comprehensive workplace health promotion and has the best fit for your workplace. Choosing a framework is important. A framework will help you focus and increase your chances of successful workplace health initiatives. Fortunately, there are several healthy workplace models that exist for you to choose from, which are listed below. Common elements in these models include:

- ❑ Obtaining commitment or buy-in from senior management, employees and unions (see pages 11-22)
- ❑ Forming a Health & Wellness Committee (see pages 24-27)
- ❑ Conducting a needs assessment (see pages 28-29)
- ❑ Creating a Health & Wellness Action Plan (see pages 29-32)
- ❑ Implementing programs or activities (see pages 33-35)
- ❑ Evaluating the process and outcomes (see pages 35-37)

Brought to you by the Workplace Workgroup of



Healthy Workplace Models

The following models help explain how to implement comprehensive workplace health promotion in your own workplace. Unless otherwise specified, these models can be accessed free of charge.

National Quality Institute: [Canada's Healthy Workplace Criteria](http://www.nqi.ca/nqistore/product_details.aspx?ID=63)

(http://www.nqi.ca/nqistore/product_details.aspx?ID=63)

The criteria address a broad-based approach to health and wellness issues in the workplace. The criteria brings together environmental, physical, mental, safety and social issues into a strategic model that helps organizations set goals and manage their wellness programs.

Health Canada: [Corporate Health Model](http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/model-modele/index_e.html)

(http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/model-modele/index_e.html)

Designed for corporations and large business, this guide provides your organization with an outline of the steps required to develop and implement a comprehensive health program to help employees maintain or improve their health using the Corporate Health Model.

Health Canada: [Small Business Health Model](http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/small-guide-petite/index_e.html)

(http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/small-guide-petite/index_e.html)

The seven steps required to develop and implement a comprehensive health program to help employees maintain or improve their health through the Small Business Health Model are outlined.

Health Canada: [Farm Business Health Model](http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/farm-agricole/index_e.html)

(http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/farm-agricole/index_e.html)

This approach allows a farm district to get involved one step at a time. Participating groups set the pace and choose the level of involvement they feel comfortable with.

Canadian Centre for Occupational Health & Safety: [Wellness in the Workplace](http://www.ccohs.ca/products/publications/wellness.html)

(<http://www.ccohs.ca/products/publications/wellness.html>)

This guide provides practical steps and program suggestions for workplace health and wellness programs. You will be able to create a wellness program or integrate one or more initiatives into your existing framework. Cost \$10 plus shipping and handling. This resource can also be borrowed from the [Workplace Resource Library \(www.doitwell.ca\)](http://www.doitwell.ca).

Conditions for Success

The healthy workplace models listed above are designed to increase your chances of success in building a healthy workplace. The Health Communication Unit (THCU) at the [Centre for Health Promotion](http://www.utoronto.ca/chp/) (<http://www.utoronto.ca/chp/>), University of Toronto, is one of 22 members of the [Ontario Health Promotion Resource System](http://www.ohprs.ca/) (<http://www.ohprs.ca/>) funded by Health Promotion & Wellness, Public Health Branch, Ontario Ministry of Health and Long Term Care to increase the capacity of health promotion practitioners to effectively promote health in Ontario communities. THCU outlines 9 conditions for successful workplace health promotion initiatives based on a review of the literature²¹, all of which are built into the models listed above to a certain extent:

1. Senior management commitment and participation is absolutely critical
2. Participatory planning (involve employees in the process)
3. Primary focus is on employees' needs
4. Optimal use of on-site resources
5. Integration (develop an overall workplace health policy aligned with companies' mission, vision, and values)
6. Recognition that a person's health is determined by an interdependent set of factors (programming should address more than one aspect of a person's life e.g. a healthy weights program could take into account healthy eating, physical activity, and body image).
7. Tailoring to the special features of each workplace environment
8. Evaluation
9. Long-term commitment

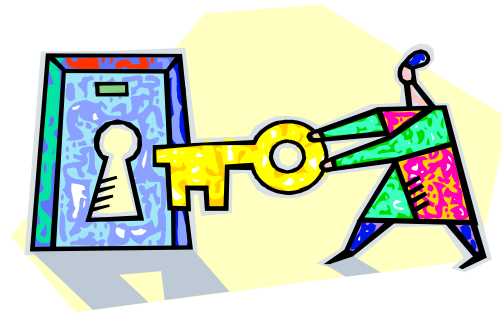
(For more details on the conditions, [click here](http://www.thcu.ca/Workplace/res) (<http://www.thcu.ca/Workplace/res>).

According to Pelletier (1991), other conditions for success include²²:

- Setting program goals and objectives
- Easy access to the program and facilities
- Incentives for participation
- Respect and confidentiality
- Corporate culture that encourages health promotion
- Helping management meet their business needs in a cost effective way.

Regardless of the model you choose, your first step will be to secure commitment from management, employees, and unions. Getting commitment can be challenging, particularly from management. The next chapter is designed to give you strategies on how to get buy-in for comprehensive workplace health promotion.

Chapter 2: How Do I Get Buy-In?



How Do I Get Buy-In?

You may be convinced that comprehensive workplace health promotion is something your workplace should adopt. You may already know the healthy workplace model (see page 8) that is most appropriate for your workplace. You may be ready, but is your workplace? If management does not see the value of comprehensive workplace health promotion you will not be able to get very far even if employees buy into the concept. Likewise, if workplace health is seen as one person's or one department's responsibility²³, you will not have the support needed to make comprehensive workplace health promotion happen in your workplace. Therefore, you need to get buy-in.

For the purposes of this guide, the term “buy-in” refers to getting support for comprehensive workplace health promotion. Obtaining buy-in is an ongoing endeavour that utilizes different strategies. Buy-in is required from key stakeholders in your workplace such as management, human resources, employees and unions.

The first step is to understand what you need buy-in for. Obviously, commitment to comprehensive workplace health promotion is necessary. Companies may like the concept of workplace health as a philosophy, but some may become defensive when it comes to committing the time and resources needed to make it happen. Therefore, before you concentrate on the strategies you want to use to get buy-in, you may want to be familiar with the healthy workplace model you want to propose and the conditions for success (see page 9) so that you know the specifics you are asking the key stakeholders in your workplace to commit to.

What Strategies Can I Use To Get Buy-In?

“There is nothing magic about this; it’s the people that make things happen. Getting resources and support from these people is our problem and challenge.”²⁴

As mentioned earlier, you need to get buy-in from all levels of the organization (management, human resources, employees, unions) for comprehensive workplace health promotion. The strategies to get buy-in can include:

- **Demonstrate the Need.** Create and continually build the business case for comprehensive workplace health promotion. **The business case** is the proposal you make to management, human resources, employees and unions to get commitment and participation to move forward with comprehensive workplace health promotion. The business case includes evidence that supports the benefits of doing comprehensive workplace health promotion and the costs of doing nothing.

To build the business case, understand the business goals of your company and demonstrate how comprehensive workplace health promotion can assist in meeting these goals in a language meaningful to them^{24, 25}. Use aggregate medical and human resource data as well as information from the research literature and case studies to emphasize the benefits of moving forward^{24,26}.

The following resources and websites can help you write your business case and lead

you to compelling evidence to include in your business case:



Tools for Writing the Business Case

2. [The Case for Comprehensive Workplace Health Promotion: Making "Cents" of a Good Idea](http://www.thcu.ca/Workplace/documents/business%20case%20v102.pdf)
(<http://www.thcu.ca/Workplace/documents/business%20case%20v102.pdf>)
3. [A Four Step Guide To Building the Business Case for a Healthy Workplace](http://www.nqi.ca/nqistore/product_details.aspx?ID=45) (The guide is available through the [Workplace Resource Library](#) or through http://www.nqi.ca/nqistore/product_details.aspx?ID=45.)
4. [Investing in Comprehensive Workplace Health Promotion](http://www.nqi.ca/nqistore/product_details.aspx?ID=46) (The guide is available through the [Workplace Resource Library](#) or through http://www.nqi.ca/nqistore/product_details.aspx?ID=46)
5. [A Discussion Paper on Workplace Health](http://www.ccih.ca/docs/CCIH-Discuss_Workplace.pdf)
(http://www.ccih.ca/docs/CCIH-Discuss_Workplace.pdf)
6. [Health Promotion Programs At Work: A Frivolous Cost or a Sound Investment?](http://www.conferenceboard.ca/documents.asp?rnext=461)
(<http://www.conferenceboard.ca/documents.asp?rnext=461>)
7. [Top Resources for Making the Business Case](http://www.thcu.ca/Workplace/res)
(<http://www.thcu.ca/Workplace/res>)
8. [Making the Case for Health Promotion: Ten Strategies for Selling Health Promotion to Senior Management](http://www.welcoa.org/freeresources/pdf/making_the_case.pdf)
(http://www.welcoa.org/freeresources/pdf/making_the_case.pdf)

Where to Find the Information You Need

Absenteeism

- ❑ [Absenteeism](http://www.hc-sc.gc.ca/ewh-semt/alt_formats/hecs-sesc/pdf/pubs/occup-travail/work-travail/absenteeism/absenteeism_e.pdf) (http://www.hc-sc.gc.ca/ewh-semt/alt_formats/hecs-sesc/pdf/pubs/occup-travail/work-travail/absenteeism/absenteeism_e.pdf)
- ❑ [Work Absences](http://www.statcan.ca/Daily/English/020704/d020704h.htm) (<http://www.statcan.ca/Daily/English/020704/d020704h.htm>)

Aging Workforce

- ❑ [Aging Workforce](http://www.hrsdc.gc.ca/en/lp/spila/wlb/aw/01aging_workforce.shtml) (http://www.hrsdc.gc.ca/en/lp/spila/wlb/aw/01aging_workforce.shtml)

Productivity

- ❑ See 'Healthy Workplaces and Productivity: A Discussion Paper,' June 6, 2003, available at www.cprn.org.

Where to Find the Information You Need Cont'd

Retention/Recruitment

- [Demographics and Destiny: Winning the War for Talent](http://www.watsonwyatt.com/research/resrender.asp?id=W-233&page=1)
(<http://www.watsonwyatt.com/research/resrender.asp?id=W-233&page=1>)
- [HR Matters Executive Summary](http://www.hrmattershamilton.ca/reports/hrmattersexecsummary.pdf)
(<http://www.hrmattershamilton.ca/reports/hrmattersexecsummary.pdf>)

Stress & Mental Health

- [Why Mental Health In the Workplace Matters](http://www.mentalhealthworks.ca/facts/why_it_matters.asp)
(http://www.mentalhealthworks.ca/facts/why_it_matters.asp)
- [The Economic Burden of Mental Health Problems in Canada](http://www.phac-aspc.gc.ca/publicat/cdic-mcc/22-1/d_e.html)
(http://www.phac-aspc.gc.ca/publicat/cdic-mcc/22-1/d_e.html)
- Best Advice on Stress Risk Management in the Workplace
[Part 1](http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/stress-part-1/index_e.html)
(http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/stress-part-1/index_e.html)
[Part 2](http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/stress-part-2/index_e.html)
(http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/stress-part-2/index_e.html)
- [Building Capacity through Investing in Whole People doing Whole Jobs](http://www.nqi.ca/nqistore/product_details.aspx?ID=47)
(http://www.nqi.ca/nqistore/product_details.aspx?ID=47)
- [Fairness in Families, Schools, and Workplaces](http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/fairness-equite/index_e.html)
(http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/fairness-equite/index_e.html)
- [Canadian Institute of Stress](http://www.stresscanada.org/)
(<http://www.stresscanada.org/>)

Work-Life Balance

- [Juggling Home and Work](http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/juggling_home_work/index_e.html)
(http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/juggling_home_work/index_e.html)
- [Enjoying Work: An Effective Strategy in the Struggle to Juggle?](http://www.statcan.ca/english/indepth/11-008/feature/star2001061000s2a02.pdf)
(<http://www.statcan.ca/english/indepth/11-008/feature/star2001061000s2a02.pdf>)
- [Work-Life Balance](http://www.sdc.gc.ca/asp/gateway.asp?hr=en/lp/spila/wlb/01home.shtml&hs=wyi)
(<http://www.sdc.gc.ca/asp/gateway.asp?hr=en/lp/spila/wlb/01home.shtml&hs=wyi>)
- See 'Work-Life Balance in the New Millennium: Where Are We? Where Do We Need to Go?', October 2001, available at www.cprn.org.

Useful Statistics

Productivity

- Evidence indicates causal links between working conditions, interventions to create a healthier workplaces, employee health and workplace productivity. *Source: Lowe, G. (2003). Healthy Workplaces and Productivity: A Discussion Paper. Minister of Public Works and Government Services Canada.*
- According to a FGIworld study, 53% of CEOs and 52% of working Canadians agree that their workplaces are not as productive as they should be. The reason? Sixty six percent of CEOs and 71% of working Canadians attributed “stress, burn-out or other physical and mental health problems.” *Source: Productivity through Health: A FGIworld CEO Study on Health and Productivity in Canadian Industry.*
- Employees in good health are 20% more productive than those in poor health – this is comparable to a productivity reduction of one day per week. *Source: European Health and Productivity Management, May 2004. Volume 1, No. 4. Retrieved July 2005 from http://www.vielife.com/our_company_pdf/e-HPMNewsletter4.pdf.*
- Burton et al. (1999) found that an employee’s productivity decreased as the number of health risks increased. *Source: Burton, W., Conti, D., Schultz, A., & Edington, D. (1999). The role of health risk factors and disease on worker productivity. JOEM, 41 (10), 863-877.*

Absenteeism

- Absenteeism rates have increased from 7.4 to 8.5 days per year for each full-time worker. *Source: Statistics Canada (2002). Work Absences. The Daily, Thursday July 4, 2002. Retrieved November 11, 2002 from <http://www.statcan.ca/Daily/English/020704/d020704h.htm>.*
- According to Watson Wyatt, the average direct cost of employee absenteeism in Canada is \$3,550 per employee per year. Combined with indirect costs, employee absenteeism accounts for 17% of payroll. *Source: Watson Wyatt. (2000). Cost of employee absenteeism up, says Watson Wyatt study. Retrieved November 10, 2003 from <http://www.watsonwyatt.com/news/press.asp?ID=6980>.*
- The Canadian Policy Research Network estimates that work/life conflict absences cost Canadian employers about \$3 billion each year. *Source: Canadian Research Policy Network (2001). New Data Show Increasing Conflict Between Work and Rest of Life. Retrieved July 19, 2005 from <http://www.cprn.com/en/doc.cfm?doc=76>.*
- Employees who have three or more risk factors (i.e. they are physically inactive, they smoke, have higher alcohol consumption, and are overweight) are more likely to have 50 % more absences from work compared to employees who don’t have these risk factors. *Source: Shain, M., & Suurvali, H. (2001). Investing in Comprehensive Workplace Health Promotion. Centre for Addiction and Mental Health.*

Useful Statistics Cont'd

Presenteeism

- According to AON Consulting, presenteeism is when employees go to work but aren't as productive as usual because they are sick or injured. The Employers Health Coalition of Tampa, Fla. analyzed 17 diseases and found that lost productivity from presenteeism cost 7.5 times more than absenteeism. *Source: Employers Health Coalition of Tampa, Fla. (1999) as cited in Lowe, G. (2002). Here in body, absent in productivity. Retrieved from www.hrreporter.com.*

Injuries

- The average lost-time injury in Ontario costs \$59,000. WSIB costs account for nearly \$12,000 of that figure, and indirect costs make up the rest. A business operating on a 6 per cent profit margin would need nearly a million in sales to make up for the \$59,000 lost from a single injury. *Source: Workplace Safety & Insurance Board. Retrieved July 19, 2005 from <http://www.wsib.on.ca/wsib/wsibsite.nsf/public/BusinessResultsHealthSafety>.*

Benefits Costs

- According to the Institute for Work & Health, the direct payroll financed claims costs for disability were about 11.1 Billion in Canada. *Source: Institute for Work & Health. Retrieved July 22, 2002 from www.iwh.on.ca.*
- Disability represents 4 to 12 % of payroll costs in Canada. *Source: Wilson, Joffe & Wilkerson, 2002 as cited at www.mentalhealthworks.ca.*
- Employer sponsored benefits are expected to increase in the double-digits. *Source: Price, C. (2005). Benefits costs continue climbing at double-digit rates. BENEFITS CANADA. Retrieved July 20, 2005 from <http://www.benefitscanada.com/>.*
- Obese employees claimed 15% more in drugs than other employees (average of \$156 vs. an average of \$133) and 55% more for short term disability payments related to obesity compared to other claimants. Long term disability payments increase – obese claimants received approximately \$49, 100 per disability. This represents a cost difference of \$7,600 when compared to other claimants. *Source: Kogon, D., Gaisford, J., & Hutzul, T. (1999). Obesity's cost. BENEFITS CANADA. Retrieved September 2003 from www.benefitscanada.com.*

Useful Statistics Cont'd

Return-On-Investment (ROI)

- In a recent Canadian study, participants were able to reduce their cardiovascular risk factors by the end of a wellness program. ROI calculations for comprehensive workplace wellness programs ranged from \$1.64 to \$3.98 (for every dollar spent). *Source: Medavie Blue Cross. (2001). Workplace wellness programs benefit employers and employees alike—study shows. Retrieved October 28, 2002, from <http://www.medavie.bluecross.ca/wabccnew.nsf/c5635deb746d346b8425682300687407/5f3f0d72b1a7e0fd84256b0400667026?OpenDocument>.*

Some examples of Canadian companies that have benefited from investing in a healthy workplace include:

- BC Hydro has an estimated ROI of \$3 for every dollar spent on employee health each year. *Source: Davie, S. (2000). Making the business case for wellness. BENEFITS CANADA. Retrieved October 28, 2002 from www.benefitscanada.com.*
- DaimlerChrysler saves over \$7 million in health care costs each year through their wellness program. *Source: Corporate Leadership Council. (2002). ROI of Wellness Programs.*
- At Telus BC in Burnaby, absenteeism in fitness members is 28% less than the corporate average. *Source: McKeown, G. (2002). Healthy Workplace: A Sound Business Strategy and a Good Investment: A Four Step Guide to Building the Business Case for a Healthy Workplace. As cited in Canadian Council on Integrated Healthcare. A Discussion Paper on Workplace Health. Retrieved from <http://www.ccih.ca/docs/CCIH-ADiscussionPaperonWorkplaceHealthFinal.pdf>.*
- Management at MDS Nordion confirms that their workplace wellness programs have boosted productivity and employee satisfaction. *Source: Health Canada. Business Case Study of the Month: The MDS Nordion Story. Retrieved October 24, 2002 from http://www.phac-aspc.gc.ca/pau-uap/fitness/work/case_studies_e.html*
- The hours lost due to short and long term disability have decreased by 42% since 1999 at Vancouver International Airport. The safety manager attributes this reduction to their wellness program. *Source: Lochhead, C. (2002). Case Study: Vancouver International Airport Authority. The Canadian Labour and Business Centre. Retrieved from <http://www.clbc.ca/files/CaseStudies/vancouverairport.pdf>.*
- American Express Canada Markham, ON facility notes that employee turnover has significantly reduced. In 1998 the attrition rate was 40.31%. By 2000, the attrition rate was 22.99%. *Source: DiGiacomo (2002). Case Study: Healthy Workplace Programs at American Express Canada. The Canadian Labour and Business Centre. Retrieved from http://www.clbc.ca/files/CaseStudies/CNAC2002_e.pdf.*
- Employees at Pazmac Enterprises report their participation in workout programs through work made them feel healthier and more alert on the job. *Source: Lochhead, C. (2002). Case Study: Vancouver International Airport Authority. The Canadian Labour and Business Centre. Retrieved from <http://www.clbc.ca/files/CaseStudies/pazmac.pdf>.*

Other strategies that can be used to facilitate buy-in include:

- ❑ **Establish Relationships.** Build rapport with management and others who influence the health of employees in your workplace so that you can understand what values/benefits are important to them²⁴.
- ❑ **Communicate.** Keep management informed of how comprehensive workplace health promotion can be a solution to challenges in business²⁷. Periodically circulate articles on pertinent issues your company is facing, case studies, and program evaluation results, with the key findings and recommendations highlighted²⁴.
- ❑ **Get Outside Assistance.** Consider bringing in a speaker for assistance with selling the concept of comprehensive workplace health promotion. You may want to hire a consultant or perhaps ask a senior executive from another company that is recognized for their business success and known for their efforts to create a healthy work environment to speak to management. Another option is to visit a healthy workplace. Having a tour of their facility to experience the change in culture may influence management to make changes in their own work environment.
- ❑ **Involve the Key Players.** If your workplace is unionized, you will want to involve them as early as possible in the process. Having the support of the Joint Health & Safety Committee or Occupational Health Nurse can also help convince management that comprehensive workplace health promotion is something worth pursuing.



Where to Look For More Ideas on How to Get Buy-In

1. [Capturing Senior Level Support](http://www.welcoa.org/wellworkplace/index.php?cat=2&page=7)
(<http://www.welcoa.org/wellworkplace/index.php?cat=2&page=7>)
2. Cialdini, R. (1993). [Influence: The psychology of persuasion](#). (To reserve a copy from the Hamilton library, visit <http://www.hpl.ca/>.)
3. Ziglar, Zig. (1991). [Selling 101](#). (To reserve a copy from the Hamilton library, visit <http://www.hpl.ca/>.)
4. Ziglar, Zig. (1984). [Secrets on Closing the Sale](#). (To reserve a copy from the Hamilton library, visit <http://www.hpl.ca/>.)
5. Chapman, L. (1997). Securing support from top management. *The Art of Health Promotion*. Vol. 1, No. 2, pp.1-8.
6. Network with others. Their experiences may be helpful.
7. The healthy workplace model you choose may have useful suggestions.

Where Is Your Workplace?

The way you use these strategies may vary depending on where your workplace is on the continuum of involvement in workplace health.

According to a Conference Board of Canada Report, most Canadian employers are involved in workplace health issues to some degree²⁸. The report outlines four levels of employer involvement:

A Continuum of Involvement²⁹

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Compliers

Tinkerers

Integrators

Community leaders

Using the continuum of involvement framework outlined in the Conference Board of Canada Report, take a moment to assess where your workplace is on the continuum²⁸. Is your workplace a:

- ❑ **Complier** (engaged only or primarily in activities that are required through legislation e.g. occupational health and safety)²⁸
- ❑ **Tinkerer** ("tinker" with workplace health and wellness programs, introducing programs aimed at the health of their workers or making adjustments in the types of programs and policies they have in place. These programs are usually aimed at the early detection or minimization of illness or injury once it has developed)²⁸
- ❑ **Integrator** (take a more proactive approach by seeking to address the physical, psychosocial and individual factors affecting health simultaneously. They have mechanisms in place to bring together key individuals from within and outside the organization to address health issues. And they entrench the concept of employee and organizational health is part of their vision, mission, and values statements)²⁸
- ❑ **Community Leader** (programs also address the linkages between the various determinants of worker health and look outwards to the impact on their communities. They seek to manage work in ways that broadly promote health)²⁸

If your response was **Complier**, then your workplace is probably not thinking about comprehensive workplace health promotion. In fact, the key stakeholders in your workplace may not be aware of what it is. In this context, you will need to provide some education³⁰ and communicate the value comprehensive workplace health promotion could add to your company. To do this, you will need to persuade management that there are problems that require fixing^{26,28}. One of the challenging tasks you face is convincing them of their responsibility as an employer to act. Part of your approach should include collecting organizational data such as absenteeism, disability, turnover, cost of benefits, and employee interest²⁶. Find out what management's key issues are and ensure you are addressing them in your business case^{24,25}. You can then pitch comprehensive workplace health promotion as the solution. If you have already tried this

approach with no success, it is important to keep healthy workplace on the agenda even though they are not ready²⁴. Keep the dialogue open to raise awareness and build rapport with the decision-makers in your workplace²⁴.

If your response was **Tinkerer**, it is likely that your workplace tends to be more reactive than proactive when it comes to health. Your workplace may understand the importance of personal health practices and occupational health and safety, but may need some education specific to the psychosocial environment. You may want the business case to emphasize the potential for cost avoidance through being more proactive using comprehensive workplace health promotion. If your workplace is not ready to take a comprehensive approach, communicate the need to management on an ongoing basis²⁴.

If you classified your workplace as an **Integrator** or **Community Leader** the needs for your workplace are very different from the Complier and the Tinkerer. You may need to solicit ongoing support to justify comprehensive workplace health promotion to those who question how it adds value to your company or to get buy-in to develop or adopt cutting edge programs to maintain a healthy workplace. Try to get senior management visible in the community²⁴. This gives them an incentive to continue comprehensive workplace health promotion if they are seen as a local success story and example to other workplaces. Challenge those who question the value of comprehensive workplace health promotion to “test it out”²⁴.

Regardless of where your workplace is on the continuum, you need to be knowledgeable when presenting your business case or in discussions with those you are trying to persuade:

- ❑ **Define** comprehensive workplace health promotion. Be clear about what you are proposing and be consistent. Emphasize that this approach is intended to build on strengths and identify opportunities for improvement. Also, this framework encourages workplaces to communicate and collaborate internally to eliminate redundancies and increase effectiveness of initiatives.
- ❑ **What's In It For Them.** The answer to this will depend on who you are targeting. Key targets within your workplace include management, human resources, unions, and employees. Cost avoidance, retention and recruitment of staff, and increased job satisfaction are examples of potential benefits of comprehensive workplace health promotion. You will need to figure out what will make your target sit up and take notice²⁴.
- ❑ **Resources Needed.** Management will want to know what is needed to build a healthy workplace. Your list of resources should include staff time, a budget, management commitment and support to respond to identified needs as well as their participation in initiatives²⁴.
 - ❑ You may want to research community partners (e.g. City of Hamilton, Public Health Services) that will offer in-kind contributions to the development of comprehensive workplace health promotion in your workplace.
 - ❑ If you want to access the expertise of a consultant or facilitator, you will want to demonstrate how they add value to the process.

- ❑ **Benefits of comprehensive workplace health promotion** (see pages 6-7). Your workplace will probably want to know who else is doing comprehensive workplace health promotion and if they have had success. Therefore, you may want include case studies of workplaces that have evaluated their initiatives^{24,26}.
- ❑ **Timeframe.** Some companies have unrealistic expectations regarding outcomes for comprehensive workplace health promotion. Healthy workplaces do not happen overnight²⁴. You may need to point out that there may be an increase in costs in the short term, but over the long term comprehensive workplace health promotion will help your workplace avoid costs.

Common Challenges to Comprehensive Workplace Health Promotion

To help you respond to those who question the value of comprehensive workplace health promotion, counter-arguments to common challenges are outlined below:

Employees are responsible for their own health

Responsibility is not the issue. Employers still pay for the cost of unhealthy employees through higher insurance premiums, absenteeism, and decreased productivity. When employee well-being is overlooked, there is no way that high performance can be sustained³¹.

Employees don't want to change

On the contrary, when surveyed, 69% of Canadians aged 12 or older intended to change their health behaviours³². However, barriers such as lack of time, knowledge and facilities inhibit their ability to make or sustain healthy behaviours³³. Offering programs and activities at or through work that are targeted to employee needs and supported by management can help decrease these barriers.

It costs too much

Costs can be reasonable by partnering with local health organizations, fundraising, or cost sharing the price of programs with employees. There may be services available that your workplace is already paying for but hasn't accessed such as presentations from your Employee Assistance Program. The important point to remember is that employers will still have to pay the price for unhealthy employees even if they do nothing.

We don't have a health or wellness coordinator in our company

Moving forward with comprehensive workplace health promotion doesn't require a health or wellness coordinator position. Management, human resource and occupational health and safety professionals can champion the health and wellness piece with assistance from interested volunteers in the organization. Existing healthy workplace models and other resources can assist them in moving forward. When more support is necessary, the expertise of a consultant can be utilized.

We already have a health and wellness program

If you think having benefits and flex-time are enough, think again. Health and wellness needs to encompass the social environment and personal resources-- not just health practices and the physical environment. Health and wellness also need to be integrated with the vision, mission and values of the organization^{233,33}. Taking a comprehensive approach increases your chances of success.

Show me the ROI

Unrealistic expectations concerning financial return-on-investment are common. Cost containment or reductions evolve slowly over a period time-- perhaps five or ten years²⁵. However, benefits such as employee participation and satisfaction are generally realized in the short-term and provide the foundation for financial return-on-investment down the road.

Evaluate Your Efforts

After each "buy-in" attempt, you will want to assess how you did. Did you get staff time to proceed? Were any funds allocated? Did an advocate from senior management emerge to champion the cause? If you didn't get the support you were looking for, keep trying. Think of your efforts as paving the road to commitment. If you obtained enough support to move forward, congratulations! The following chapter can help guide you through the next steps.

Chapter 3: What's Next?



What's Next?

The level of support you have obtained from management will influence your next steps along with the healthy workplace model (see page 8) you have selected. More than likely, your next step will include forming a Health & Wellness Committee.

Is Having a Health & Wellness Committee Absolutely Necessary?

The argument could be made that forming a Health & Wellness Committee is so imperative that no healthy workplace initiatives should be attempted without one. Strycker et al (1997) state that such committees are felt to be important for implementing healthy workplace initiatives but that little research has established what makes them successful³⁴.

Many companies boast that their committees are extraordinarily productive. Although little research has been published on Health & Wellness Committees and outcomes, there is an association between number of hours spent by committee members and program success³⁵. It is not known if committees are essential for employee participation.

Some workplaces choose not to form a Health & Wellness Committee in favour of using an existing Joint Health & Safety Committee. The main function of a Joint Health & Safety Committee is to ensure that your workplace complies with health and safety legislation. According to O'Grady (2000), Joint Health & Safety Committees can play an important role in improving workplace health and safety³⁶. The established structure and function of the Joint Health & Safety Committee makes it an appealing alternative to some workplaces, whereas others prefer to create a Health & Wellness Committee. Each workplace is different and will have to determine what is best according to their needs.

Forming the Health & Wellness Committee

The Health & Wellness Committee includes members that represent the various types of jobs and people at a workplace (e.g. senior and middle management, labour representatives, human resources, clerical, etc.). Committees ranges in size; 6 to 12 members are common. If you have a large workplace with multiple locations, you may want to consider having separate committees at each site. The other option is to have representation from each worksite location on the committee.

A member of the Joint Health & Safety Committee should be on the Health & Wellness Committee to act as a liaison between the two groups. If this is not feasible, there should definitely be communication and coordination between the two groups to maximize health and safety opportunities and minimize redundancies.

Strycker et al (1997) found that successful committees have a committed chair, active members, guidance and structure when starting out³⁴. These researchers also claim that Health & Wellness Committees appear to work best when they are made up of “doers”; start out with highly visible, easily managed activities; are given step-by-step instructions for conducting activities; solicit employee feedback and requests; and form ties with other worksites and community agencies.

As such, you will want to designate someone as “chair” of the committee and have each member take the lead on the different initiatives. In this way, work can be shared by all members.

Once the Health & Wellness Committee is formed, it is important to set terms of reference for the Committee members (e.g. roles; frequency and duration of meeting; how decisions will be made) and establish a goal statement to communicate the intention and direction of the committee to employees. Some companies also create a logo for their Committee, which is later used on all communication and promotional materials. This helps with branding and building awareness of the committee.

Recruiting New Members

Some people lean towards having a committee of volunteers rather than appointees. They argue that appointees may not be as devoted as volunteers. Researchers in one study took this position by suggesting that committees made up of volunteers would be most likely to last and have enthusiasm³⁷. Contrary to the researchers’ hypothesis however, results showed it made no difference whether committees were made up of self-volunteers, were appointed by a contact person, or were recruited as volunteers. Similarly, there was no association between volunteer, appointed, or recruited committee members and subsequent attendance at meetings, participation in committee work, or representativeness of the committee. However, the researchers of this study admit that their finding is inconsistent with other research that found it difficult to form committees or difficult to obtain representation. Given the fact that there is very little research on this issue, you will have to find out what works best in your workplace through trial and error.

The committee may want to informally put a call out for new members to all employees, briefly highlighting what is involved with being on the committee. Invite those who are uncertain to attend a meeting so that they can get a better sense of what to expect. Another option is to formally request new members and have them go through an application process. If there is not a response from putting a call out to all employees, then have the existing committee brainstorm individuals to approach and ask them personally to be involved.

When recruiting new members, consider who is needed or missing on the committee. In addition to having members that represent the various types of jobs and people in your workplace, it’s also helpful to have people on the committee with varied expertise (i.e. creativity, promotional skills, motivational skills, planning skills, etc.) Include these details in the call out to employees or approach individuals that meet the profile the committee is looking for.

It is important to be realistic about the membership of the Health & Wellness Committee— your committee will change with new members. Change can be good as new members bring fresh ideas and energy to the table.

Motivating the Health & Wellness Committee

There will definitely be times when members of the committee need motivating. If your committee is just getting started, they may be unclear about their role and the direction of the committee. Initial enthusiasm can be maintained by:

- Asking the members what they would like to get out of being on the committee and aim to incorporate as many committee members' wishes as possible.
- Figuring out your direction as a committee and the role of each member. This process will provide a clear purpose for being involved and identify how they can contribute.
- Meeting on a regular basis (i.e. monthly) with times that work for everyone. Pre-book meetings so that people have the time blocked off, but be flexible to change if the schedule no longer works.
- Legitimizing committee members' roles as an important function in the company as opposed to a volunteer group (i.e. have role put in member's Performance Appraisal and encourage their managers to commend their involvement).
- Giving committee members access to training opportunities either by having a guest speaker during a meeting or attending workshops in the community on healthy workplace topics. This is important particularly if members feel they are interested in being involved but do not really understand the concepts behind healthy workplace initiatives.

For a mature Health & Wellness Committee (i.e. the committee and members have been in place for a while) that seems to have lost momentum, try the following to re-energize and motivate the members by:

- Finding out if members are still interested in being on the committee. If they are, try to identify what is making the group stagnant. Maybe their workload is intense and the committee needs to scale back on their activities or make use of project groups with people outside the committee. Perhaps conversations need to take place with certain managers to stress the value of their staff being involved on the committee. Or, the direction of the committee may need to be reviewed to ensure that it still aligns with members' wants and needs. If the focus of the committee is no longer clear, revisit the goals.
- Celebrating achievements and look for opportunities to have committee members recognized for their contribution (i.e. apply for an external award, treat the committee to lunch, incorporate committee recognition at a staff recognition event).
- Having the occasional creativity session can help the committee generate new ideas—they may be bored with the status quo or may struggle with what to attempt next.
- Fostering camaraderie among members.
- Advocating for committee members to have the responsibility and authority to make changes in the workplace without the fear of reprimands from others. At the very least, define the parameters of what they are able to do as a committee. Perhaps the role of the

committee is to act as a non-partisan group whose recommendations are heavily considered by management.

- Creating opportunities for personal and committee growth (i.e. training, learning new skills, taking on exciting challenges).
- Designating working spaces (i.e. meeting room) and resources (i.e. operational budget, bulletin board, section on the company intranet) so the committee feels acknowledged.



Notes About Integration

Integration is one of the key conditions for a successful workplace health promotion initiative (see page 9). Integration means workplace health promotion strategies should be integrated into a company's regular management practices and eventually should be formally incorporated into the company's corporate plan³⁸. This includes having an overall wellness policy²¹ and acknowledging the value of people in the vision/mission statement of the organization².

For workplaces just starting comprehensive workplace health promotion, integration may not be feasible. If this is the case for your workplace, consider the goal statement of the Health & Wellness committee as a starting point for integration. Creating a wellness policy and aligning the vision/mission statement based on the philosophy of comprehensive workplace health promotion can be addressed as you move forward.

Where Do Employee Assistance Programs Fit?

Employee Assistance Programs, or EAPs, are a benefit provided by employers to their employees and family members with the aim for improving employee health and organizational well-being well reducing costs associated with absenteeism, disability claims, workplace accidents or low productivity. EAP services typically include short-term counselling assistance provided by professionals, telephone and web-based information and support services, and wellness and training programs that focus upon prevention and health promotion. In addition, EAPs can offer specialized services such as on-site trauma response, management consultation, mediation/alternative dispute resolution, and outplacement services³⁹.

If your workplace already has an EAP, employees and their families can access assistance for a wide range of personal challenges. EAP usage data can be collected during the needs assessment process (see pages 28-29) as an indicator of the current state of your workplace. EAP can also be promoted and utilized in planning and implementing workplace health initiatives.

Coordinating the Needs Assessment Process

At this point, many Health & Wellness Committees are eager to begin implementing programs or activities. However, it is imperative that they refrain until the needs of the workplace have been assessed and the findings translated into a plan of action. Typically the responsibility of coordinating the needs assessment process falls to the Health & Wellness Committee. A **needs assessment** is a process used to identify the gap between what exists and what is desired. This may also be called a gap analysis or situational assessment. The needs assessment process should reveal the actual needs, current practices and preferences of employees. In choosing tools or techniques for the needs assessment process, the Health & Wellness Committee will want one that is valid (measures what its supposed to measure) and reliable (measures the same thing consistently). Preferably the Health & Wellness Committee will select tools or techniques that identify employees' needs and preferences in terms of the 3 avenues of influence (see page 5): Health Practices, Physical Environment, and Social and Personal Resources.

Tools or techniques that can be used as part of a needs assessment include surveys, focus groups, audits and human resource data analysis. The benefits of conducting a needs assessment include:

- ❑ Identify employee and organizational needs
- ❑ Provide justification for programming and financial support
- ❑ Consulting employees about their needs fosters employee's ownership and commitment to programming
- ❑ Information collected can be used as baseline data to measure changes at a future date

Tips for the Needs Assessment Process

Assessing the Needs of a Changing Workforce

- ❑ This newsletter provides a rationale for assessing the needs of your workplace. Includes articles specific to nutrition, physical activity, and smoking policies and programs. Available in hardcopy by e-mailing workplace@hamilton.ca or calling 905-546-2424 ext. 3065 or 7218.

[Workplace Health: Discovering the Needs](http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/health-sante/index_e.html)

(http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/work-travail/health-sante/index_e.html)

- ❑ A guide for the committee or co-ordinating group that has been given the responsibility for planning workplace health programs. The guide outlines a step-by-step process for planning the needs assessment so that it is as effective as possible.



How the Health & Wellness Committee proceeds with the needs assessment process depends on the resources available (i.e. staff time and expertise, statistical software, a budget for workplace health promotion initiatives) and management support to respond to employee needs identified through the needs assessment. The Health & Wellness Committee will need to weigh the pros and cons in selecting tools and techniques. For instance, some tools are not quantifiable. Members of the Health & Wellness Committee will want to discuss issues such as whether or not they want to benchmark their organization to others in their respective industry or if they have the resources to meet the demands that will arise.

The Health Communication Unit (THCU) at The Centre for Health Promotion Department of Public Health Sciences, University of Toronto has developed a Catalogue of Situational Assessment Tools that contains information about 29 recommended and promising situational assessment tools in six categories: needs assessments, health risk appraisals, workplace audits, employee interest surveys, current practice surveys, and organizational culture surveys. To view the catalogue, go to <http://www.thcu.ca/Workplace/sat/index.cfm>.

Creating a Health & Wellness Action Plan

The results of the needs assessment will provide the Health & Wellness Committee with a picture of what is going on in your workplace in terms of needs, current practices and preferences of employees. The results should also identify employees' needs and preferences in terms of the 3 avenues of influence (see page 5): Health Practices, Physical Environment, and Social and Personal Resources. The Health & Wellness Committee can translate the needs assessment results into a Health & Wellness Action Plan. A **Health & Wellness Action Plan** is a detailed description of how employee and organization needs are going to be addressed.

The value of the Health & Wellness Action must not be understated. Without a written plan of action, the Health & Wellness Committee jeopardizes their survival in the organization. By having an action plan, the Health & Wellness Committee can justify resource utilization and demonstrate accomplishments when objectives are achieved. Furthermore, with a Health & Wellness Action Plan the foundation is laid for future evaluations (see pages 29-32).

It is often said that what gets measured matters, and without written objectives and an evaluation plan, there is no framework for measurement.

Features of the Health & Wellness Action Plan should include:

- Objectives to be achieved.
- Programs or activities that will be offered to employees as a means to achieve the objectives. To get a better idea of the types of programs or activities you could use, read the section on Implementing Programs (pages 33-35).
- How the programs or activities will be evaluated. For more information on evaluation, read the section on Coordinating Evaluations (see page 35-37).
- The timeframe in which programs or activities are taking place.

- Estimated cost of programs or activities.
- The individual(s) on the Health & Wellness Committee responsible for taking the lead.

To view a sample structure, see page 32.

How to Write Objectives

An objective is a brief statement specifying the desired impact, or effect of a health promotion program (i.e. how much of what should happen to whom by when)⁴⁰. The Health & Wellness Committee, based on the results of the needs assessment process, typically generate the objectives in the Health & Wellness Action Plan. Generally speaking, the objectives on the Health & Wellness Action Plan remain the same until they are evaluated; however, the activities and timelines may be revised in order to accommodate the ever-changing needs of the workplace.

- To increase by 5% the number of respondents who describe their health as good/excellent by June 2008.
- To decrease by 12% the number of respondents who feel their present level of activity is unsatisfactory by August 2010.
- To investigate the possibility of offering a yearly health and wellness subsidy of \$100 for each employee by October 2009.
- To implement the Eat Smart! Cafeteria Program by September 2011.
- To offer 6 educational opportunities to all employees on health topics by May 2007.

Helpful Hint: **A good objective is SMART⁴⁰**

Specific (clear and precise)

Measurable (amenable to evaluation)

Appropriate (i.e., realistic)

Reasonable (i.e. reasonable)

Timed (specific time frame provided for achievement of objective)

To help you write objectives, try using the framework below:

To (check one only):

- increase
- decrease
- investigate
- implement
- other (specify:)

by _____ % _____

(what¹)

in/for (whom²)

by (when)

¹ E.g. awareness, behaviour, environmental support, policy, etc.

² E.g. management, all employees, shiftworkers, etc.

Example Structure for Health & Wellness Action Plan

Objectives	Programs or Activities	Evaluation	Timeframe	Estimated Cost	Responsibility

Implementing Programs or Activities

If your workplace has offered very little in terms of health and wellness, a good place to start is to focus on awareness raising and educational/skill building opportunities. The goal of **awareness raising** is to provide information, increase knowledge and interest. Awareness raising includes making health information available to employees through posters, brochures, newsletters, e-mail messages, paycheque inserts and displays.

Education and skill building opportunities help employees develop new skills to change and maintain health behaviours. Examples of education and skill building opportunities include lunch and learns, workshops and conferences.

- **[Health and wellness fairs](http://www.healthyworkplaceweek.ca/2003/HealthFair.php)** (<http://www.healthyworkplaceweek.ca/2003/HealthFair.php>) are useful to raise employee awareness of health issues and can be used as an avenue for demonstrations (e.g. Tai Chi) or screening (e.g. cholesterol testing).
- Many local agencies offer **free resources and presentations**. To access health resources in Hamilton check out the **[Community Resource Directory](http://doitwell.ca/pages/projects/Workplaces/Workplace+Resources.html)** (<http://doitwell.ca/pages/projects/Workplaces/Workplace+Resources.html>).

Helpful Hint: Some Health & Wellness Committees like to coordinate their programs with established health-related days. For a calendar of the health-related days and corresponding contact information, **[click here](http://www.hc-sc.gc.ca/ahc-asc/conferences/calend/index_e.html)** (http://www.hc-sc.gc.ca/ahc-asc/conferences/calend/index_e.html).

As employees become aware of and participate in awareness raising and educational and skill building opportunities, you will want to offer environmental supports. Environmental supports are necessary to enable employees to participate in or practice healthy behaviours. On-site fitness classes or walking clubs, healthy food choices in the vending machine and cafeteria, and a smoking cessation program at work are all examples of supports in the workplace that make healthy choices easier for employees.

Examples of Environmental Supports

[Creating a Supportive Environment](http://www.welcoa.org/wellworkplace/index.php?cat=2&page=12)

(<http://www.welcoa.org/wellworkplace/index.php?cat=2&page=12>)

This article focuses on how workplaces can provide supportive healthy lifestyle choices.

Workplace Physical Activity Challenge

Although designed as a challenge for Hamilton workplaces to participate in during Canada's Healthy Workplace Week 2004, the Workplace Physical Activity Challenge can be used in your workplace at any time! This inexpensive, ready-to-use challenge comes with an implementation guide and packages for those who are regularly active and those who want to be more active. For more information, e-mail workplace@hamilton.ca or call 905-546-2424 ext. 3065 or 7218.

EatSmart! Cafeteria Program

Eat Smart! Cafeteria is a program for workplace cafeterias composed of specific requirements related to availability of healthy food choices, food safety standards, and non-smoking seating. For more information, call 905-546-2424 ext. 3632. For details of the EatSmart! Restaurant, check out <http://www.eatsmart.web.net/>.

[The Stop Smoking Centre](http://www.stopsmokingcenter.net/) (<http://www.stopsmokingcenter.net/>)

The Stop Smoking Centre is a free web program designed to help people who have either quit smoking or are thinking of quitting.

Policy Development

Policy is the key to sustaining healthy workplace programming. Workplaces can create an overall written health policy, or develop specific policies. Examples of specific policies include:

- Cost share program for physical activity equipment and activities
- Healthy food choices available at company meetings and functions
- 100% smoke-free policy

Where to Find Sample Policies

City of Hamilton, Public Health Services

For samples policies or consultations regarding policy development, contact a Workplace Health Promotion Specialist at workplace@hamilton.ca or 905-546-2424 ext. 3065 or 7218.

Developing A Comprehensive Health Policy. Why and How: A Guide for the Workplace

The purpose of this guide is to show why a comprehensive health policy would benefit an organization and how to develop it. A comprehensive health policy is a statement of an employer's intention to protect and promote the health of all their employees' by providing as healthy an environment as possible. This guide is available from through the [Workplace Resource Library](#) or Health Canada Publications at 613-954-5995.

Healthy Policies = Healthy Profits

This manual can help you develop and implement policies on specific health-related issues of relevance to your workplace. Sample policies are included along with ideas and further sources of information. This guide is available through the [Workplace Resource Library](#).

Policy: The Key to a Healthy Workplace - A Guide to Making Your Organization Healthier

This guide can help you develop and implement policies on specific health-related issues to enable you to employ a more global approach to target specific problems in your workplace. Considerations, ideas and further sources of information and assistance are identified. Samples of existing or model policies are included. The guide is available through the [Workplace Resource Library](#) or through Ottawa-Carleton University at 613-724-4197.

Coordinating Evaluations

It is often said that what gets measured matters. This makes evaluation an extremely important component in your efforts to build and sustain a healthy workplace. **Evaluation** can be defined as a course of action used to assess the value or worth of a program⁴¹. Evaluations can improve programs, provide justification for existing or demonstrate the need for additional resources.

According to Chapman (1999), evaluation questions that senior managers frequently want answered are:

- How much program activity actually reached employees?

- How many employees participated in the program?
- How many employees completed the program?
- What difference in individual health risk factors were achieved?
- How many employees actually changed?
- How much did the program cost?
- What effect did the program have on sick leave and injuries?
- What effect did the program have on employee health benefit costs?
- What was the net economic effect (cost/benefit) of the program?
- What improvements should be made in the program for next year?

Although it is widely accepted that evaluations are important, many Health & Wellness committees find evaluation challenging. Common barriers to evaluation worksite health promotion programs include⁴²:

- lack of knowledge
- fears of exposing weaknesses
- lack of time
- lack of money
- not a priority (i.e. efforts concentrated on doing programming rather than evaluation)

You may identify with the barriers outlined above. Perhaps the biggest issue facing Health & Wellness Committees is that employers considering workplace health promotion want to be guaranteed of the benefits—however, if they proceed, they don't want to pay for evaluation³¹. Possible solutions to these barriers include familiarizing yourself with evaluation and emphasizing importance of evaluation when attempting to get buy-in (see pages 12 to 22). To learn more about evaluation, check out the links below:



Evaluation Links

[Evaluating Comprehensive Workplace Health Promotion](http://www.thcu.ca/workplace/documents/EvaluationInfoPackFinalWeb.pdf)

(<http://www.thcu.ca/workplace/documents/EvaluationInfoPackFinalWeb.pdf>)

This Info-pack focuses on key aspects of evaluation within the CWHP framework. It is designed for busy practitioners who support the development of CWHP initiatives in their community and would like to access practical, 'how-to' information about program evaluation.

[Comprehensive Workplace Health Promotion: Recommended and Promising Practices for Situational Assessment Tools](http://www.thcu.ca/Workplace/sat/index.cfm)

(<http://www.thcu.ca/Workplace/sat/index.cfm>)

This resource contains information about 29 recommended and promising situational assessment tools in six categories: needs assessments, health risk appraisals, workplace audits, employee interest surveys, current practice surveys, and organizational culture surveys. It is designed to help workplace health promotion intermediaries in Ontario to: select and implement a situational assessment tool in their workplace, and replicate and/or adapt the best practice process used to generate the tools. The resource also provides a conceptual look at CWHP, situational assessment tools and best practice; guidelines and principles related to situational assessment tools; methodological information; and future recommendations for the project.

This chapter outlined the process for building a healthy workplace. The purpose of the next chapter is to provide solutions to barriers the Health & Wellness Committee may encounter.

Chapter 4: Overcoming Barriers



Overcoming Barriers

While implementing the objectives of your Health & Wellness plan, there will be barriers that the Health & Wellness Committee will need to overcome. This chapter highlights frequent barriers and suggests solutions to address them.

Increasing Employee Participation

Wellness coordinators and Health and Wellness Committees often struggle with getting employees to participate in healthy workplace initiatives. Common frustrations include:

- Employees say that they will participate through sign up sheets or surveys but don't commit
- Employees at risk do not appear interested in participating
- Initiatives appear to consistently attract people who are already healthy
- Participation rates drop on normally well-attended initiatives
- Certain types of employees participate more frequently than others (i.e. office staff show up more than assembly line workers)
- Communications (i.e. posters, e-mails, word of mouth) have been maximized to promote initiatives but people do not show
- Difficulties involving employees from satellite locations

Use the following rates to estimate how many employees will participate in healthy workplace initiatives offered by the health and wellness committee:

- 10 to 50% of employees will actively participate in on-site programs⁴³
- 10 to 25% of employees will participate in programs offered outside the workplace⁴⁴
- Participation rates are higher for general orientation sessions (75 to 80%) and for completing health risk appraisals (65-75%)⁴⁵

In North America, the following employee participation trends have been observed:

- Those with higher income and education levels are more likely to participate⁴⁶

- Blue collar workers are less likely to participate than white-collar workers^{47,48}
- Persons in risk-related jobs (i.e. construction) may be less likely to participate⁴⁹
- In one study, women were more likely to participate than men⁵⁰
- Employees with more job flexibility are more likely to participate⁴⁶
- Healthier people more likely to participate⁵¹
- Employees who are motivated or ready to change are more likely to participate⁵¹

There are a variety of reasons why employees do not participate in healthy workplace initiatives:

- Unaware of initiative(s)
- Lack of interest
- No time
- Lack of motivation
- Lack of social support
- Concerns about confidentiality
- Organizational characteristics (i.e. lack of commitment from management).

The following strategies to can be used to increase employee participation:

1. Get active support and participation from management

Sloan & Grunman found that employees are more likely to participate if their supervisors are supportive⁵¹. To gain support from management for healthy workplace initiatives try:

- Finding a senior management champion who will visibly participate in healthy workplace initiatives and encourage others to get involved.
- Formally request management to address specific barriers to employee participation (i.e. offer flexible work arrangements to permit employees to participate, subsidize the cost of initiatives, and emphasize confidentiality).
- Asking management to clearly communicate their endorsement and support to employees in terms of getting involved with healthy workplace initiatives.

2. Change the culture of your workplace

Culture change is a slow process, but here are some ways to make your workplace culture a “culture of health”:

- Address safety issues, sources of stress, and work/life conflict problems if they are paramount to employees and have not been resolved. Employees may not be willing to participate in other healthy workplace initiatives until progress has been made on other issues important to employees.
- Environmental supports are necessary to enable employees to participate in or practice healthy behaviours. On-site fitness classes or walking clubs, healthy food choices in the vending machines and cafeteria, and a smoking cessation program at work are all examples of supports in the workplace that make the healthy choices easier for employees.
- Policy is the key to sustaining healthy workplace programming. Policies establish ground rules and expectations with regards to a particular behaviour. Workplaces can create an overall written health policy or develop specific policies. As an example, for company events over three hours there could be a policy that requires a physical activity component and a healthy snack.
- Position healthy workplace initiatives as a joint partnership between management, employees, and the union (if applicable). Employees may not participate if they think initiatives are management driven and they are being monitored.
- Request and share testimonials of how specific healthy workplace initiatives have helped employees. These anecdotes from co-workers may encourage their co-workers to participate in the future.

3. Consider using incentives

Incentives can be a double-edge sword: they may increase employee participation, but may not change employee behaviour! Also, once started, incentives are difficult to remove. Incentives generally work best when they are kept small and strategically support your healthy workplace initiative. Some incentives to consider include:

- Allowing employees to participate on company time
- Offering prizes (i.e. pedometers, massage, healthy cookbooks)
- Running contests
- Providing fun awards

4. Involve employees in the planning and implementation

This ensures employees' needs will be met⁵², thereby increasing the likelihood that they will participate. Common ways to get employees involved include:

- Conducting a needs assessment. This process should reveal the actual needs, current practices and preferences of employees. Tools or techniques include surveys, focus groups, audits and human resource data analysis. For more information on tools available, see THCU's [Catalogue of Situational Assessment Tools](#)
- Involving employees on the Health & Wellness Committee. Make sure the health and wellness committee reflects the diversity of your workplace (i.e. gender, language, cultural background, job roles, etc.) in order to offer initiatives that will be attractive to employees. If representation of this nature is unrealistic, ensure you consult with employees who can help the committee.

5. Customize initiatives

Customizing initiatives increases employee participation because it caters to employee preferences. Employees will be attracted to different initiatives, so you will want to offer a variety that appeal to employees of different stages of readiness or motivation. For example, employees who are not physically active on a regular basis may prefer a one-month pedometer program that includes showing them how to use the pedometer and includes a progress sheet that helps them reach realistic goals, whereas employees who are regularly active may want to be in a physical activity competition. Making initiatives affordable, convenient, simple and easy to follow are important considerations as well.

6. Have a marketing and communication strategy

Rather than just promoting individual events to employees, consider developing a marketing and communication strategy. This may involve how you brand the Health and Wellness Committee initiatives, how management and employees stay informed of your activities, and how to promote initiatives and accomplishments. Channels of communication to use include: management, co-workers, meetings, company newsletter, and intranet. Do not forget that once is never enough to create awareness— employees need to hear the same message at least four times. Therefore you will likely want to make use of several channels of communication for each initiative you want to promote! For more information, see pages 46-48.

7. Maintain participant confidentiality

Many employees are apprehensive about participating in healthy workplace initiatives if they think that they will be monitored by others. Make it clear to employees that their individual participation is confidential— only aggregate information is collected for reporting purposes (if

that is the case).

Important Points to Remember:

When using participation to determine effectiveness, consider both the number of employees who sign-up and the ones who continue to participate. The Health & Wellness Committee is on the right track if high numbers of employees are involved. When assessing lifestyle behaviours or participation rates, remember that just because an employee stops participating in a healthy workplace initiative does not mean that he or she is discontinuing the behaviour. For example, an employee that drops out of a Pilates class offered at work may have joined another one in the community.

Participation rates are critical because the effectiveness of healthy workplace initiatives depends on employees getting involved. Don't be discouraged if participation rates are low – chances are the health and wellness committee can apply the strategies outlined above and increase participation. Furthermore, Serxner et al. (2004) suggest that workplaces can still achieve positive return-on-investment from "*surprisingly low participation rates*" because the cost of unhealthy employees is higher than the cost of programs to improve their health⁵³. Some workplaces are concerned if employees who are already "healthy" are the ones participating, but remember that it is imperative to keep them healthy and well. Some researchers argue that by ignoring low-risk employees, they will become high-risk and high-cost over time^{54,55}. Similarly, doing nothing to support high-risk employees will likewise result in increased risk⁵⁴. Therefore, healthy workplace initiatives should address all groups: high-risk, low-risk and healthy employees⁵⁵.

Reaching Employees Who Work Shifts

If you have employees who work shifts, try doing the following:

- Offer duplicate events so all shifts have an opportunity to participate.
- Give them access to health information in a useful way (i.e. bulletin board, video library).
- Provide education to shiftworkers and their managers specifically about issues related to working shifts.
- Promote services that are accessible to shiftworkers "after hours" such as Employee Assistance Programs, hotlines, websites, etc.

Shiftwork Resources



Shiftwork Like Clockwork Worksite Wellness Program Facilitator's Guide

The Shiftwork Like Clockwork facilitator's guide contains background notes, practical tools and ideas to offer up to 22 "Reach and Teach Modules". Each module addresses individual health issues and takes approximately 15-20 minutes to deliver. You can deliver one module in a series of 15-20 minute Health and Safety meetings or you can combine them to any desired length. This resource is available for loan through the [Workplace Resource Library](#).

[OSH Answers: Rotational Shiftwork](http://www.ccohs.ca/oshanswers/work_schedules/shiftwrk.html)

(http://www.ccohs.ca/oshanswers/work_schedules/shiftwrk.html)

On-line responses to questions related to shiftwork. Includes approaches workplaces can take to reduce the effects of shiftwork.

[Shiftwork: Health Effects & Solutions](http://www.ohcow.on.ca/resources/handbooks/shiftwork/shiftwork.pdf)

(<http://www.ohcow.on.ca/resources/handbooks/shiftwork/shiftwork.pdf>)

A seven page PDF that covers health effects and solutions.

Reaching Employees in a Workplace That Has Multiple-Office Locations

If your workplace has more than one office location, it can be challenging to offer consistent programs, especially if the locations vary significantly in size, facilities, and are spread out geographically. Here are some suggestions for reaching employees at multiple-office locations:

- If there is just one Health & Wellness Committee for the entire workplace, find “champions” at each office location. Even if they are not members of the Health & Wellness Committee, they can be a point person for employees to find out about upcoming initiatives and can provide the committee with valuable insight on which initiatives will be best for their respective locations.
- Run multiple sessions of the most popular activities at all locations.
- Decentralize programs as much as possible. In other words, choose initiatives that are “location-less”. For example, run a contest in which employees keep track of their own participation through use of a scorecard, or give them access to health information through the company intranet at home and work. This permits employees to participate without requiring them to travel to a mutual location.

- Rotate initiatives among the office locations so that one location does not host everything.

Offering Healthy Workplace Initiatives on a Limited Budget...Or Without a Budget

It doesn't matter if your workplace is large or small, public or private – all workplaces struggle with funding for health and wellness initiatives. The good news is that while a budget is certainly helpful, it does not mean you cannot move forward without one.

If the Health and Wellness Committee is just getting started, you may want to rely on free services in the community for things like displays for a health fair; presentations for employees; consultations; and resources. Check with your benefits and Employee Assistance Program providers – you may be able to access resources and presentations that are already covered by your workplace. Find out if employees are interested in volunteering their services – you may already have a yoga instructor or walking club leader who would be happy to help your committee by offering a yoga demonstration or organizing some walks.

When a budget is necessary, there are a few options the committee can consider:

- Making a presentation to senior management for funding (either for an annual budget or for a specific initiative).
- Collaborating with another business unit within your workplace that already has a budget on a joint initiative (i.e. perhaps you can team up with the Joint Occupational Health & Safety Committee and offer health and wellness activities during North American Occupational Safety & Health Week).
- Fundraising through 50/50 draws or other means to fund Health & Wellness Committee activities.
- Apply for community grants.
- Request free services/donations.
- Make use of in-house experts.
- Participate in community-wide events.

Budget Resources

[The Wellness Budget](#)

(http://www.welcoa.org/freeresources/pdf/wellness_budget.pdf?PHPSESSID=5920821ee325f17bc77da8f9511979e0)

If you are looking to learn more about building a budget for health & wellness, this four page article will guide you through budget principles, budget justification, and budget sustainability.

[Healthy Doesn't Have to Mean Wealthy! IAPA's Approach to a Healthy Workplace](#)

([http://doitwell.ca/downloads/Excellence_article_\(NQI\).pdf](http://doitwell.ca/downloads/Excellence_article_(NQI).pdf))

This article highlights how the Industrial Accident Prevention Association (IAPA) has successfully supported and encouraged employee health without spending excessively.

Communicating With Employees

Heirich et al (1989) list eight recommendations that can be used to develop effective health information communication in industrial settings. These recommendations have been adapted from:

Heirich, M., Cameron, V., Erfurt, J., Foote, A., & Gregg, W. (1989). Establishing communication networks for health promotion in industrial settings. *American Journal of Health Promotion*, 4(2); 116.

Eight Steps to Effective Worksite Communication of Health Information

1. Use existing formal communication channels

- Staff meetings
- Health & Safety training/meetings
- Pay slip
- Voice mail
- E-mail
- Company newsletter/ intranet
- TV monitors
- Word-of-mouth

2. **Create new, official health communication channels**
 - Form a Health & Wellness Committee
 - Request an e-mail address for the Health & Wellness Committee to send out e-mails and to receive e-mails from employees
 - Create a Health & Wellness Committee section on the company intranet
 - Develop Health & Wellness Committee bulletin boards, newsletters, information kiosks, posters, surveys, etc.

3. **Create direct-link, one-to-one outreach with employees**
 - Offer visible events to connect with employees directly (i.e. health fairs, screening/counseling sessions, presentations, training, etc.)
 - Have employees sign-up on the spot for future health and wellness activities
 - Send reminders to employees to attend
 - Follow up with no-shows

4. **Create informal health communication flow by targeting strategically-placed employees for early one-to-one outreach**
 - Include Health & Wellness Committee members
 - Include “bees” whose jobs have them moving throughout the worksite and able to talk with others
 - Include people at the hub of communication interaction (i.e. secretaries in key offices)

5. **Enlarge and reinforce short-link communication chains**
 - Invite people who want to make health changes to create their own buddy systems and support groups

6. **Create new health communication networks**
 - Invite people with common successes to have lunch together and plan ways to help others (i.e. former smokers, those who are regularly physically active)

7. **Organize special health events involving:**
 - Friendly competition
 - Humour
 - Incentives for successful behaviour change
 - Opportunities for social support

8. **Create attention for focused health messages**
 - Use posters, moving targets, sight and sound surprises (i.e. balloons)

Communication Resources

[Communicating Effectively with Employees](http://doitwell.ca/downloads/CommunicatingEffectively.pdf?PHPSESSID=3130c11b779a3af8d4475ec528a53e46)

(<http://doitwell.ca/downloads/CommunicatingEffectively.pdf?PHPSESSID=3130c11b779a3af8d4475ec528a53e46>)

A nine page Power-Point presentation by Tom Wallis, former Communications Officer with the City of Hamilton covers some of the most effective ways to communicate with staff and the need to have solid business objectives when creating your communication and marketing plan.

[Healthy Workplace Innovation Series: Small Group Discussion Summary on "Communication"](http://doitwell.ca/downloads/Communication.pdf?PHPSESSID=3130c11b779a3af8d4475ec528a53e46)

(<http://doitwell.ca/downloads/Communication.pdf?PHPSESSID=3130c11b779a3af8d4475ec528a53e46>)

This three page excerpt from the Small Group Discussion on May 11, 2005 highlights the various methods of communication and the strengths, weaknesses and possibilities for each.

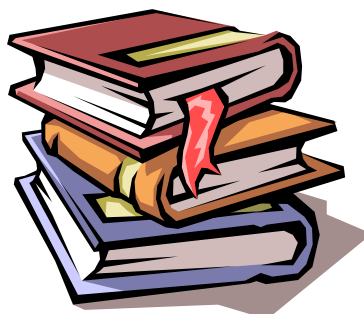
[Want to Reach Staff? Tell Them a Story](http://resources.greatplacetowork.com/article/pdf/cnd_hr_reporter.pdf)

(http://resources.greatplacetowork.com/article/pdf/cnd_hr_reporter.pdf)

A two page article by Graham Lowe highlights workplaces that have a corporate culture of open and honest communication.

This chapter suggested tips to overcoming barriers. The purpose of the next chapter is to highlight resources that might make your journey easier.

Chapter 5: Resources



Resources

The purpose of this section is to link you to resources that will be useful while building a healthy workplace, regardless of which healthy workplace model you use as your vehicle for comprehensive workplace health promotion.

Where to Find Support

At various points on your journey to building a healthy workplace, you may want to access the expertise of a consultant, facilitator, or perhaps information on services available for workplaces in Hamilton. The following resources will help you find the support you need.

Free Consultation

[City of Hamilton Public Health Services, Healthy Workplace](http://www.hamilton.ca/workplace)
(<http://www.hamilton.ca/workplace>)

Public Health Services healthy workplace services are free and directed to those people who influence employee health and wellness in the workplace. We can help:

- Demonstrate the value of being a healthy workplace
- Develop a customized action plan for creating a healthy workplace
- Offer resources, education and networking opportunities
- Modify the work environment to make the healthy choice the easy choice

For more information, contact a Workplace Health Promotional Specialist at workplace@hamilton.ca or 905-546-2424 ext. 3065 or 7218.

Directories

[2005 Healthy Workplaces: Community Resource Directory](http://doitwell.ca/pages/projects/Workplaces/Workplace+Resources.html)
(<http://doitwell.ca/pages/projects/Workplaces/Workplace+Resources.html>)

Community service and program information at your finger tips! Healthy Workplaces: Community Resource Directory (formerly the Corporate Health Directory) has been updated. The directory is a quick resource guide of contacts in the community that can support your workplace with health and wellness information

[Your Ontario Health and Safety System](http://www.wsib.on.ca/wsib/wsibsite.nsf/LookupFiles/DownloadableFileYourOntarioHealthandSafetySystem/$File/HSSG.pdf)
([www.wsib.on.ca/wsib/wsibsite.nsf/LookupFiles/DownloadableFileYourOntarioHealthandSafetySystem/\\$File/HSSG.pdf](http://www.wsib.on.ca/wsib/wsibsite.nsf/LookupFiles/DownloadableFileYourOntarioHealthandSafetySystem/$File/HSSG.pdf))

This booklet contains the names, mandates, and contact information for Health and Safety Way organizations in Ontario. To order a copy call 1-800-663-6639 or download the PDF free of charge.

Hamilton Human Resources Services Directory

(<http://www.htab.ca/publications/HTAB%20Directory-bookmarked.pdf>)

A “how to” guide and directory of human resources services in Hamilton and surrounding area. An indispensable resource for every employer planning the future success of his or her business.

Events

Canada's Healthy Workplace Week

(<http://www.healthyworkplaceweek.ca/>)

Canada's Healthy Workplace Week is a yearly celebration of workplace health in Canadian organizations. The official website of the week highlights both events and resources. The website [healthyworkplaceweek.ca](http://www.healthyworkplaceweek.ca) has ideas for any type of organization seeking to enhance its success through promoting the well-being of employees and a healthy workplace environment.

- If your organization is new to workplace wellness, this week could be an opportunity to get started (there is a section on the website with some helpful tips) and to learn from other workplaces.
- If your organization has already started a workplace health initiative, then this week could be the ideal time to expand on your initiative and celebrate what you have accomplished.
- If you are a workplace health professional, the website has lots of strategies that you can use with the organizations you work with.

The Canada's Healthy Workplace Week website is available as your one-stop, year-round resource for workplace health.

During Canada's Healthy Workplace Week, workplace health initiatives are happening locally. Call your local public health unit to find out what is happening in your area!

Workplace Resource Library

Healthy workplace resources are available for loan free of charge. To view available resources visit <http://doitwell.ca/pages/projects/Workplaces/Workplace+Resources.html>.

Educational and Networking Opportunities

Healthy Workplace Innovation Series

(<http://doitwell.ca/pages/projects/Workplaces/Healthy+Workplace+Innovation+Series.html>)

The Healthy Workplace Innovation Series consists of 3 to 4 half-day sessions per year. Each session features a compelling combination of keynote speakers, small group discussions, and

displays. To date 48 workplaces have participated in the series. Recent evaluations reflect 97% participant satisfaction with the experience and confidence that learnings can be applied to the workplace.

[Health, Work and Wellness Conference](http://www.healthworkandwellness.com)

(www.healthworkandwellness.com)

The Health, Work and Wellness conference intends to help professionals build the business case for workplace health in their own organizations and/or with organizations that they work with. Speakers provide the latest research, success stories in other businesses, tools and strategies to help delegates with the work they are doing with their organizations. The program is developed through focus groups and surveys each year to determine what the biggest workplace issues are that year in order to address these issues at the conference. A peer review process is used for determining speakers. Each submission is reviewed by a panel of experts in workplace health - researchers and practitioners -- before being accepted. For those professionals who are advising clients on workplace health issues, this is the best opportunity in Canada for them to have direct access to researchers, practitioners, successful influencers, educational opportunities, tools and resources in the field of organizational health. Education credits are given for the conference, so for any public health nurse or other professional needing credits from their respective professional associations, this is available⁵⁶.

Listservs

Healthy Workplace Bulletin

Healthy Workplace Bulletin is an informal e-mail written by City of Hamilton Public Health Services staff, which is sent approximately once a month. The e-mail highlights upcoming events, updates, resources related to healthy workplace. Please contact workplace@hamilton.ca to be added to the distribution list.

Health @ Work

Health @ Work is an informative (but "light") e-bulletin written by the [Canadian Centre for Occupational Health and Safety](http://www.ccohs.ca) (www.ccohs.ca) staff, which is sent approximately every 8 weeks. This e-bulletin contains information on workplace health promotion, the latest news from Canadian Health Network (CHN), information from fellow network contributor partners, announcements, and tid-bits such as useful web site addresses, conference notices, and other interesting material. Please contact chn@ccohs.ca to be added to the distribution list.

New and Events At NQI (National Quality Institute)

Join the NQI distribution list and find out about upcoming news and events. To join, create a [profile](http://www.nqi.ca/myprofile.aspx?create=yes&pageURL=%2fprofile.aspx) (<http://www.nqi.ca/myprofile.aspx?create=yes&pageURL=%2fprofile.aspx>).

[WorkEnvironment e-news](http://www.grahamlowe.ca/subscribe.html)

(<http://www.grahamlowe.ca/subscribe.html>)

A monthly email newsletter created by the Graham Lowe Group Inc. It provides practical knowledge about how to create healthy, innovative and productive work environments. Each

issue offers original synthesis and commentary on the latest research, thinking and practices focused on creating better work environments.

Newsletters & Publications

[Benefits Canada](http://www.benefitscanada.com/) (<http://www.benefitscanada.com/>)

Benefits Canada is a publication written primarily for the sponsors of group benefits and pension plans and is published 12 times a year.

[Canadian Healthcare Manager](http://www.chmonline.ca/chmonline/) (<http://www.chmonline.ca/chmonline/>)

Canadian Healthcare Manager is an integrated healthcare magazine that is published seven times a year.

[Canadian HR Reporter](http://www.canadianhrreporter.com/home/default.asp) (<http://www.canadianhrreporter.com/home/default.asp>)

Canadian HR Reporter is published 22 times a year and offers readers the most current news, information on the latest trends and practices, expert advice, experiences and insights from HR practitioners, research and resources.

[OASIS](http://www.stresscanada.org/news.html) (<http://www.stresscanada.org/news.html>)

OASIS is a free newsletter by the Canadian Institute of Stress, which provides updates on new content, events, and services.

[Wellness Letter](http://www.berkeleywellness.com/) (<http://www.berkeleywellness.com/>)

The Wellness Letter is an 8-page newsletter translates leading-edge research into practical information for daily living edited by the experts at the University of California, Berkeley School of Public Health.

[Work Channel](http://www.workchannel.com/) (<http://www.workchannel.com/>)

workchannel.com contains information on the Canadian workplace. The content changes daily.

Websites

[Calendar of Health Related Days](#)

Health Canada has listed health-related days with corresponding websites.

[Canadian Centre for Occupational Health and Safety \(CCOHS\)](#)

This website is dedicated to providing employers, employees and practitioners, free and easy access to one of the most comprehensive collections of credible resources in Canada for creating and promoting healthy workplaces.

[Canadian Health Network: Workplace Health](http://www.canadian-health-network.ca) (www.canadian-health-network.ca)

Credible and practical health information. Articles, links, and frequently asked questions on workplace health.

[Canadian Policy Research Networks, Inc.](http://www.cprn.org) (<http://www.cprn.org>) Access research publications on the workplace.

[The Graham Lowe Group](http://www.grahamlowe.ca/) (<http://www.grahamlowe.ca/>) Access articles, reports and presentations on workplace health.

[Healthy Living Hamilton: Workplace](#)

Access free resources, information on upcoming educational and networking opportunities, and find out how to become a member of the Workplace Workgroup.

[The National Quality Institute](#)

Articles and information on courses, resources, awards and memberships to help Canadian organizations to achieve excellence.

[The Workplace Health Bureau](#)

Workplace health, links with other federal and provincial stakeholders, workplace health systems models. Free resources are available on this website.

¹ Shain, M., & Suurvali, H. (2001). Investing in Comprehensive Workplace Health Promotion. Retrieved September 9, 2003 from http://www.nqi.ca/nqistore/product_details.aspx?ID=46.

² The National Quality Institute and Health Canada. (1998). Canadian Healthy Workplace Criteria. Retrieved September 9, 2003 from http://www.nqi.ca/nqistore/product_details.aspx?ID=63.

³ Statistics Canada as cited in The Hamilton Chamber of Commerce Newsletter *Working For You* (February 22, 2003).

⁴ HR Matters Hamilton Human Resource Strategy Study (2002). Retrieved May 28, 2003 from <http://www.city.hamilton.on.ca/business/development/pdf/Exec-Summary.pdf>

⁵ Industrial Overview for the Hamilton HRCC Area. Retrieved May 7, 2003 from http://www.on.hrcc-drhc.gc.ca/english/offices/hamilton/lmi/content/hamindstruct_e.shtml.

⁶ City of Hamilton, Public Health & Community Services Department: Program Policy and Planning Division. (2002). Rapid Risk Factor Surveillance System: Body Mass Index.

⁷ McGuire, H. (e-mail communication June 8, 2006).

⁸ Canadian Community Health Survey, 2003.

⁹ Duxbury & Higgins (2001). *Work-Life Balance in the New Millennium: Where Are We? Where Do We Need to Go?* Ottawa: Canadian Policy Research Networks Inc.

¹⁰ Shain, M. (2000). Best Advice on Stress Risk Management in the Workplace. Retrieved September 9, 2003 from <http://www.hc-sc.gc.ca/hecs-sesc/workplace/publications.htm>.

¹¹ Statistics Canada (2002). *Work Absences*. The Daily, Thursday July 4, 2002. Retrieved November 11, 2002 from www.statcan.ca/Daily/English/020704/d020704h.htm

¹² The Canadian Council on Integrated Healthcare (2002). *A Discussion Paper on Workplace Health*. Retrieved October 2003 from www.ccih.ca.

¹³ Cambridge, Murray & Lopez, 1996 as cited at www.mentalhealthworks.ca.

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- ¹⁴ Wilson, Joffe & Wilkerson, 2002 as cited at www.mentalhealthworks.ca.
- ¹⁵ Pelletier, K. (1991). A review and analysis of health and cost-effective outcome studies of comprehensive health promotion and disease prevention programs. American Journal of Health Promotion, 5(4), 311- 313.
- ¹⁶ Aventis Pharma Canada Inc. (2001). Workplace wellness programs benefit employers and employees alike - - study shows. Retrieved October 28, 2002, from <http://www.aventis-pharma.ca/G1impact.htm>
- ¹⁷ Davie, S. (2000). Making the business case for wellness: Showing the benefits to the bottom line is not an impossible task [Electronic version]. Benefits Canada. Retrieved October 28, 2002, from <http://www.benefitscanada.com/Content/2000/11-00/viewpoint2.html>
- ¹⁸ Blaney, S., Bonnett, C., Caron, S., Kee, S., May, A., Norton, J., & Yardley, J. (2002). A discussion paper on workplace health, 52- 54. Retrieved October 17, 2002, from http://www.ccih.ca/e/working_papers.htm
- ¹⁹ Health Promotion at Work: Results of the 1992 National Workplace Survey (1994). [Electronic version]. Retrieved October 30, 2002 from <http://www.cflri.ca/cflri/resources/pub.php>
- ²⁰ Whitehead, D. (2001). A corporate perspective on health promotion: Reflections and advice from Chevron. American Journal of Health Promotion. Vol. 15, No. 5, 367-369.
- ²¹ The Health Communication Unit (2003). Conditions for successful workplace health promotion initiatives. Retrieved July 2003 from <http://www.thcu.ca/Workplace/infoandresources.htm#res>.
- ²² Pelletier, K. (Ed.). (1991). A review and analysis of health and cost-effective outcome studies of comprehensive health promotion and disease prevention programs. American Journal of Health Promotion. Vol. 5, No. 4. 311-313.
- ²³ Health Canada as cited in Path to Wellness Newsletter (July 2003).
- ²⁴ Chapman, L. (Ed.). (1997). Securing support from top management. The Art of Health Promotion. Vol. 1, No. 2. 1-8.
- ²⁵ Sloan R., Gruman J., & Allegrante, J. Investing in Employee Health: A Guide to Effective Health Promotion in the Workplace. San Francisco, CA (USA): Jossey-Bass Publishers, 1987.
- ²⁶ Healthy Workplace Week.ca. (2003). Business Case. Retrieved June 6, 2003 from http://www.nqi.ca/chww/strat2_what_bc.htm.
- ²⁷ Newkirk, W., & Jones, L. Sales strategies. In: Newkirk EW, Jones LD, ed. Occupational Health Services: A Guide to Program Planning and Management. Place: American Hospital Publishing, Inc., 1989: 181-199.
- ²⁸ Bachmann, K. (2000). More than just hard hats and safety boots: Creating healthier work environments. The Conference Board of Canada.
- ²⁹ MacBride-King, J. as cited in Bachmann, K. (2000). More than just hard hats and safety boots: Creating healthier work environments. The Conference Board of Canada.
- ³⁰ Muto, T., Tomita, M., Kikuchi S., & Watanabe T. (1997). Methods to persuade higher management to invest in health promotion programmes in the workplace. Occup. Med. Vol. 47, No. 4: 210-216.
- ³¹ Pratt, D. (1999). So whose responsibility is employee wellbeing? Employee Health & Productivity. 19-20.
- ³² National Population Health Survey (1996-7) as cited in Bachman, K. (2002). Health promotions at work: A frivolous cost or a sound investment? The Conference Board of Canada.

-
- ³³ Bachman, K. (2002). Health promotions at work: A frivolous cost or a sound investment? The Conference Board of Canada.
- ³⁴ Strycker, L., Foster, L., Pettigrew, L., Donnelly-Perry, J., Jordan, S., & Glasgow, R. (1997). Steering committee enhancements on health promotion program delivery. American Journal of Health Promotion, 11(6): 437-440.
- ³⁵ Linnan, L., Fava, J., & Thompson, B., et al. (1999) and Hunt, M., Lederman, R., Potter, S., et al. (2000) as cited in Thompson, B., Hannon, P., Bishop, S., West, B., Peterson, A., & Beresford, S. (2005). Factors related to participatory employee advisory boards in small, blue-collar worksites. American Journal of Health Promotion, 19(6): 430-437.
- ³⁶ O'Grady, J. (2000). Joint Health and Safety Committees: Finding a Balance.
- ³⁷ Thompson, B., Hannon, P., Bishop, S., West, B., Peterson, A., & Beresford, S. (2005). Factors related to participatory employee advisory boards in small, blue-collar worksites. American Journal of Health Promotion, 19(6): 430-437.
- ³⁸ Chu, C., Breuker, G., Harris, N., Stitzel, A., Gan, X., & Dwyer, S. (2000) as cited in The Health Communication Unit (2003). Conditions for successful workplace health promotion initiatives. Retrieved July 2003 from <http://www.thcu.ca/Workplace/infoandresources.htm#res>.
- ³⁹ Butt, J. (personal communication, September 9, 2003).
- ⁴⁰ The Health Communication Unit. Introduction to Health Promotion Planning. Retrieved from http://www.thcu.ca/infoandresources/planning_resources.htm#tp.
- ⁴¹ Farrell, Kratzman, McWilliam, Robinson, Saunders, Ticknor & White. (2002). Evaluation made very easy, accessible, and logical.
- ⁴² Chapman, L. (1999). Evaluating your program. The Art of Health Promotion. Vol. 3, No. 3: 1-12.
- ⁴³ Wilson, M. (1990). Factors associated with, issues related to, and suggestions for increasing participation in workplace health promotion programs. Health Values, 14(4): 29-36.
- ⁴⁴ Fielding, J. as cited in Lovato, C. & Green, L. (1990). Maintaining employee participation in workplace health promotion programs. Health Education Quarterly, 17(1): 73-88.
- ⁴⁵ Parkinson, R. as cited in Lovato, C. & Green, L. (1990). Maintaining employee participation in workplace health promotion programs. Health Education Quarterly, 17(1): 73-88.
- ⁴⁶ Palank as cited in Baker, E., Israel, B., & Schurman, S. (1994). A participatory approach to worksite health promotion. J Ambulatory Care Manager, 17(2); 68-81.
- ⁴⁷ Glasgow et al as cited in Peltomaki et al., (2003). Social context for workplace health promotion: Feasibility considerations in Costa Rica, Finland, Germany, Spain and Sweden. Health Promotion International, 18 (2): 115-126.
- ⁴⁸ Morris et al. (1999). Do blue-collar workers perceive the worksite health climate differently than white-collar workers? Am J Health Promotion, 13(6): 319-324.
- ⁴⁹ Stange et al. as cited in Baker, E., Israel, B., & Schurman, S. (1994). A participatory approach to worksite health promotion. J Ambulatory Care Manager, 17(2); 68-81.
- ⁵⁰ Berkman and Kawachi as cited in Peltomaki et al., (2003). Social context for workplace health promotion: Feasibility considerations in Costa Rica, Finland, Germany, Spain and Sweden. Health Promotion International, 18 (2): 115-126.

-
- ⁵¹ Sloan, R. & Gruman, J. (1988). Participation in workplace health promotion programs: The contribution of health and organizational factors. Health Education Quarterly, 15 (3): 269-288.
- ⁵² Glasgow, R., McCaul, K., & Fisher, K. (1993). Participation in worksite health promotion: A critique of the literature and recommendations for future practice. Health Education Quarterly, 20(3): 391-408.
- ⁵³ Baker, E., Israel, B., & Schurman, S. (1994). A participatory approach to worksite health promotion. J Ambulatory Care Manager, 17(2); 68-81
- ⁵⁴ Serxner, S., Anderson, D., & Gold, D. (2004). Building program participation: Strategies for recruitment and retention in worksite health promotion programs. The Art of Health Promotion.
- ⁵⁵ Serxner, S., Gold, D., Anderson, D., & Williams, D. (2001). The impact of a worksite health promotion program on short-term disability usage. JOEM, 43(1); 25-29
- ⁵⁶ Jones, D. (personal communication, June 2, 2003)