



## **Healthy Employees in Healthy Organisations**

European Network for  
Workplace Health Promotion

# **ENWHP Toolbox**

**A European collection of methods and practices  
for promoting health at the workplace**







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**Assembled by dr Lenneke Vaandrager, drs Tamara Raaijmakers,  
drs Christel van Capelleveen and the members of the  
European Network Workplace Health Promotion**



The European Network for Workplace Health Promotion receives financial support from the European Commission. Neither the European Commission nor persons acting on behalf are liable for the use of this information.

The report on the Toolbox is also available on CD-ROM, and an accompanying facts & figures sheet is published. These materials are also available on [www.enwhp.org](http://www.enwhp.org)

# Preface

'Healthy employees in healthy organisations' has been the vision of the European Network for Workplace Health Promotion (ENWHP) since its establishment in 1996. Former Network initiatives focused on WHP quality criteria and success factors (1st initiative), WHP in small and medium-sized enterprises (2nd initiative) and WHP in the public administration sector (3rd initiative).

The Toolbox is part of the 4th initiative of the Network, and the Netherlands Institute for Health Promotion and Disease Prevention (NIGZ-Work & Health) took on the task of coordinating this project. The toolbox provides an overview of a number of available methods and practices for Workplace Health Promotion (WHP) in Europe. The other parts of the 4th initiative are the Case for WHP and the forum approach. The Case is about *why* WHP is important, resulting in effective arguments. If stakeholders are convinced, they want to know *how* to implement WHP. This answer is provided by the toolbox, because for effective WHP one needs effective tools. From earlier experiences with an overview of Models of Good Practice (MOGP) - companies and organisations which did a good job on WHP - it is necessary *to disseminate* the experiences of WHP and relevant methods. National forums are thus needed. The MOGP can also be seen as very useful 'tools' for putting forward the message for WHP!

This report is the result of intensive discussion and the coordination process among network members and national experts. It consists of 74 tools from 22 countries and is just a start. It cannot thus be seen as a complete overview of all tools available in Europe, but is rather a selection of tools which ENWHP-members think should be available to others. The collecting of further tools will continue as an ongoing process. The added value of the toolbox comes from access to tools from other countries and experiences of the same tool in different countries.

Special thanks to everyone who contributed to the development of this toolbox, and particularly to the Toolbox project group. There have been long discussions about what a tool actually is and how to judge the quality of tools. It is important that this judgement should not be made by a small group but by the users themselves and I hope to receive feedback on the usefulness of this toolbox! The NIGZ has enjoyed coordinating this project and is proud of this final outcome.

Woerden, April 2004



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# Introduction

## The network and its initiatives

*“Workplace health promotion (WHP) represents the combined efforts of employers, employees and society to improve the health and wellbeing of people at work. This can be achieved by a combination of improving the work organisation and the working environment, promoting active participation and by encouraging personal development” (Luxembourg Declaration 1997).*

‘Healthy employees in healthy organisations’ has been the vision of the European Network Workplace Health Promotion (ENWHP) since its establishment in 1996. The **1st initiative** of the Network ran from 1997 until 1999. The aim of the project was to identify companies in the participating countries which clearly demonstrated good practice in workplace health promotion – the so-called Models of Good Practice, MOGP. Another aim was to document this experience in a useful way and then to disseminate this information to as wide an audience as possible. This was done in order to encourage the development of good practice in WHP in other organisations. The qualification of the MOGP is based on jointly-developed criteria, success factors for WHP and a common European understanding. In the beginning much of the WHP activity was developed and implemented with large organisations as the target. Unfortunately the needs of SMEs are very different to those of large organisations, and the projects that have been developed are not always easy to transpose. And more than two-thirds of the European labour force is employed in the SME sector. This resulted in the **2nd initiative**: a project that would capture the experience of SMEs in implementing WHP activities, and make this information available to a much wider audience (1999 – 2001). In recent years public administrations across Europe have passed through a period of modernisation and reform – a process continuing today. The role of workplace health promotion is recognised increasingly as being of major importance, although comprehensive WHP initiatives are still comparatively rare in public administrations. This resulted in the **3rd initiative**: Workplace health promotion in the public administration sector (2001 –2002)

There are still challenges. One of them is sharing experiences of how to implement WHP. Taking into account the wide range of information available in the member states, there are still a relatively low number of companies adopting a comprehensive and integrated approach to health management. The know-how in one country is not necessarily a guarantee that it is accessible or useful in other countries. This is why the Network has undertaken the **4th initiative**:

1. Making an analysis and documenting the benefits and effectiveness of WHP to increase the relevance for stakeholders (companies, employers’ and employees’ organisations, government, social bodies, decision-makers in politics et cetera): Project Making the Case for WHP.
2. A basic inventory of methods and practices for WHP to support the implementation of workplace health promotion: Project the Toolbox.
3. Setting up national forums to support, develop and create network initiatives and other suitable infrastructures on a national level to facilitate the implementation of European strategies and policies for WHP in the individual countries: Project The Forum approach.

These initiatives do not stand alone, but are linked to each other. The Case is for giving arguments *why* WHP is important, resulting in effective arguments. If stakeholders are convinced about implementing WHP they need to know *how* to do this: the answer is given by the Toolbox. For effective workplace health promotion you need effective tools. From earlier experiences with Models of Good Practice – companies who did a good job implementing WHP – it is necessary to *disseminate the experiences* of using tools and following successes or pitfalls in implementing WHP. Forums are

therefore needed, combined with ways to communicate effectively with stakeholders in these forums. The faith of the WHP forum will be related to the transfer of practical knowledge of the toolbox by means of national (WHP) forums. This must be a continuing process. Only with the forums stakeholders in the different countries can have good access to arguments and methods for workplace health promotion, assisting them in promoting the message of healthy employees in healthy organisations.

For this, both the Case and Toolbox can be seen as new policy instruments and therefore tools themselves. Also exchanging of information – the forum approach – is a tool as such. The objective of the Network is to collect and disseminate good practice on WHP. This means a need for good tools, and the emergence of standards for evaluation.

These tools collected help to reduce absenteeism, increase economic performance, deal effectively with challenges of an ageing workforce, etc.

This report is the descriptive version of the Toolbox. The toolbox is also available on the internet: [www.enwhp.org](http://www.enwhp.org)

# 1. The concept of the ENWHP-toolbox and how to use it

## 1.1. The tools concept

Tools described in this report are methods and practices for promoting health at the workplace. At organisational level a tool can be participatory, process-oriented, integrated in company management and the daily routines and structures of the organisation, induce organisation change, have special attention for continuity (not a one-shot tool) etc. In order to be called a tool it needs to be used for a clear purpose by a third party in a practical context. It is also in this practical context that the same tools can be used in a different way.

Countries have significant differences in their backgrounds and prior experiences, their institutional structures and their attitudes to change. We are likely to find that the same tools can be used for different purposes, depending on the context. The toolbox contains numerous tools, whose meaning and significance will be seen in their use.

## 1.2. What makes a tool a WHP tool?

WHP is a modern corporate strategy which aims to prevent ill-health at the workplace to enhance health potential and to improve wellbeing at work. By including elements such as organisational and human resource management, WHP takes on a broader dimension than traditional occupational safety and health.

The tools presented here have a WHP focus, although the distinction is not always easy to make. According to the meaning of WHP, the tools may not always have a narrow meaning only for WHP, but can focus on broader concepts of healthy workplaces, sustainability, social responsibility, workability and good management practices.

A WHP tool is a programme, project (model of good practice) or an instrument suitable for improving or promoting health at the workplace, particularly for giving solutions tackling health related problems at the workplace, such as ageing, workforce, disability, management, alcohol abuse, smoking, unhealthy eating habits, stress, etc.

A WHP tool can have different identities:

- Concepts and instruments for developing commitment from various types of stakeholders (i.e. social marketing, policy development or networking methods);
- Instruments for identifying needs and problems related to WHP (i.e. evaluated questionnaires);
- Instruments and programmes for WHP intervention and implementation (i.e. training courses, relaxation or exercise programmes);
- Instruments for evaluating WHP activities (i.e. process- and outcome-related instruments and indicators);
- Models of Good Practice (in large companies, SME, public administration).

The toolbox deals with the question of how or with which methods and practices good workplace health promotion practice can be achieved. Aims of the toolbox are:

1. Identify and assess useful WHP methods and instruments from every European country
2. Organise a European 'exchange pool' of tools for WHP
3. Deliver strategic input for the national forum work

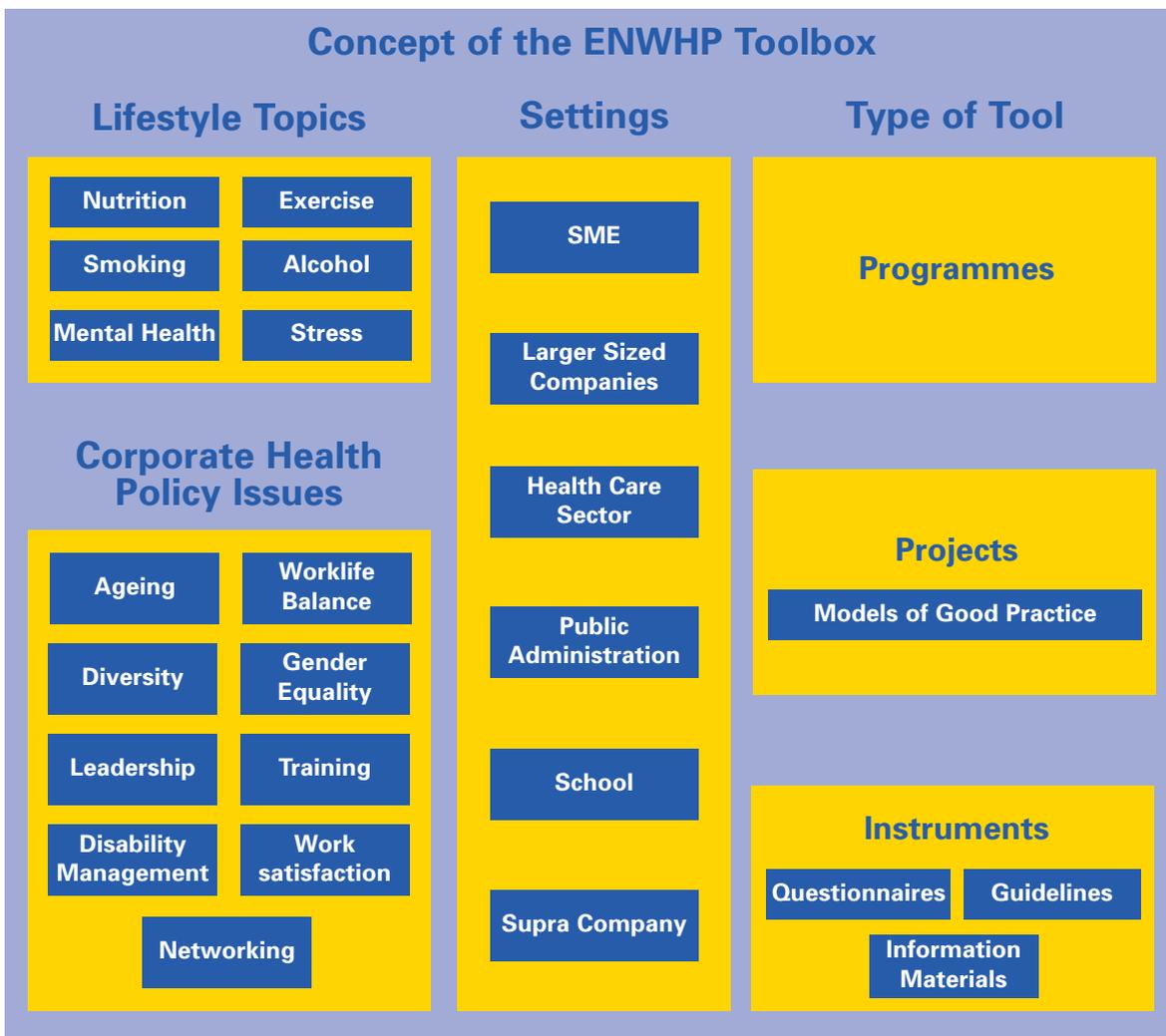
# The concept of the ENWHP-toolbox and how to use it

The toolbox will not duplicate work which has already been carried out in several member states and at European level. For example the Models of Good Practice (MOGP) are very useful tools, but these are not included in this report. The MOGP projects are described earlier in ENWHP reports.

The focus of the toolbox will be primarily on workplace health promotion, although as earlier mentioned the distinction is not always that clear to make.

This report provides a first overview of WHP tools available within the Network. The toolbox will be an ongoing process: in the future other interesting WHP tools will be added to the toolbox. At the moment, for example, there are tools missing on workload, post-traumatic stress, social responsibility and for management purposes. The intention is to result in a web-based database that provides the latest update of available WHP tools.

The following figure provides a graphic overview of the concept of the ENWHP-toolbox:



# 2. How the toolbox was developed

## 2.1. Project group

The Toolbox initiative was co-ordinated by the Dutch National Contact Office (NIGZ-Work & Health). This office established a project group consisting of the representatives of the National Contact Offices (NCOs) from Belgium, Germany, France, Ireland, Italy, Norway and Spain (see Annex 1). The project group began their work developing an initial concept of the Toolbox. This was discussed thoroughly at Network meetings (Copenhagen, November 2002) and within the advisory committee of the Network (Lyon, February 2003). The outcome of this process and the online survey of needs for tools carried out by the co-ordinator, provided the input for the 1st project team (see also 2.2. Collecting the tools). A template for classification purposes, developed by the ENWHP during past projects in connection with the quality criteria, was used to monitor the collection of tools and to identify loopholes (see Annex 2).

A practical trial on how the template works was carried out at the Network meeting in Athens (June 2003) and was amended accordingly before the collection process among the Network members finally began. The first evaluation was made at the second project team meeting in Amsterdam (October 2003), and a second collection was carried out to fill the loopholes (e.g. only a few marketing tools are available) and to clarify outstanding points concerning the tools submitted.

The information from the templates formed the basis for the descriptions of the tools in this report. For a final check, these descriptions were commented on by the NCOs who delivered the described tools.

## 2.2. Collecting the tools

For collecting the tools the project co-ordinator asked the National Contact Offices (NCOs) of the network to provide information on interesting WHP tools in their country. For obtaining the most essential information, the tools had to be described in the earlier mentioned template.

The NCOs were asked to deliver the descriptions of four tools (preferably non-specific multi-disciplinary general WHP-guidelines) and to describe them within the given template. The NCOs decided which tools were useful for the toolbox on the information of the project group and the relevant template. The NCOs were asked to deliver tools which are:

- used on a company level;
- used more than once (multi-use);
- transferable to different working situations and companies;
- accessible to different kind of users.

In addition to these inclusion criteria the NCOs were asked to provide references of the tools and examples of use. This information was needed to provide an insight into the quality of the recommended tools. The NCOs decided which tools to deliver for the toolbox. It was their decision whether the tools were of sufficient quality to be part of the toolbox, based on the inclusion criteria. The references of use give evidence of the practical use of the tools and the way the tools are evaluated in practice.

It still remains the fact that tools can be evaluated differently, according to their use in particular contexts. Tools are used by individuals or organisations, for purposes, in different contexts, at different levels. Tools may require adaptation to local circumstances. To assess the quality of the tool and its use in a specific context, the contact details for more information are included.

A difficulty in gathering the information was not only the timescale, but also the language. It was not always clear what exactly was meant in the templates, so feedback from the different NCOs was needed for a complete and exact description of the tool.

In the toolbox a description of the tool is available, not the tool itself since they are often not available in English. If tools are available through the internet, links were given in the description. This short description of the gathered tools was made with the following items: introduction, summary of the tool, example of use, references and contact details for more information. The description of the tools gives information for users to make their own judgement about quality because it is questionable who should set the standards. Every situation requires different aspects of quality of the tool.

The data-gathering for information about the tools ran from July 2003 till March 2004. This included validation of the information.

This is the first time WHP tools are collected Europe-wide as a joint effort of the members of the ENWHP

### 2.3. Using this toolbox

The toolbox is a practical kit for action to improve the health and wellbeing of employees. The added value of the toolbox comes from access to tools from other countries and the experiences of the same tool in different countries. In the description the contact details for more information are included, offering users the possibility to get more information about interesting tools. The toolbox can be used by anyone who wants to improve the health and wellbeing of employees at company level. Furthermore the tools are for stakeholders at local, regional and national level or external professionals (e.g. consultants WHP, occupational safety and health). The toolbox is not only for practical use. Some tools can also be used in the political dissemination process to change the incentives and political framework conditions for WHP.

This report is the descriptive version of the toolbox. A website database toolbox is under construction. With this database the search for convenient tools will be much easier. For this purpose the tools are labelled with type of tool (e.g. questionnaire), issue (for example mental health) work organisation/personnel and corporate health policy issues (e.g. leadership) and setting (SME, large company etc.). A search by country and language is also possible. The database will be part of the website of the Network: [www.enwhp.org](http://www.enwhp.org). Models of Good Practice (MOGP) are also included in this database. This database will make it easier for users to search for a specific tool, and the collection of tools will also be an ongoing process and more tools will be available.

### 2.4. Other interesting tools

This toolbox is focussed on WHP and derived from the input of the National Contact Offices of the network. There are several toolboxes which are also interesting, not specifically on WHP but worth consideration in the field of health promotion at the workplace.

For example:

- The Baua toolbox for Germany: [www.baua.de](http://www.baua.de)
- Wellbeing index of the WHO: [www.who.int](http://www.who.int)
- Tools of the International Labour Organisation: [www.ilo.org](http://www.ilo.org)
- Tools of Health Canada: [www.hc-sc.gc.ca/english/](http://www.hc-sc.gc.ca/english/)
- Tools of the Bilbao agency: [www.osha.eu.int](http://www.osha.eu.int)
- Disability management tools: [www.wrc-research.ie](http://www.wrc-research.ie)

# 3. Overview of tools per country

## Explanation of categories

### **Term „toolbox“**

The term „toolbox“ is very strongly associated with the level of concrete instruments and measures. However this toolbox also covers projects and the level of programmes. Therefore an inclusive approach was developed which covered the Models of Good Practice outcomes (projects, some of them reflecting corporate –wide programmes) as well.

### **Type of tool category**

Programmes: a series of projects (often corporate wide) with each project applying a series of instruments (tools).

Models of Good Practice: reports (based on ENWHP quality criteria) of companies who can be seen as good examples in the field of WHP.

Instruments include questionnaires for example needs assessment or evaluation, guidelines and information materials such as books and leaflets.

### **Lifestyle Issues**

The following lifestyle issues are included: nutrition, exercise, smoking, alcohol and mental health.

### **Work organisation/ personnel and corporate health policy issues**

Under this heading the following issues are included: ageing workforce, work-life balance, diversity, gender equality, leadership, training, disability management, work satisfaction and networking.

### **Setting**

SME: micro and small-sized enterprises in the private sector

Larger sized companies: larger and medium-sized enterprises/organisations in the private sector

Health care: health care, welfare and social security

Public administration

School: organisations in the field of school and training

Supra Company

## Austria tool 1

### Health Report/ Gesundheitsbericht

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	<b>Work Satisfaction</b>	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	<b>Larger sized companies</b>	Health care	Public Administration	School	Supra Company	

#### Summary

The health report is a statement for management and employees describing the structural analysis of the health situation within a company and is produced before and after a WHP-project. Producing the project plan and catalogue of activities makes them binding for the organisation. The tool is thus used principally for internal project marketing.

The content of the first report is:

- Aims of project
- Project team
- Project plan
- Known health figures (sick leave data, accidents, etc.)
- Results of 1st employee survey (enquiring about work satisfaction)

The second health report is produced following the WHP-project.

The content of the second report is:

- Description of the entire project
- Catalogue of activities (those in progress and also those planned for the future)
- Results of 2nd employee survey (enquiring about work satisfaction)

Both health reports are distributed to the entire workforce.

This tool has been available in German since 1998 and has been used some 20 times.

#### References

Sochert R. (1999). *Gesundheitsbericht und Gesundheitszirkel: Evaluation eines integrierten Konzepts betrieblicher Gesundheitsförderung*. Wirtschaftsverlag N.W. Verlag für neue Wissenschaft GmbH.

#### Costs

Production of the necessary number of reports.

### Example

The health report tool was used by Habau Hoch- und Tiefbaugesellschaft (building company with 1,200 employees) The HSG project (Habau-Sicher-Gesund) started with an analysis of the current situation. Employees thereafter worked out more than 200 suggestions to improve their working situation with regard to technical improvements as well as training and the improvement of internal cooperation.

The first report was produced in 1999 and the second in 2000. Both reports were distributed to all employees.

### Contact:

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### More information

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## Projektbericht



## Austria tool 2

### Health Circles/Gesundheitszirkels

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	<b>Work Satisfaction</b>	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	<b>Larger sized companies</b>	Health care	Public Administration	School	Supra Company	

#### Summary

The Austrian WHP Network uses the WHP quality criteria formulated by ENWHP. One of them is 'participation' - that means supplying employees with comprehensive information at an early stage of the WHP planning process and also involving them in decision making. One way to achieve this goal is to organise Health Circles. Projects that have used health circles have produced successful outcomes. The results of the health circle (health circles) form the basis for WHP programme planning.

The health circle employs the following working procedure:

- 6-8 employees with similar exposure to stress come together for 4-6 meetings of 2 hours each.
- There is no hierarchy between the participants, no special 'experts' participating
- Moderated by an external or internal leader (trained as described in 'Training' tool)

Content:

As a first step, participants discuss shortcomings related to communication, organisation, work satisfaction factors and working environment. The second step for the group is to come up with proposals for improvement. In most cases, the realisation of these proposals requires a continuous process to be integrated in the company organisation and work process, which changes as the environment of the company does.

The tool has been available in German and has been part of WHP projects since 1995 in Upper Austria.

#### References

Sochert, R. (1999). *Gesundheitsbericht und Gesundheitszirkel Evaluation eines integrierten Konzepts betrieblicher Gesundheitsförderung*, Wirtschaftsverlag N.W. Verlag für neue Wissenschaft GmbH.

#### Costs

Working time of participants and costs for moderator.



VIVA – Gesundheitsförderungsprojekt bei pro mente OÖ

### **Example**

The tool was used by the Bildungsinstitut Pro Mente (Organisation for mental and social health with 1,094 employees) as a part of the project 'VIVA – Health Promotion in Pro Mente'

In this workplace 7 health circles were held (1 for each section). Participants made more than 1,000 proposals. The results were presented at a conference, and a project team selected a number of proposals for implementation.

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URL: [www.ooegkk.at](http://www.ooegkk.at) and [www.netzwerk-bgf.at](http://www.netzwerk-bgf.at)

## Austria tool 3

### SALSA Employee survey/ Mitarbeiterbefragung „SALSA“

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	<b>Work Satisfaction</b>	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	<b>Larger sized companies</b>	Health care	Public Administration	School	Supra Company	

#### Summary

SALSA is an employee survey measuring work satisfaction. SALSA is used as a diagnosis instrument at the beginning of a project as well as an instrument for evaluation at the end. The questionnaire was developed by ETH Zürich (Swiss federal Institute of Technology) and is used with their authorisation by GKK (the Upper Austrian Sickness Fund). The companies receive a detailed report and a management presentation. The results are made available at department level and are a useful starting point for following activities such as health circles.

SALSA consists of two parts. The first part can be changed to suit the individual need of the company/organisation, the project and the socio-demographic data. The second part is fixed.

It is possible to compare the results with the figures of other companies of the same branch.

The tool has been available in German since 1995 and has been used by the Upper Austrian Sickness Fund since 2001. Up to March 2004, 30 surveys have been completed.

#### References

Strohm O., Ulich E., (1997), *Unternehmen arbeitspsychologisch bewerten*, Mensch-Technik-Organisation Band 10, Vdf-Hochschulverlag AG an der ETH Zürich.

#### Costs

The price depends on the number of employees: between €726 and €1,450.

### **Example**

The 'Steyrermühl UPM-Kymmene' (a paper production company with 700 employees) started the project 'Gemeinsam Gesund' (Healthy Together) in February 2002 using SALSA. The analysis was carried out for 9 different departments. 80% of all employees took part. The conclusion was presented to the management, to the entire workforce in two conferences, and was also published in an internal health report distributed to all employees.

The project has now been completed and was evaluated in September 2003.

### **Contact:**

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### **More information**

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Sickness Fund  
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Austria  
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URL: www.ooegkk.at and www.netzwerk-bgf.at

## Austria tool 4

### Training for project leaders and health circle moderators/ Training für ModeratorInnen und ProjektleiterInnen

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

In Austria the demand for professional projects continues to rise. In order to support the companies, health circle training courses are offered by the Austrian network of WHP together with Fonds Gesundes Österreich (the Fund for a Healthy Austria) ([www.fgoe.org](http://www.fgoe.org)) with the aim of building up 'in-house competence' for running projects.

The training course 'Moderating Health Circles' is an 'on call' seminar. This means that the organisations can determine the time and place of training to suit the needs of the project. Larger organisations can request in-company training courses, while the staff of smaller companies participate in courses held for employees of several companies.

The training for 'Project leaders' consists of: 3 days (seminar) and 1 day (coaching) for 6-12 people  
Content:

- Basics of WHP
- Instruments of WHP
- Project management

The training 'Moderating of health circles' consists of: 2 days seminar for 6-12 people  
Content:

- Aims of WHP and Health circles
- Methods of moderating and presenting

This tool has been available in German since 2003 and has been carried out six times.

#### References

References are not available

#### Costs

Training for Project leader: €300

Training for moderating health circles: €200

Companies running a project get a 50% discount from the Fonds Gesundes Österreich (the Fund for a Healthy Austria).

### Example

The Finanzlandesdirektion Kärnten (Finance Office Carinthia, 1,050 employees) has implemented the training.

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URL: [www.dienststellen.bmf.gv.at](http://www.dienststellen.bmf.gv.at)

### More information

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## Belgium tool 1

### Addressing Psychosocial Problems at Work (SOLVE)

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	<b>Training</b>	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	<b>Smoking</b>	<b>Alcohol</b>	<b>Mental Health and stress</b>		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

SOLVE is an interactive educational programme and shows how psychosocial problems can impact on each other. How, for example, someone suffering from serious stress may also develop alcohol or drug addiction, or become physically or psychologically abusive to other employees. While dealing directly with such addiction or abuse is part of the solution, another aim so too is trying to alleviate the stress, whether through better social support or by restructuring work. The aim of SOLVE is to address the problems of stress, alcohol and drugs, violence (both physical and psychological), HIV/AIDS and tobacco at the enterprise or organisational level. Using an integrated approach, SOLVE offers a course for managing directors, an in-depth course for operational managers and courses for employees.

SOLVE for managing directors is an interactive two-hour programme for top managers designed to introduce the integrated approach and to demonstrate the impact on corporate survivability.

The policy level SOLVE course takes place over four days, with each day being devoted to a different psychosocial condition, and structured on the basis of a triple-stage learning process. The Policy-Level SOLVE Course is highly interactive, using case study analysis, simulation exercises and policy development activities to reach its objectives.

SOLVE for employees is a one to two-hour interactive orientation course for employees, employees' representatives and supervisors. It is designed to

demonstrate how multiple psychosocial factors can impact the worker at work, during leisure activities and at home. It also provides an opportunity for the worker to become familiar with the comprehensive corporate policy. There are 15 MicroSOLVE courses (one-and-a-half-hour courses) to inform workers on specific means of recognising, preventing and dealing with specific psychosocial problems,

The SOLVE approach is spread across several countries. The ILO (International Labour Organisation) has designated *host institutions* and *national facilitators*. The national facilitator is responsible for promoting SOLVE at the national level, for acquiring, printing and distributing SOLVE materials and translating them into local languages. The SOLVE courses can only be organised by *Course directors*. PREVENT ([www.prevent.be](http://www.prevent.be)) is the national facilitator for Belgium.

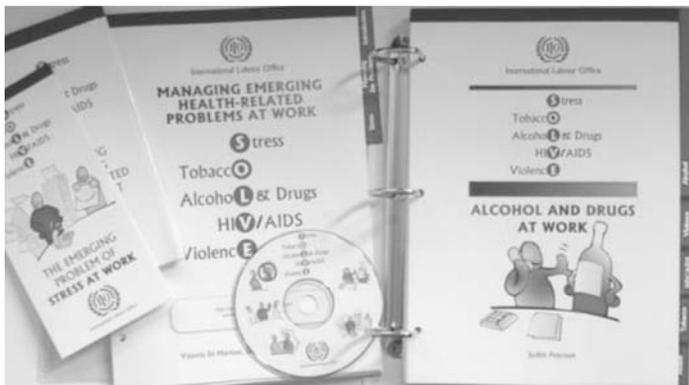
This tool is currently available in English, French and Thai. The Spanish translation is currently being finalised and will be available in late 2004. Since its inception in 2000 national capacity to direct SOLVE has been created in over 25 countries.

#### References

Di Martino, V., Gold, D. and Schapp, A. (2002). *Managing Emerging Health-Related Problems at Work*, Geneva: International Labour Organisation.  
[www.ilo.org/safework/solve](http://www.ilo.org/safework/solve)

## Costs

The costs of the courses vary. The course director decides on the costs for participants.



**S**tress  
Tobacco  
Alcohol & Drugs  
HIV/AIDS  
Violence

## Example

SOLVE was used by the Joint Air Canada / International Association of Machinists and Aerospace Workers EAP Program to educate corporate leaders, employee assistance workers and workers in dealing with psychosocial problems at work.

## Contact:

International Association of Machinists and Aerospace Workers,  
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## More information

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URL.: [www.ilo.org/safework/solve](http://www.ilo.org/safework/solve)

## Belgium tool 2

### Participatory Risk Assessment/ Participatieve risico analyse

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	<b>Training</b>	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

In the Participative Risk Analysis (PRA) method, based on the processes and together with the employees concerned, possible problems are traced, causes identified and suggestions for improvement are proposed.

Involving employees can only succeed when everyone (top-down) in an organisation is convinced of the usefulness of participation and when the management is prepared to establish information and communication structures for the project. Without this commitment, a project based on participation is doomed to failure. Employees must be conscious of the fact that their participation is aimed at optimising the process.

Employees (people) play as much of a role in that process as the organisation of labour (work). It is therefore not the aim to make a list of complaints and wishes: those involved are persuaded by the PRA system to reflect in a constructive and positive manner. They must arrive at the causes of the problems and the possible solutions themselves.

In this way, the organisation climate will be influenced positively.

PRA (participatory risk assessment) consists of the following steps:

- Management (commitment): information about the method, defining the strategy for the company, commitment
- Informing the workers: project, approach, time frame
- Developing the questionnaire: defining the tasks, question items

- Training: hazards, risks, perception
- Questionnaire: individually, risks, scores (0-5), solutions
- Analysis and report
- Presenting the report to the management
- Presenting the results to the workers
- Identifying the priorities and the measures: quick wins, plan (schedule, responsibilities, means)
- Implementing the measures
- Evaluation

This tool has been available in Dutch since 1985 and has been used 400 times (various projects, including small ones and projects covering various risks).

The tool is also a part of a 'train the trainer' programme in which people learn how to use it. After the training they can use the tool themselves.

#### References

Beeck, Op de R. (1998). *Participatieve Risicoanalyse*. Paper veiligheidskunde niveau 1.

#### Costs

Cost for training experts. The training is given by PREVENT.

### **Example**

Fluxys, a natural gas transport company, has over 800 employees and a consolidated balance sheet total of €2,029 million (2002). Some 600 collaborators are responsible for the maintenance, operation and development of the gas infrastructure: a natural gas transport network in Belgium comprising some 3,730 km of pipeline, associated infrastructure, an underground storage facility and a terminal for liquefied natural gas (LNG) in Zeebrugge. With 17 points of connection to natural gas sources and neighbouring networks, the Fluxys network is one of the best-interconnected systems in Western Europe. Fluxys carried out a PRA. In the first phase the project was carried out within the group of 'operational' employees, who work in the field. The next phase aimed at the employees working in the main office.

Through a training programme the employees identified the main risks related to their jobs and proposed actions to improve the situation. These actions are implemented step by step, after being prioritised and evaluated. The implementation process is still ongoing. The project was initiated by the OSH (Occupational Safety and Health) department and carried out by a working group composed of operational managers. This working group assures the follow-up and is also responsible for the implementation of the improvement actions. The whole process is accompanied by external consultants. The first results show that the PRA contributed to a significant decrease in occupational accidents.

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### **More information**

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URL: [www.prevent.be](http://www.prevent.be)

## Czech Republic tool 1

### WHP Screening and intervention system

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The WHO strategy of comprehensive occupational health includes screening of risk factors for non-communicable diseases and a needs assessment. Based on this strategy the WHP screening and intervention system consists of a questionnaire on healthy lifestyles and working conditions.

It was standardised for the Czech population, translated into English and used several times.

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## Denmark tool 1

### Working Environment Certificate/ Arbejdsmiljøcertifikat

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The working environment certificate can be achieved by inspection or certification of the company's working environment management system. ISO 9000/14000-systems can be integrated. The aim of the tool is to be an incitement for companies to achieve a systematic and preventive effort on a high level and to fulfil legal obligations on material working environment issues, while at the same time dealing with workplace health promotion.

#### Requirements for WHP:

- Participation of the employees or their representatives in decision making about how to deal with health promotion at the workplace.
- The decision has to be in writing.
- For companies with a safety committee (if there are more than 20 employees) the decision must include aims, an action plan and guidelines for follow-up.
- The company must be able to document the effort and the following results as well as the participation of the employees.
- Documentation must be available to the public

This tool has been available in Danish since 1999 (updated 2003). By March 2004 more than 150 companies had been certified.

#### References

At-vejledning om arbejdsmiljøcertifikat F5.1, Arbejdstilsynet april 2002. København.  
[www.at.dk/sw5573.asp](http://www.at.dk/sw5573.asp)

#### Costs

Depending on company size and production complexity (e.g. approx. DKK 200,000 for a hotel chain with 10 locations). Building up the system costs, internal time and often money for OHS or other external advisors.

### **Example**

Kommunekemi a/s (a treatment plant for hazardous waste, approx. 200 employees) has received the Working Environment Certificate 2002. Outcomes and activities are described in the Environmental Statement 2002 which can be downloaded from the homepage in English.

### **Contact:**

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Email: [kk@kommunekemi.dk](mailto:kk@kommunekemi.dk)  
URL: [www.kommunekemi.dk](http://www.kommunekemi.dk)



*65 employees, cheerful and in good form, participated in the annual relay race in Fælledparken*

### **More information**

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URL: [www.arbejdstilsynet.dk](http://www.arbejdstilsynet.dk)

## Denmark tool 2

### Health profiles for employees and workplaces/ sundhedsprofil

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	<b>Training</b>	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The aim of the personal health profiles is to motivate employees to change lifestyles and the workplaces to improve their health.

Skilled consultants conduct two health conversations. The period between these conversations is 4 months. There are special guidelines and questionnaires for the conversation. Topics of the conversation are: health status, motivation, stages of changes, contract for the future and a self-assessment combined with a colour-coding of the need for change – major need, some need and no need: red, yellow and green.

Output of the health conversations is a mapping of health and wellbeing at the workplace and as well as status and intervention related to the individual.

This tool has been available in Danish since 1995 with an update in 2002. It has been used on a wide scale.

#### References

NCSA (2002). Sundhedsprofiler – manual. København, NCSA.

#### Costs

Manual can be downloaded from [www.ncsa.dk](http://www.ncsa.dk) and used free of charge. If consultants from NCSA (National Centre for workplace health promotion) are needed the price will be negotiated.

### **Example**

Amagerforbrænding I/S (waste incineration plant, used the tool as a baseline and follow-up survey in a larger project ('Healthy Amagerforbrænding') combining lifestyle activities, social responsibility and work environment.

Reference: Wiegman & Petersen (2002). Evaluering af Sund Amagerforbrænding. København, CASA. [www.casa-analyse.dk/498](http://www.casa-analyse.dk/498)

### **Contact:**

Mrs A. Blædel, see below under more information.



### **More information**

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URL: [www.ncsa.dk](http://www.ncsa.dk)

## Denmark tool 3

### Healthy bus sector/Sundbus

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The aim of the Healthy Bus project is to initiate systematic health promotion efforts in cooperation with the parties in the bus sector. The efforts will lead to improved health and well-being among bus drivers.

The intention of the bus project is to develop company-related methods to strengthen and evaluate health promotion efforts. Healthy Bus thus focuses on change and action research.

The tool consists of the following elements:

- A survey of the possibilities of, and barriers to, health promotion within the bus sector using a questionnaire: How good is the work environment, the health, the well being, and the lifestyle of the bus drivers?
- Interview with the employers about the same subjects.
- Presentation of possible improvements and interventions.
- The participants are responsible for selecting and carrying out the interventions, for example within the following areas: organisation of the work and decision authority, education and competence, traditional work environment issues, lifestyle and work-life balance.
- Questionnaire studies two and four years after the first survey to see if the initiatives have been carried out and have had any effect.
- Several detailed studies during the project.
- Development and description of general methods which bus sector companies can use specifically and which other sectors can use to initiate health promotion.

This tool is available in Danish. Since a project start in 1999 it has been used on a wide scale in the greater Copenhagen area.

#### References

Poulsen, K. et al. (2004). *Refleksioner over interventioner*. København, AMI.

Abstract in English can be found at [www.ami.dk](http://www.ami.dk) under projects and health promotion.

#### Costs

Time and money for the intervention research.

### **Example**

De Hvide Busser (Company “The White buses”, approx. 80 employees) has participated in the project. The activities included a change in work planning, individual physical treatment and nutrition guidance for the drivers and their families. Larger companies like Arriva and Connex have also participated.

### **Contact:**

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### **More information**

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URL: www.ami.dk

## Denmark tool 4

### Thermometer for well being at work/ Trivselstermometret

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The aim of the thermometer for well-being at work is to start a dialogue and a process in order to maintain and improve the existing well-being at work at group level.

The tool consists of the following elements:

Step 1: brainstorm over the question: How can we ensure that everybody is happy to go to work tomorrow?

Step 2: present temperature on well-being

Step 3: focus on the positive elements of well-being

Step 4: making a list of positive elements

Step 5: division of elements into categories

Step 6: temperature on future well-being

Step 7: which elements can contribute to reaching that temperature?

Step 8: choosing a priority and making an action plan

Step 9: brainstorm/reflection: How can we devote more attention to positive well-being?

Step 10: action

Step 11: more elements through step 8-10.

This tool has been available in Danish since 1999. It has been used widely by public and private companies.

#### References

Sønderjyllands Amt (undated pamphlet):

*Trivselstermometret – en metode til at forbedre arbejdsmiljøet.* Aabenraa, Sønderjyllands amt. Can be downloaded from: [www.sfa.sja.dk](http://www.sfa.sja.dk) under 'foldere og publikationer'.

#### Costs

Download is free, a paper pamphlet costs DKK 12.

### Example

Danfoss A/S (worldwide company producing mechanical and electronic component, e.g. for climate control, approx 17,000 employees) has helped develop the tool as a user.

### Contact:

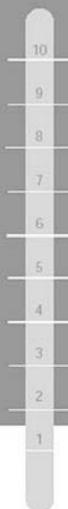
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### More information

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Sønderjyllands Amt



*Trivselstermometeret*  
*- en metode til at*  
*forbedre arbejdsmiljøet*

Et samarbejde mellem *Danfoss* og Sønderjyllands Amt

Sundhedsforvaltningen

## Finland tool 1

### Workability Index/ Työkykyindeksi

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The workability index is an instrument to be used in occupational health care. The index is meant to support the worker. It can be used at an early stage to help ensure that the correct measures are taken to maintain workability. The data are confidential, and on an individual level the information is only used for occupational health care purposes. The workability index is easy and quick and can be used for follow-up studies both at an individual and at group level.

The workability index covers seven items, each of which is evaluated through one or more questions.

1. Current workability compared with the lifetime best
2. Workability in relation to the demand of the job
3. Number of current diseases diagnosed by a physician
4. Estimated work impairment due to diseases
5. Sick leave during the past year (12 months)
6. Own prognosis of workability two years from now
7. Mental resources

Each item has its own score; the best rating on the index is 49 points and the worst is 7 points. The points can be divided into four different categories:

- 7 - 27 points = poor
- 28 - 36 points = moderate
- 37 - 43 points = good
- 44 - 49 = excellent.

This tool is available in Finnish, Swedish and English, first published in 1994 and updated in 1997. There are more than 1,000 occupational health care units using the tool.

#### References

Ilmarinen J; Tuomi K; Klockars (1997). Changes in the workability of active employees over an 11-year period. *Scand J Work Environ Health*: 23 (suppl):49-57.

#### Costs

The instruction manual (in English) costs €19. It includes the questionnaire which can be copied.

### **Example**

Almost all the Finnish occupational health care use the tool on a daily basis.

It can also be used in Human Resource reports at company level.

### **More information**

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Finland

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## Finland tool 2

### Team Bees/ Työyhteisötalkoot

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The aim of 'team bees' is to maintain workability by increasing the cohesiveness of the work community.

The objectives are:

- To increase employee-employer collaboration
- To strengthen employees' empowerment and
- To support individual and collective self-esteem in result-oriented problem solving and in organisation development (OD) activities.

The tool is a process tool beginning at the individual phase (result-searching thinking on the problem or the challenge presented), and then enriched with (and crystallised in) pair dialogue and group discussion.

The process is based on the production of a visionary image for the future and on mapping the obstacles on the way to this vision.

The task is to remove the obstacles by carrying out some concrete and practical activities agreed in the Team Bees.

This tool has been available in Finnish since 1995 and has been updated in 2001; it has been implemented by FIOH (Finnish Institute of Occupational health) 20-30 times between 1995-2003.

#### References

Ilmarinen, J., Tuomi, K., Klockars (1997). Changes in the work ability of active employees over an 11-year period. *Scand J Work Environ Health* 1997;23 (suppl): 49-57.

#### Costs

According to the contract.

### **Example**

In the City of Helsinki (Building and Constructing dept., 1,700 employees), the Maintenance of Work Ability Programme was based on this tool in 1995 - 2000.

Outcome: Decreased sickness-absenteeism. Increased reported wellbeing and reduced self-reported health problems among employees.

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## Finland tool 3

### STEPS for Well-being in Workplaces

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

As part of the National Age Program the Ministry of Social Affairs and Health asked the Finnish Institute of Occupational Health to produce short and simple but comprehensive material for workplace health promotion. The publication can be used for preparing, planning, realising and evaluating work place health promotion. It was designed to be readable and useful for employees, teams, foremen and management of organisations, also in small and medium sized enterprises. The STEPS also contains a matrix for self-evaluation and scoring of practices. The tool was published in 1998 and updated in 2003.

#### Preparing

The commitment of all parties, including employees, foremen and management is necessary. Visible information advances initiative. It is good practice to document the decision to start and to nominate a group of people responsible for planning the programme.

#### Planning

Initially there should be an examination of the available material on individual health, workplace safety, organisational function and training needs and the programmes available. The needs assessment should involve all those working in the organisation. Priorities for the health promotion development program can be set after ensuring that everyone has expressed his or her personal needs. Responsibilities, timetables and follow-up plans are then outlined.

#### Realisation

It is useful to divide the planned actions into smaller processes to be achieved according to an agreed timetable. Work ability maintenance should intertwined with the everyday practices and processes of the workplace. The process should reach everyone. A work-maintaining approach can be called conducive production.

#### Evaluation

All actions need assessment and reorientation from time to time. Evaluation of outcomes may be formal or informal. Available figures and statistics should be used in doing this. A self-assessment programme for each individual worker is also advisable. The STEP self-evaluation matrix is designed for the macro-evaluation of all health promotion activities.

#### Self-evaluation matrix

The WHP-STEPS-tool contains an evaluation matrix (1-6 scores) for 1) employee health and well-being, 2) organisation and team functions, 3) professional skill development, 4) work and work environment and 5) organisation of workplace health promotion. Score ranges are ranked in terms of good practice, high standard practice and excellent practice.

There are three levels of operation. The first is the good practice level (6-15 points). The second is the high standard practice level (16-26 points) and the third is the excellent practice level (27-36 points).

This tool is available in Finnish, Swedish and English. Part of the tool has been translated into Italian.

### References

Jouttimäki L. (1999). Steps to workplace health promotion - a useful tool for every workplace. Työterveiset, Newsletter of FIOH. Työterveyslaitos, Helsinki.

Jouttimäki L, Bergström M. (2003). Tyky-Step - työkalu työpaikan tykytoimintaan. Laatupala, Stakes: Helsinki.

### Costs

The handbook costs €10.



### Example

The tool has been used both in training courses at Finnish Institute of Occupational Health and widely within workplaces across Finland.

At Hyvinkään Sairaala (Hyvinkää Hospital) some 200 employees used the steps for wellbeing. They have adapted the tool to their own needs.

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## Finland tool 4

### Human resource report – model for SMEs/ Pienten ja keskisuurten yritysten henkilöstötilinpäätös - malli ja ohjeet

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The Human Resource report outlines quantitative and qualitative indicators for human resource management. The Human Resource Report is based on the mission statement of the companies and comprises three different parts:

- 1) Income statement of Human Resources
  - Personnel renewal costs
  - Personnel development costs
  - Costs due to stress and absence
- 2) Report of personnel
  - Number of personnel
  - The type of employment (regular, temporary, part-time etc.)
  - Working time
  - Competence (qualifications, period of service, personnel training, etc.)
  - Health and safety (sick leaves, number of work accidents, workability-index etc.)
  - Working community (indicators from working climate surveys etc.)
  - Networks (customer satisfaction)
  - Economy (net sales/worker, operating profit, etc)
  - Summary (Analysis of strenghts, weaknesses, opportunities, threats (SWOT), durable outcome development)
- 3) Balance sheet of personnel

This tool has been available in Finnish since 2002 and this tool is widely used in Finland.

#### References

Ahonen, G., Anttonen, H., Bergström M, et al. (2001). *Henkilöstöraportointi, johtaminen ja työssä jaksaminen (Personnel reporting, management and wellbeing at work)*. Helsinki: The Ministry of Labour.

#### Costs

The tool is free of charge.

### **Example**

One restaurant called Osuusruokala Ylensyjät with 33 employees has been producing a human resource report since 2000 based on this model. They have made a SWOT analysis from the information, and found cornerstones for their developmental work.

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## France tool 1

### Enterprise network on Muscle Skeletal Disorder prevention/ "Club TMS"

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	<b>Networking</b>					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	<b>Mental Health and stress</b>		
Setting	<b>SME</b>	<b>Larger sized companies</b>	Health care	Public Administration	School	Supra Company	

#### Summary

The enterprise network is a tool to support workplaces putting WHP into practice. It is a tool for benchmarking, debating practices and sharing good practices. The focus of these networks is on Muscle Skeletal Disorders (MSD) prevention.

The following steps are important:

Step 1: Design of the network principles

- Identification of companies
- Identification of appropriate characteristics (e.g. branch)
- Homogeneity between companies

Step 2: Setting up the local network

- Definition of aims of the group
- Definition of items of debate
- Definition of the process

Step 3: Implementation

- Regular meetings, every two or four months. The meetings rotate amongst each company
- Knowledge management and meetings to accumulate knowledge.
- Some meetings with specific target groups (for example physicians, methods ...)

Step 4: Dissemination of knowledge

- Training of target groups (company experts or external consultants)
- Meetings open to larger public
- Articles in newspapers and professional journals

This tool has been available in French since 2000 and was updated in 2003. Lorraine was the first region. By March 2004 'clubs TMS (MSD)' were active in seven regions, and implementations continue.

#### References

Bourgeois F. et al. (2000). *Troubles musculosquelettiques et travail . Quand la santé interroge l'organisation*, Éditions ANACT Collection Outils et Méthodes.

#### Costs

Network management by ANACT (Health and Work Department): about 15 days for one group in one region and time investments of participants.

### **Example**

An electrical component company of the Lorraine Club; participated in the network. The participation contributed in developing outcomes such as:

- Training for members
- Development of economic criteria
- Reorganisation of workplaces
- Tools for occupational physicians services for collecting health complaints

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## France tool 2

OMSAD® (Medical Observatory of Stress, Anxiety and Depression)/

OMSAD® (Observatoire Médical du Stress, de l'Anxiété et de la Dépression)

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	<b>Networking</b>					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	<b>Mental Health and stress</b>		
Setting	SME	<b>Larger sized companies</b>	Health care	Public Administration	School	Supra Company	

### Summary

OMSAD is a tool to measure stress levels and to define WHP interventions. The existing 50,000 completed questionnaires are stored in a database. This database contributes to the understanding of occupational stress.

OMSAD consists of the following 7 steps:

Step 1: Communication & information about stress for the whole company

Step 2: Installation of software for the questionnaire

Step 3: Medical staff training

Step 4: Process evaluation (individual)

Step 5: Statistical processing (collective)

Step 6: Feedback & communication with medical staff, employees and management

Step 7: Pragmatic measures (if necessary) such as consultancy and training.

This tool has been available in French and English since 1998 and was updated in 2001. Since 1998 50,000 employees in France have completed the questionnaire.

### References

Not available.

### Costs

The tool itself is free of charge. Medical training €5,000.

Installation of software €10,000.

### **Example**

Renault (car manufacturer, 60,000 people) implemented an OMSAD in 1998.

Five years later, the levels of stress, anxiety and depression had decreased significantly.

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## France tool 3

### PLATO Operation: evaluation of risks, implementation and prevention/Opération PLATO

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	<b>SME</b>	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

PLATO operation can be used by SMEs and very small companies to evaluate multi-level professional risks and to implement WHP. The tool analyses medical, technical and organisational risk exposure. It is focused on the mobilisation of different actors, effective implementation of WHP, sustainability and dissemination of ideas.

#### Step 1:

Setting up the project. The steering committee included ARACT (Regional Association for improvement of working conditions), DRTEFP (Regional authority for work, employment, and professional training), DDTEFP Béziers (the local authority), General Council of Herault Territory (political authorities) and the European Social Fund. Consultants had been selected, one for each company, some of them being members of ARACT and ANACT. The steering committee was made up from the group of companies.

#### Step 2:

Start of the operation: managers of companies meet to discuss process and rules.

#### Step 3:

Several interventions in companies and frequent meetings to discuss data, definition of 'unities' of work (a new concept in prevention); identification and analysis of exposure conditions on one or several 'unities'; definition of a plan of WHP-action by the steering committee; implementation; evaluation.

#### Step 4:

Reporting and dissemination (articles and conferences).

This tool has been available in French since 2002 and has been implemented a number of times.

#### References

Not available.

#### Costs

Fee for consultants (15 days for each company).

### **Example**

CRIBALLET (industrial maintenance company with 18 employees) identified the 'Unities' of work and analysed exposure conditions in several units including an administrative centre. It appeared there was a link between pressure from the customers and conditions of work. A video was produced in which employees expressed themselves on the reality of these issues.

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## France tool 4

### Socio-economic approach to management (SEAM)/ Approche Socio-économique du Management

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

Sustainable economic performance demands dynamic balancing in time of the social performance/economic performance duality. This duality refines the socio-economic performance of new organisations. Social performance designates the organisational capacity to meet the needs of the internal and external players, i.e. stakeholders (managers, personnel, shareholders, customers, suppliers, and public and private institutions).

With a 'bio systematic' base the SEAM creates a model that integrates the various disciplines of analysis within an organisation. For example:

- it integrates human resources and financial management by calculating the costs of dysfunctions related to a lack of quality management
- it integrates marketing, sales and strategy
- it integrates the operations and production management with organisational development

The analysis of the interactions between various management dimensions of the business exceeds the usual methodology of the 'business plan', which does not actually integrate the company's social system, nor the fundamental concept of human potential.

The intervention consists of implementing synchronised types of actions :

- the transformation process. It begins with a diagnosis, which consists of the mirror effect of the dysfunctions, a calculation of the hidden costs and an expert's opinion on the unexpressed and root causes of the dysfunctions.

This diagnosis enables the players to become aware of the impact of social factors on economic performance.

This diagnosis is achieved in a two to four month period, through interviews.

- a socio-economic analysis. The implementation decision is taken on the basis of economic balances. After completion, a socio-economic evaluation of the project is made.

The tool has been continually developed since the seventies and is available in French, but many essential parts are translated into English and there are some in Spanish. The tool has been used often in several countries. A specific school of management trains high-level managers and experts, and contributes to research.

#### References

Savall H., Zardet V., Bonnet M. (2000). *Releasing the Untapped Potential of Enterprises Through Socio-economic Management*, ILO: Geneva.

Savall H. (2003). Socio-economic approach to management *Journal of Organisational Change Management* Emerald.

#### Costs

From €1000 in SMEs to €1 million in a company with 1,000 employees.

### **Example**

The approach has been implemented since 1984 in an industrial company, PDG in the agricultural sector. There has been a strong economic growth (from 350 employees in 84 to 3,200 in 2002). The company restructured itself on a decentralisation principle, focusing on individual life at work and taking teams into account. More than 300 people work in a new plant with a number of managerial functions. Reduction of working time to 33 hours has been implemented since 1995, in other words well ahead of the first French legislation on the issue. WHP has been integrated within management far beyond legal obligations.

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Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

### Summary

The Health Circles approach is a tool for OSH professionals and managers in private enterprises, public organisations and authorities. The approach is also useful for works councils in enterprises. At the supra-company level, the tool can be used by OSH professionals (e.g. health insurance funds, accident insurance funds, labour inspectorates) or WHP consultants.

The Health Circles have two main purposes:

1. To use information acquired from the employees on their experiences and perceptions to analyse the psycho-social, physical, environmental and organisational stress factors and health strains identified at the workplace (participation approach)
2. To develop suggestions, again by using the information acquired from the employees on their experiences and perceptions, to improve stress factors and health strains that have been identified regarding the technical and organisational work design and also individual behaviour (participation approach).

The tool describes the prerequisites and the different stages of implementation that are the periods in which specific measures are carried out. Health Circles can be implemented by dividing them into 6 successive phases that are again subdivided into different steps:

1. Prerequisites: consensus, project group
2. Preparation: needs analysis, expert discussion
3. Implementation of interventions based on needs analysis
4. Presentation of results to project group and staff
5. Implementation of measures

6. Evaluation by circle participants, staff and management and of company documents

The principle of the 'management circle' is the concept of continual improvement. Relating to a circle should demonstrate that the end of one activity is a basis and prerequisite for the beginning of another activity. Health management therefore becomes a permanent process within the enterprise. The implementation of the Health Circles approach takes a period of about 15 months.

The first edition of the tool was developed at the end of the 80s. Since then the tool has been evaluated continuously, improved and adapted for use in all branches of industry, trade, banks, insurance and in public authorities. The tool is available in German and English. A survey has shown that up to 1996 some 350 Health Circle projects were carried out by all the larger health insurance funds.

### References

Slesina, W. , Beuels, F. R., Sochert, R. (1998). *Betriebliche Gesundheitsförderung*, Weinheim: Juventa

Sochert, R. (1999). *Gesundheitsbericht und Gesundheitszirkel. Evaluation eines integrierten Konzepts betrieblicher Gesundheitsförderung*.

### Costs

The tool itself is described in the book 'Health Promotion Circles at the Workplace': €10

For organisations to implement:

- Company health report and employee survey: about €5,000 (depending on the size)
- External facilitator: €10,000
- Organisation manpower
- Training: €2,000

### Example

The tool health circle approach is used in various sectors. For example:

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## Germany tool 2

### Health Management at the Workplace: A Guideline for Practical Use/ Betriebliches Gesundheitsmanagement – ein Leitfaden für die Praxis

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	<b>SME</b>	<b>Larger sized companies</b>	Health care	Public Administration	School	Supra Company	

#### Summary

Health Management at the workplace is a tool for OSH professionals and managers in private enterprises, public organisations and authorities. The approach is also useful for members of works councils in enterprises. At the supra-company level, the tool can be used by OSH professionals (e.g. health insurance funds, accident insurance funds, labour inspectorates) or WHP consultants.

With the assistance of this tool, companies are able to identify the weak spots in their occupational health management structures and processes. A further aim is to integrate the entire process of health management as a learning cycle into the daily company routine.

The guideline has three aims:

1. To provide information, orientation and motivation for management and health experts
2. For systematic self assessment of an organisation
3. To assist in further training for management and health experts.

The guideline of health management is divided into 6 chapters:

1. Terminology and summary of the links between occupational health and safety, health promotion and occupational health management
2. Scientific basis and aims of occupational health management
3. Quality approach and the procedure chosen in the guideline
4. The basic idea of a 'learning organisation' is introduced and its implementation in daily company routine.

5. Presentation of a self-assessment process that enables the users in the company to analyse and assess the strengths and weaknesses of their occupational health management. There is also information about quality criteria for workplace health promotion and examples for implementation.
6. Presentation of tasks and problems that occur particularly frequently in the daily company routine when implementing workplace health promotion.

The first edition of health management was developed in 1999 and used many times. The tool is available in German.

#### References

The tool is not evaluated.

#### Costs

The tool itself is described in the book 'Betriebliches Gesundheitsmanagement': €15.

For organisations to implement: Organisation manpower to build up a health management system and to integrate into the existing management structures.

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## Germany tool 3

### Problems of age structure at the workplace: A guideline for self assessment/ Selbstbeurteilung altersstruktureller Problemstellungen im Betrieb

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The tool was developed to improve the working conditions for elderly employees. This is done by sensitising those in charge to problems concerning personnel policies and age-related questions. The tool provides guidelines and information for conducting a self-assessment of the organisation and where it stands with their policy on age-related issues such as workplace assessment, employment strategy, health and work design, working hours etc. The evaluation is carried out by a responsible person in the company. Questions are set on each of the issues to weigh up the arguments and encourage reflection. They should provide a wider view of the current situation and question whether the present structures are appropriate for the future with respect to changes and new challenges. With the results the tool enables companies to respond to the possible development of risks inherent in an ageing workforce in a timely manner.

The tool can be used by OSH professionals and managers in private enterprises, public organisations and authorities. The approach is also useful for members of works councils in enterprises. At the supra-company level, the tool can be used by OSH professionals (e.g. health insurance funds, accident insurance funds, labour inspectorates) or WHP consultants.

The first and most recent edition of the tool dates from 2000 and has been used in at least 20 companies, mainly in North Rhine Westphalia. The guidelines are available in German.

#### References

The tool has not been evaluated thus far.

#### Costs

Free of charge.

### **Example**

The guideline for self assessment was used in M. Busch GmbH Co Kg, an industry plant with two locations: production and administration of components and a foundry and mechanical treatment plant. The project was called TransAlt: it concerned the development of a systematic concept for health management with a focus on ageing employees. Requirements for the concept were:

- To develop a qualifying concept for OSH professionals, managers, members of works council and experts at the supra-company level
- To identify tasks to determine performance of elderly employees
- To create a suitable age structure in personnel policy

The concept should promote health and safety of employees and the financial framework should be part of the concept.

### **Contact:**

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## Germany tool 4

### The Health Kit for SMEs/ Der Gesundheitsbaukasten für Klein- und Mittelbetrieben

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	<b>SME</b>	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The health kit provides information, background knowledge and tools in order to help SMEs to deal systematically with the issue of health. The purpose of the kit is to provide a tailor-made concept, rather than providing a universal solution to impose on all enterprises. The Health kit can be used by employers and employees in SMEs, by OSH professionals at the supra-company level (e.g. health insurance funds, accident insurance funds, labour inspectorates) and WHP consultants. The Health Kit method is designed according to the method adopted by health management at the workplace and health circles (See also Germany tools 1 and 2).

The Health Kit contains:

- General information for assessing the initial situation of health and safety in the SME
- A brief description of the entire project and the production of the handbook to conclude the project
- Concepts, methods, procedures for a management approach on health
- Tools and aids such as questionnaires, checklists or information boards on workplace information management to adapt for use in the own enterprise
- Pool of knowledge with relevant basic and background information, e.g. relating to ergonomics, psycho-social and mental strains, motivation.
- Further sources of information (websites, literature etc.)

The tool was first used in a project during 1995 – 2000. So far the tool has been used in about 20 model enterprises which took part in the project, and involving roughly 10

manufacturers. The tool is available in German.

#### References

Not available.

#### Costs

The tool itself is described in the health kit: €20.

For organisations to implement:

- Organisation manpower;
- Costs for implementing the proposals for improvement (depending on the nature of proposals).

### **Example**

The tool health Kit for SMEs is used in various sectors.  
For example:

#### **Chluba & Ludwig Dentaltechnik**

Mühlstraße 15  
7139 Oberriexingen  
Germany  
Tel.: +49 7042 92250

#### **Optik Müller OHG**

Bocksgasse 28  
73525 Schwäbisch Gmünd  
Germany  
Tel.: +49 7171 927220

### **More information**

Gmünder Ersatzkasse/Gmünder Health Insurance Funds  
Mr H. Müller  
Gottlieb-Daimler-Strasse 19  
73529 Schwäbisch Gmünd  
Germany  
Tel.: +49 7171 801 628  
E-Mail: [hardy.mueller@gek.de](mailto:hardy.mueller@gek.de)  
URL: [www.gek.de](http://www.gek.de)

## Germany tool 5

### Guideline for health policy / Eine Handlungshilfe für betriebliche Gesundheitspolitik

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

With this guideline companies can integrate occupational health and safety into workplace health promotion, making workplace health promotion a comprehensive and permanent process and part of the work culture. The tool provides information on issues concerning prevention, sickness and health promotion, and provides guidelines to introduce, implement and evaluate workplace health promotion. The tool can be used by OSH professionals in private and public organisations, by members of works councils and by WHP consultants. The tool is more suitable for use in larger and medium sized, than in micro and small enterprises and organisations.

The guideline is divided into three parts:

#### A. Work – Health – Quality of Life

This part gives a summary of health, illness, prevention and health promotion. The main focus is on work-related health hazards and health strains which can lead to problematic conditions and illness. A description is given of the costs created by illness and the main workplace health promotion instruments which can be used to avoid them.

#### B. Steps for health promotion

A guideline for the strategic development of comprehensive workplace health promotion in the company. A detailed description is provided on how employees, spokesmen/women, works councils and other players involved in occupational health and safety can work together.

#### C. Create publicity

Working materials (leaflets, questionnaires, information brochures and posters) that invite ideas and encourage support for company health policy.

The tool has been available in Germany since 1995. It is unknown how often the tool is used.

#### References

Not available.

### **More information**

IG Metall Vorstand  
Abteilung Sozialpolitik, Referat Arbeits- und  
Gesundheitsschutz  
German Trade Union  
Mrs E. Zinke  
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60528 Frankfurt/Main  
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Tel.: 0049 69 66 93 22 23  
E-Mail: [eva.zinke@igmetall.de](mailto:eva.zinke@igmetall.de);  
URL : [www.igmetall.de](http://www.igmetall.de)

## Greece tool 1

### Greece: WHP benefits/ ELAIS S.A.

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The aim of the tool is to provide the user with a process model for implementing WHP, a set of activities to ensure the implementation of WHP and a set of tools to support the process. The tool comprises seven stages of the WHP implementation process:

##### Step 1. Programme Planning

- Building up the annual WHP program
- Cost analysis / Budget
- Management commitment

##### Step 2. Communication

- Preparation of communication plan
- Flesh out the project plan

##### Step 3. Needs Analysis

- Preparation of questionnaire / Appointments
- Analysis and feedback

##### Step 4. Programme Development

- Priorities
- Choices
- Action plan

##### Step 5. Implementation

- Plan implementation
- Communication with employees

##### Step 6. Evaluation

- Evaluation of the questionnaire
- Analysis and feedback

##### Step 7. Consolidation

- Integrate into work routine

The tool is available in Greek and was developed in 1999 (first edition) and reviewed in 2002 (most recent edition).

#### References

Not available.

#### Costs

At ELAIS S.A. a substantial WHP budget (approximately €600 per employee, according to the company's figures for the year 2003), is dedicated to the Occupational Health Department and is adjusted every year. In addition, the company spends, on an annual basis, about €80,000 for Occupational Health, Health Care and Dental Care programs and in addition, €100,000 as expenses for Medical Treatment (in and out of the hospital), in order to make its employees' health recovery easier and faster. In addition there are costs for the employees' training, time of the OSH department and costs of the OSH department staff.

### Example

ELAIS S.A. (produces and markets edible fats, 400 employees) has implemented the tool in 1999.

### Contact:

ELAIS S.A.  
Mrs Beki Theodoropoulou  
Occupational Health Department  
74 Athinion – Pireos str. – GR 185 47  
N. Faliro – Pireas  
Greece  
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### More information

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E-mail: Beki.Theodoropoulou@unilever.com  
URL: www.elais.gr

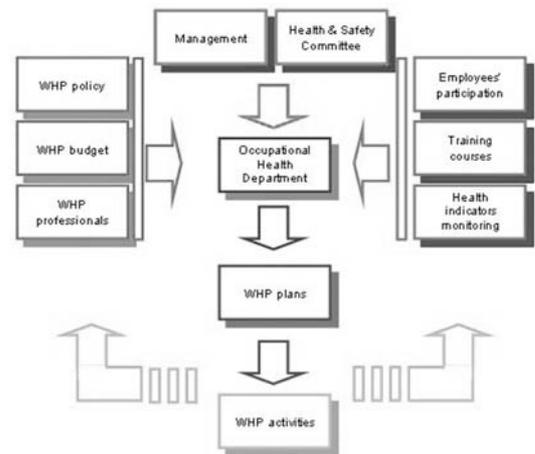


Fig. 1 WHP integration in the organization of ELAIS S.A.

## Greece tool 2

### Quality of life questionnaire in a hospital/ Ereuna Hygeias Ergazomenon

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The aim of the quality of life questionnaire is to assess the needs for future health promotion initiatives for hospital staff. The questionnaire focuses on quality of life, health risk factors, smoking, alcohol, nutrition, exercise and job satisfaction (based on SF-36 quality of life questionnaire).

The tool is a needs analysis amongst hospital staff. It includes the following steps:

- Preparation of questionnaire
- Performance of survey
- Analysis and feedback
- Reporting

The tool is available in Greek and was developed in 1998 (1st and most recent edition) and is used in 7 hospitals.

#### References

Not available.

#### Costs

Development of questionnaire: €3,000.

Use of questionnaire €5,000.

### **Example**

This tool is currently being used for the Hellenic Network of Health Promoting Hospitals.

### **Contact:**

Institute of Social and Preventive Medicine (ISPM)  
Mrs D. Triantafyllou  
115 17 Athens  
Greece  
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E-mail: dtriant@hotmail.com and chsr@med.uoa.gr

### **More information**

Institute of Social and Preventive Medicine (ISPM)  
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E-mail: chsr@med.uoa.gr

## Hungary tool 1

### Practice of WHP in Europe/A munkahelyi egészségfejlesztés európai gyakorlata

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The tool is a publication in a periodical for family doctors and occupational physicians. The publication concerns the guidelines of the World Health Organisation (WHO) on Occupational Safety and Health (OSH), the concepts of the European Union on Workplace Health Promotion (WHP) and the work of the European Network Workplace Health Promotion (ENWHP).

This publication was distributed in an edition of 8,200 copies in June 2002. The publication is available in Hungarian.

#### References

Galgóczy G. (2002). *A munkahelyi egészségfejlesztés európai gyakorlata*. Családvoszi: Fórum 7: 45-47.

#### Costs

Free of charge.

### **Example**

The information materials about European WHP practice were used at the prescribing of healthy workplaces at the American Chamber of Commerce in Hungary.

### **Contact:**

American Chamber of Commerce in Hungary  
Mrs B. Kovács  
H-1052 Budapest, Deák Ferenc u. 10.  
Hungary  
Tel.: +36 1 266 9880  
E-mail: [beatrix.kovacs@amcham.hu](mailto:beatrix.kovacs@amcham.hu)  
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### **More information**

National Institute of Occupational Health  
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Tel.: +36 1 476 1140  
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URL: [www.fjokku.hu](http://www.fjokku.hu)

## Hungary tool 2

### Consciousness of health (television programme)/Egészségtudat, tudatos egészség

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The tool provides information about the necessity of workplace health promotion.

Hungarian Television produced a series of programmes in a popular form called 'University of All knowledge' about the importance of scientific subjects.

The Hungarian data of morbidity and mortality justifies a programme about health promotion, and the workplace is a part of it.

This television programme was first broadcasted in September 2003 and has been shown three times. This TV programme is only available in Hungarian.

#### References

Hungarian National Academy of Sciences. Hungarian Telephone Company (MATÁV)

Duna Television Broadcasting Company.

#### Costs

Free of charge.

### **Example**

This programme was made available to the general public on TV during the course of a week on various channels. Approximately 2 million people viewed the programme.

The written version of this paper is available on the net: [www.mindentudas.hu](http://www.mindentudas.hu). There is an online chat-forum and a test to take an examination. Each semester will be also be compiled in book form. The topics and the speakers are selected by the Hungarian Academy of Science.



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## Hungary tool 3

### Booklets of the Forum of Primary Prevention of WHP

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

This tool is a series of three booklets. The booklets provide information about causes of early death and the consequences of exposure to chemical agents. It also provides possibilities of primary prevention at the workplace on the matter of chemical and carcinogenic agents. The subjects of the three booklets are:

1. Causes and Prevention of Early Deaths.
2. Health Promotion of employees exposed to chemical agents.
3. Health promotion of employees exposed to carcinogenic agents.

These booklets were published in 1994 in Hungarian.

#### References

Causes and Prevention of Early Deaths / Az id\_ el\_tti halálozás okai és megelőzésének stratégiája.  
Health Promotion of employees exposed to chemical agents /Citosztatikumokkal foglalkozók egészségvédelme.  
Health promotion of employees exposed to carcinogenic agents / Kémiai rákkelt\_ anyagokkal foglalkozók egészségvédelme.

#### Costs

Free of charge.

### Example

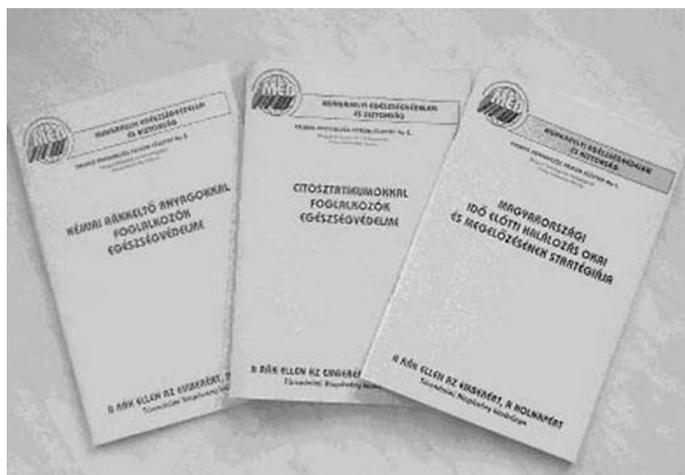
The publications are distributed primarily during meetings organised by the Institute under the name 'Forum of Primary Prevention', each year in late May. The booklets are also available after the meetings from the Institute on request. Besides doctors and occupational physicians, people from various occupations (e.g. teachers, medical officers, nurses, social workers, industrial workers, engineers from different fields etc.) have received the booklets. The booklets contain information applicable to all, but mainly to professionals, who are interested in health promotion and in the elimination of exposure (and the consequences of exposure) to dangerous chemicals (e.g. carcinogenic agents). For example, they describe the use of various protective devices, the elimination and neutralisation of carcinogens in routine bedside work of hospital nurses, the toxic consequences of exposure etc.

Hospital staffs in various hospitals in Budapest have made use of the booklets.

### Contact:

National Public Health and Medical Officers Services.

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## Hungary tool 4

### National programme on decade of health/ Az Egészség Évtizedének

### Johan Béla Nemzeti Programja

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

This tool concerns a national programme on health. The programme is under development and concerns:

1. Development of health-promoting social environment
2. Decrease of risks on human health
3. Development of institutional system of public health

One of the settings of the programme is the workplace. The main activities in 2004 will be:

- Hungarian Conference on Health-friendly Workplace (HFWP);
- Certificate winners of HFWP award.
- Publishing a booklet entitled 'Healthy employer at the healthy workplaces. The present and future of WHP'.
- Regional workshop for all stakeholders on WHP
- National Forum Day on WHP

The Programme started in 2003 and is carried out by the National Institute of Health Promotion in Hungary.

#### References

Not available.

### **Example**

A list of the winners of Health-friendly Workplace (HFWP) can be obtained from the National Institute of Health Promotion.

### **Contact:**

National Institute of Health Promotion  
Mrs I. Irén MISZ  
H-1062 Budapest, Andrásy út 82  
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Tel.: +36 1 4288271

### **More information**

National Institute of Health Promotion  
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## Hungary tool 5

### Smoking cessation programme in an oil company/Dohányzásról leszoktató program egy olajfinomítóban

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

This tool is about implementing a smoking cessation policy in an oil company. The most important reason for this policy is to reduce the risks of malignant and other diseases with the help of a smoking cessation programme. There is a relationship between smoking, exposure to dangerous substances and cancer.

The following actions are undertaken for implementing the policy:

1. An assessment of the needs concerning chemicals hazardous in production.
2. The employees' current state of health.
3. Inventory of already existing programmes on workplace health promotion
4. Consideration of programmes promoted by law in the area of public health carcinoma screening (lungs, gynaecology, rectal, mamma).
5. Choosing the topics that need priority in the policy
6. Tools and materials for the OHS physicians to promote smoking cessation for employees: information booklets, medicines, consultation materials, documents.
7. The financial needs of the oil company

This tool has been available since 2002 in Hungarian.

#### References

Not available.

#### Costs

The costs for the oil company were: €40,000 and consisted of:

- Paying off-work hours during the programme
- Rewarding employees

### Example

In the oil company the policy was implemented following these steps:

- Step 1 Investigation: with a questionnaire the smoking habits of employees working with chemical agents (petrol) was investigated.
- Step 2 Dissemination of knowledge on the risks of smoking for both management and employees. Managers should be conscious of the fact that they serve as a model for employees and that they should motivate employees morally and financially not to smoke. Employees working with chemical agents should be aware that if they do not smoke they avoid greater risks of malignant diseases.
- Step 3 Organising a lecture day for the employees of the oil company on the effects of smoking on employees' health.
- Step 4 Rewarding employees for ceasing smoking and evaluation of the results of the policy.

### Contact:

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### More information

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## Iceland tool 1

### Key factors of Job Satisfaction/Lykiloættir starfsánægju

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The tool is based on the outcome of the ALSOI project (Assessment of Lifestyle Satisfaction in Occupational Integration) – a Leonardo da Vinci project with partners from Italy, Spain, Scotland and Iceland. The object of the project was to study the impact of supported employment on the quality of life of people with intellectual disabilities. Furthermore, to identify key factors important in the successful participation of people with intellectual disabilities when entering supported employment. Supported employment is identified as a way of enabling people, who need additional assistance, to obtain and develop their careers in (paid) jobs.

The aim of the tool is to give service providers better understanding of the key factors of job satisfaction when finding employment for people with intellectual disabilities.

The key factors are based on the understanding of people with intellectual disabilities themselves from the four aforementioned countries. The key factors were gathered in focus groups and interviews with people with intellectual disabilities. The respondents were asked to mention factors that they found important for their successful participation in employment. The key factors mentioned are:

- Training for work;
- Personal abilities versus wishes;
- Support, opportunities and rights;
- Good relationships at work.

The manual was written in English in 2003 but was later translated into Italian and Spanish. In Iceland specific chapters were translated into Icelandic (the key factors and

practical formats).

#### References

Further findings are presented in the ALSOI manual, Assessment of Lifestyle Satisfaction in Occupational Integration. Svæ\_isskrifstofa Reykjaness, 2003.  
[www.arfatladra.is/media/vidburdir/leonardo/ALSOI.ppt](http://www.arfatladra.is/media/vidburdir/leonardo/ALSOI.ppt)

#### Costs

Free of charge.

### **Example**

The tool has not been tested in any company yet to our knowledge. The tool will be used in ROAHR, the Regional Office for the Affairs of Handicapped in Reykjanes Iceland.

### **Contact:**

Regional Office for the Affairs of the Handicapped (ROAHR)

Mrs I. M. Ísaksdóttir,

Fjar\_argata 13-15

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### **More information**

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Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	<b>Larger sized companies</b>	Health care	Public Administration	School	Supra Company	

### Summary

The methodology describes a 7-phase model to implement workplace health promotion.

1. Getting started
2. Marketing
3. Needs analysis
4. Planning
5. Implementation
6. Evaluation
7. Consolidation

Each phase is described in terms of a set of activities, priorities, typical problems and their resolution and a set of tools to support these activities. The methodology can be used by anyone who wants to implement WHP.

The tool was developed in the mid-1990s. The most recent version has been developed by NIGZ Division Work & Health (Netherlands Tool 1). No formal evaluation of the tool has been carried out as yet, though feedback from users indicates that the tool has been found to be extremely useful.

The methodology tool is available in English, Dutch and Spanish. In Ireland the tool has been used on approximately 7 or 8 occasions, though many more copies of the tool are in circulation. It is currently being used in at least two locations in Ireland. The tool has also been used in Spain and in the Netherlands (in a slightly adapted form) on more than 20 occasions.

### References

Wynne, R., Grundemann, R. and Moncada, S. (1996). *A European methodology for workplace health promotion*. Dublin, Work Research Centre.

### Costs

The tool costs €125.

For implementing the costs of hiring an external consultant: €10,000 - €30,000.

### **Example**

Most recently, the tool has been used in Ireland to support a major WHP process in a regional health authority with more than 5,000 employees. In particular, the seven stages of implementation outlined in the tool were followed, with particular emphasis on setting up and integrating with appropriate structures within the Midland Health Board. As a result of the project, which is now moving into its implementation phase, two main strategies for improving the health and wellbeing of staff are being followed. The first concerns providing management training with a view to improving management style, which was identified as a major source of stress for staff, while the second targets the implementation of a physical activity strategy for staff. Other initiatives include training in manual handling, improving the communications strategies of the organisation and using the risk management structures to deal with local stress-related and health-related issues.

### **Contact:**

Midland Health Board  
Mrs J. Boulger  
Health Promotion department  
Tullamore  
Co. Offaly  
Ireland  
Tel.: 00-353-86-8069829  
E-mail: j.bolger@mhb.ie

### **More information**

Work Research Centre  
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Terenure, Dublin 6W  
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E-mail: r.wynne@wrc-research.ie  
URL: www.wrc-research.ie

## Ireland tool 2

### Work Positive Questionnaire

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	<b>Mental Health and stress</b>		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The Work Positive Questionnaire is a specific tool for measuring and assessing sources of occupational stress. It provides a basis for the analysis of needs in this area and it supports the development of preventive stress actions in the workplace.

At its core is a 52-item questionnaire which breaks down into 10 dimensions of stress. The tool also provides some guidance on how to structure a stress prevention project. The tool can be used by people responsible for stress prevention, e.g. HRM staff, OHS staff, WHP professionals, consultants.

Since 2001 the questionnaire has been used in Scotland and Ireland. Current usage is not known, but could run to some hundreds of worksites.

#### References

The tool underwent an intensive development process in approximately 120 worksites, whereby it was tested for psychometric and usability purposes.

#### Costs

Work Positive Questionnaire: approximately €60.

Costs of using it for stress prevention purposes would range from €5,000-€25,000 if external consultants were to be used, depending on the size and complexity of the stress audit to be undertaken.

### **Example**

The tool is currently used by the Work Research Centre in Ireland in two settings with approximately 3,000 staff in regional health authorities. In each of these settings the tool has been used to characterise the main occupational sources of stress for staff. In the Northern Area Health Board, for example, a 20% sample of all staff were invited to complete the tool, and it has provided a sound basis for identifying the principal sources of stress. These issues include management style and communications in the workplace. Programmes which will address these issues are now in the process of being designed. More information on the tool can be found on the following websites:

- [www.hsa.ie](http://www.hsa.ie)
- [www.hebs.scot.nhs.uk](http://www.hebs.scot.nhs.uk)

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Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	<b>Training</b>	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	<b>Supra Company</b>	

### Summary

The manual is structured according to the European Methodology for Workplace Health Promotion. It details a process and the tasks needed to implement the WHP process.

In short it provides a conceptual model, a methodology and a framework for developing workplace health promotion training courses for WHP implementers. The tool can be used by trainers and educators in WHP.

The training manual comprises:

- A conceptual model of workplace health promotion implementation (backed up by a literature review)
- Instructions on how to develop training programmes and courses
- Examples of almost 30 training courses from 20 countries which have been developed using the manual.

The manual's first edition dates from 1995. It was revised in 1998. The manual is available in English, Dutch and Italian. By 1998, the manual had been used as the basis for developing almost 30 training courses in some 20 countries for approximately 5,000 students. These courses are detailed in the manual.

### References

Nuyens, M., Willemsen, M., Gründemann, R. (2002). *Evaluatie cursus 'Gezondheidsbevordering op het werk'*, Hoofddorp: TNO Arbeid

### Costs

The tool is available free of charge from the European Foundation for the Improvement of Living and Working Conditions, Ireland.

[www.eurofound.eu.int](http://www.eurofound.eu.int)

### **Example**

In the Netherlands the manual was translated into Dutch and made more appropriate for the Dutch situation. Every year 20-30 students follow a WHP course based on this manual and become WHP consultants. So far 150 consultants have been trained. The course has been evaluated positively by TNO Work & Employment.

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## Ireland tool 4

### Creating a healthy teaching environment

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	<b>Mental Health and stress</b>		
Setting	SME	Larger sized companies	Health care	Public Administration	<b>School</b>	Supra Company	

#### Summary

The tool provides support for teachers in undertaking stress prevention projects in their own schools. It supports all stages of undertaking such a project. The tool has been designed for use by second level teachers in schools of more than 15 teachers. However, it may also be used by first level teachers. It enables non-expert driven stress prevention projects to take place in schools. The tool comprises:

- A manual outlining the major activities and processes to be followed when undertaking a stress prevention project in schools. It outlines a 5-stage process, each supported by tools, for getting started, assessment of stress-related issues, stress prevention planning, implementation and evaluation and consolidation.
- The manual is supported by a website allowing teachers to communicate with each other about projects
- A training course for training teachers in how to use the manual

An initial development version was generated in 1998, which was updated in 1999 on the basis of tests in 3 countries. The manual has now completed further piloting for purposes of developing a third edition in 2004. The first and second editions are available in English, Dutch and Spanish. The third edition will be available in English only.

The first edition was piloted in 12 schools in Ireland, the Netherlands and Spain. The second edition is being used in 40 schools (with more than 1,000 teachers)

#### References

Wynne, R. and Milisevic, I. (2002). *Creating a healthy teaching environment – a stress prevention resource pack*. Dublin, Work Research Centre.

#### Costs

The manual costs €125.

Implementing the programme in a school involves 3 training days for around 4 teachers per school and 100-150 hours implementation time within the school.

The manual is designed to require minimal input from external consultants.

### **Example**

The tool is currently in use in around 40 schools in Ireland in an extended pilot. One example relates to a school located in a small town in Ireland where the analysis of stress sources revealed that two main issues were causing stress. The first related to how staff meetings were conducted, where teachers felt that they had little opportunity to communicate effectively. In part this was due to the numbers of teachers involved and the short amount of time available for such meetings. A new format for staff meetings was devised, which used group work as the basis for identifying teachers' views on decisions to be made instead of a large group meeting. This format proved to be significantly more efficient at allowing teachers to express their views and in ensuring that their views were taken into account in decision making. A second initiative in this school saw the design of a new system for time-tabling of classes – the new system was perceived to be much fairer and more equitable..

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## Italy tool 1

### 'Health' strategy (leaflet)/ Strategia Salute, Lavoratori Sani in Aziende Sane

La promozione della salute nella tua azienda è un buon affare per tutti

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

### Summary

This is a leaflet (an A4 page folded in three) which briefly describes just what health, health promotion and workplace health promotion is. The leaflet also contains information about the possible benefits of workplace health promotion and Models of Good Practice (MOGP).

The leaflet aims to persuade managers that there is another way to make business with workplace health promotion and that there are companies which benefit from this.

The leaflet was first distributed on an information day held in Milan, 2002. The leaflet is available in Italian and English.

### References

Not available.

### Costs

Free of charge. The tool is freely available on [www.ispesl.it](http://www.ispesl.it)

### Example

The leaflet is distributed during events on health and safety in the workplace. It is usually accompanied by a printed announcement and a parallel section on WHP.

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## Italy tool 2

### Healthy workers in healthy organisations. A guide for implementing WHP/ Lavoratori sani in Imprese sane. Guida per la promozione della salute nei luoghi di lavoro

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The aim of this tool is to provide a simple method to get workplace health promotion started. The method describes four steps for implementing WHP:

##### Step 1 Preparing

We have decided to start workplace health promotion activities in our workplace:

- How we build up collaboration?
- How do we disseminate information about activities in our organisation?

##### Step 2 Planning

We have our group and have informed everyone about the activities.

- How do we set the targets of the activities?
- What functions well in our workplace and what could we improve?

##### Step 3 Realisation

We have mapped the needs for health promotion, made a plan for development and informed everyone of the planned activities.

- How do we realise our plans?
- Who will be responsible for the actions?
- Who will participate?
- What is the target of the actions?

##### Step 4 Follow-up and evaluation

The process is ongoing and in part some of the targets have been achieved.

- How to follow-up and evaluate the process?
- Have we achieved the targets we desired?
- How to ensure a continuous progress?

The words and the layout have been studied in order to be easily used by all the persons responsible for contributing to workplace health promotion in a company.

The first and most recent edition of the guide dates from 2001. It is available in English and Italian.

#### References

Not available.

#### Costs

Free of charge. The tool is freely available on [www.ispesl.it](http://www.ispesl.it)

**Example**

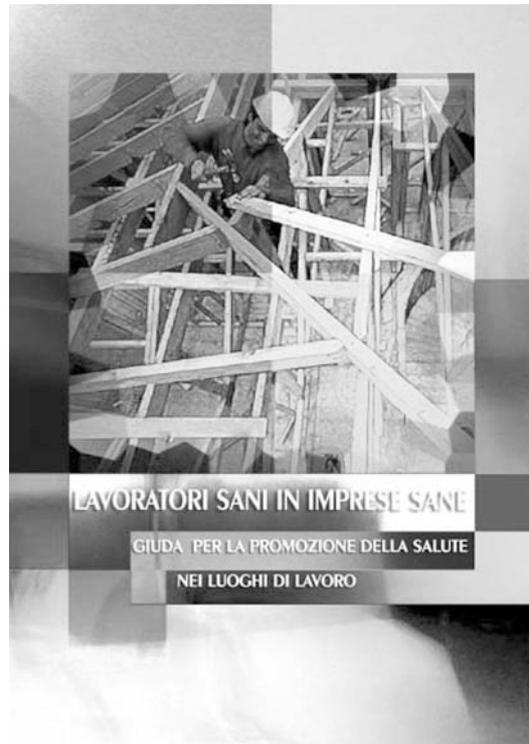
It is used as a starting point on which the discussion can begin. It also gives a timescale for planning future activity.

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### Italy tool 3

#### Proceedings of the National Conference on Occupational Health and Safety (Sicily Decalogue) / Atti della Conferenza Nazionale e sulla Salute e Sicurezza nei luoghi di lavoro (Il Decalogue della Sicilia)

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The work of the ENWHP has brought to light significant differences in practices between the countries of northern and southern Europe. A series of meetings took place between the National Contact Offices for Workplace Health Promotion in Southern Europe in 2000 / 2001. These meetings took place to identify particular factors which influence the development of workplace health promotion in Southern European Countries. The major outcome of the meetings was the development of the Sicily Decalogue. This document sets out 10 recommendations, which, if implemented, would lead to enhanced levels of workplace health promotion in Southern Europe and consequently to a fitter, healthier and more productive workforce, together with more efficient and profitable working practices.

The specific purpose of this tool is to give a wide overview on experiences, actions and guidelines in order to promote workplace health promotion in Italy and in the other Southern European countries. It includes the Sicily Decalogue. In the tool specific attention is given to health promotion in Italian workplaces. It gives insight in definitions, theoretical models and models of good practice in Italy, along with the current and future strategies for the implementation of WHP programmes.

The first Italian version dates from 2002. In 2003 a translation in English followed. The tool is used as distributing material during conferences, seminars and workshops. It has also been used as an official lecture in several training courses.

#### References

Not available.

#### Costs

Free of charge. The tool is freely available on [www.ispesl.it](http://www.ispesl.it)

### **Example**

This book has been used with success in two different situations:

1. As teaching material for health professionals in the workplaces, and
2. As material to introduce the subject, WHP, in a local round table on WHP.

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## Italy tool 4

### Health promotion in the workplace (Handbook plus video)/ La Promozione della Salute nei Luoghi di Lavoro (libro con video cassetta)

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The specific purpose of the handbook and the video is to give aid to employers and employees for the implementation of WHP programs in their workplace.

It contains information about:

1. Health and its many meanings
2. The ecological view of health
3. The foundations of health: the factors that determine health and wellness
4. Health Promotion: how it is done, where it is done and how it can be learned
5. The strategic importance of the workplace: the strong points of health promotion programmes at the workplace
6. Economic and social costs if nothing is done in the interests of health promotion
7. Concrete examples of health promotion
8. Obstacles to health promotion
9. Conclusions, references and sources of information

In the handbook information is also given about Occupational Health and Safety, the Ottawa Charter for Health Promotion, WHP – Health Promotion at the Workplace and training courses in health promotion. It is generally used by employers to start discussions with the other figures present in the workplace on the possibility of starting a WHP programme in the workplace.

The first edition appeared in 2001, while the second edition is scheduled for the end of 2004.

The handbook and video are available in Italian and English.

#### References

Not available.

#### Costs

Free of charge.

### Example

The handbook and video can be used in implementing WHP policy in the company. It provides supportive material during an internal training meeting between management and workers. round table on WHP.

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## Liechtenstein tool 1

### SALSA Salutogenetic Subjective Work Analysis /SALSA - Saluto- genetische Subjektive Arbeitsanalyse

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

SALSA is based on Antonovsky's salutogenesis and sense of coherence. According to Antonovsky (1979, 1987), the primary health-related question is not only why people become ill, but why they stay healthy in spite of the eventually existing (occupational) risk factors. Health is determined by a dynamic balance of health risk and health protection factors. Ease (well being) and disease are constructed on a continuum determined by psychosocial risk and protection factors, physiological risk and protection factors and a personality construct referred to as the Sense Of Coherence (SOS).

SALSA is therefore an instrument to identify work situations affecting health. The questionnaire not only tries to discover any relevant stress, but also asks about conditions and protection for the maintenance of health and workplace satisfaction.

The questionnaire is easy to understand and, apart from the time necessary to fill in the form (15 – 20 minutes), makes no demands on the recipient. It is also possible to compare values with companies in the same or in other lines of business and to use these as benchmarks when considering in-company questionnaire results.

A standard evaluation contains the following points:

- A description of the strengths and weaknesses of the company on the health-related questions
- A comparison with other companies
- A comparison among different units within a company
- The identification of possible fields of action for health promotion in the company

The points described are made into a report and can be

presented within the company on request.

The target group for this kind of health survey are those companies which plan to implement health promotion activities for their employees on a well-founded basis.

The SALSA questionnaire was developed by the Swiss Federal Institute of Technology (ETH Zürich) in 1993. The tool is available in German and in English.

#### References

Rimann M., Udris I.(1997). *Subjektive Arbeitsanalyse: Der Fragebogen SALSA*, in: Strohm O., Ulich E. (1997). *Unternehmen arbeitspsychologisch bewerten. Ein Mehr-Ebenen-Ansatz unter besonderer Berücksichtigung von Mensch, Technik und Organisation*. Vdf Hochschulverlag AG an der ETH Zürich.

#### Costs

The German version is available on a CD-ROM included in the book mentioned in the Reference.

### **Example**

The SALSA questionnaire was used by various companies, e.g. Suva (Switzerland).

SALSA was used by almost all units and agencies of Suva to measure health risks and protection factors. According to the main results of the specific units or agencies, health programmes have been set up since 1996. At present, every unit and agency has one or two collaborators, responsible for implementation of the these activities. In addition to the decentralised activities, a centralised health programme has also been set up within the past two years. The topics are physical activities, courses or workshops for stress reduction, ergonomics and absenteeism. This programme is still ongoing and is becoming more and more popular.

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## Luxembourg tool 1

### Risks and prevention in the finance sector, in the construction sector and in SMEs / Risques et prévention dans le secteur financier, dans le secteur de la construction et dans les PME.

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

In close collaboration, the Labour Inspectorate, the Accident Insurance Association, the Health Service of the finance sector and the Handcraft Federation set up a methodology for the practical implementation of the legal framework for safety and health requirements. For each profession and any work to be executed, groups of risk have been listed. A limitation to the most important groups of risk was decided. For the different groups of risk, the applicable safety measures were specified thereafter. The tool – in CD-ROM format – enables companies to select the safety precautions most suitable for their work and to develop their own safety management.

The current CD-ROM contains various functional features:

- Creation of 'safety plans': on the basis of groups of risk, a safety plan for the building site is created.
- Creation of 'control documents': on the basis of risk analysis, the program prepares a control document which serves as guidance for the local control of the building site.
- Requests for 'safety regulations': the safety regulations can be viewed or printed at any time. As an additional functional feature, slideshows for internal trainings can be programmed.
- Workplace health promotion (WHP): on top of an all-round occupational safety and health policy, high-levelled small- and medium-sized companies can practice workplace health promotion in an integrated way. The CD-ROM provides instruments for this.

The tool can be used by management, foremen and safety-coordinators. Depending on the success of the

current CD, the instrument is to be widened to further professional occupations and to be supplemented by further functional features.

The first edition of the tool for SMEs dates from 2000. The first edition for Finance is from 2001. The global and most recent edition was produced in 2003. The original language of the tool is French.

#### References

No systematic evaluation has yet been carried out.

#### Costs

The CD-ROM costs €18.60. An online version is free from charge: [www.itm.etat.lu/auto/html/autocontrole/main.pl](http://www.itm.etat.lu/auto/html/autocontrole/main.pl)

### **Example**

The tool is used mainly for training of trainees and vocational training, for training of workers exposed to certain risks and as a checklist for sick building syndrome or office risks.

The tool has been used for vocational training for employees.

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## Netherlands tool 1

### WHP Consultancy with 7-step programme/ GBW-consult volgens 7 stappenmethodiek

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	<b>Larger sized companies</b>	Health care	Public Administration	School	Supra Company	

#### Summary

To provide a comprehensive range of WHP-related services for organisations willing to pay for these services. The tool describes what a consultant can do during implementing a WHP policy:

Step 1 Building up support: secure management commitment, get start document approved, introduce project leader

Step 2 Setting up a structure: assemble project team, first project team meeting, prepare communication plan, flesh out project plan

Step 3 Needs analysis: preparation of questionnaire, performance of survey, analysis and feedback, reporting

Step 4 Developing a plan: define priorities, make choices, produce action plan

Step 5 Implementing the plan: implement plan, communication with employees, process evaluation

Step 6 Evaluation: preparation of questionnaire: performance of survey, analysis and feedback, reporting

Step 7 Consolidating WHP: produce improvement plan for consolidation, freshen up project team, integrate into routine.

The tool can be used by any professional wanting to implement WHP in a company. There is also training available to become a specialised WHP consultant. The first and most recent edition dates from 2001. The tool is originally in Dutch and translated into English (2003).

#### References

Baart et al. (2003) '*Workplace Health Promotion, an integral part of good business practice*'. Woerden, Uitgeverij NIGZ

#### Costs

The tool is described in the book 'WHP, an integral part of good business practice': €24.95

For providers, e.g. OSH experts: WHP training: €2,500

For organisations to implement: €10,000-16,000 for consultancy service

Other costs: manpower of organisation and costs for promotional material.

### Example

Together with two WHP consultants, ZonMw (a non-profit organisation for funding health projects in the Netherlands, 140 employees) is currently using the WHP consultancy tool (project runs from May 2002-April 2004). Together with a project team with representatives from all departments the 7-step method is used to implement a WHP policy. By implementing this policy special attention is given to exercise and nutrition.

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## Netherlands tool 2

### Integral Health Management/ Integraal Gezondheidsmanagement (IGM)

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	<b>Larger sized companies</b>	Health care	Public Administration	School	Supra Company	

#### Summary

The aim of the tool is to provide insight as to what extent health has been integrated into the policy of the company. With the Integrated Health Management method (IHM) companies can perform a self-evaluation on how health is integrated in their company.

The self-assessment is done with the IGM meter. For every aspect of integrated health management a company gains credits. The level of IHM varies from starter to expert level. The IHM tool is based on the criteria for workplace health promotion of the ENWHP, aspects of Total Quality Management and the Finnish steps for maintenance of Workability. For the Netherlands it is an innovative tool because it contains all the aspects of Human resource management, disability management, workability, workplace health promotion, life employment, absenteeism, reintegration etc.

The tool is divided into 7 lines of development:

1. Health as a strategic issue
2. A healthy primary management process
3. A healthy physical (working) environment
4. A healthy social (working) environment
5. Healthy people
6. Healthy relationship with the direct living environment
7. Healthy products and/or services.

The IHM tool has two approaches: a systematic approach to IHM, and using every opportunity available to work on integral health management. The tool is especially useful for the management in companies.

The first and most recent edition is from September 2003. The tool is available in Dutch.

#### References

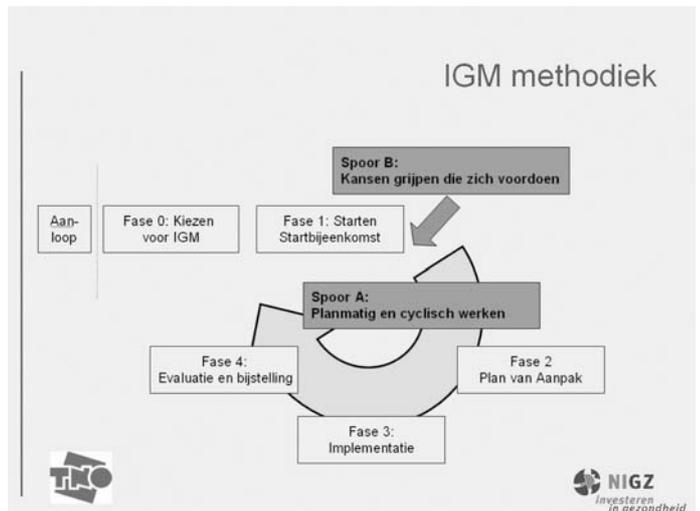
Gründemann R., Piek P., Raaijmakers T., Vaandrager L., Zwetsloot G. (2003). *IGM Methodiek (Integral Health Management Methodology)*. Hoofddorp: TNO Work and Employment.

#### Costs

The pilot organisations are asked for a contribution of € 18,000 for the support of NIGZ and TNO Work and Employment to implement the strategy in their company.

### Example

Currently a pilot project is underway among six organisations in the Netherlands. One of these pilot organisations is the Ministry of Health and Welfare. The results of this pilot project will be published in 2005.



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## Netherlands tool 3

### BIB: Online needs assessment/ Bedrijf in Beweging (BIB)

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

BIB is a web application for companies to communicate about the workplace health activities within their organisation. One part of the application is completed by the company itself, the other part is completed by NIGZ (Netherlands Institute for Health Promotion and Disease Prevention) and contains news on lifestyle themes such as Repetitive Strain Injury (RSI), stress, smoking, use of alcohol, physical activity, nutrition and healthy life in general. For an example: [www.bedrijfinbeweging.nl](http://www.bedrijfinbeweging.nl) Another use of the tool is needs assessment. With BIB, employees can fill in questionnaires on the website. The questionnaires are about lifestyle themes and workplace health in general. The results of these questionnaires are combined in a database. The results of these needs assessments are usually the launching pad for a workplace health policy in the company.

The first edition is from 2003, and it is still under compilation. The BIB is in Dutch.

#### References

Not yet available.

#### Costs

To start the application: € 2,400. The licence is based on the number of users at €0.50 per user per month.  
Introduction workshop of the BIB, in company: €195  
Advice and support from a consultant: €120 per hour.  
The effort of the webmaster of the company to complete their own part of the website. The effort of employees in the company in setting up the needs assessment.

## Example

BIB is a recent product and still partly under compilation. The website application for information and communication about WHP activities is tested by Waterland Ziekenhuis, a hospital in the Netherlands. The hospital used it for a needs assessment by the employees.

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## Netherlands tool 4

### WHP nutrition programme 'Dare to choose, eat healthy'/ Handboek bedrijfsvoedingsprogramma 'Durf te kiezen, eet gezond'

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	<b>Nutrition</b>	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	<b>Larger sized companies</b>	Health care	Public Administration	School	Supra Company	

#### Summary

The handbook provides information about nutrition and workplace health promotion and describes the steps for successful implementation of a nutrition programme in a company. It is based on the 7-step method of NIGZ (Netherlands Institute for Health Promotion and Disease Prevention).

The handbook contains four packages:

1. Basic package: giving basic information about nutrition and workplace, for example by means of a leaflet.
2. Action package: for starting up activities in the company canteen, for example labelling the food in the canteen varying from low fat to high fat.
3. Training package: for lectures and courses about nutrition at the workplace, for example a workshop on healthy and tasty cooking.
4. Individual packages: test line for employees. The focus is on individual health measures such as weight, balance, cholesterol, blood pressure and fat percentages.

The most recent edition of the handbook dates from 2004. It is available in Dutch.

#### References

The handbook has been tested within a transport company, BBA. The results of this pilot are used as examples in the handbook. *Handboek Bedrijfsvoedingsprogramma 'Durf te kiezen, eet gezond'* (2004). Voedingscentrum and NIGZ. Woerden: Uitgeverij NIGZ

#### Costs

The Handbook: € 30

For advice and support from a WHP consultant: €120 per hour.

The effort of employees in the company in setting up the programme.

The costs of chosen activities (for example hiring a dietician for personal advice).

### Example

The Multi Groen company, a social workplace, utilised the nutrition programme. The focus was on activities in the canteen, such as labelling the food, making comparisons between calories and physical activity, individual health measures etc. The employees particularly appreciated these activities and the information about healthier eating. The process aspect - implementing a nutrition programme - was less important in this company.

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## Norway tool 1

### CHPS-model for salutogenetic organisational change/ HENÆR-modellen for helsefremmende endringsprosesser

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	<b>Mental Health and stress</b>		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The tool can be used for organisational change processes in the field of health promotion, especially stress. The specific purpose is to stimulate salutogenetic management of stress associated with organisational development. Salutogenesis starts from the view that the primary health question is not why people get ill, but why they stay healthy in spite of occupational risk factors. The core idea is to promote health by increasing employees' sense of coherence, by means of making tasks comprehensible, manageable and meaningful.

The tool describes how managers and employees in collaboration can manage change processes by:

- Identifying tensions, dilemmas and paradoxes in expectations of the results of the change process
- Using the methodology as a communication tool to exchange information on expectations and expected results
- Scrutinising own biases and prejudices in decision-making processes on how to make best use of scarce resources.

The tool emphasises pragmatic action learning. This forms the basis for an increased systematic control over change processes. The tool is solution-focussed in addressing change expectations within the company. The emphasis is on possible health benefits by managing stress-related change efficiently. The CHPS-model (Centre for Health Promotion in settings) is not a step or phase model. Instead, the model stimulates meta-reflection on everyday work activities such as involvement, assessment,

generating experiences, integration and frame-reflection. The first edition dates from 2000. The second and most recent edition is from 2003. The tool is in Norwegian. It is currently being translated into English.

#### References

Hauge, H.A. and Mittelmark, M.B. (2003). *Helsefremmende arbeid i en brytningstid. Fra monolog til dialog?* ("Health Promotion in transition. From monologue to dialogue?", Bergen: Fagbokforlaget.

Hauge, H.A., Branstad, A. and L.H. Ausland (2002). *Seniorpolitikk (Senior Politics)*. Oslo: Tiden

#### Costs

The tool is free of charge.

### Example

A municipal Department of Youth Affairs has used the tool in collaboration with CHPS (Centre for Health Promotion in Settings) for developing a systematic approach to organisational development and learning. As a result, health promotion ideology has become an integrated part of how the organisation relates to change processes, with particular emphasis on health aspects related to stress.

### Contact:

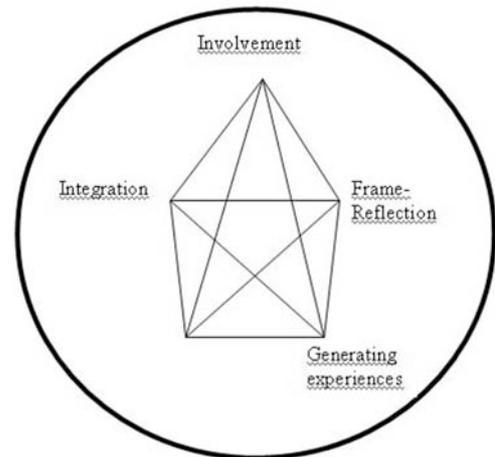
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URL: [www-sa.hive.no/henar/](http://www-sa.hive.no/henar/)

### CHPS-model

#### META-REFLECTION



## Norway tool 2

### The wheel of life phases - a pedagogical tool for planning and priorities for an ageing workforce / Livsfasehjulet

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

In the Norwegian context policies addressing the perceived demographic threat of workforce ageing are called senior policy. However, policies addressing seniors are seen in close connection with the life phase policy (LPP), viewing each worker's (regardless of age) potential for contributing to productive employment as dependent on their overall life situation. The argument is that improving and adapting the work situation for all can prevent the need for policy targeting seniors in particular. LPP advocates that each individual worker should cooperate in planning the later phases of their careers, literally from their first day at work. Growth and learning in the senior phase is seen as dependent on growth and learning throughout the span of the entire career.

The wheel of life phase policy is a tool for systematic planning and discussing priorities of different arrangements for a life phase policy in the workplace. The specific purpose is to stimulate organisational development related to arranging work for an ageing workforce. The tool emphasises:

- Solution focus (as opposed to deficit focus) in addressing change expectations related to ageing workforce or life phase politics.
- A pedagogical tool to emphasize dialogue and discussions about senior policy in the workplace.
- A constructive and pedagogical approaches to priorities. The tool uses the view of salutogenesis (see Norway, CHPS model).

The first edition of the Wheel of life phase policy dates from 1998, the most recent from 2004. The tool is in Norwegian.

#### References

The tool is described at: [www.seniorpolitikk.no](http://www.seniorpolitikk.no), and in an internal journal of the Norwegian National Insurance Administration (RTV): 'Et Inkluderende arbeidsliv', gode eksempler. September 2003.

#### Costs

The tool is free of charge.

### Example

Vestfold Insurance Administration (FTK) in Norway use the wheel of life phases as a pedagogical approach to prioritize incentives for older people to work longer:

1. Dialogue with employees in all phases of life about the question: "What kind of work arrangements or incentives would encourage you to stay at work/work longer?"
2. All the suggestions from the employees were arranged in a circle, according to the age/phases of life of the employees who had suggested them.
3. Using the wheel as a pedagogical tool, the managers and the union leaders found that the youngest and the oldest workers had complementary needs for special work arrangements, which simplified internal policy priorities. Using the tool stimulated the dialogue about life phase policy in the work organisation. The tool is also used in continuing education for leaders in Vestfold University College, Norway.

### Contact:

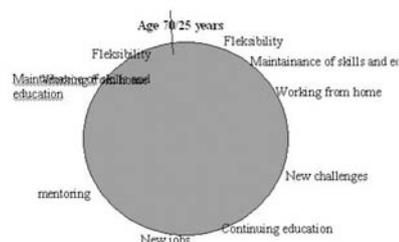
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## The wheel of life phases- a pedagogical tool for planning and priorities for an ageing workforce. L.H.Ausland

Employees wishes for special arrangements according to their ages and phases of life, showing that the oldest and the youngest employees had similar needs for arrangements at work. The use of the wheel facilitated priorities and policy planning in a large public sector in Norway.



## Norway tool 3

### Solution-Oriented Self-Assessment/ Egenvurdering med løsningsfokus

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	<b>Work Satisfaction</b>	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The aim of the tool is to evaluate and improve work processes by creating participation among all those involved in the specific work processes and by creating ownership and enthusiasm for the processes. The tool describes a systematic way of doing a process evaluation.

The evaluation is based on four principles:

- Everyone taking part in the work process will participate in the evaluation
- To build openness and trust, everyone's argument and experience must be listened to and tested
- The conversation is focused towards solutions rather than finding the root cause of the problem
- The conversation will build commitment to whatever has been agreed

An important part of the conversation should be to find examples on how to manage challenges together, to identify the characteristics of the processes and to reach agreement on how things should be.

The tool has been developed to meet the special needs of a specific company: Norsk Hydro, production of oil and gas. The tool is now being implemented on the offshore platform.

The first edition of this self-assessment was developed during 2001-2003. The tool is in Norwegian. It is currently being translated into English.

#### References

Not available.

### **Example**

This tool was used in the evaluation of maintenance processes, or in work processes with a great risk potential.

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## Norway tool 4

### Solution-focused processes

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

This is a tool still under development. It is a tool to stimulate a solution-focused and appreciative approach to problem solving and the development of the working environment.

The tool is particularly suitable for needs assessment and the subsequent actions.

The tool describes a method for:

- Group sessions where the participants interview each other in groups of two about highlights in their work and what is inspiring, rewarding and gives joy and energy.
- Group work where the desired future is explored
- Description of the sensible and necessary steps towards the desired future. Essential is the very first step with the appointment of those responsible for the various aspects.
- Regular follow-ups for an insight into what has been achieved since the last meeting. For example by using solution-focused self-assessment.

The tool is not intended specifically for a particular issue. Using the tool will promote positive development of all aspects in the working environment.

The tool's development began in 2002, and it is still in progress. The first edition will be released soon and will be in Norwegian. There are plans for an English version.

Even during the development of the tool it has been used some six times by managers and occupational health professionals.

#### References

Not available.

### **Example**

The tool was used in an oil and gas production company, Norsk Hydro. The department of Health, Safety, Environment and Audit of this company used the tool as a follow-up after a working environment survey.

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## Poland tool 1

### WHP Quality Assessment Questionnaire/ Kwestionariusz Oceny

#### Jakości Zakładowego Programu Promocji Zdrowia

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

### Summary

The tool can be used to measure the quality of workplace health promotion programmes. It is a questionnaire consisting of 6 parts concerning the policy, structures, objectives, planning, implementation and evaluation of workplace health promotion. In each part several crucial issues are tackled. The respondent has to establish whether the criteria indicated in each part are met.

The tool was prepared as a part of the scientific work of the National Centre for Workplace Health Promotion/The Nofer Institute of Occupational Medicine in Poland in 2000-2001. The users of the tool can be companies but may also be health promotion leaders and scientists. In Poland 50 WHP Leaders were trained at the Centre to use the questionnaire.

The tool is available in Polish and English.

### References

Korzeniowska E, Puchalski K. (2000). *Kwestionariusz Oceny Jakości Programów Promocji Zdrowia: w Miejscu Pracy*, Medycyna Pracy, 53, 5

### Costs

The tool is available free of charge from:

[http://www.imp.lodz.pl/zaklady\\_pages/centrum\\_zdrowia/kwest1.asp](http://www.imp.lodz.pl/zaklady_pages/centrum_zdrowia/kwest1.asp)

### **Example**

The tool was used in 15 enterprises within the Local WHP Forum in Kielce, Poland to evaluate the regional programme. One of these organisations is the Regional Centre of Occupational Medicine.

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URL: [www.womp.com.pl](http://www.womp.com.pl)

### **More information**

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## Poland tool 2

### How to promote health in the workplace – a series of guidelines/ Jak promowa\_ zdrowie w miejscu pracy? - poradniki

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

Several guidebooks are involved. There is a general one about workplace health promotion, and more specific publications on topics like smoking, stress, nutrition and medical intervention in the workplace: the role of doctors in WHP programmes. The main idea behind the guidelines is to make companies, health promotion leaders and OSH physicians aware that health promotion is a process developed for and with employees.

Each guidebook includes:

- General information about the concept and history of WHP in brief
- How to plan the programme: assessment of the situation, choosing objectives and designing tasks
- How to implement WHP programmes: contacting company and management, where to find funding, building a working team, establishing goals, timetables, winning the support of employees, marketing the programme
- How to evaluate WHP programmes: what to evaluate and why

All guidebooks include useful tips and show the most common mistakes and obstacles. Each topic-specific guidebook also includes detailed information relevant to the problem under discussion (legal, medical, methodological, etc.).

The guidelines were prepared as part of scientific work of the National Centre for Workplace Health Promotion/The Nofer Institute of Occupational Medicine in Poland between 1996 and 1999. The guidebooks are available in Polish.

All WHP leaders trained at the Centre use the guidebooks – roughly 500 people.

#### References

Not available.



### More information

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### Poland tool 3

## WHP Information for employers and managers/ Promocja zdrowia w miejscu pracy. Informator dla pracodawców i mened\_erów

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

### Summary

The publication is aimed at informing employers about the basics of WHP. It can be used as a marketing tool for WHP. It includes a short version of the self-assessment tool for the company.

It is a short, high-quality booklet that includes:

- A short test for an employer: 'Is this publication useful to you?'
- A short description of WHP and WHP programmes
- Information about the benefits of WHP: company's image, marketing, human resources development, saving costs, better internal relations etc. Each benefit is explained in detail
- A short, simple version of the self-assessment tool: 'How far is your company on WHP?' (12 yes-or-no questions)
- Information about WHP Conferences and documents of the ENWHP
- Information about other WHP publications available in Poland

The first edition of the booklet was published in 2000 and was financed by the Ministry of Health in Poland. Around 3,000 copies were printed. The booklet is available in Polish.

### References

Not available.

### **Example**

Managers and employers can use the booklet for marketing the idea of WHP. It has also been developed as part of a marketing and education material kit for WHP leaders trained at the National Centre for Workplace Health Promotion/The Nofer Institute of Occupational Medicine in Poland. Most active WHP leaders trained at the Centre use the booklet as 'a business card' while negotiating WHP programmes with employers.

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## Romania tool 1

### Needs assessment Questionnaire for training/information in Workplace Health Promotion (WHP)/ Chestionar de identificare a nevoilor de formare în Promovarea Sănătății la Locul de Muncă (PSLM)

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The aim of the needs assessment questionnaire is to identify the information and training needs for SME representatives. These representatives are HR managers, occupational health physicians, safety engineers etc. The specific purpose was to develop modules for information/training for such representatives. Issues covered in the questionnaire are gender, ageing workforce, health risks, WHP initiatives in the enterprise, communication, and qualifications needed for those involved in WHP in the enterprise.

It is a questionnaire to be used within the Romanian Network for Workplace Health Promotion. After deciding to be involved in the Network the representatives of each SME will complete this questionnaire in order to evaluate their needs for training and information.

The tool was developed in 2003 and is available in Romanian and translated into English. It has been used by 20 companies simultaneously within a workshop which took place in July 2003, attended by SME representatives from Romanian 3 regions. It had previously been pre-tested by representatives of 10 enterprises.

#### References

Not available.

#### Costs

The costs to produce the tool were €4,000. Costs for training are €550 per person.

### **Example**

This questionnaire was used by Segros.

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## Romania tool 2

### The Employee's Guide for Health/ Ghidul sănătății angajatului – Ce trebuie să știm despre controlul periodic și efectele expunerii la substanțe periculoase pentru sănătate

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	<b>Work-life Balance</b>	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	<b>SME</b>	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The aim of this guide is to support the employees in knowing more about health (nutrition), safety and work in the situations of exposure to dangerous, toxic substances in the working environment and work-life balance. The tool is used for pre-employment and periodical check-ups.

This guide constitutes an invitation to debate between the employee, the employer and the occupational health physician in order to prevent occupational illnesses, to create healthy and secure jobs and to increase the employees' work performance. It emphasises the importance of performing pre-employment and periodical check-ups for all the employees.

The tool is available in Romanian, has been translated into English and has now had 500 users.

#### Costs

The cost of producing the tool was €1,450

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## Spain tool 1

### Employee Assistant Program (EAP) / Programa de Ayuda al Empleado. EI EAP

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The main function of the Employee Assistant Program (EAP) is to prevent, identify and control the causes associated with sick leave and absenteeism. EAP can be offered by the organisation to its personnel via an external supplier. The aim is to give confidential and professional counselling support to all workers by helping to resolve their personal and professional problems. It is also intended to reduce the impact of the problems on their professional performance and to optimise the productivity of human capital and resources. EAP also focuses on the labour climate.

Employees have often used the tool in cases like the following: emotional problems (depression, divorce, stress and anxiety), personal problems (divorce, relationships with children, older people), addictive behaviour (alcoholism, drug addiction, addiction to gambling, etc). It has also been used for problems linked to the workplace: burnout, low motivation, stress, relationships with colleagues and staff, overwork, etc.

The tool has been available in Spain since 2000. The most recent edition dates from 2003. The tool is available in Spanish, Catalan and English. The tool is often used by 6% - 8% of company employees. The presence of local EAP providers is growing up in Spain although we do not know exactly the amount of companies using the tool.

#### References

Akabas, S.H (1998). *Programas de asistencia a los empleados* Cap. 15 de la enciclopedia de la OIT (<http://10.16.14.2/insht/encoit/tomo1.htm#p2>)

Googins, B; Davidson, B (1993). *The organisation as client: Broadening the concept of employee assistance programs*. Social Work 28; 477-484

#### Costs

The tool is free to all employees.

The company's cost in implementing the tool is linked to the total number of employees number. Costs are lower pro rata the greater the number of employees.

### **Example**

Levi Strauss & Co. Spain (Sales office, distribution and production facilities of jeans and casual wear) has used the EAP since year 2000. It has been used both telephone counselling and face-to-face counselling.

Problems attended: family problems, personal problems and issues at work.

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## Spain tool 2

### Workers' risk perception dimensional evaluation (EDRP) / Evaluación dimensional del riesgo percibido por el trabajador (EDRP-T)

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

EDRP provides a systematic evaluation of risks perceived by the worker in his/her workplace. It also helps the designer of WHP interventions to avoid the preventive message lacking credibility or creating distrust by focusing attention on perceived employee risks.

The conceptual basis of EDRP is the psychometric paradigm developed by Slovic and his associates (Slovic, 2000). The base of this paradigm is that risks are multidimensional and defined subjectively by individuals and may be influenced by a huge range of psychological, social, institutional and cultural factors.

EDRP has two components: a questionnaire and guidelines for application. The questionnaire consists of ten questions related with a risk factor. The first nine questions ask about the characteristics of the specific risk (as working hours, flexibility, work-life balance or even more traditional as noise, vibration) as perceived by the employees and the managers. The final question is general about the overall level of risk perceived on issues like ill-health at work including discomfort, work-related diseases, accidents, injuries, occupational diseases and stress.

The tool has been available in Spain since 2001, the most recent edition being from 2003. The tool is also available in Italian. Since 2001 the tool has been used by around 20 enterprises supervised by the INSHT, a governmental body in Spain dealing with assessment-training and research in the field of health and safety at work. The current users are OSH experts.

#### References

Slovic, P. (2000). *The perception of risk*. London: Earthscan Publications Ltd

Portell, M., Solé, M.D. (2002). *Riesgo percibido: un procedimiento de evaluación*. Barcelona, NTP 578 INSHT

#### Costs

The tool is free of charge.

### **Example**

At the moment H2000 Consulting (Consultancy firm WHP) and CSM Centro Servizi Medici (a medical center) are using the Italian version of this tool. In these projects the EDRP is combined with EECAT-PRL, also described in this inventory. The tool is used for optimising the design of information, training and workplace health promotion interventions in companies which require their services. Main aims of the project are: to establish the discrepancies between technical risk evaluation and workers' risk perception, to evaluate workers' attitudes toward preventive measures applied in the company and to develop a modular kit of interventions adapted to each perceptive and attitudinal profile. The effectiveness of the interventions will also be evaluated.

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### Spain tool 3

## Workers' health behaviour stage evaluation (EECAT-PRL) / Evaluación de la etapa de cambio de actitud de los trabajadores hacia la prevención de riesgos laborales (EECAT-PRL)

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

### Summary

The aim of the tool is an analysis of worker's attitudes towards risk prevention, improving design of preventive information, enhancing participation and improving training design of risk prevention and health promotion. EECAT-PRL allows five formative profiles: (1) workers who are unaware of risks, (2) workers who are aware of risks but he or she feels invulnerable, (3) workers who are unaware of preventive measures or who are in disagreement with them, (4) workers who are thinking about taking prevention but are undecided or who have decided not to take prevention, (5) workers who have decided to take prevention. With the tool also the effectiveness of interventions can be evaluated. EECAT-PRL applies the logic of stage models to evaluate the attitude of the employee towards risk prevention and health promotion in the workplace. It consists of seven questions. The tool is easy to use and fast to apply and produces useful data for the design of OSH and WHP interventions. It is possible to adapt the questionnaire to evaluate the attitude towards programmes on specific or single risk factors.

The tool was first produced in Spain in 2001, the most recent edition being from 2003. The tool is also available in Italian. Since 2001 the tool has been used by around 20 enterprises supervised by the INSHT, a governmental body in Spain dealing with assessment-training and research in the field of health and safety at work. The current users are OSH experts.

### References

Portell, M., Solé, M.D. (2002). *Actitud hacia la prevención: un instrumento de evaluación*. Barcelona, NTP 580. INSHT

### Costs

The tool is free of charge.

### **Example**

H2000 Consulting (Consultancy firm on WHP) and CSM Centro Servizi Medici (a medical centre) are now using the Italian version of this tool (combined with EDRPT also described in this inventory) for optimising the design of information, training and workplace health promotion interventions in companies which require their services. Main aims of the project are: to establish the discrepancies between technical risk evaluation and workers' risk perception, to evaluate workers' attitudes toward preventive measures applied in the company, and to develop a modular kit of interventions adapted to each perceptive and attitudinal profile. The effectiveness of the intervention will also be evaluated.

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## Spain tool 4

### Online training for WHP / Curso online de promoción de la salud en el trabajo

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	<b>Training</b>	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The aim of the online training is to increase awareness and knowledge of health promotion at work. The tool is for individuals, organisations or departments devoted to training in the field of health and safety at work to integrate health promotion in health management.

It is a distance learning course supported by a CD-ROM and web-based discussion and experience sharing. The course is structured in five units. The units deal with general concepts such as 'What is workplace health promotion?' and 'What are the main barriers and facilitators to undertake workplace health interventions?' But it also provides specific tools on how to manage absenteeism within the scope of workplace health promotion or how to evaluate needs, attitudes or perceptions of the workers. There is also a final evaluation of participants which includes all the units and a glossary.

The tool was first published in Spain in 2000, the most recent edition being online (2002). A new edition of the course was scheduled to appear at the end of 2003. The CD-ROM would then intended to be available as an INSHT publication.

#### References

Wynne, R. (1997). *A Manual for Training Workplace Health Promotion*. Ireland, European Foundation for the Improvement of Living and Working Conditions.

Breucker, G., Kloppenburg, H, Menckel, E., Orfeld, B., Thomsson, H. , Wynne, R. (1998). *Success Factors of Workplace Health Promotion*. Germany, BKK.

#### Costs

The cost of the course itself is related to personnel costs and the e-learning platform.

The CD-ROM is not currently available to external experts.

### **Example**

Since 2000, once a year OSH, experts including occupational doctors, nurses and HR-staff are trained by the CNCT/INSHT, a governmental body in Spain dealing with assessment-training and research in the field of health and safety at work.

At the end of the course attendants have completed an evaluation questionnaire. Main results were: high satisfaction with the course itself, high work demanding, applicability to daily work and difficulties in doing the course during working hours.

### **More information**

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## Spain tool 5

### Health 2000 Risk Appraisal System (H2000-RA) /

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The Health 2000 Risk Appraisal System (H2000-RA) is used by medium and larger sized enterprises to identify the most important risks among their employee population and to allocate their resources efficiently to achieved reduced absenteeism and turnover costs. Insurance companies use the system to perform a reliable and low-cost assessment of their policy holders' health risks (individuals as well as insured population). National and regional health care organisations and public administration may use the system to analyse the health risks distribution in the population, for setting up the most appropriate health promotion actions.

This is an individual health risk appraisal, including personal attitude towards lifestyle change and quantitative analysis of potential wellness improvement when taking part in health-promoting activities. The tool generates a statistical analysis of the population's health risks distribution and it supports the decision process for allocating resources aimed at promoting health. H2000-RA is based on a questionnaire (on paper or on-line) and software enabling evaluation of the health status and risk factors in the individual, as well as the distribution of diseases and risk factors in the target population. Through specific algorithms, it is possible to identify and contrast risks related to the 18 most common causes of death in western countries. The questionnaire consists of some 80 questions about personal health history, habits and lifestyle, blood test data, and a few physical measurements (height, weight, blood pressure).

The first edition of the tool dates from 2002, while the most recent edition is available online (2004). The tool is currently available in Spanish and Italian. Versions in other languages are expected in 2004 or in line with demand.

#### References

The system is based on several algorithms, developed with Gordian Health Solutions, a leading company in the US for health promotions services ([www.gordian-health.com](http://www.gordian-health.com)). In addition, every statement included in the personal report is based on Evidence Based Medicine literature, whose titles and author are clearly mentioned at the end of every report.

Mochi, G., Martín Alvarado, M.A., Bianchini, A., Reed, R.W., Alles, W.F. (2002). *Essere-Benessere: a health risk appraisal (H.R.A.) project to promote wellbeing in the work environment*. Barcelona, European Conference on Promoting Workplace Health 17th-18th June 2002

#### Costs

Off-line (paper supported) questionnaire and report: €18 – €98.

On-line questionnaire and report in Internet/intranet: €3- €10.

The costs vary according to the number of participants in the project and other added values (helpdesk, onsite promotion, laboratory tests, physical analysis, and personal interview with doctors). The price is per participant.

### **Example**

H2000-RA is currently under test by several medium-to-large sized enterprises in Italy, as well as by three insurance companies. Due to privacy reasons, at the moment the companies' names can not be disclosed.



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## Spain tool 6

### Copenhagen Psychosocial Questionnaire (Spanish adaptation, istas21 CoPsoQ)

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	<b>Mental Health and stress</b>		
Setting	<b>SME</b>	<b>Larger sized companies</b>	Health care	Public Administration	School	Supra Company	

#### Summary

Istas21 CoPsoQ is a participative and action oriented instrument for prevention. It is a methodology for the assessment of psychosocial risks. It allows identification and evaluation of the risks and defining the measures for intervention. The main characteristics of the tool are:

1. It is an evidence-based and validated instrument for identification and evaluation of risk factors.
2. It is a universal tool: it is designed for any type of work. The questionnaire includes 21 psychosocial dimensions such as general health, mental health, vitality, stress and work satisfaction
3. It is an individual, anonymous, confidential questionnaire which has two versions adapted to the size of the company: fewer than 25 workers and for 25 or more workers.
4. The analysis of results is standardised.
5. It is a methodology that allows the identification of improvement areas and the development of more healthy alternatives of work organisation.
6. The method for the analysis of the data includes reference values obtained in a sample of occupational population.
7. It is a methodology available free of charge.

The tool can be used by researchers, OSH technicians, occupational physicians and workers' delegates.

The original language of the tool is Danish (2000). The tool is also available in Spanish (2003). The tool is used by researchers in several countries, including Denmark, Spain, Germany, Belgium, Norway and Sweden. The

medium-sized questionnaire is used by a very large proportion of Danish work environment professionals. There is a pilot group of 20 Spanish companies applying this method. By January 2004 the tool had around 500 registered users in Spain.

#### References

The adaptation process obtained the award of the Best Scientific Research in Occupational Health of the Catalan Society of Occupational Safety and Medicine, 2003. An original Spanish paper is in the process of publication in Archivos de Prevencion. International papers in English are also being prepared.

#### Costs

The electronic versions of the questionnaires are available free of charge on [www.istas.net](http://www.istas.net)

### **Example**

One example of the companies using istas21 is Codorníu (food and beverage: cava and wines). This company is currently working on the proposal of preventive measures after having finished the risk assessment process.

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## Sweden tool 1

### The Skåne Network for Healthy Workplaces / Det skånska nätverket för hälsofrämjande arbetsplatser

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	<b>Networking</b>					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The aim of the Network is to increase health at the workplaces in Skåne, a municipality in Sweden. The network has a function in enhancing and further developing the knowledge on how to create healthy workplaces. It comprises all factors to create and maintain a healthy workplace. The key concept is participation of employees in terms of:

- Participating in the organisation's planning and development
- Having control over the work situation
- Having an important role in the organisation
- Developing in different ways
  - With each other
  - In their responsibilities
  - And receiving support in life crisis/crisis management.

Meetings of participating members forms the base of the network. Every two months organisations within the Skåne region meet to exchange experiences and to develop and initiate projects together. The network has a homepage and arranges conferences, seminars and breakfast meetings. A monthly newsletter is produced.

The network consists of 29 community-based local networks and reaches approximately 250 workplaces – both public and private organisations are represented.

The network is described in Swedish and English. The first version dates from 1999.

#### References

Evaluation is currently being undertaken.

#### Costs

The organisations participate free of charge in this network. There are costs for the project coordinator and a small yearly budget for network activities shared by Skåne Regional Public Service and the National Institute for Working Life.

### **Example**

Two methodology conferences – “How do we create health-promoting workplaces?” and “Health promoting workplaces are good economy”.

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## Sweden tool 2

### Health certification / Hälsodiplomering

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The aim of Health Certification is to provide a model to organise and ensure the quality of health promotion programs in the workplace. Health Certifications are awarded to companies to recognise successful completion of company health projects, in which both the company's management and its employees have demonstrated their commitment to health.

Health Certification helps companies to develop and implement a health strategy. The health strategy involves a number of health criteria, which focus on physical activity and personal health skills. Companies are provided with a coach who can give advice on how to have a successful health promotion program. Health Certification fits organisations and workplaces of all sizes. It works on an organisational, group and individual level.

The first edition of Health certification was developed in 2001, and the most recent edition is October 2003. The tool is available in Swedish.

Roughly 600 companies are today using health certification as a tool. Health certification has to be renewed after one year.

#### References

The tool is being evaluated in companies using it. 10 percent of all certifications are being evaluated by Korpen. See more information.

#### Costs

Costs are based on the number of employees in a company and additional costs of implementing activities to fulfil the criteria of certification.

### **Example**

Folksam is an insurance company with 3,000 employees. They have offices in 63 different cities and are divided into 16 different regions. This company has been working with Health certification right from the start in 2001. They have used it as a framework for their health promotion program in the entire organisation. For them it is a way of ensuring that all offices work towards healthier employees in a strategic way.

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## Sweden tool 3

### Health Account / Hälsobokslut

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	<b>SME</b>	<b>Larger sized companies</b>	Health care	Public Administration	School	Supra Company	

#### Summary

The overall purpose of the Health Account (HA) is to structure the health and working environmental issues in such a way that they are a natural part of the business policy. The purpose is also to identify the personnel, economic, profit and loss accounts of health problems at the workplace. This is important to know in order to invest in the right problem-solving actions. The HA model can be used by Small- and Medium- Sized Enterprises (SMEs) as well as by larger organisations. The method facilitates a co-operation between different players such as human resource personnel, economists, occupational health services and work managers.

The result, a complete HA, is used as an internal basis for decisions and actions taken with regard to increasing good health and a better working environment.

The Health Account consists of three work phases:

1. Mapping of working environment and health with the use of special report forms for HA (reporting of personnel, time use, competence structure, sickness absenteeism, need for rehabilitation, investments in health and working environment, profits and losses of ill-health, sickness absenteeism etc.)
2. Dialogue and interpretation of the results in the working group
3. Initiating actions and follow up of the HA investments

The HA may also be used as a follow-up tool when the organisation wishes to obtain information on the success of actions taken to increase health and decrease illness. Health accounts have been undertaken in approximately 60

Swedish and Finnish organisations, within both the private and public sector. Many municipalities, hospitals and schools have made health accounts.

One user is human resource managers who want to integrate the personnel and health report within normal business monitoring. Occupational Health Services use the HA as a needs assessment tool and to initiate actions to decrease health risks. Economists use HAs to follow-up the cost development and the benefits of investments of actions taken for a better working environment and healthy workplaces.

The first edition dates from 2000-2001, the most recent 2003. The material is available in Swedish and Finnish.

#### References

Liukkonen, P, (2003). *Hälsobokslut – vägen mot bättre hälsa och bättre arbetsmiljö: erfarenheter av genomförda hälsobokslut*. Norsborg: Oskar Media (no English version).

#### Costs

Health account: € 3,000- € 4,000 (30,000 – 40,000 SEK).

### **Example**

At a hospital a Health Account was performed during 2001 resulting in an update of the hospital's routines for business follow-up. This was extended to important areas such as personnel efforts and the working environment in the health care. Important key figures on health development are followed up in the same way as (economical) indicators of health care.

The health follow-up is now part of the daily business follow-up at the clinic.

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## Switzerland tool 1

### SME-vital – program for healthy enterprise/ KMU-vital-Programm fuer gesunde Betriebe/PME-vital Programme pour la santé en entreprise

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	<b>Training</b>	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	<b>Mental Health and stress</b>		
Setting	<b>SME</b>	<b>Larger sized companies</b>	Health care	Public Administration	School	Supra Company	

#### Summary

SME-vital is an internet-based toolbox with 10 modules enabling SME or external consultants to implement comprehensive WHP in a systematic process:

1. Initiate WHP: information brochure and 'starter workshop' with top management for initial motivation and organisational analysis
2. WHP analysis: employee and management surveys for detailed bottom-up and top-down analysis of health promoting working conditions
3. Develop WHP strategy: module 'health circle' for setting company-specific targets and developing an action plan
4. Implement the plan: choose/combine modules for organisational development (aspects of ergonomics, job design), personnel development (teamwork, WHP as manager's task) health behaviour (wellness, stress management)
5. Evaluate the results: repeated application of employee and management surveys; controlling of company-specific targets
6. Consolidate WHP: establish 'health circles' as sustainable structure (joint labour-management committee) for WHP

The modules consist of practical guides, questionnaires (incl. automatic online-analysis of employee survey), training and presentation materials, practical examples and an overall project management guide. The toolbox will be available on the internet in German and French from July 2004, along with portraits of the 10 pilot companies and links e.g. to WHP consultants and WHP training in Switzerland.

#### References

Funding agency/publisher: Health Promotion Switzerland, Bern (see contact).

Project Lead: Institute of Social and Preventive Medicine, University of Zurich and Institute for Occupational Medicine, Baden, Switzerland, July 2004.

[www.kmu-vital.ch](http://www.kmu-vital.ch), [www.pme-vital.ch](http://www.pme-vital.ch)

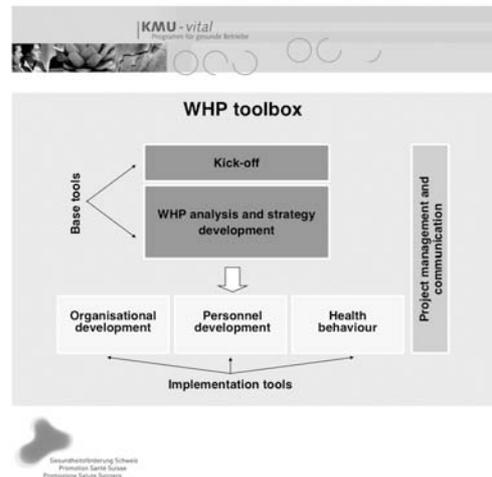
#### Costs

The tools can be downloaded free of charge from the internet ([www.kmu-vital.ch](http://www.kmu-vital.ch), [www.pme-vital.ch](http://www.pme-vital.ch)). They can be implemented by the enterprises' staff or by an external WHP-coach/-consultant. Depending on the scope of activities and the degree of external support needed, external costs will vary but will not normally exceed €20,000.

## Example

Experienced WHP-consultants developed the toolbox together with company representatives and tested it in 10 pilot SMEs. The pilot-SME with 50 to 200 employees covers various economic sectors situated in the German and French-speaking parts of Switzerland. Based on the pilot test, the toolbox was revised and completed before publication on the internet.

Brief case studies (portraits) of the 10 pilot companies along with contact information are available as models of good practice for WHP on [www.kmu-vital.ch](http://www.kmu-vital.ch) and [www.pme-vital.ch](http://www.pme-vital.ch)



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## Switzerland tool 2

### Quint-Essenz : Quality Management tool for health promotion projects

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

Quint-Essenz is a tool that supports project managers in all project-phases for health promotion like planning, implementing and evaluating. It is a website offering concrete tools, checklists and other resources of project and quality management in the field of health promotion. The website is structured as far as possible according to project phases and quality, offering answers to many questions that arise in the course of a project. Such as: Which criteria are used to evaluate the quality of health promotion and prevention projects? Does the project conform to a target group? Based on which criteria do you choose partner organisations? Should you approach the media? If yes: how?

For the purpose of illustration there are examples of projects which have already been carried out. Checklists and tools for self-evaluation and materials relating to the theme of 'gender' are currently being developed

This toolbox, freely accessible, was applied and tested in connection with concrete projects in Switzerland. Quint-Essenz can be used as a quality management system for projects in health promotion. The current version of this toolbox is online ([www.Quint-essenz.ch](http://www.Quint-essenz.ch)).

The tool has been available in German, French and Italian and is used regularly by Swiss professional project managers.

#### References

The tool has been auto-evaluated.

#### Costs

The use of the tool is free of charge, as are the consultations under certain circumstances: [www.quint-essenz.ch](http://www.quint-essenz.ch)

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URL: [www.quint-essenz.ch](http://www.quint-essenz.ch)

## UK tool 1

### Workplace Health Activity Toolkit (WHAT Toolkit)

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	<b>Exercise</b>	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The WHAT toolkit provides a range of information that can be used to convince the senior management team of the benefits of promoting physical activity in the workplace, provide motivational tools for the employees and practical guidance on how physical activity can be promoted.

More specifically, the objectives of the pack are:

- To raise awareness of the beneficial link between physical activity and heart health;
- To promote simple and easy to do physical activities;
- To complement health and safety policies and other health promotion initiatives, such as healthy eating and stress management;
- To support the achievement of Health at Work programmes and awards;
- To identify and target specific groups and encourage joined up working at a national and local level.

The material within the pack is designed to be accessible and useful to a wide range of individuals, not all of whom have a background in health. People who use the toolkit include senior managers, occupational health professionals, human resource managers, training managers, physiotherapists, physical activity co-ordinators and workplace health promotion teams, as well as the employees who participate.

Since its launch in 2003 the toolkit has been widely distributed. It is available from the British Heart Foundation distribution agent Dataforce. The tool is in English.

The tool has been available in German, French and Italian and is used regularly by Swiss professional project managers.

#### References

A user evaluation of the Workplace Health Activity Toolkit, for internal reference, took place in January 2004.

#### Costs

The WHAT toolkit is available on receipt of a £25 donation to the British Heart Foundation (BHF). The company can decide how much money it wishes to invest in setting up initiatives or developing facilities but many of the suggestions within the pack do not require any additional costs.

### **Example**

A national Insurance Company used the WHAT toolkit. The marketing co-ordinator was very enthusiastic about the WHAT pack, which he regarded as a useful tool with which to support the departmental mission statement that an active healthy workplace is good for employers and employees. He used the pack within the department to structure an 'Active at work' challenge. This was an 'activity points' challenge, with a goal of 100 points per individual within the month (1 point for 1 minute of activity). The response was enthusiastic: 70 of the 120 departmental members signed up to the challenge; a competitive challenge from another department within the organisation added impetus to the initiative. Z-cards (credit card sized information leaflets) and active@work leaflets (part of the toolkit) were distributed to all participants. During the challenge, corporate fitness trainers gave talks on the benefits of activity and the staff restaurant arranged a healthy eating promotion. Walks were measured out to inspire participants, explaining how many points they would get. Organised walks led by a fitness instructor were set up. An interdepartmental relay (2 miles) took place and it is reported that this actually encouraged some staff to take up running. The challenge was incentivised using bottles of champagne for those earning the most points within the month. It is good to note that some people who were previously inactive began to take exercise.

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## UK tool 2

### A Training and Resource Pack on Workplace Alcohol and Drug Policies

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The Resource pack describes the process of developing and implementing workplace policies on alcohol and drugs. The overall aim of this tool is to create safe and healthy working communities within the workplace environment. In turn this will both protect and promote health and safety and by doing so sustain health, enhance productivity and strengthen business performance.

This overall aim is translated into action through the achievement of the following three objectives:

- To raise awareness of alcohol and drugs and to prevent alcohol and drug related problems affecting the workplace;
- If any problems do arise then to identify them at the earliest possible stage;
- To protect the health, safety and welfare of employees by offering support to those who inappropriately use alcohol and drugs.

The resource pack contains:

- Guidelines for employers on how to develop and implement a comprehensive alcohol and drug policy into their workplace
- Information booklets for workers
- A template for a model policy.

This English tool has been available since 1 September 2003. It is not yet known how many organisations have been or are currently using the tool.

#### References

An evaluation has not been carried out yet.

#### Costs

The tool is free to employers. Costs for use, implementation, services and training have not been evaluated at this stage.

### **Example**

A three-day training course was run in Belfast in the autumn of 2003. Participants came from a wide variety of backgrounds including health promotion agencies, drug and alcohol treatment and support agencies, as well as representatives from a variety of workplace related disciplines.

The course concluded with a session on action planning and each of the participants determined to return to their organisation with the goal of promoting good practice in workplace alcohol and drug policies both internally and with their external partners.

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## UK tool 3

### Healthy Workplace Initiative – SignUp Newsletter

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	<b>SME</b>	<b>Larger sized companies</b>	Health care	Public Administration	School	Supra Company	

#### Summary

The SignUp newsletter is a specific tool for promoting simple workplace help and advice in health-related issues, and it highlights practical tools available to employers. The Initiative seeks to promote healthy workplaces by:

- Developing examples of good practice for handling key workplace health issues
- Making available relevant and up-to-date information
- Encouraging better access to services and helping to provide a bridge between prevention, treatment and rehabilitation
- Helping to promote compliance with relevant workplace legislation.

Using simple language SignUp aims to keep people up-to-date with workplace health developments, to signpost sources of help and to provide information on local, regional and national health promotion activities. The newsletter has a holistic outlook and whilst it covers traditional occupational health topics it also has a strong focus on healthy-living issues, job retention, rehabilitation and disability issues. In addition, people also have access to a website [www.signupweb.net](http://www.signupweb.net). The SignUp newsletter is distributed quarterly and is aimed at employers and employees, particularly of SMEs. There is also a question and answer facility to enable users to receive specific advice.

The first newsletter was published in July 1999, and it became available electronically in 2001 with the fourth edition. There are three editions each year plus a European week special edition. There are currently some 24,000

users from large and small organisations, trade union representatives and health related occupations.

The tool is available in English.

#### Costs

The Newsletter is a free resource – a paper copy is sent to all those who have 'Signed up' and is also freely available on the SignUp website [www.signupweb.net](http://www.signupweb.net)

### **Example**

The edition issued at the time of European Safety and Health week in 2003 focused entirely on dangerous substances.

Other articles have focused on disability, rehabilitation and the Department of Works and Pensions pilot scheme 'Pathways to Work', 'Beating back pain by yourself' and 'A Breath of fresh Air' - information on passive smoking are other topics covered in the newsletter.

In addition, every newsletter contains a regional round up of news and views relating to health at work.

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## UK tool 4

### Health Partnerships in Scotland

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	<b>Networking</b>					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The aim of the tool is to provide a coherent, consistent and integrated approach to workplace health in Scotland.

Partnership working is endorsed by the Scottish Executive's 'Healthy Working Lives' initiative whose objective is to develop a holistic approach to improving the health of working-age people in Scotland. It brings together under one umbrella the interests of workplace health, social justice and lifelong learning.

NHS Health Scotland, a nationwide organisation set up to take forward this national health improvement programme, aims to put processes in place so that the working-age people of Scotland become part of this integrated and 'joined up' partnership approach. They have instigated many projects that operate throughout Scotland dealing with a number of health promotion topics.

This tool is thus made up of a variety of projects aimed at different target groups and dealing with many health-related subjects. The working-age population of Scotland and in some instances health-related professionals are the end users of this tool.

NHS Health Scotland has been in existence in its current form since April 2003 although certain projects pre-date this. The tool is available in English and is on-going.

#### Costs

Each project is costed individually e.g. Work Positive costs £40,000.

### **Example**

A sample selection of projects:

**Scotland's Health at Work** – a health promotion award scheme for organisations

**Safe and Healthy Working** – a national telephone advice helpline and risk assessment service aimed at offering advice and guidance on the main areas of workplace health, safety and welfare

**Working Backs Scotland** – a multi-disciplinary partnership to ensure consistent advice is given to people of working-age with back pain. Its aim is to help people with back pain to help themselves.

**Work Positive** - a stress prevention tool developed for SMEs but used for both large and small businesses

**Alcohol and Drugs – Policies and Employment** – a resource pack and training course aimed at encouraging organisations to develop a positive alcohol and drug approach in their workplaces

**The Workplace Health Course** – an online course that integrates health and safety, occupational health and health promotion and aims to promote the collaboration between these different disciplines. This professional development programme is offered by Heriot-Watt University in Edinburgh as the first module of an Institute of Occupational Safety and Health (IOSH) accredited Diploma in Occupational Health and Safety.

### **More information**

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## ENWHP tool 1

### Questionnaire for Self Assessment

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The questionnaire was developed to help organisations, companies and enterprises record the quality of their workplace health promotion measures and continually improve them. Working with the questionnaire:

- Permits a systematic self-assessment of workplace health promotion measures
- Highlights both strengths and areas which need improving
- Helps to establish what quality level the organisation's measures have already reached
- Helps to set priorities for future projects
- Permits a performance comparison with other organisations

The questionnaire is based on the model of the European Foundation for Quality Management (EFQM) and was especially adapted for the assessment of health promotion measures. It incorporates both scientific expertise on the effects of workplace health promotion and practical experience of a wide variety of organisations which have already been successful in implementing workplace health promotion. The questionnaire comprises 27 questions spread over the following six sectors:

1. WHP and corporate policy,
2. Human resources and work organisation,
3. WHP planning,
4. Social responsibility,
5. WHP implementation and
6. WHP results.

The tool can be used by OSH professionals and personnel management in private enterprises, in public organisations and authorities. The tool is also suitable for members of works councils and WHP consultants.

The first and most recent English edition is from 1999. The questionnaire is also available in: German, Dutch, French, Finnish, Greek, Portuguese, Spanish, Italian, Danish, Swedish, Norwegian and Icelandic.

About 100 organisations have been registered as using the tool on the ENWHP website – and the number is steadily growing. The tool is also used by members of the Network. The exact number of users is not known.

#### References

The tool has not yet been evaluated.

#### Costs

The tool is available free of charge on [www.enwhp.org](http://www.enwhp.org) or at the national contact offices of the network.

For organisations to implement it costs only manpower.

### **Example**

The questionnaire is used across Europe and can be completed by means of the ENWHP website to receive a picture of one's own WHP-status compared against the average of the organisations which have participated up to now.

The tool was used in the BKK (a federal association in Germany), to determine a starting point for WHP and to highlight WHP areas which need improving. For this purpose the occupational health and safety experts of BKK, a representative of the works council and of BKK as an employer also carried out a half-day workshop, led by a neutral moderator. They discussed and worked together on the questionnaire, aiming at achieving common answers to the questions. Consequently the rationale of this procedure was a discussion among the relevant experts of a company – in this case BKK – to agree on the quality and level of WHP already implemented and on the perspective regarding the next steps to be taken in the various areas.

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## ENWHP tool 2

### Luxembourg Declaration on Workplace Health Promotion in the European Union

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	SME	Larger sized companies	Health care	Public Administration	School	Supra Company	

#### Summary

The vision set out by the Luxembourg Declaration is "healthy employees in healthy organisations". In concrete terms, using the Luxembourg Declaration is a method of pursuing the goal of disseminating workplace health promotion in the world of work and giving health a greater significance in the workplace. According to this Declaration, WHP is viewed as a comprehensive approach which necessitates a common strategy for all players inside and outside the enterprise. The priorities of the ENWHP were further explained in the Declaration:

- Increase awareness of WHP
- Identification and dissemination of good WHP practice
- Develop guidelines for effective WHP
- Ensure commitment of the Member States to incorporate respective policies
- Address the specific challenges of working together with SMEs.

The first and most recent edition of the declaration dates from 1997. The original declaration is in English, but it has been translated into German, Dutch, French, Finnish, Greek, Portuguese, Spanish, Italian, Danish, Swedish, Norwegian and Icelandic.

Professional and political organisations and players inside and outside the enterprise involved in disseminating WHP, OSH professionals in enterprises, employer associations and (personnel) management in enterprises can use the declaration. It is also a useful tool for trade unions, works councils and WHP consultants. The exact number of users at the moment is unknown.

#### References

The tool has not yet been evaluated.

#### Costs

The tool is available free of charge on the [www.enwhp.org](http://www.enwhp.org) or at the national contact offices of the network.

### **Example**

The Declaration is used across Europe to address and gain the commitment of companies and stakeholders either to conduct WHP based on the understanding set out in the Declaration or to give WHP their support. In Germany for instance there are several company networks existing which are committed to the ideas and philosophy of the Declaration.

In Germany the tool is and was used to gain a common understanding of WHP. In the foundation stage of the two most important WHP-networks in Germany, which are co-ordinated by BKK – the Enterprise for Health Network and the German Network for WHP – it serves as a basis for a common platform for working together in the future within this area. In return the individual companies used it as a marketing instrument for increasing their image by including their company logos in the German version of the tool. On disseminating the German version of the Luxembourg Declaration other companies also became keen on attending the networks covering the Declaration, and this too strengthened the overall dissemination process.

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## ENWHP tool 3

### The Lisbon Statement on Workplace Health in Small and Medium Sized Enterprises (SMEs)

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress		
Setting	<b>SME</b>	Larger sized companies	Health care	Public Administration	School	<b>Supra Company</b>	

#### Summary

This statement is the result of a joint initiative in small and medium enterprises (SMEs) launched by the European Network for Workplace Health Promotion (ENWHP). The role of SMEs in creating an entrepreneurial, socially aware and healthy Europe is explained. More than 99% of companies in the EU are SMEs and between them they employ more than two-thirds of the EU's workforce. Not only are SMEs of growing importance with regard to employment policy, but they are also significant in economic terms, accounting for more than half the EU turnover.

This statement is aimed at the social partners and decision makers in politics, enterprises, science and research and is intended to help improve the framework conditions for health and economic success within SMEs in the European Community (EC).

The first and most recent English edition dates from 2000. The questionnaire is also available in German, Dutch, French, Finnish, Greek, Portuguese, Spanish, Italian, Danish, Swedish, Norwegian and Icelandic.

The tool can be used by OSH professionals and personnel management in private enterprises, in public organisations and authorities. The tool is also suitable for members of works councils and WHP consultants. The exact number of users is not known.

#### References

The tool has not yet been evaluated.

#### Costs

The tool is available free of charge on [www.enwhp.org](http://www.enwhp.org) or at the national contact offices of the network.

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## Joint Programme: Framework guidelines for addressing workplace violence in the health sector

Type of tool	Programmes	MOGP	Instruments				
			Questionnaires	Guidelines	Information Materials		
Corporate health policy issues	Ageing	Work-life Balance	Diversity	Gender equality	Leadership	Training	Disability Management
	Work Satisfaction	Networking					
Lifestyle issues	Nutrition	Exercise	Smoking	Alcohol	Mental Health and stress	<b>Violence</b>	
Setting	SME	Larger sized companies	<b>Health care</b>	Public Administration	School	Supra Company	

### Summary

International Labour Office (ILO), International Council of Nurses (ICN), World Health Organisation (WHO) and Public Services International (PSI) have jointly developed a set of guidelines as a basic tool for the development of policies against violence at work. They are intended to support all those responsible for safety in the workplace.

The main objective of this tool is to provide general guidance in addressing workplace violence in the health sector. The guidelines have been developed as a basic reference tool for stimulating the autonomous development of instruments specifically targeted at and adapted to different cultures, situations and needs.

The guidelines cover the following key areas of action:

- Prevention of workplace violence
- Dealing with workplace violence
- Management and reducing of the impact of workplace violence
- Care and support of workers affected by workplace violence
- Sustainability of initiatives undertaken

After a first chapter dealing with the background, scope and definition and a checklist of general rights and responsibilities of governments, employers, workers, professional bodies and society, the document explains key areas for interventions in the workplace such as approach, risk assessment, measures at organisational, environmental and individual levels, after-the-event interventions and evaluation.

These guidelines are addressed to governments, employers, workers, trade unions, professional bodies and

members of the public. It is not known how many users there are at this moment.

The first edition of this tool was developed in English in 2002. The tool is also available in Spanish, French and Russian.

### References

International Labour Office, International Council of Nurses, World Health Organisation and Public Services International (2002). *Framework Guidelines for Addressing Workplace Violence in the Health Sector*. Geneva, ILO/ICN/WHO/PSI Joint Programme

All study reports and working papers, as well as the study protocol developed for the country case studies, are available at the URL cited behind.

Hoel, H. Sparks, K. Cooper, C. (2000). *The cost of violence and stress at work and the benefits of a violence and stress-free working environment*. Manchester University ([www.ilo.org/public/english/protection/safework/whpwb/eco/costs.pdf](http://www.ilo.org/public/english/protection/safework/whpwb/eco/costs.pdf))

Wiskow, C. (2003) *Guidelines on Workplace Violence in the health sector: comparison of major known national guidelines and strategies* ([www.who.int/violence\\_injury\\_prevention/injury/work9/en/print.html](http://www.who.int/violence_injury_prevention/injury/work9/en/print.html))

### Costs

The tool itself is free available at: [www.who.int/violence\\_injury\\_prevention/injury/work9/en/print.html](http://www.who.int/violence_injury_prevention/injury/work9/en/print.html)

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Giuseppe Masanotti, ISPESL, Italy, project member  
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Thomas Theuringer, BKK Bundesverband

Coordination of the Toolbox initiative:

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Co-workers:

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The template which is used to describe the tools covers wider classification dimensions, as for example specific settings and issues as well as information on frequency of use, cost and benefits of tools, addresses of users etc., from which the user can assess the criteria important to him or her.

Name of the tool (full title: no abbreviations) <ul style="list-style-type: none"> <li>- Name in original language</li> <li>- In English</li> </ul>	
Author of the tool	
Contact (full contact details) <ul style="list-style-type: none"> <li>- Name</li> <li>- Address</li> <li>- E-mail address</li> </ul>	
Background of organisation <ul style="list-style-type: none"> <li>- Describe in key words: what is the function of this organisation?</li> <li>- Web address</li> </ul>	
When developed <ul style="list-style-type: none"> <li>- 1st Edition</li> <li>- most recent edition</li> </ul>	
Languages <ul style="list-style-type: none"> <li>- Original language</li> <li>- If translated in English is it a validated translation?</li> </ul>	
End-user of the tool (target group)	
Action level <ul style="list-style-type: none"> <li>- Workplace</li> <li>- Organisation</li> <li>- Supra-company level</li> </ul>	
Aims of the tool Specific purpose?	

<p>Setting specific?</p> <p>If yes for what setting:</p> <ul style="list-style-type: none"> <li>- Larger and medium-sized enterprises/ organisations in the private sector</li> <li>- Micro and small-sized enterprises in the private sector</li> <li>- Public administrations</li> <li>- Organisations in the field of 'school and training'</li> <li>- Organisations in the field of 'health care, welfare and social security'</li> <li>- Organisations in the field of 'labour markets and administration'</li> </ul>	
<p>Issue (if applicable)</p> <p>work-life balance, gender, ageing workforce, heart disease/circulatory disorder, lack of exercise, eating habits, new forms of work e.g. part-time employment, temporary agency work, marginal employment / target groups: foreign workers, ethnic minorities, poorly qualified groups of workers threatened with unemployment etc.</p>	
<p>Task or process-oriented (please describe)</p>	
<p>Is the tool:</p> <ul style="list-style-type: none"> <li>- A non-specific multidisciplinary general WHP guideline</li> </ul> <p>Or a specific WHP tool for</p> <ul style="list-style-type: none"> <li>- The marketing/advocacy stage</li> <li>- The change process stage</li> <li>- The results/monitoring stage</li> </ul>	
<p>Brief description of the tool (summary)</p>	
<p>Describe an example of the use of the tool e.g. how the tool was used in a certain company (include name &amp; contact details)</p>	
<p>Repeated use</p> <ul style="list-style-type: none"> <li>- How often used (roughly estimated)?</li> <li>- Who are current users?</li> </ul>	

<p>Evaluation</p> <ul style="list-style-type: none"><li>- Tool as such</li><li>- Benefit of using the tool</li><li>- Methods of evaluation</li><li>- Provide References</li></ul>	
<p>Costs (describe costs for whom)</p> <ul style="list-style-type: none"><li>- The tool itself</li><li>- To use/implement the tool</li><li>- Other possible costs</li></ul>	
<p>Author of the template</p> <ul style="list-style-type: none"><li>- Name</li><li>- Address</li><li>- E-mail address</li></ul>	
<p>Date</p>	

### **ENWHP publications**

- Luxembourg Declaration. European Network for Workplace Health Promotion. Luxembourg 1997
- Models of good Practice. ENWHP, 1999
- Report on the current status of Workplace Health Promotion in Small and Medium-Sized Enterprises (SMEs). ENWHP, 2001
- Report on the current status of Workplace Health Promotion in the Public Administration Sector. ENWHP, 2002
- Healthy Employees in Healthy Organisations. For sustainable social and economic development in Europe. 2003
- ENWHP Quality Criteria for Workplace Health Promotion. ENWHP, 2000.
- ENWHP Questionnaire for self assesment. ENWHP, 2000.

### **ENWHP internal documents:**

- Minutes of the 15th Business meeting, Athens 4-6 June 2003
- Minutes of Toolbox project groups meetings, Netherlands 24 April and 17 October 2003
- Minutes of the 16th Business meeting, Rome 4-6 December 2003
- Activity Report European Network for Workplace Health Promotion 01.10-2002-31.10.2003
- A review by the ENWHP chairman Karl Kuhn and the ENWHP secretariat. How should the ENWHP develop in the future? Perspectives and strategic directions. November 2003
- Comments on the Toolbox Survey (needs assessment). A discussion paper of the German contact office of the ENWHP. BKK Essen, April 2003.



# Healthy Employees in Healthy Organisations

Methods and Practices for Workplace  
Health Promotion (WHP) in Europe



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