



Influencing the Organizational Environment to Create Healthy Workplaces

Version 1.1 July 9, 2004

This Info-pack contains:

- an overview of key factors which impact organizational health
 - stress and mental health
 - work-life balance
 - management practices
- strategies to promote the health of the organizational environment
- ideas for workplace health promoters
- available resources

T H
THE HEALTH COMMUNICATION UNIT
C U

INFO-PACK

at the Centre for Health Promotion
University of Toronto

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The Health Communication Unit
at the Centre for Health Promotion
University of Toronto
100 College Street, Room 213
The Banting Institute
Toronto, Ontario M5G 1L5
Tel: (416) 978-0522
Fax: (416) 971-2443
hc.unit@utoronto.ca
<http://www.thcu.ca>

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Acknowledgements

Members of THCU Comprehensive Workplace Health Promotion Project Team:

- Lisa Sullivan – researcher and writer
- Ali Kilbourn – editor
- Berkeley Butler
- Nancy Dubois
- Larry Hershfield
- Brian Hyndman

Members of THCU Project Advisory Committee:

- Thomas Abercrombie – Senior Prevention Program Specialist, WSIB

- Christa Costas-Bradstreet – Physical Activity Specialist, City of Hamilton, Social and Public Health services, Healthy Lifestyle and Youth Branch
- Mary-Ann Diosi – Public Health Nurse, Workplace Wellness, Health Promotion Division, Sudbury and District Health Unit
- Patricia England/Laurel Cammaat – Public Health Nurse, Kent-Chatham Public Health Department
- Linda Hawkins – Executive Director, Centre for Family Work and Well-Being
- Richard Hesch – Public Health Nurse, Brant County Health Unit
- Allan Jones – Workplace Health Consultant, Peel Health
- Frank Mabrucco – Manager, Best Practices Branch, WSIB
- Brenda Marshall – Workplace Wellness Project Officer, Muskoka-Perry Sound Health Unit
- Geri McKeown – Consultant Wellness Matters
- Melissa Warner – Centre for Family Work and Well-Being
- Suzanne Ouellet – Public Health Nurse, Hastings and Prince Edward Counties Health Unit

Stephen Kingston (MediaDoc) – Design & Production

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INTRODUCTION

For many Canadian organizations, addressing employee health and well-being concerns is a key strategy in order to attract and retain workers and to contain the costs related to ill employees. Numerous research studies over the past few decades have shown that healthy workplaces benefit both organizations and individuals. Most workplaces, however, have focused their employee health programs on employee safety and usually, to a lesser degree, healthy lifestyle promotion initiatives. While these programs are important contributors to the overall health of employees in a workplace and have some impact on reducing absenteeism, evidence now shows that workplace health promotion programs are more effective when a comprehensive approach is used. A comprehensive approach includes elements that address the organizational environment.

Elements of the organizational environment include leadership style, management practices, the way work is organized, employee autonomy and control, and social support. These factors have been shown to have a dramatic impact on employee health outcomes.¹ These factors are also known as *psychosocial* factors or part of a *psychosocial* work environment. When the organizational environment is perceived by employees as negative, high levels of employee stress are reported. It is employee stress that has the largest impact on employee health and productivity. In fact, research shows that workers stressed due to 'high effort – low reward' situations experience much higher rates of cardiovascular disease, depression, and certain cancers. Stressed workers are also at risk for two to three times the number of accidents compared to their peers without these particular stressors.² Unfortunately, workplace stress-related illnesses are on the rise in Canada and cost organizations dearly in terms of absenteeism, higher insurance claims, lost efficiency and lost productivity.³

"Little of today's technology is proprietary. Technology is easily obtained and replicated and only levels the playing field... an organization's valued human assets cannot be copied."

Bill Gates

1. Shain, M., Suurvali, H. (2001). *Investing in Comprehensive Workplace Health Promotion*. Centre for Addiction and Mental Health (CAMH) and the National Quality Institute (NQI). 8.

2. Shain, M., Suurvali, H. (2001), 12 and Burton, J. (2002). "The Leadership Factor: Management practices can make employees sick." *NQI Excellence Articles*. 4.

3. Shain, M., Suurvali, H. (2001). 74.

Evidence shows, however, that when organizations improve their working environments by organizing work in ways that promote health, all related adverse health outcomes, including injury rates and absenteeism, decrease.⁴ Organizations can do this by keeping demands on time and energy within reasonable boundaries, maximizing the degree to which employees participate in the governance of their own work, and providing adequate recognition for work well done.⁵ Changing the organizational environment and influencing the culture and personal working styles of managers takes time and commitment from an organization, and is no easy task. So what role can Ontario public health practitioners, who are mandated⁶ to promote healthy workplaces, realistically play?

To support Ontario public health practitioners in their efforts to promote healthy workplaces, The Health Communication Unit (THCU) has received funding through the Stroke Strategy of the Ontario Ministry of Health and Long-Term Care. Over the past several years, THCU has developed a comprehensive workplace health promotion (CWHP) approach and a number of supporting resources and services for health promotion practitioners. This Info-pack focuses on one element of the CWHP approach – the organizational environment. It is designed for practitioners who support the development of healthy workplaces in their community and would like to increase their understanding of the ways in which the organizational environment affects workplace health. It also provides practical ideas about what practitioners can do to promote healthy workplace environments.

4. Shain, M., Suurvali, H. (2001). 74.

5. Shain, M., Suurvali, H. (2001). 53.

6. Ministry of Health. (December 1999). Mandatory Health Programs. Ontario.

CONCEPTUAL APPROACH

Before addressing the role of the organizational environment specifically, it is important to put this element in the context of a wider understanding of workplace health. THCU has adopted a broad definition of workplace health, one that acknowledges that many factors within the workplace greatly influence health. In this definition, workplaces are viewed not only as a setting in which to ‘do’ health promotion, but also as a key determinant of health. Comprehensive Workplace Health Promotion is defined as “an approach to protecting and enhancing the health of employees that relies and builds upon the efforts of employers to create a supportive management under and upon the efforts of employees to care for their own well-being.”⁷ Within this broad definition, workplace health interventions are categorized into three groups: occupational health and safety; voluntary health practices; and organizational change.

- **Occupational Health and Safety** – reducing work-related injury, illness and disability by addressing ergonomics, air quality, and environmental and chemical hazards in the workplace.
- **Voluntary Health Practices** – reducing the risk or incidence of worker illness by addressing individuals’ lifestyle behaviours through education, supportive environments and policy.
- **Organizational Change Initiatives** – improving job satisfaction and productivity by changing worker attitudes and perceptions, management practices, and the way work is organized. For the purposes of this Info-pack we will consider this element as the organizational environment.

Figure 1 CWHP Approach



* The term “voluntary health practice”, “individual lifestyle practice” and “healthy lifestyles” are often used interchangeably for this factor.

⁷ Shain, M., Suurvali, H. (2001). 5.

Though often separated in theory, these elements overlap in practice. For example, stress is primarily influenced by the organizational environment, but healthy lifestyle initiatives may help individuals increase their capacity to cope. For a more complete discussion on THCU's comprehensive approach to workplace health visit www.thcu.on.ca/Workplace/Workplace.html.

ORGANIZATIONAL ENVIRONMENT FACTORS AFFECTING HEALTH

The organizational environment of a workplace can be defined as all the organizational and job factors that affect the interaction between people, their work and the organization.⁸ The organizational environment has a major impact on employee health and productivity and is influenced by many factors including:

- Leadership style – belief in and commitment to employee health and satisfaction and the link between employee health and the organization's business objectives.
- Management practices – how work is distributed, directed, and designed, how employees are involved and how they participate in decisions, as well as fairness, communication, feedback and rewards, and support for work-life balance.
- Social support – interpersonal relationships and communication between peers and supervisors.
- Pervading culture – unconscious beliefs values and norms shared by members of the organization; how employees think, act and feel, and what management pays attention to and rewards.

This next section will review three main themes discussed in the literature as they impact the organizational environment and the influencing factors listed above:

- stress and mental health issues,
- work-life balance, and
- management practices.

Of course, these issues overlap and this Info-pack is meant only as an introduction to these complex issues. As well, several terms are used interchangeably in the literature when discussing the organizational working environment. For a list of some terms and their definitions please see Appendix D.

A healthy organization is one "...whose culture, climate and practices create an environment that promotes employee health and safety as well as organizational effectiveness."

Cited in Lowe, Graham. (Jan 2004). Healthy Workplace Strategies: Creating Change and Achieving Results.

⁸. Bachmann, K. (October 2002). *Health Promotion Programs at Work A Frivolous Cost or a Sound Investment?* Conference Board of Canada: Ottawa. 10.

Stress and Mental Health

In the 2002 Aventis Healthcare Survey, 51% of Canadian employees said they experienced a great deal of stress at work. Roughly, 25% of these employees said that their workplace stress had been so overwhelming that it made them physically ill at times. More than half of the employees surveyed said they worried that the stress they experienced at work could cause serious long-term illness. When asked if their employer was doing enough to help them manage their stress at work, 44% of respondents said “no.”

Source: Cited in Canadian Council on Integrated Health Care (2002) Discussion Paper. p.21

Workplace stress related illnesses are on the rise in Canada. Recent insurance company statistics indicate that mental and nervous disorders are the top conditions causing long-term disability.⁹ The 2002 Aventis Health Care survey¹⁰ found that 51% of Canadian employees said they experienced a great deal of stress at work. Findings of the Association of Professional Executives of the Public Service of Canada (APEX) show that the executive cadre is experiencing stress in the high to extreme range.¹¹ Workplace stress today is linked to working more hours¹², an increased intensity of job demands, a lack of control over the pace of work or a lack of understanding of how to carry out duties, poor communication with supervisors and an imbalance between work and personal responsibilities.

According to a report from the Global Business and Economic Roundtable on Addiction and Mental Health on Corporate Leadership in Mental Health¹³:

- Mental illness in the labour force is a clear and present danger confronting the global economy and the corporations competing therein.
- Depression and ischemic heart disease are on track to become the leading causes of work years lost in the global economy by 2020 through human disability and premature death.
- Upwards of 20-25 per cent of the Canadian and U.S. labour force suffers from depression and anxiety disorders in any given year. Those numbers double over the course of a lifetime.
- Men and women in their prime working years – the backbone of our consuming and producing economy – are the most vulnerable to mental health problems.
- The global information economy is an economy of mental performance; 85 per cent of the jobs in North America, according to a McKinsey study, now require cerebral, not manual, skills.
- The costs of mental illness in the Canadian labour force – only recently documented – exceed \$33 billion a year in production loss alone.

Research shows that high job demands and having too much to do over too long a period, with constant imposed deadlines, are some of the most harmful workplace stressors. The most stressful combination is having high demands

⁹ Canadian Council on Integrated Healthcare (CCIH). (October 2002). *A Discussion Paper on Workplace Health*. 20.

¹⁰ Aventis Health Care Survey 2002 cited in CCIH (2002). 21.

¹¹ Association of Professional Executives of the Public Service of Canada (APEX). (November 28, 2002). *The Health Status of Executives in the Public Service of Canada*.

¹² The Health Communication Unit (THCU). (April 2002). *Supporting Comprehensive Workplace Health Promotion in Ontario Project Stakeholder Analysis*, 12.

¹³ Wilkerson, Bill. (February 4, 2004). Global Economic Roundtable on Addiction and Mental Health.

Dr. Martin Shain, from the Centre for Addiction and Mental Health and the University of Toronto's Centre for Health Promotion, summarized much of the research in this area. He describes the key factors behind the development of strain in the workplace:

- High job demand, where there is too much to and constant deadlines;
- Low job control, where the person has too little influence over the organization of his or her work;

- High effort or energy needed to achieve goals; and
- Low reward compensation, or acknowledgement of effort.

When there is high job pressure combined with low job control, and high effort combined with low reward, particularly when there is also home stress and a lack of social support, stress can result.

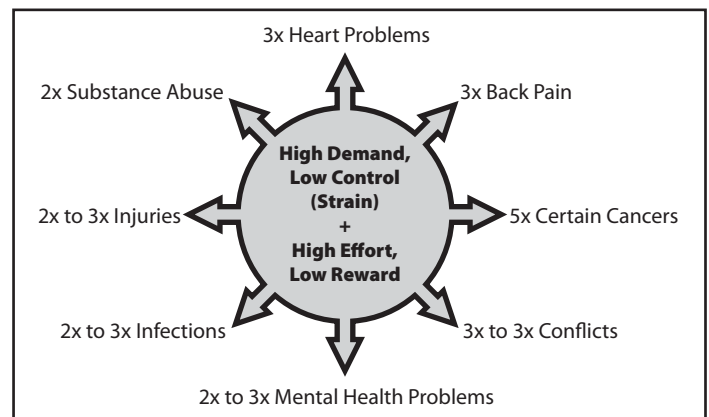
Source: Wilson, Jane. (May 5, 2003). An Unhealthy Workplace can be Bad for You. www.nqi.ca

and low control, plus an absence of social support at work.^{14,15,16} This is based on the Karasek and Theorell's demand-control-support model.¹⁷ Another model used to explain stress at work is the Effort/Reward Imbalance Model. This model shows that high job strain results when high mental or physical job effort is expended to achieve organizational goals, and low compensation or acknowledgement of effort is rewarded in terms of bestowed status, financial gain or career advancement.

According to physiological research, stress can lead to changes in brain chemistry, which then affects the body's ability to defend itself against infections and other diseases.¹⁸ Some stressors are worse than others in terms of their effects. Data show that people working with high demands and low control, compared with workers who have a high level of control, experience significantly higher rates of heart and cardiovascular disease, anxiety, depression, alcohol abuse, infectious diseases, back pain and repetitive strain injuries (RSIs). As employees become more stressed by increased job demands and emotional stressors, they are more likely to be involved in workplace accidents and sustain injuries.¹⁹ Shain²⁰ reports that stress can increase workplace rates of injury by a factor of two to three times.

Figure 2 summarizes the many negative health and safety effects that result from constant exposure to high demands and low control, and high effort and low rewards in the workplace.²¹

Figure 2 Health Consequences of Stress²¹



¹⁴. Bachmann, Kimberley. (October 2002). 10.

¹⁵. Cited in Bachmann, K. (October 2002). 10.

¹⁶. Shain, M. (2000). *Best Advice on Stress Risk Management in the Workplace*. Health Canada. 33.

¹⁷. Shain, M. (2000) and Burton, J. (2002).

¹⁸. Wilson, J. (May 5, 2003). *An Unhealthy Workplace can be Bad for You*. NQI.

¹⁹. Shain (2000).

²⁰. Shain (2000).

²¹. Shain (2000).

Award winning Quebec business man Remi Tremblay in his recently published book "Happiness at Work" states that workers who feel good make clients feel good and have a positive effect on business.

Source: Nebenzahl, D. (Wed. March 31, 2004). *Happy employees are essential to success.* Ottawa Citizen.

It has been shown that "satisfiers", such as control and rewards, can mitigate the stress caused by too much demand and effort.²² Workers who are satisfied with their jobs tend to be healthier, whereas people who are dissatisfied with their jobs experience negative physical and psychological consequences.²³ Furthermore, literature suggests that there is a "spill-over" effect from job to leisure, indicating that people who hold stimulating jobs might be more likely to engage in physical activity and other healthy behaviours.²⁴ Job satisfaction is also linked to customer/client satisfaction and ultimately, the bottom line.²⁵ For example, Sears, Roebuck and Company was one of the first to recognize this link, and was able to increase revenues by over \$200 million in 12 months by increasing employee satisfaction.²⁶

Dr. Shain has recently demonstrated that perceived fairness by employees is another powerful influence on health.²⁷ He describes two kinds of fairness:

- Distributive – who gets what, and when
- Procedural – the processes through which decisions are made

Feelings associated with a sense of unfairness include anger, depression, demoralization and anxiety. Feelings associated with fairness include satisfaction, calmness, enthusiasm and happiness. Strong negative feelings translate into compromised immune systems, setting the stage for a variety of adverse physical and mental health outcomes. In other words, feelings of unfairness

²² Amos, Susan. (2003). The Business Health Culture Index – A tool to Foster Organizational Health slide presentation. Human Resources Development Canada.

²³ Peterson, M., Wilson, J. (1996). *Job satisfaction and perceptions of health.* *Journal of Occupational and Environmental Medicine*, 38(9):891-8.

²⁴ THCU (April 2002). 194.

²⁵ THCU. (April 2002). 5.

²⁶ Corbett, Dan. (2003). *Why Focus on a Healthy Workplace?* NQI.

²⁷ Based on information presented in an article by Joan Burton (2002). *The Leadership Factor: Management practices can make employees sick.* *NQI Excellence Articles.*

A number of Canadian research studies have shown links between how work is organized and health outcomes. For example:

- A study of hourly paid workers at a General Motors plant in Oshawa, Ontario, conducted by the Institute for Work and Health, found that both physical and psychosocial factors were linked to the development of lower back pain. In particular, the study found that individuals who had low job control or workers who felt more negative about the general atmosphere at work were more likely to report low-back pain than those who were not exposed to these situations.
- A study of non-production employees at the Toronto Star found that physical factors, such as long hours in front of a keyboard, as well as psychosocial factors, such as tight deadlines, low levels of co-worker support, and low job control, were associated with the occurrence of repetitive strain injuries.

Source: Bachman, K. (October 2002). *Health Promotion Programs at Work A Frivolous Cost or a Sound Investment?* Conference Board of Canada: Ottawa. p. 10

magnify the effects of perceived stress on health. In contrast, a sense of fairness is related to trust, which is key to employer-employee relations, high morale and productivity.

Understandably, in today's fast-paced society, businesses cannot succeed without making high demands on employees, and often expecting a lot of effort in return. Most employees can cope with high demands if given appropriate control over the way they work, and can put out sustained high efforts if they feel appropriately rewarded and appreciated.

Work-life Balance

A leading issue causing stress for many Canadians is the challenge of balancing work and personal responsibilities (work-life balance). The most compelling Canadian studies on this topic are by Duxbury and Higgins, who discuss the changes from their Canada-wide surveys on work-life balance in 1991 versus 2001. Studies done in 1991 and repeated in 2001 show that work-life balance has deteriorated significantly in the past 10 years. Duxbury and Higgins state that work-life conflict occurs when time and energy demands imposed by our many roles become incompatible with one another. Employees experience much of this conflict because of role overload and work interference with family life. "Employees with work-life conflict are significantly less committed to the organization and satisfied with their jobs."²⁸ They also report significantly higher levels of job stress, absenteeism, EAP use, prescription drug use and intent to turnover. Yet in the same companies, employees with "supportive supervisors" reported significantly higher job satisfaction, trust of managers and commitment to the organization, as well as less role overload, job stress, depression, poor health, work-life conflict, fatigue, absenteeism and intention to leave the company.²⁹

Management Practices

Canadian organizations are not addressing the real issue affecting employees' mental health and stress—the organizational environment. A survey by Statistics Canada in 1999 of over 6,000 workplaces found that roughly half (49.5 per cent) had adopted an organizational practice of sharing information with employees. Other organizational practices supporting employee well-being were limited. For example, only about a third (31.9 per cent) had instituted flexible job designs, 31% had employee suggestion programs, 25.7% had problem-solving teams and 10.3 % had self-directed workgroups.³⁰

Employee Retention

In two surveys carried out by AON Consulting and Prudential Life, the top seven drivers for employee retention were (not in rank order):

- management/supervisory quality
- management recognition of work-life balance
- opportunities for personal growth
- keeping pace with skills needed for the job
- open communication
- satisfying customer needs
- competitive pay

Source: Burton, J. (2002). The Leadership Factor: Management practices can make employees sick. NQI Excellence Articles.

²⁸. Cited in Burton, J. (2002).

²⁹. Cited in Burton, J. (2002).

³⁰. Cited in Bachman, K. (October 2002). 11.

"If you are a lousy leader...you are making people sick. Ambiguity, inconsistency, uncertainty, insecurity, arbitrariness, bad decision-making, self-centredness, rewarding the wrong things in the office, the fostering of office politics, and rewarding political behaviour - that's the earmark of weak leadership."

Source: Bill Wilkerson, President and Co-Founder Global Economic Roundtable on Addiction and Mental Health. Cited in Burton, J. (2002). *The Leadership Factor: Management practices can make employees sick.* NQI Excellence Articles.

The National Quality Institute (NQI) has developed Canadian Healthy Workplace Criteria to assist organizations with implementing CWHP. These criteria were developed in partnership with Health Canada and in association with professionals from the health and safety sector. The criteria provide a logical framework for developing and sustaining a healthy workplace through what NQI calls the four essential "drivers": Leadership, Planning, People Focus and Process Management. The emphasis on leadership and people speaks to the importance of the organizational environment.

The Association for Professional Executives of the Public Service of Canada (APEX)'s study of federal public service executives demonstrated that executives continue to have low levels of decision latitude, significant increases in work demands and deteriorating health status. In fact, 53% of executives interviewed reported high levels of stress—almost twice the rate for the average Canadian of the same gender and age.³¹ As APEX points out – “put a healthy person in an unhealthy environment, and eventually they will become ill.”³²

Recent research shows that many of the organizational initiatives designed to increase productivity are closely linked to health. Organizations that understand the impact of employee satisfaction and health on business outcomes are strategically better placed at being successful.³³ Leadership is key to making this happen and good leaders realize that “*workplace well-being is a business strategy*.”³⁴

The National Quality Institute (NQI) asserts that *Leadership* is key because a healthy workplace can only be sustained when the organization's leaders believe in and are committed to that goal. Leadership means aligning workplace health with organizational goals. Leadership also means that the executive management team provides direction and resources while at the same time, sharing the leadership, responsibility and accountability for healthy workplace issues throughout the organization.

Although the workplace is an environment that can negatively affect health, it simultaneously offers great potential for improving overall employee health and well-being. Management can improve the workplace organizational environment by organizing work in ways that promote health. They can do this by keeping demands on time and energy within reasonable boundaries, maximizing the degree to which employees participate in the governance of their own work, and by providing adequate recognition for work well done.³⁵ Shain argues that organizational change is a key ingredient in workplace health promotion. He states that health promotion programs will be effective only under conducive managerial conditions (primarily those that stimulate employee job satisfaction).³⁶ Shain defines what he calls the key social skills of managers and common set of practices as:

- Self-Awareness – How do I affect others?
- Willingness and ability to balance demand and control/effort and reward
- Challenges and Skills – at an individual and group level

³¹. APEX (November 28, 2002). 2.

³². APEX (November 28, 2002). 2.

³³. Corbett, D. (2001). *Why Focus on a Health Workplace?* NQI.

³⁴. Amos, Susan. (2003). HRDC, personal interview 27/02/03.

³⁵. Shain, M., Suurvali, H. (2000). 53.

³⁶. Shain, M., Suurvali, H. (2000). 53.

- Perceptiveness about others' legitimate needs, interests, strengths, and limitations
- Ability to negotiate an equitable division of labour in a work group
- Ability to mediate disputes
- Fairness (to be fair and to be seen as fair)

Although these social skills may sound simple, Shain notes that their simplicity conceals some of the real difficulties in achievement. These skills often require personal transformation for managers and a change in workplace culture. Encouraging managers to identify and take action on areas they have control over is a key strategy to improving the working conditions for employees. When this happens, managers can also identify problems they do not have control over and then can work with senior management to make the necessary changes.

Management practices in organizations are influenced by the workplace culture³⁷ and vice versa. The culture in a workplace is made up of the assumptions, values, beliefs and attitudes that employees learn in the organization about how to work together and manage organizational life.³⁸ These beliefs and values are often unconscious. The behaviour modeled by the leader and management shapes the culture and practices.³⁹ According to Linda Duxbury, culture is demonstrated by:

- What leaders pay attention to, measure and control on a regular basis
- The reactions of leaders to critical incidents and organizational crisis
- Observed criteria by which leaders allocate scarce resources
- Deliberate role modeling, teaching and coaching
- Criteria for allocating rewards
- Criteria for recruitment, selection, promotion, retirement and exiting.

Norm William, vice-president of human resources programs at AT&T Canada notes that "Many people equate wellness with expensive fitness facilities and daycare centres... We're building the concept of healthy workplace into everyday management practices and that does not require a lot financial resources..." What it does require is commitment from the top and plenty of communication.

Source: NQI. *The Healthy Workplace: Just Good Business.* www.nqi.ca

³⁷. Duxbury, L. (2004). *Work-life Balance in Ontario: A Status Report.*

³⁸. National Quality Institute (NQI). (2000). *Framework for the Development of a Healthy Workplace.* 76.

³⁹. Hagberg, R. Heifetz, J. (2000). *Corporate Culture/Organizational Culture: Understanding and Assessment.* Telling the CEO his/her baby is ugly. Hagberg Consulting Group (HCG).

Telus BC, a large telecommunications company with headquarters in Burnaby BC, is a NQI Healthy Workplace Award trophy recipient. Telus BC has identified resilience, change mastery and a corporate culture that supports work-life balance and employee health needs as key success factors. They determined these priorities through dialogue with senior management, strategic planning sessions, employee surveys and studies, and industry and national business trends. Telus uses the Balanced Scorecard approach to encourage management accountability for meeting healthy workplace objectives and, as such, has experienced a positive change in corporate culture. Telus is showing positive trends in employee health and well-being, as well as cost savings to the company. They state a return on investment of three dollars for every dollar invested in the program.

Source: McKeown, Geri. (Mar 4, 2001). *Workplace Wellness: Something's Happening Here.* NQI.

The Treasury Board of Canada list a number of common characteristics found in the literature of “what makes a good place to work.” For example:

- People are engaged in their work
- There is mutual respect and trust between employees and manager
- People feel they are treated fairly
- There is a clear sense of purpose
- Employees are able to balance their work and personal responsibilities
- Employees feel safe (i.e., free from harassment and/or discrimination)

They also suggest a number of common conditions from the literature that help create great places to work such as:

- Senior management is committed to the tasks
- Supportive middle managers are recognized and rewarded
- Open and honest communication is encouraged throughout the organization
- Employee participation in decision making is encouraged and facilitated
- Employees are given some control over their work.

Source: Treasury Board of Canada (May 2002). Annotated Bibliography Workplace Well-Being.

WHAT CAN BE DONE?

By Workplaces

Research clearly shows that reducing employee health risks requires changes in job design, workplace culture, organizational systems and management practices. But this change is not an easy process. Creating healthy and productive workplaces takes time and dedication at many levels including the individual manager, senior executives in organizations, and governments.

Graham Lowe, in his paper on *Creating Change and Achieving Results*,⁴⁰ refers to creating a healthy organization through organizational and management change as *Transformational Change*. Transformational change requires a systemic change with clarity of vision, strong commitment, and a strong degree of cooperation and involvement of everyone in the organization.

The main steps supporting the development of a healthy workplace are described in previous THCU reports.⁴¹ See Appendix A for the CWHP Planning Framework. The following section reviews the key elements of this planning process related to supporting healthy organizational environments:

- obtaining management support;
- conducting a situational assessment;
- developing and implementing programs; and evaluation.

It is important to realize, however, that conventional planning models only go so far in facilitating transformation change, and therefore, the process should be considered iterative, and should leave room for lots of reflection and readjustment.⁴²

⁴⁰ Lowe, Graham. (Jan 2004). *Healthy Workplace Strategies: Creating Change and Achieving Results*. Prepared for the Workplace Health Strategies Bureau, Health Canada.

⁴¹ THCU. (April 2002).

⁴² Lowe, Graham. (Jan 2004).

Obtaining management support

The evidence points to the need for commitment and involvement of senior management in creating organizational change. This commitment helps employees understand their employers' serious commitment to health. Graham Lowe suggests that creating healthy organizations is far less straightforward than implementing a healthy lifestyle program. When attempting to transform organizational culture and values, it is important that health promotion and human resource professionals team up. Equally crucial, there must be support from employees, unions, and managers and supervisors at all levels. These stakeholders must engage in discussions about the role of the entire organization in "creating health."⁴³

Conducting a situational assessment

Key to influencing the organizational environment is understanding the existing culture of the organization and finding out about the underlying issues affecting satisfaction and emotional and mental health contentment at work. Assessing the personal style of management and determining how supportive management is regarding employee health and productivity will help determine specific training and program needs. Some tools to consider include:

- The Business Health Culture Index (BHCI)⁴⁴ is a tool designed to help foster the health of an organization and its employees by:
 - Measuring the extent to which the "health culture" of the organization is working for or against its business objectives;
 - Tracking the stress and satisfaction of employees;
 - Providing an assessment tool for managers and work groups to plan what steps they might take to maintain and/or improve workplace well-being.

The BHCI was developed by Dr. Martin Shain to measure the four key factors influencing stress and satisfaction in the work environment:

- Demand – the amount of time to do the work
- Control – the amount of influence over how the work is done
- Effort – the emotional psychological requirements of work
- Reward – the amount of recognition and acknowledgement for a job well done

For an excellent selection of organizational needs and issues assessment tools visit Canada Healthy Workplace Week website at www.nqi.ca/chww/strat.htm

⁴³. Lowe, Graham. (Jan 2004).

⁴⁴. Shain, M., personal interview 16/01/03.

The BHCI is constructed from the Stress and Satisfaction Offset Scale (SSOS), comprised of answers of individual employees to four simple questions. The answers to the questions measure stress, satisfaction and health at work.

1. I am satisfied with the amount of involvement I have in decisions that affect my work. (control)
2. I feel I am rewarded for the level of effort I put out for my job. (reward)
3. In the last (6) months, too much time pressure at work has caused me worry, “nerves” or stress. (demand)
4. In the last (6) months, I have experienced worry, “nerves” or stress from mental fatigue at work. (effort)

The results of the SSOS in aggregate form provide a score for the average stress and satisfaction for the workforce as a whole, and provide a measure of the extent to which the health culture of an organization is working for or against its business objectives. It can be used as a benchmark from which personal and organizational improvements can be made. See Appendix B for a copy of this tool. An enhanced Stress/Satisfaction Questionnaire is also available from the Neighbour@Work website (www.neighbouratwork.com) on each of the four key factors (demand/control/effort/reward) and provides more detail on priority elements for planning.

- A tool developed by Susan Amos and the Wellness Program, Human Resources Development Canada (HRDC) in collaboration with Dr. Martin Shain⁴⁵ assesses how the current management style promotes health and productivity among employees. A score from this test estimates the probable impact that leadership style has on the mental health and productivity of the people who report to the manager. See Appendix C for a copy of this tool.
- NQI offers twelve questions for organizations to see how they measure up to the NQI Healthy Workplace Criteria.⁴⁶ These questions are a good starting point for an organization interested in becoming healthier.
 1. Is a strategic approach in place for developing and sustaining a healthy workplace and is it based on employee needs?
 2. Do your leaders demonstrate, through their comments and action, a commitment to the management of a healthy workplace?
 3. Is there an overall health policy in place stating your organization’s intent to protect and promote the health of all employees by providing as healthy an environment as possible?

⁴⁵ Amos, Susan. (2003). HRDC, personal interview 27/02/03.

⁴⁶ McKeown, Geri. (Mar 4, 2001). *Workplace Wellness: Something’s Happening Here*. NQI.

4. Do you have a formal assessment process to determine employee needs, attitudes and preferences in regard to healthy workplace programs?
5. Are the workplace health assessment results analyzed and are improvement goals set out in a Healthy Workplace Plan?
6. Does the Healthy Workplace Plan lead to improvement of all the key elements of a healthy workplace - the Physical Environment, Health Practices and the Social Environment and Personal Resources
7. Do you have a mechanism in place to review relevant occupational health and safety legislation and are you in compliance with such legislation/regulations?
8. Do you have methods in place that make it easy for people to provide ongoing input on healthy workplace and organizational issues and to seek assistance?
9. Do you measure employee satisfaction levels in order to improve the workplace?
10. Do you identify the contributions of your employees and provide appropriate recognition and rewards?
11. Are there good levels and trends in employee satisfaction and morale?
12. Do you train your employees in healthy workplace principles and methods?

Developing and implementing programs

The Neighbour@Work Project

The Neighbour@Work Initiative is a tested method to promote health and productivity by improving the quality of the employment relationship. The key element of the relationship is neighbourliness based on a standard of good management practice rooted in fairness. The website has a number of valuable resources on supporting workplace fairness and health. Visit www.neighbouratwork.com

The literature clearly suggests that many changes in organizational culture, management practices and style can eliminate or reduce the exposure to, and the effects from, the hazards causing employee distress. When implementing a program, it is important to consider how to/how you will:⁴⁷

- encourage workers to participate in decision-making;
- encourage workers to voice concerns and make suggestions - and then listen;
- improve workers' trust in the company, and managers' trust of workers;
- demonstrate fairness in management style, and application of policies;
- improve supervisors' communication effectiveness and "people skills";
- train and evaluate supervisors in giving rewards and appreciation appropriately;
- institute feedback for performance measurement;
- institute flexible work options;
- support work-life balance with policies and practices; and

⁴⁷. Burton, J. (2002).

- measure employee stressors and satisfaction regularly, and then act on the results in consultation with the employees.

Graham Lowe presents an action model that guides the implementation of healthy workplace changes by addressing the following issues:

- Recognizing and removing major barriers to organizational change;
- Determining how new organizational practices can be diffused through learning and innovation;
- Taking an integrated top-down and bottom-up approach to change initiatives;
- Engaging all employee groups in the change process;
- Reducing the stress of change, so stress does not become an impediment;
- Measuring progress;
- Identifying and addressing knowledge gaps in order to further the diffusion of healthy workplace concepts.

For a full discussion on this action model, see Lowe's paper at www.cprn.com.

Human Resources and Skills Development Canada (HRSDC) offers some practical suggestions for improving management practices in the four (previously discussed) key areas of:⁴⁸

- Increase rewards
 - new learning opportunities
 - interesting assignments
 - promotion
 - external representation roles
 - positive feedback on work well done
- Increase control
 - delegate decision-making to individual employees
 - train managers to be good workload management coaches and to establish boundaries between essential work and work that can wait
- Reduce Demands
 - clarify priority work for employees
 - set realistic service delivery standards with clients
 - help people to say "no" without guilt

Mental Health Works, an initiative of the Canadian Mental Health Association in Ontario helps organizations to recognize the important role they can play in supporting the mental health of their employees and how they can respond appropriately when employees experience mental health problems.

- Provides organizations with information about early identification, prevention and accommodation
- Develops and distributes kits for employers and employees
- Designs and delivers customized training
- Develops networks to exchange strategies for addressing mental health issues in the workplace
- Is a one-stop source for information about what is happening in Canada and around the world in the area of mental health and work

Source: www.mentalhealthworks.ca

⁴⁸. Amos, Susan. (2003). HRDC, personal interview 27/02/03.

- Reduce Effort and Strain
 - monitor people's perfectionist tendencies
 - ensure staff are taking holidays and are working towards a healthy work-life balance
 - engage staff and clients in redesigning work processes to reduce effort and strain
 - invest in technology and high quality training and development to augment staff competency and capacity
 - equip people with skills for conflict resolution

Evaluation

Monitoring and evaluating CWHP efforts is an important learning tool that provides accountability, the ability to share successes with others and learn from mistakes, and make changes to the course of action as necessary. Tools such as the BHCI (discussed above) can be used to track and measure progress and obtain feedback on management practices.

Examples of CWHP evaluations and their usefulness in evaluating progress on CWHP are available in the THCU Info Pack: *Evaluating your Comprehensive Workplace Health Initiatives* available at www.thcu.ca

By Intermediaries

As a public health professional or a health promoter with a government or volunteer agency involved in workplace health promotion, you have a role in helping workplaces develop the knowledge and skills to deliver healthy workplace activities and services directly to employees in areas mandated by your organization. THCU refers to this role as the “intermediary” - those who provide (or have potential to provide) direction and support to people in workplaces who make decisions about if and how to provide workplace health promotion. The intermediary role can take on a *specialist* function (e.g., offer expertise in a specific topic area such as tobacco control) or a *generalist* function (e.g., provide advice and consultation on general workplace health promotion strategies). Given that the literature is clear that a healthy organizational environment is a key aspect in any workplace health promotion initiative and it is likely as an intermediary you are *not* an expert in organizational change and development, what could be your role? The following are some suggested roles and activities for intermediaries to influence organizational environments in workplaces to support health. Before you begin approaching workplaces, it is important to look at your own organization's project needs and establish boundaries for services.

Educate the business community in your area to increase their knowledge and awareness about the links between organizational structure, fairness, management support and employee satisfaction. Although most organizations have concerns about the costs related to illness, absenteeism and low produc-

For more information on developing your role as an intermediary in CWHP see THCU Info Pack: *An Introduction to Comprehensive Workplace Health Initiatives* at www.thcu.ca

tivity, the benefits of investing time and energy today may seem too far in the future and may lead to employers not wanting to undertake the initiative. Ideas for education include:

- Hosting workshops and conferences;
- Partnering with other groups to bring in well known speakers on organizational health issues;
- Presenting and consulting with individual workplaces or with business groups and associations;
- Developing and disseminating web based and/or print resources;
- Engaging community and business leaders through round table discussions with other experts in your region;
- Finding a business leader to champion health in the workplace; and
- Implementing media awareness campaigns.

Search out and/or provide opportunities for training and leadership development in the area of healthy organizational environments and promote them with workplaces. The provision of training on the relationship between management practices and employee health and productivity and learning strategies on how to implement positive work environments is a crucial step towards changing manager's attitudes and practices.

Assist your workplace clients with navigating through the organizational development and health resources in the community. Keep abreast of available resources and tools to increase your knowledge and skills as a workplace health promoter and to provide up to date resources for workplaces. If you are not an organizational change specialist, consider developing criteria to help workplaces determine the best resources to suit their needs. As well, you may wish to develop an inventory of key local resources and services to assist you when referring workplaces to other professionals and/or community organizations.

Consult and advise on the process of developing CWHP. Organizational environment issues are important in the development of an overall CWHP initiative. Change will realistically take three to five years⁴⁹ and workplaces will benefit from your continual support in the process, from developing the CWHP rationale, to implementing programs and policies, to evaluation.

Model and achieve healthy workplace and organizational initiatives in your own workplace to gain experience and credibility when working with other organizations. Doing this will also help your own organization understand and value the work that you do. Consider implementing a CWHP if one

Examples from the field...

- The City of Ottawa Public Health has developed a series of information sheets and a display on balancing work and home, which they have shared with workplaces across their region.
- Many public health units host annual workshops with well known speakers, such as Linda Duxbury, to attract business leaders.
- Grey Bruce Health Unit and The District Health Council have partnered to provide a workshop for their region.
- Muskoka-Parry Sound Health Unit provides a monthly electronic newsletter to local businesses through a list service.

⁴⁹. Lowe, Graham. (Jan 2004).

is not already in place, and encourage the adoption of management skills that promote and support employee health, productivity and job satisfaction. For example:

- Open and honest communication
- Trust and respect
- Fairness
- Involvement in decision making and job control
- Clear direction and expectations
- Rewards, in terms of praise and recognition for work well done
- Work-life balance

Workplace Gifts

The Gift of Clear Expectation -- Let us be clear what we expect of others at work and respectfully convey that information.

The Gift of Job Fulfillment -- Let us remember that a pay cheque buys bread for the table. Job fulfillment buys bread for the soul.

The Gift of Inclusion -- More than ever, at work, keep people close and engaged. Don't let email sap human contact from your place of work.

The Gift of Listening -- Give this gift to someone everyday.

The Gift of Trust -- Let your co-workers know you believe in them.

The Gift of Being Home -- In these nervous times, people think about their kids and their families a lot. Respect this.

The Gift of Fairness -- It treats the wounds of life and work.

Source: Bill Wilkerson, President and Co-Founder Global Economic Roundtable on Addiction and Mental Health. Presentation on the "Corporate Leadership in Mental Health" to The 2nd Annual Canadian/U.S. Employer Forum February 4, 2004, Royal York Hotel, TORONTO, Canada. www.mentalhealthroundtable.ca

RESOURCES AND SUPPORTS

Many groups offer a variety of tools to help organizations and managers to create culture change and organizations supportive of positive work environments for employees.

The Health Communication Unit (THCU)

With funding from the Ministry of Health and Long-term Care, THCU has pulled together a number of valuable workplace health resources and documents. See www.thcu.ca/Workplace/Workplace.html. THCU has also partnered with Canadian Centre for Occupational Health and Safety (CCOSH) to make a database of over 800 resources on CWHP, searchable through the CCOSH website.

THCU's Workplace Health Promotion project has also launched a *Virtual Community* – a virtual space where you can share your insights, opinions and resources relating to supporting comprehensive workplace health promotion initiatives. The Virtual Community is intended for health promotion intermediaries working to develop initiatives within Ontario workplaces. To submit a story or read what others are saying, log on to www.thcu.ca/workplace/vc

Recommended Reading:

- Effectiveness of Workplace Health Promotion. March 2003.
- Conditions for Successful Workplace Health Promotion Initiatives. March 2003.
- Conceptual Approach. March 2003.
- Comprehensive Workplace Health Promotion “Making Cents of a Good Idea” – Business Case. June 2003.
- An Introduction to Comprehensive Workplace Health Promotion-Info-pack. June 2004.
- Evaluating Comprehensive Workplace Health Promotion – Info-pack. June 2004.

National Quality Institute (NQI)

The National Quality Institute (NQI) is a not-for-profit organization, which provides strategic focus and direction for Canadian organizations to achieve excellence, enabling Canada to set the standard for quality and healthy workplace practices throughout the world. NQI, in partnership with Health Canada, has developed the Canadian Healthy Workplace Criteria. NQI offers many valuable reports and articles on its website as well as the opportunity for a variety of educational and training programs. The NQI-PEP Healthy Workplace Progressive Excellence Program is the implementation “Roadmap” for the Canadian Healthy Workplace Criteria, and consists of four levels of certification and recognition. Organizations that have achieved all four levels can apply for recognition of their outstanding achievement through the prestigious Canada Awards for Excellence, Healthy Workplace Award. This coveted award is tangible evidence of organizational excellence.

In addition, NQI supports two other websites for healthy workplace resources:

- ***Canadian Healthy Workplace Resource (HWR) Guide*** at www.nqi.ca/hwr - an online source that provides credible resources to facilitate the continuous improvement of all aspects of a healthy workplace. HWR contains links to valuable organizations and their specific resources. Resources are categorized according to type (conference, publication, training etc.), subject (smoking, stress, physical activity etc.) and NQI-PEP level (Level One: Commitment, Level Two: Planning etc.).
- ***Canadian Healthy Workplace Week*** (www.nqi.ca/chww) – an online resource that provides ideas on creating a healthy organization year-round. It contains links to valuable information, research, and resources on workplace health. Within this site, the ***Resource Well*** (www.nqi.ca/chww/well) is located. It is described as a place to find and share workplace health and wellness information in Canada. There are useful links to organizational and personal health, as well as wellness-related web-based resources including articles, posters, fact sheets, research reports, and websites.

Recommended reading:

- Shain, M. and H. Suurvali. (2001). Investing in Comprehensive Workplace Health Promotion. Centre for Addiction and Mental Health.
- Shain, M. (April 2001). Building Capacity through Investing in Whole People doing Whole Jobs.
- Canadian Healthy Workplace Criteria.

Canadian Centre for Occupational Safety and Health (CCOHS)

CCOHS (www.ccohs.ca/ccohs.html) is a Canadian federal government agency, which serves to support the vision of eliminating all Canadian work-related illnesses and injuries. CCOHS provides unbiased, relevant information and advice that supports responsible decision-making and promotes safe and healthy working environments. CCOHS hosts a large searchable database on CWHP issues which includes over 800 annotated articles collected by THCU during the past four years of comprehensive workplace health project funding.

CCOHS was chosen as an affiliate Partner with the Canadian Health Network (CHN) and is responsible for leadership and content expertise on the workplace health information section (see www.canadian-health-network.ca/1workplace_health.html).

Recommended Reading:

- Workplace Stress – General: OSH Answers www.ccohs.ca/oshanswers/psychosocial/stress.html

Neighbour at Work Centre

Neighbour@Work (www.neighbouratwork.com) provides a number of resources and descriptions of services that are offered. Many of the resources are part of The Workplace Health-Productivity Matrix, which is a guide to the options that are available for planning improvements to health and productivity in the workplace. The Matrix provides an orientation to research and best practices in CWHP commissioned, developed and otherwise supported by Health Canada over a period of many years. In the Matrix there are links that lead to 22 documents that relate to the Neighbour@Work concept.

Canadian Mental Health Association (CMHA)

CMHA's programs are meant to ensure that people whose mental health is endangered will find the help needed to cope with crisis, regain confidence, and return to their community, family and job. (www.cmha.ca).

CMHA also sponsors the Mental Health Works program, (www.mentalhealth-works.ca) which has a variety of resources for workplaces.

Recommended Reading:

- Coping with Stress
- Stress Sense: workshops and tips

Canadian Policy Research Networks (CPRN)

CPRN (www.cprn.com) is one of Canada's leading think-tanks, specializing in social and economic policy research and public engagement. CPRN hosts the **Work Network**. The Work Network explores the cutting edge of workplace and labour market change, and the evolving interface between learning and work.

Recommended Reading:

- Graham Lowe Group, Research Associate with CPRN's Work Network paper prepared for Health Canada - *Healthy Workplace Strategies: Creating Change and Achieving Results*.

Workplace Health Strategies Bureau of Health Canada

Health Canada supports the creation of safe, healthy and supportive work environments as part of its efforts to improve the health of Canadians and their families. The mandate and key activity areas of the Workplace Health Strategies Bureau include strategies to increase awareness and understanding of comprehensive workplace health, build national and international capacity through partnerships, establish links with other federal and provincial stakeholders, and disseminate workplace health systems models. Several key workplace health documents are available on their website at www.hc-sc.gc.ca/hecs-sesc/workplace/publications.htm.

Recommended Reading:

- Shain, M. (2000). *What Do We Know? Best Advice on Stress Risk Management in the Workplace*.

Centre for Families, Work and Well-Being

The Centre for Families, Work and Well-Being was founded in 1998 at the University of Guelph in the College of Social and Applied Human Sciences. The Centre is an innovative, interdisciplinary research and educational facility. They provide a number of resources, background documents, and statistics related to work and home issues. www.worklifecanada.ca.

Recommended Reading:

- Work Life Practices and Flexibility in Small Business - A Canadian Report.

Other Government sources

- Statistics Canada – statistics on work stress and health. www.statcan.ca
- Treasury Board of Canada – a number of tools and references to help management support workplace well-being. www.tbs-sct.gc.ca/survey-sondage
- Canadian Management Development (CMDP) – is mandated to help managers in the Public Service develop a successful co-operative relationship with staff members at all levels, through leadership, motivation, effective internal communication and the encouragement of innovation, high quality service to the public and skills development. www.tbs-sct.gc.ca
- Human Resources and Skills Development Canada – Work-Life Balance in Canadian Workplaces. <http://www.hrsdc.gc.ca>. This website has been created to help organizations design and implement supportive programs and policies facilitating work-life balance. The first section allows employers, unions, managers and human resource practitioners to access the latest information and examples of best practices that enhance work-life balance for their employees. The second section highlights the issues of an aging workforce.

Key websites for information on workplace organizational health

- Canada's Healthy Workplace Week www.healthyworkplaceweek.ca
- Canadian Centre for Occupational Health & Safety www.ccohs.ca
- Canadian Health Network www.canadian-health-network.ca
- Canadian Mental Health Association – Mental Health Works www.mentalhealthworks.ca
- Canadian Workplace Research Network www.cwrn-rcrmt.org
- Centre for Addiction & Mental Health www.camh.net
- Centre for Families, Work & Wellbeing www.worklifecanada.ca/
- Global Business and Economic Roundtable on Addiction and Mental Health www.mentalhealthroundtable.ca
- Health Canada, Workplace Health Strategies Bureau www.hc-sc.gc.ca/whsb
- Human Resources and Skills Development Canada – Work-Life Balance in Canadian Workplaces <http://www.hrsdc.gc.ca>.
- National Quality Institute www.nqi.ca
- Resource Well www.nqi.ca/chww/well
- The Health Communication Unit (THCU) Comprehensive Workplace Health Project www.thcu.ca/workplace

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APPENDICES

Appendix A: CWHP Planning Framework

Appendix B: The Stress/Satisfaction Questionnaire

Appendix C: Managing for Health and Productivity Questionnaire

Appendix D: Some Definitions

Appendix A: CWHP Planning Framework

Comprehensive Workplace Health Promotion Planning Framework

Workplace Program Management



Internal Project Management	Element 1 Obtain Management Support	Element 2 Establish Health Workplace Committee	Element 3 Conduct Situational Assessment	Element 4 Develop Healthy Workplace Plan	Element 5 Develop Program & Evaluation Plan	Element 6 Obtain Management Support	Element 7 Implement Plan	Element 8 Generate Evaluation Report
Components <ul style="list-style-type: none"> • Participation • Time • Money / Resources • Data-gathering • Decision-making 	Components <ul style="list-style-type: none"> • Business Case 	Components <ul style="list-style-type: none"> • Strategic Recruitment • Terms of Reference • Leadership 	Components <ul style="list-style-type: none"> • Environmental Scan • Needs & Risk Assessment • Organizational Change Survey 	Components <ul style="list-style-type: none"> • Vision • Mission • Values • Goals • Strategies • Key Audiences • Sustainability 	Components <ul style="list-style-type: none"> • Objectives • Programs/ Activities • awareness • education & skill building • supportive environments • policies • Indicators • Evaluation • Methodology • Resources • Timeline • Responsibilities 	Components <ul style="list-style-type: none"> • Plans • Presentation • Evidence 	Components <ul style="list-style-type: none"> • Communication & Marketing • Capacity Building • Events • Interpersonal Activities • Monitoring • Conduct Evaluation • process • outcome • impact • economic 	Components <ul style="list-style-type: none"> • Key Result Areas • Indicators • Results • Implications • Recommendations



Implementation Evaluation

Appendix B: The Stress/Satisfaction Questionnaire⁵⁰

Please circle the numbers that best describe how you feel about the following statements.

Then refer to the scoring instructions below.

Scoring Instructions (scores to be recorded in far right column above):

	Agree Strongly	Agree	Not Sure	Disagree	Disagree Strongly	Self Score
1. I am satisfied with the amount of involvement I have in decisions that affect my work. [CONTROL]	1	2	3	4	5	
2. I feel I am rewarded (in terms of praise and recognition) for the level of effort I put out for my job. [REWARD]	1	2	3	4	5	
3. In the last (6) months, too much time pressure at work has caused me worry, "nerves" or stress. [DEMAND]	1	2	3	4	5	
4. In the last (6) months I have experienced worry, "nerves" or stress from mental fatigue at work. [EFFORT]	1	2	3	4	5	
Total Score						

Q1 Responses 1/2 = 1

Responses 3/4/5 = 0

Q2 Responses 1/2 = 1

Responses 3/4/5 = 0

Q3 Responses 1/2 = 1

Responses 3/4/5 = 0

Q4 Responses 1/2 = 1

Responses 3/4/5 = 0

Stress Satisfaction Score (SSS):

(Q1 + Q2) minus (Q3 + Q4)

Range: +2 to -2

+ve score = More satisfaction than stress;

-ve score = More stress than satisfaction

⁵⁰ For a full description of the Stress/Satisfaction Survey, see Shain, M. Suurvali, H. (2000). *Investing in comprehensive workplace health promotion: A review for the pursuit of organizational excellence*. Health Canada www.nqi.ca/english/downloads/Shain

Appendix C: Managing for Health and Productivity Questionnaire⁵¹

In your role as manager, how often do the following apply:	Usually	Sometimes	Never	Score boxes		
				"A"	"B"	"C"
1. I am concerned about whether my employees have enough time to get their work done within regular working hours.	2	1	0			
2. I act as a workload coach to my employees by assisting them to prioritize their work.	2	1	0			
3. My employees would agree that I try to ensure they are able to accomplish their work within regular working hours.	2	1	0			
4. I consider it important to involve my employees in decisions and changes which affect their work.	2	1	0			
5. I consult with my employees on decisions and changes which affect their work.	2	1	0			
6. My employees would agree that I consult with them on decisions and changes which affect their work.	2	1	0			
7. I consider it important that the amount of mental and emotional effort required by my employees to do their work is reasonable.	2	1	0			
8. I take steps to reduce the amount of mental and emotional effort required by my employees to do their work when it is excessive.	2	1	0			
9. My employees would agree that I help to manage the amount of mental and emotional effort required to do their work.	2	1	0			
10. I know what makes each of my employees feel rewarded and appreciated for their efforts.	2	1	0			
11. I appreciate and reward my employees for their efforts.	2	1	0			
12. My employees would agree that I appreciate and reward them for their efforts.	2	1	0			
Subscore "A" Total (Range 0 to 8)	→					
Subscore "B" Total (Range 0 to 8)	→					
Subscore "C" Total (Range 0 to 8)	→					
Grand Total Score ("A" + "B" + "C")	→					

Interpreting Scores (next page)

⁵¹. Material presented is from the work of Susan Amos, National Manager of Workplace Wellbeing Human Resources Development Canada in collaboration with Dr. Martin Shain.

Interpreting Scores

- **Subscore "A" (ATTITUDE)** assesses the degree to which you consider the impact of your decisions on key aspects of employee job satisfaction and stress.
 - **Higher scores** – those ranging from 4 to 8 – show awareness of and concern about how managerial decisions and actions affect employee job satisfaction and stress.
 - **Lower scores** – those below 4 – show limited awareness of and concern about the impact of managerial decisions and actions on employee job satisfaction and stress.
- **Subscore "B" (BEHAVIOUR)** assesses how much importance you attach to this impact in terms of what you are prepared to DO about it.
 - **Higher scores** – those ranging from 4 to 8 – show effort on the part of managers to act and make decisions in ways intended to reduce unnecessary job stress and to promote job satisfaction among employees.
 - **Lower scores** – those below 4 – show limited effort on the part of managers to act and make decisions in ways intended to minimize unnecessary job stress and to promote job satisfaction among employees.
- **Subscore "C" (PERCEPTION)** assesses the extent to which you get feedback from your employees about these actions.
 - **Higher scores** – those ranging from 4 to 8 – show that managers are making sure their intentions to minimize unnecessary work stress and to promote work satisfaction are coming across as such to the employees, and based on the feedback, are making modifications in their actions, if required.
 - **Lower scores** – those below 4 – show that managers are not verifying that their intentions are coming across correctly to employees. These managers may actually be trying to act in what they think are stress-reducing, satisfaction-promoting ways, but for various reasons, employees are not perceiving the effort.
- **The Grand Total Score** is an indicator of the probable impact that your leadership style will have on the mental health and productivity of the people who report to you.
 - **High scores** – those ranging from 12 to 24 - indicate a leadership style that contributes to, or supports employee mental health and productivity.
 - **Low scores** – those below 12 - indicate a leadership style that contributes to, or perpetuates employee mental health problems and performance deficits.
- Higher scores are clearly more desirable. But low scores can point to areas in which improvements could often be made once the difficulty is understood.
- The underlying essence of the scores is "fairness": high scores point to a leadership style that employees tend to see as fair; low scores point to the opposite.
- "Fairness" and its close cousin, "Trust," are known to be key drivers of employee mental health, satisfaction, loyalty, commitment, creativity and productivity. So there is ample incentive to learn and apply leadership styles that build on fairness and trust.

Appendix D: Some Definitions

Stress – the result of any emotional, physical, social, economic, or other factors that require a response or change. It is generally believed that some stress is okay (sometimes referred to as "challenge" or "positive stress") but when stress occurs in amounts that you cannot handle, or is prolonged, it has a negative effect both emotionally and physically. Chronic stress may lead to symptoms of anxiety, depression, heart palpitations, muscle aches or pain. The most common result is illness, due to the decreased effectiveness of the immune system. This is caused by the hormones of stress that inhibit the activity of the white blood cells of our immune system.⁵²

Work stress – the relationship between stressors on the job and how the worker physically and emotionally reacts. Stress at work can also involve job security, un-stimulating work, salary problems and other issues.

Psychosocial hazards – also known as workplace stressors – issues related to the way work is organized that can threaten the mental and physical health and safety of employees.⁵³ Examples include:

- Work overload and time pressure;
- Lack of influence over day-to-day work;
- Lack of training or preparation to do the job;
- Too little or too much responsibility;
- Ambiguity in job responsibility;
- Lack of status rewards (appreciation);
- Discrimination or harassment;
- Poor communication;
- Neglect of legal and safety obligations; and
- Lack of respect or support for work-life balance.

Organizational culture – assumptions, values, beliefs and attitudes that employees learn in the organization about how to work together and manage organizational life.⁵⁴ These beliefs and values are often unconscious. The behaviour modeled by the leader and management shapes the culture and practices.⁵⁵

Psychosocial work environment – a set of organizational and job factors related to the interaction between people, their work and the organization.⁵⁶

⁵² http://www.melpomene.org/old_site_archive/intheknow/stress.html

⁵³ Burton, J. (2002). 1.

⁵⁴ National Quality Institute (NQI). (2000). Framework for the Development of a Healthy Workplace. 76.

⁵⁵ Hagberg, R. Heifetz, J. (2000). Corporate Culture/Organizational Culture: Understanding and Assessment. Telling the CEO his/her baby is ugly. Hagberg Consulting Group (HCG).

⁵⁶ Bachmann, K. (October 2002). *Health Promotion Programs at Work A Frivolous Cost or a Sound Investment?* Conference Board of Canada: Ottawa. 10.

YOUR FEEDBACK

Please take some time after using some or all of this workshop presentation and facilitator's guide and let us know how useful it has been. Any and all suggestions are welcome.

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About yourself

Name: _____

Organization: _____

Address and Contact information:

Your role in Comprehensive Workplace Health Promotion:

- Public Health Professional
- Health Promoter with a government or volunteer agency, non-governmental organizations or community health centres
- Representative of an organization of professionals that provide health and/or safety services
- Employee of this organization with direct responsibilities for workplace health
e.g. occupational health nurse, human resource professional
- Union or employee group representative within this organization
- Member of this organization's workplace health committee
- Owner / senior manager within this organization
- Other: _____

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- | | | | | |
|-------------------|---|-----------------|---|-------------|
| 1 | 2 | 3 | 4 | 5 |
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c. "What Can Be Done?"

1	2	3	4	5
Not useful at all		Somewhat useful		Very useful

d. "Resources and Supports"

1	2	3	4	5
Not useful at all		Somewhat useful		Very useful

e. "Appendices"

1	2	3	4	5
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Thank you

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