Integrated Health Management at the Workplace from a European Perspective

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Integrated Health Management at the Workplace
IHM (or TWSH) means excellence in OHS and HP

- Health Promotion (HP)
- Health Protection (OHS)

- Improvements
- Effective programs
- OHS Management System and KVP
- Random activities
- Specific & effective interventions

- Health management

Time
Major Reasons for Improving Health Management

1. Aging workforce
   a) High med leave
   b) Shortage of skilled workers

2. Non-monetary reasons
   a) Attractiveness of employer
   b) Demand for work/life balance
   c) Demand for values beyond salary
Major drivers for IHM in Europe
WHO Europe

European Agency for Safety and Health at Work

https://healthy-workplaces.eu/en
European Network for Workplace Health Promotion (ENWHP)

- European **WHP Toolbox**
- Questionnaires for **Self-Assessment**
- The **Luxembourg Declaration** adopted on 28 November 1997

Political Support is needed:

**Example: Germany’s Prevention Act of 2015**

*Prevention Act 2015 (Präventionsgesetz, PrävG):*

*Among many regulations ...*

- Supports prevention of diseases and disability: early detection of disease, disease management and health promotion in the national health care system and communities
- Subsidizes special HP programs in day-care centers, schools, elder care and workplaces (life cycle)
- Doctors can “prescribe” health promotion activities
- Health promotion activities can be subsidized by health insurances
- **Worksite health promotion activities are supported by health insurance companies up to 500 EUR per employee and year.**

Models for the Organisation of Health Management
Isolated or Integrated?

“Managing Health” means integration of “health” into business processes

Most companies just run isolated HP programs. Nothing wrong with this! Regarding the Integrated Health Management, corporations differ widely in the ways they manage “Health of Employees” and how they integrate it into their everyday business:

- As an opportunity/risk in the enterprise risk management
- As part of OHS Management System
- As an item of quality control
- As a HR process
## Models for the Integrated Health Management

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<th>Organizational Form</th>
<th>Company Examples</th>
<th>Lead Department</th>
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<td>Set-up HM as a separate but collaborating management system</td>
<td>Siemens GER Novo Nordisk DEN</td>
<td>EHS and HR HR</td>
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<tr>
<td>Run HM out of the corporate Medical Department</td>
<td>BP UK Unilever NED</td>
<td>Medical Service Medical Service</td>
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<tr>
<td>Integrate HM into existing OSH management system</td>
<td>Deutsche Post/ DHL GER</td>
<td>EHS</td>
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<td>Use the Lean Production System for global Ergonomics Prg</td>
<td>Siemens GER</td>
<td>Manufacturing Excellence &amp; EHS</td>
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<tr>
<td>Use quality management system</td>
<td>Hospital SWE</td>
<td>QM (Lean, Kaizen)</td>
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Barriers and Challenges
EU-OSHA 2012 Survey: 
Typical Barriers and Challenges

• A negative perception of occupational health requirements and benefits.
• A lack of relevant skills and qualifications.
• Inadequate cooperation between key stakeholders in the process.
• The misperception by employers and organisations that WHP has limited or no benefits for the company, is too time-consuming, and is not their responsibility.

“It is vital to conduct a thorough analysis of the needs and properties of each individual occupational sector (and each organisation within it), and to tailor health promotion policies, practices and initiatives to the identified needs and priorities. “

And misconceptions ...

“Surveys have shown that despite recent efforts to redirect attention towards changing environmental and organizational factors aimed at improving and protecting employees’ health, the majority of WHP activities remain focused at the level of the individual. This has been found to be especially true for small and medium-sized enterprises.”

Guiding Principles

Data Protection and Inclusion
Strong Protection of Privacy

Risks:

- **Disclosure** of personal information e.g. medical conditions, psychiatric problems, deficiencies
- Consequent **discrimination** at work, or stigma
- Not getting or **loss of work contract**
- Loss of health insurance coverage

Principles of Confidentiality

1. Ask only what is **absolutely needed**!
2. Keep details **confidential** and **exclusively with the medical professional** and other authorized departments
   
   => No medical files are kept at HR!
3. Only conclusions with regard to the work or workplace can reach the employer
Keeping People at Work: Inclusion of Chronically Ill Persons

- **Protection of chronic ill employees** e.g. through
  - Anti-Discrimination Laws for equal treatment in hiring and employment
  - Penalties for not-employing disabled persons

- **Continued health insurance coverage** for continuous support in treatment and management of chronic diseases

- **Mandatory Return-to-Work processes** to support returning and chronically ill employees
Summary
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1. Worksite Health Promotion is practiced in Europe with huge differences between companies and, specifically, between large companies and SMEs. There is no ONE model for managing the risks/opportunities of the “health of employees”, they range from isolated HP to Integrated Health Management.

2. Worksite HP is strongly encouraged in Europe and facilitated by European-wide networks.

3. It is often financially supported by health insurances or gov funds.

4. Legislation and politics in some EU countries have clarified the “rules of collaboration” between different players.

5. Considering the non-monetary effects of improving health is an important argument in Europe and, maybe, outweighs potentially small monetary gains.
Thank you!

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Example:
Integrating health promotion with quality improvement in a Swedish hospital

Using the existing quality management system and Kaizen notes to promote improvements in health and safety and wellbeing

Fig. 2: The number of kaizen notes related to employee health and safety, distributed by the main categories.