

Proposed guidelines for a workplace health promotion policy and implementation framework

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ABSTRACT

Since workplace health promotion programmes are often not guided by a specific policy or health promotion framework, a study was conducted to develop guidelines for the implementation of health promotion in South African workplaces. A Delphi technique involving twelve health promotion experts was used to reach consensus about the proposed policy framework and guidelines. These guidelines are directed towards implementing a comprehensive workplace health promotion programme that aims to accommodate all employee health and safety needs. They can be used to develop relevant health promotion or wellness policies that are easy to implement, monitor and evaluate.

Key words: Workplace health promotion, policy, framework, guidelines, wellness programme

INTRODUCTION

The Occupational Health and Safety Act aims to ensure healthy and safe working conditions of workers.¹ Although some organisations have worked hard to safeguard their employees' health and protect them from work-related hazards, their programmes have not been guided by any specific policy or workplace health promotion (WHP) framework. Having WHP programmes is not obligatory,² but there is increased recognition that occupational health (OH) and safety legislation emphasises the need for a workplace to be not only safe, but also healthy.³ While some workplaces have started implementing health promoting programmes such as employee assistance programmes and HIV/AIDS management programmes, there is still a gap with regards to programmes that focus mainly on the health of employees.⁴ A three phased study was conducted with the purpose of developing guidelines and policy framework for the implementation of health promotion in the South African workplaces. The findings of the first phase of the study showed that these WHP are in the form of wellness programmes and other health promotion activities.⁴ The problem was that some of these programmes were not guided by any specific policy or health promotion framework. Having a clearly identified framework guiding the wellness programme would make it easier to evaluate the programme outcomes and outputs, and hence to make necessary adjustments. The second phase of the study was conducted, as described hereafter, with the objective of developing guidelines for the implementation of health promotion in the South African workplaces. The resulting guidelines are presented in this article.

RESEARCH METHODOLOGY

A Delphi technique⁵ was used to determine the extent to which experts agreed about the proposed policy framework and guidelines which were developed in the first phase of the study. The process continued until consensus was reached.⁶ To select the panel, the researcher searched databases, sectors,



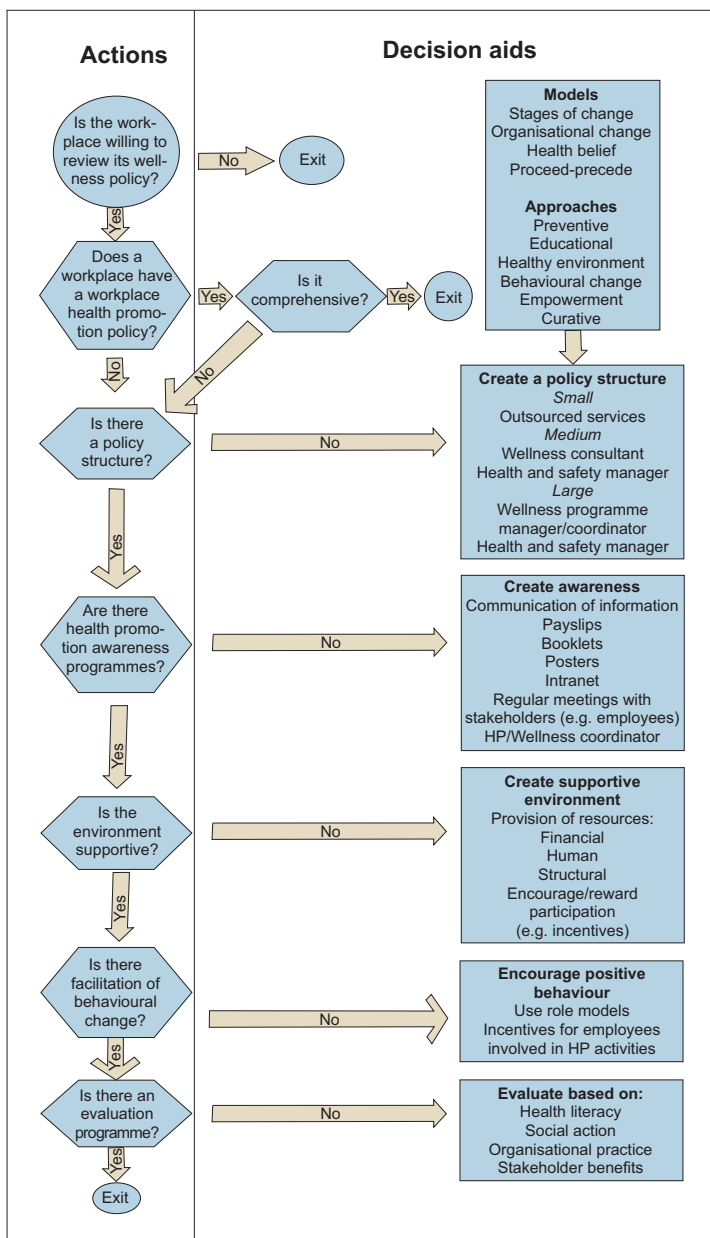


Figure 1. Workplace health promotion policy and implementation framework

academic institutions, and industries, for experts in the field of health promotion/wellness, OH and policy development. The criteria for selection were that they had to be involved within the identified fields either in conducting research, teaching or actively employed in that field at the time of the study. Twelve of the 15 identified agreed to participate. The panel of experts was asked to complete a series of questionnaires focusing on their opinions and judgements concerning the guidelines and implementation of health promotion in the workplace.⁵⁻⁶

The data collection instrument was an interview guide that was formulated based on a reactive Delphi approach, whereby respondents were asked to respond to previously prepared information based on the results of the first phase of the study, the research questions and the conceptual framework. Permission was obtained from the University of

KwaZulu-Natal research ethics committee to conduct the study (Ref: E211/04). Informed consent was obtained from participants, participation was voluntary and information was kept confidential.

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In the data analysis, the researcher searched for emerging categories and patterns. Standard correlation analysis approach was used during analysis. To enhance data credibility participants were from different settings and different countries. Feedback was provided to study participants after the first and second round of Delphi regarding the emerging data.

THE PROPOSED GUIDELINES

There was a very strong concurrence between the findings from the experts and literature in terms of what needs to be included in the health promotion policy guidelines, namely organisational philosophy, stakeholder involvement, and programmes to be included in the policy. Experts in the field of OH and health promotion were all in agreement that a WHP guideline was an important document that workplaces irrespective of their size needed to have.

An algorithm of these WHP policy and implementation framework guidelines is presented in Figure 1 and described in the following sections of the article. The guidelines are directed towards implementing a more comprehensive employee wellness programme to accommodate all employee health and safety needs, including HIV/ AIDS programmes. Furthermore, since the implementation framework guidelines are research based, the WHP programme should be relevant to employee needs and easy to plan, implement and evaluate. The guidelines can be made flexible to meet the needs of an organisation and to plan, based on the organisational budget.

KEY POLICY ELEMENTS AND UNDERLYING ASSUMPTIONS

An organisational health promotion policy needs to be developed. It should include the following elements in order that the WHP is successfully implemented.

The purpose of the health promotion policy

The policy should clearly state:

- why it has been developed and its purpose;
- the organisational commitment to health and safety of its employees; and
- the organisation’s commitment to OSH Act.

Table 1. Stakeholder involvement in policy development

Phase of policy development	Stakeholders involved
Planning for policy development	OHP, labour unions, employees & management
Programme selection	OHP, employees
Implementation	OHP, employees
Monitoring and evaluation	OHP, employees, labour unions & management

The underlying assumption is that if employees are aware that the policy exists because the organisation is committed to their health and safety, they are more likely to utilise the programmes offered.⁷

Organisational philosophy

The organisational philosophy and vision needs to appear at the beginning of the document, and should reflect the organisation’s standing or vision on the health of employees, and also how important the employees are to the organisation. Including the vision statement will demonstrate that the organisation has a long-term plan for improving employees’ health and safety.⁷⁻⁸

Stakeholder involvement in policy development

Stakeholder involvement needs to form the basis of the implementation process. This can be achieved through effective communication amongst those involved. Employee involvement in the planning process will enhance the possibility of greater positive health behaviour change.⁹ It is recommended that the policy illustrates if and how all the stakeholders have been involved in policy development. To be included in this section is the process that was followed in policy development, including employee needs assessment and how stakeholders were involved in every step of this process. Experts in the field of health promotion and OH suggest that specific stakeholders should be involved in the four phases of policy development, as shown in Table 1.¹⁰ Involving stakeholders from the beginning, i.e. needs assessment, up until evaluation, will increase the likelihood of successful policy implementation and will ensure that employees are aware of policy existence.

CHOOSING AN EMPLOYEE HEALTH PROMOTION/WELLNESS PROGRAMME

Current literature indicates WHP programmes will produce physical and mental health improvement among employees if the organisation has a comprehensive wellness programme with relevant health promotion activities to meet its needs, and it is based on resource availability.¹¹ The programme can include various components such as the examples presented in Table 2. Organisations need not necessarily provide all these health promotion programmes or activities, but intensive engagement of all stakeholders will assist in deciding which of these programmes are necessary in a particular organisation. The assumption is that deciding on which programmes to have will depend on factors such as

employee needs, organisational needs, employee demographics, availability of resources and the country’s health priorities.¹²

POLICY AND FRAMEWORK IMPLEMENTATION PLAN

In implementing these policy guidelines, organisations should aim for the best WHP programmes. Health promotion should be viewed as geared towards changing employees’ unhealthy lifestyle through behaviour change. According to O’Donnell,¹³ “lifestyle change can be facilitated through a combination of efforts to enhance awareness, change behaviour, and create environments that support good health practices” (p 49). These three factors should therefore be the guiding principles in implementing these guidelines to create health promoting workplaces. Also important in WHP implementation is ensuring that the programmes are constantly monitored and evaluated.

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Table 2. Choosing relevant workplace wellness programmes

Programme	Target group	Required resources	Objectives	Benefits
EAP	Employees with personal problems	Professional counselling services EAP counsellor	To reduce stigma associated with mental illnesses Assist employees to get appropriate professional help	Improved job performance Reduced absenteeism Helps employees resolve personal problems Increased safety awareness
Healthy diet/nutrition	Overweight, middle aged employees with chronic illnesses such as diabetes type 2 and hypertension Sedentary employees	On site services such as: • Healthy food options • Professional advice • Awareness and information	Prevention of diseases such as cardiovascular diseases, cancers, obesity, osteoporosis, back pain	Reduction in health care costs and absenteeism Increased productivity
HIV/AIDS	All employees	VCT services ART services Support system	Prevention of HIV infection Assisting infected employees to stay healthy Offer assistance for affected employees	Improved quality of life Increased awareness Increased productivity Decrease absenteeism
Physical activity	Employees of all ages Special focus on middle aged employees Sedentary employees	Gym facilities on site/offsite facilities supported by management Swimming pool facilities Walking space	Prevention of diseases e.g. hypertension, heart disease, Diabetes type 2 Improving quality of life Reduce risk of developing depression	Reduction in medical aid claims and absenteeism Increased employee morale
Smoking/substance abuse cessation	Smokers and substance abusers	Counselling therapy Support system, rehabilitation programme	Prevention of diseases such as lung cancer Prevention of secondary smoking to other employees	Reduction in absenteeism rate Increased safety standards Increased quality of life
Stress management	Employees involved in stressful jobs e.g. noisy environment, monotonous jobs	Organisational change Support system – skills training Counselling services	Modify/eliminate stressors Increase stress management skills	Reduction in medical costs Reduction in stress related accidents
Weight control	Obese/overweight employees	Gym facilities Support system	Prevention of diseases e.g. heart diseases, stroke, colon cancers	Improved quality of life Decreased medical costs Improved self esteem
Advanced driving lessons	Young employees	Driving instructor	To reduce motor vehicle accidents Improved safety in the workplace	Reduced medical costs and absenteeism
Retirement preparation	Employees within 5 years of retirement	A consultant	To reduce stress related to retirement To improve succession planning Improved mental and physical health after retirement	Less medical expenses after retirement Improved quality of life

Modified from O'Donnell¹³

Putting the structure in place

Once the organisation has decided on the specific programmes that will be put in place, it is imperative to decide on the structure each programme will take.¹² This means that specific activities to be included in each programme need to be identified. A selective programme will target specific health problem and specific activities addressing such health problems will be put in place. The advantage with this type of programme structure is that it is easy to monitor and evaluate. For example, to evaluate employee involvement in a physical activity programme, management needs to check the number of people who attend the gym or involved in other physical activities. The disadvantage is that it is costly as each problem is addressed individually.¹⁴ A comprehensive programme that will target a number of health problems using few health promotion activities is therefore recommended.

Certain programmes can be combined to address different health issues as indicated in Table 3, which provides guidance on how to structure the WHP programme. Deciding on the programme and the structure it will take can also depend on the organisational size. The following example relating to the three factors identified by O'Donnell¹³ can be used as a guideline.

Enhancing awareness

Organisations need to clearly describe the whole process of policy guidelines implementation to the stakeholders, with deadlines clearly stated. There have to be clear communication channels which will be decided upon by the stakeholders. The first step will therefore be creation of employee awareness regarding the proposed programme. Awareness can be in the form of posters, pay slip information,

Table 3. Structuring a WHP programme

Organisational size	Structure	Possible programmes
Small	Outsourced services Workplace wellness consultant to design the programme HIV/AIDS	HIV/AIDS Other programmes as indicated by worker profile
Medium	Some services outsourced Use of wellness consultant Programme manager dealing with safety and wellness	EAP – addressing stress management, substance abuse and smoking control Disease prevention – Weight control, physical activity, nutrition Safety programmes
Large	Comprehensive programme with Wellness programme manager/coordinator working with safety manager	All programmes, individually, but some may be combined as in medium sized organisations

intranet, information booklets and regular meetings.¹⁵ The organisation can select any method that is feasible and also accessible to the employees. Through this/these communication method/s, employees will be made aware of the need to elect/employ one individual who will coordinate the process of health promotion programmes implementation in the workplace. This individual can be named “the wellness programme coordinator/manager” (WPC).⁸ The WPC will be responsible for coordinating all the tasks involved in the development of the wellness policy in the workplace, and implementation of the wellness programmes. Having one person coordinating the process will ensure smooth running of programme implementation and the stakeholders will know who to liaise with regarding the programme.


Once the WPC has been identified the first step will be to hold meetings with all stakeholders, to identify people who will be engaged in discussions on the health promotion programmes, representing all stakeholders. In these discussions there must be negotiations on planning the programme, what needs to be included, and deadlines will be set. These representatives can draw up a time line or a Gantt chart for illustrating a series of activities that will occur during the implementation of this programme, when each activity will take place, and who will be responsible. This time line will include different phases of the programme plan, such as: (a) the programme planning phase which can involve negotiation and drawing up a budget; (b) the implementation phase which will involve policy formulation, stakeholder involvement, prioritising relevant health promotion programmes, conducting relevant surveys for programme monitoring; and (c) the evaluation of the programme. This timeline needs to be communicated with other stakeholders, so that they can have an idea on what will be happening and when. In that way they will feel that they are also involved in the process.

The programme objectives have to be set by all stakeholders involved in the project as they need to clearly understand their respective roles in achieving these objectives. The objectives have to be simple, measurable, achievable, reasonable and time bound (SMART) in order to facilitate monitoring and evaluation. Having a

well organised implementation process such as this one will assist in programme evaluation.¹⁶ The evaluator will be able to identify one phase of the programme for evaluation

“Stakeholder involvement needs to form the basis of the implementation process.”

and hence identify areas of concern. Communication amongst the working group and other stakeholders should therefore be maintained throughout all stages of this process.



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Creating supportive environments

Workplaces need to aim at being health promoting workplaces (comprehensive approach)¹¹ rather than providing health promotion in the workplaces (selective approach). The selective approach only focuses on certain areas or individuals within the workplace and tends to focus on a single illness or risk factor, whereas the comprehensive approach of health promoting workplaces means that health promotion programmes have to focus on both individual risk factors and the broader organisational and environmental issues, starting from policies to management attitudes.¹⁷ The suggestion is therefore for workplaces to have comprehensive wellness

“ . . . programme objectives have to be set by all stakeholders . . . as they need to clearly understand their . . . roles . . . ”

policies that incorporate health and safety issues, as these will both ensure the wellbeing of all employees.¹⁸ Supportive environments will comprise the following components:

- provision of necessary resources (financial, human and structural) for health promotion; and
- encouraging and rewarding participation in health promotion activities.

Encouraging behavioural change

For employees to be healthy, they need to change unhealthy behaviours and participate in health promotion programmes.¹² Organisations can provide incentives for employees to encourage their involvement in health programmes.¹⁹

A number of models and approaches can be used as a foundation for WHP programmes²⁰ in order to facilitate behavioural change. These models and approaches can assist in guiding implementation of WHP, and hence provide a framework for implementation and evaluation. Policy and programme development can be based on either of these models and approaches, which can be decided upon by stakeholders, based on programme objectives. The matrix in Table 4 shows models recommended for certain health promotion programmes:

The following six approaches to health promotion programmes, as defined for the study, have been identified in the literature. The findings of this study showed that the educational approach was commonly used in all organisations.

Preventive approach – the focus is on the disease prevention (primary prevention), or slowing the existing disease (secondary prevention), e.g. wearing ear muffs in noisy areas.

Educational approach – educating the employees about various diseases, that is, providing information and leave the employees to make their choices, e.g. education on HIV/AIDS infection.

Healthy environment approach – creating healthy environments for the employees, e.g. providing healthy snacks at the work based canteen.

Behavioural change approach – persuading employees to change their lifestyles or their unhealthy behaviour and adopting healthy lifestyles, e.g. providing physical activity programme.

Empowerment approach – employee centred, and the health promoter facilitates the implementation of programmes thereby empowering employees to identify their health concerns, e.g. blood pressure management and support groups.

Curative approach – Curing occupational diseases as they occur, e.g. DOTS TB programme.

In this study, experts in the fields of health promotion and OH suggested educational, preventive, behavioural change, empowering approaches as the most appropriate ones as a starting point.

Monitoring and evaluation

Programme monitoring and evaluation refers to assessing with the aim of improving implementation or parts of the programme. The overall purpose of programme monitoring and evaluation is to measure programme effectiveness, identify problem areas, gather lessons learned and improve overall



Table 4. Recommended models for certain programmes

Programme(s)	Recommended model(s)
Smoking cessation	Stages of change
Control of substance use	
Physical activity	Stages of change
Stress management	Organisational change
Healthy diet/nutrition	Stages of change
	Social cognitive

performance.¹⁶ In implementing policy guidelines, it is imperative to monitor if the programme is implemented according to plan and if the programme is achieving the set objectives.

Evaluation can be targeted towards one of the following: inputs such as the availability of resources; process such as service utilisation by target population, awareness activities; and outcomes such as change in employee attitudes, motivation, participation in health promotion activities and change in organisational practice. Evaluating short-term programme outcomes will therefore include evaluation of the following aspects of the programme:

- *health literacy* – awareness, beliefs, knowledge, attitudes, motivation and behavioural intention;
- *social action* – employee participation, physical activity and employee opinion;
- *organisational practice* – policy statement, resource allocation and organisational practice; and
- *stakeholder benefits* – stakeholders (employees, trade unions, OH practitioners and management) benefits from the programme.

Authors in recent health promotion literature have argued that integrating and evaluating the effectiveness of ‘settings’ based health promotion programmes in workplaces, such as in this study, is complex, due to the diversity of conceptual understandings and real-life practice in many aspects of work settings.²¹⁻²² Policy and systems theory is increasingly being used to improve such programmes.

CONCLUSION AND RECOMMENDATIONS

Implementing a comprehensive WHP policy should benefit both the organisation and its employees. The very strong concurrence between the findings from the experts and literature in terms of what needs to be included in the health promotion policy guidelines, namely organisational philosophy, stakeholder involvement and programmes to be included in the policy, was an exciting finding which at the same time raised concern. Although the OH practitioners deemed the WHP as vital in the provision of OH services, in practice, based on the findings in phase one of the study, this provision was not taking place. Employers need to consider health promotion approaches that will be suitable for their organisations as agreed upon by all stakeholders. For organisations that already have health promotion programmes, conducting process evaluation and outcome evaluation can help to determine

programme utilisation by employees hence cost effectiveness of their programmes. Organisations need not necessarily provide all health promotion programmes or activities at the same time, but intensive engagement of all stakeholders will assist in deciding which of these programmes are necessary in a particular organisation. Further research on the implementation of the guidelines is recommended.

“Workplaces need to aim at being health promoting workplaces (comprehensive approach)¹¹ rather than providing health promotion in the workplaces (selective approach).”

ACKNOWLEDGEMENTS

Professor Leanna Uys, my research supervisor during the development of the guidelines.

The Ford Foundation International Fellowship Programme for funding this project.

The National Research Foundation (NRF) for funding the initial stages of this research.

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LESSONS LEARNED

1. A clear policy and guidelines framework for the development and implementation of workplace health promotion programmes is essential.
2. Such a framework will facilitate the evaluation of the programme.
3. Stakeholders must be involved in all phases of the programme.
4. The enhancement of health promotion awareness, behaviour change and the creation of supportive environments are key aspects of workplace health promotion programmes.

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