



LESSONS IN LEARNING

Can workplace learning create healthier employees?

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Workplace learning is usually associated with skills training designed to improve productivity. However, another form of workplace learning—found in workplace wellness programs—has achieved improvements in workers' performance.

This issue of Lessons in Learning examines whether workplace wellness programs can actually improve employees' health and well-being, while enhancing an organization's bottom line. It also identifies the characteristics of effective workplace wellness programs and how they can be implemented.

What do we know?

According to Statistics Canada's Labour Force Survey, worker absenteeism rates are on the rise.

In 2001, an estimated 700,000 full-time employees, or about 7.0% of the total, were absent from work for all or part of any given week because of personal reasons, such as illness or disability, or personal or family responsibilities (excluding maternity leave). Thus, absenteeism was up considerably from 6.3% in 2000, and 5.5% in 1997.

As a result of these absences, 3.4% of usual weekly work time was lost in 2001, up from the 3.2% in 2000, and 3.0% in 1997.

This translates into an average of 8.5 days for each full-time employee, with 7.0 of those days due to illness or disability, and 1.5 days due to personal and family responsibilities.

In total, an estimated 85.2 million workdays were lost because of personal reasons in 2001, up from 78.6 million in 2000 and 65.6 million in 1997.

Poor health is a disadvantage to employees and employers alike. Numerous organizations in Canada and around the world are developing employee wellness programs as a means to address this challenge.

In 2002, the Canadian Labour and Business Centre (now the lead organization for CCL's Work and Learning Knowledge Centre) documented and analyzed innovative workplace health and safety practices in 12 organizations across Canada, encompassing large and small firms in a variety of sectors (CLBC 2002b).

The goal of these case studies was to expand understanding of:

- the motivations behind creating workplace health and safety initiatives;
- the role of management and workers/unions in developing and maintaining these initiatives;
- the relationship between the initiative and the organization's business strategy; and
- the impact of the initiatives on employee health and workplace performance.

The case study process

The research focussed on 12 organizations, deliberately selected to reflect a range of sizes and sectoral activities, from hospitals to steelmakers.

The objective was to determine whether there were common features to workplace health initiatives even in vastly different types of workplaces.

The organizations selected:

- ranged in size from 30 to 7,300 employees;
- represented public and private sector organizations; and
- included unionized and non-unionized workplaces.

The goal was also to highlight innovative workplace health practices. In particular, the study sought out employers who had made workplace health an integral element of their business strategy, rather than considering it simply a useful 'addition.' Innovative organizations addressed workplace wellness on a full range of fronts, from ergonomics to the employees' sense of control over their work.

This approach was strongly influenced by the Canadian Healthy Workplace Criteria used by the National Quality Institute's Canadian Healthy Workplace Award.

Data for the studies was gathered through on-site interviews and a review of relevant documents provided by the employer. At each site, interviews were conducted with managers and union/worker representatives in order to provide a well-rounded picture of the initiatives and attitudes towards them.

The research sought to situate the wellness initiatives within the context of the workplace and assess their contribution to the organizations' culture and performance.

Overall, the studies focussed as much on the motivations behind the initiatives, the process of developing and maintaining them, and their impacts, as they did on their content.

What were some of the elements of workplace wellness programs?

The selected workplaces displayed a broad variety of health and wellness programs. These ranged from injury prevention programs to healthy cafeteria choices, access to fitness facilities, employee assistance programs, flexible

Twelve Workplace Wellness Case Studies

- Irving Paper Ltd. (New Brunswick)
- Rideau Construction Inc. (Nova Scotia)
- Dofasco Inc. (Ontario)
- American Express Canada (Ontario)
- Seven Oaks General Hospital (Manitoba)
- City of Regina Transit Department (Saskatchewan)
- Moose Jaw – Thunder Creek Health District (Saskatchewan)
- Pazmac Enterprises Ltd. (B.C.)
- Vancouver International Airport Authority (B.C.)
- Petro Canada Burrard Products Terminal (BPT) (B.C.)
- Vancouver Shipyards (B.C.)
- QLT Inc. (B.C.)

work schedules, alternate work arrangements and leaves of absence. Several organizations also targeted workplace stress by introducing initiatives aimed at developing a culture of mutual respect. These emphasized two-way communication and employee participation in decision-making.

In general, the initiatives studied can be grouped into three categories: those relating to the physical environment; those relating to physical health; and those relating to mental health, stress levels and other psycho-social concerns.

Examples of the types of interventions are listed in the table below.

Category of Initiative	Types of Interventions
Acting on the physical environment	<ul style="list-style-type: none">• Safety/cleanliness• Air quality• Ergonomics• Health and safety committees
Promoting the physical health of the employee	<ul style="list-style-type: none">• Fitness• Smoking cessation• Nutrition• Lifestyle information/encouragement
Addressing employees' mental health, stress levels and other psycho-social concerns	<ul style="list-style-type: none">• Work/family balance• Work organization• Stress reduction• Two-way communication

Why workplace wellness?

According to the Second Tri-Annual Buffet Taylor National Wellness Survey (2000), 17.5% of Canadian employers had comprehensive workplace health programs in place, while 64% were offering some wellness initiatives. Most of the comprehensive programs were offered by larger organizations (CLBC 2002a). Smaller firms were less able to offer a wide array of wellness programs.

The 2000 survey found the top four reasons why companies offered worksite wellness programs were the following:

- 27.3% considered healthy employees a valuable asset,
- 25.6% wanted to promote a healthy lifestyle,
- 14.3% wanted to reduce absenteeism,
- 10.1% wanted to contain the costs of benefit programs .

Many of the organizations under study introduced comprehensive wellness programs in response to a financial or labour crisis. In other cases, the management philosophy of the organization's leadership was the driving force. Owners and managers believed that healthy workplace initiatives would help create a positive work environment, foster employee loyalty, improve productivity and help attract skilled employees.

- For the Moose Jaw–Thunder Creek Health District, as well as the Vancouver International Airport Authority and the City of Regina Transit Department, the decision to implement a workplace wellness program stemmed from rising rates of absenteeism and injuries as well as growing concerns about workload, stress and declining morale. While not at a crisis point, these became serious enough to trigger a concerted focus on workplace health and safety practices.
- Dofasco Inc.'s workplace health program emerged out of a financial crisis in the early 1990s. The company adopted a new business strategy emphasizing employee engagement. Renewing its emphasis on traditional health and safety issues, the company decided to go a step further to ensure that its employees were "healthy, and at work" (CLBC 2002b).
- At QLT Inc., valuing workplace health and community involvement reflected the values of its founding CEO. This interest was also in keeping with the therapeutic and health-promoting nature of its products.
- American Express Canada Inc. explicitly sought to be recognized as a Top 25 in Canada employer and designed its wellness program to support this objective (CLBC 2002b).

A wellness check-up

In late 2005 and early 2006, a follow-up assessment was undertaken with two of the organizations studied in 2002—Seven Oaks General Hospital and Petro-Canada's Burrard Products Terminal—to determine the ongoing impact of their wellness programs.

Promoting health from the inside out: Workplace wellness at the Seven Oaks general Hospital

The Seven Oaks General Hospital (SOGH) in Winnipeg, Manitoba, is an advocate of health and wellness both in the workplace and the community. Established in 1981, the hospital offers services in primary care, acute intervention and long-term care. The facility has a staff of 1,500 employees and 300 volunteers (Lamontagne, F. 2002a).

SOGH's interest in creating a healthy workplace was closely linked with the hospital's longstanding commitment to integrating wellness with health care delivery and in promoting community health. In 1998, the hospital had launched the Wellness Institute—a state-of-the-art medical fitness facility dedicated to improving the health status of the community through health promotion, disease prevention and rehabilitation services.

Starting in 2001, SOGH piloted its wellness program in two work areas: medicine and material services. This allowed the hospital to test its program model in two different settings.

The pilots moved through four key steps.

Wellness Institute researchers conducted health-risk appraisals with individual workers to create an overall profile of employee health risks. They also collected information on staff preferences for health promotion and activities. Two wellness teams, of 10 to 15 members each, were created to plan and implement the program in their respective division. They included managers and employees.

Each wellness team created a program vision with strategic goals and operational objectives, a budget, and plans for communication, marketing and evaluation.

The wellness teams then developed interventions that reflected the safety, health and wellness needs and interests of employees in their divisions. These focussed primarily on health services, workplace culture and healthy living.

Finally, a data system was put in place to track employee participation in the health risk appraisals and activities. Employee involvement in implementation and decision-making was also considered a significant outcome of the pilot programs.

By 2005, SOGH had expanded its workplace wellness program to cover all of its divisions and employees (Mooney, S. 2005a). Program results were now measurable and included:

- Reduced employee turnover—now the lowest of any health care facility in the city;
- Reduced Workers Compensation Board rates—dropped from 3.8% per eligible employee in 2002 to 1.97% in 2004, the lowest for this kind of facility in the province (Mooney, S. 2005b); and
- Increased participation in health risk assessments—two wellness teams have reached 50% coverage in their divisions.

In 2005 and 2006, Maclean's magazine recognized SOGH as a Top 100 employer. SOGH also received the Manitoba Gold Award for Human Resources Leadership, and is currently participating in a workplace wellness demonstration program sponsored by Health Canada.

Workplace Wellness at Seven Oaks General Hospital (SOGH)

Selected Interventions:

Conflict Resolution and Communication
Meditation Classes
Yoga
Lunch & Learns
Nutrition Classes
Tai Chi
Team Building
Accountability Workshops
Exercise Classes
Social Activities
Health Fairs
Screening Clinics
Free Massage Therapy
Speakers
Walking Clubs
Amazing Race

Values, Leadership and Culture Change: Workplace Health and Safety at Petro-Canada Burrard Products Terminal (BPT)

Petro-Canada's Burrard Products Terminal (BPT) is a processing operation for finished petroleum products, located on the outskirts of Vancouver. First established in 1958 by British American Oil, the terminal currently handles about 3.5 billion litres of jet fuel, distillate and gasoline each year. At the time of the case study, BPT had about 80 employees—60% of whom were unionized. Another 20 people worked on the site on a contract basis.

The 2002 case study found that corporate values and local leadership were the change agents that helped build a workplace culture that makes safety, health and wellness an integral part of doing business (Lamontagne, F. 2002b).

BPT's wellness initiative dates back to 1995, following a significant downsizing of operations and the arrival of a new manager with a strong commitment to employee wellness and empowerment. However, the organization already had a solid health and safety record.

Although there is no formal employee wellness program in place at BPT, the operation is strongly influenced by Petro-Canada's Total Loss Management (TLM) approach. TLM is a company-wide initiative aimed at eliminating or reducing risks to people (including employees and the community), the environment, company assets and production. Employee and management compensation is tied, in part, to financial and organizational performance. Meeting health and safety goals are explicitly valued.

Certainly, the results seem to support BPT's approach. The 2006 update to the 2002 case study found the operation's health and safety record, and other business indicators, remain outstanding. These include:

- Two consecutive years without an injury requiring first aid;
- Ten consecutive years without a recallable injury (where the worker is taken to hospital and the incident is reported);
- Eleven consecutive years without a "lost-time injury" (where the worker has to take time off work);
- Low absenteeism; and

Healthy Workplace Programs at Petro-Canada's Burrard Products Terminal

Corporate Programs:

Employee Assistance Program
Safety, Health and Industrial Fund
Value sharing program
Volunteer program
Subsidized sports facilities membership
Smoking cessation program

Local Interventions:

Promotion of 'culture of mutual respect'
Open-door policy
Monthly staff meetings
Zero tolerance for workplace or sexual harassment (adapted from corporate program)
Ergonomics assessments
Community volunteering and involvement
North America Occupational Health and Safety Week (annual event, open to public):

- Nutrition, stress management and fitness seminars
- Yoga and massage

- Almost no turnover—workers generally only leave when they retire.

BPT has won several awards for its business success, community involvement and reputation as an employer of choice. Among these are the:

- 2002 Petro-Canada Best in Class Operation Award,
- 2003 Vancouver Volunteer Recognition Award,
- 2004 Psychologically Healthy Workplace Award.

To qualify for the Psychologically Healthy Workplace Award, employers must satisfy criteria in four categories: employee involvement, family support, employee growth and development, and health and safety. Sponsored by the British Columbia Psychological Association, in partnership with the American and Canadian Psychological Associations, the award is the first of its kind in Canada.

Lessons learned

The majority of organizations in the study developed specific workplace safety, health and wellness plans to guide decisions around programming, implementation, participant feedback, monitoring and evaluation.

Key steps taken by most of the organizations included:

Policy and Communication—Senior managers signed health and safety policy commitment statements, which were then brought to the attention of all employees. In some cases, these statements were embedded in the firm's mission statement.

Organization—Roles, responsibilities and accountability for employees, committees and management were clearly outlined.

Planning and Implementation—Guidelines were developed for proactive health and safety planning, setting of objectives, internal inspections and risk assessments.

Measuring Performance—Commitments were made to consistent data gathering in order to monitor progress in implementation and success in achieving overall objectives.

Audit and Review—Audits and reviews were built into the programs to assess the effectiveness of program delivery systems and overall impact on business performance and employee health, wellness and morale.

A number of further conclusions can be drawn regarding the value of promoting workplace safety, health and wellness. Chief among these are that:

- Workplace health pays. All the workplaces studied pointed to benefits, either in terms of employee health indicators (human goals) or workplace performance and 'bottom-line' indicators (business or financial goals). Irving's short-term disability costs dropped by \$800,000 and their Workers

Compensation Board costs fell by 60%. Dofasco's Workplace Safety Insurance Board rates fell by 63%. All the workplaces were sufficiently convinced of the value of their programs to continue their workplace health activities.

- Leadership commitment is vital. Senior managers play an essential role in expressing and supporting wellness as a priority. Successful programs made workplace health an integral part of the organization's business strategy.
- Employee participation is critical. Employees must buy into and support the workplace health culture, both as program designers and program participants.
- Workplace health can be achieved in all sizes of organizations. Even small organizations can address workplace health initiatives by ensuring their workplace culture is supportive and healthy.
- Workplace health issues do not appear to vary significantly between public and private sector workplaces.
- Impacts take time to be seen and recorded.
- Monitoring and measuring impact is critical to sustainability. Many employers with wellness programs don't have a formal process of evaluation. In 2000, the Buffett Taylor National Wellness Survey found that less than one-quarter of employers did so. As well, a majority of employers underestimated the time needed to see improved employee health.

Conclusion

The purpose of the CLBC's 12 case studies in workplace wellness issues across a variety of organizations was to fill information gaps about workplace health, safety and wellness programs in Canada, including why organizations chose to launch such programs, the processes used and, where measurable, their impacts on business outcomes and individual health.

In all the workplaces studied, the wellness activities had a positive impact on business objectives and addressed broader concerns for the health and well-being of the workers. Overall, the studies showed that innovative health and wellness programs can be successfully integrated into the day-to-day business of both large and small operations.

Summaries of all 12 case studies are available on CLBC's web site.

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