pre-planning

- Programme Orientation
- 2 Programme Stages
- 3 Programme Positioning
- 4 Programme Organisation

planning

- 5a Programme Design
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- 5c Programme Design

• implementation •

- 6 Marketing Your Programme
- 7 Programme Implementation
- 8 Programme Evaluation





workplace health promotion: pre-planning series



Programme Stages

Benchmarking workplace health promotion programme

Updated Version 2

KEY CONCEPTS

- Principles of workplace health promotion
- Stages of development in workplace health promotion programme

A note for you

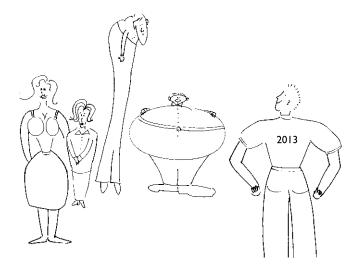
- The Workplace Health Manager...

Your role is a critical one because you have the opportunity to bring about changes that can impact your colleagues' health.

Though your role differs from company to company, you are generally tasked to plan, organise and implement a workplace health promotion (WHP) programme.

While you do not need to be an expert on health issues or be medically trained, some basic understanding of health, the factors that influence it, concepts of WHP and what can be achieved will definitely help you in your task.

This guide will support your role as a workplace health manager, and enable you to plan effectively. To find out on the latest news and events, visit HPB's one-stop on-line portal for workplace health managers at www.hpb.gov.sg/healthatwork. If you need further assistance, please e-mail to Workplace Health at HPB_HEALTH_At_Work@hpb.gov.sg or call 64353704.



Workplace health promotion begins with you, you & YOU...

Introduction

The Essential Guide to Workplace Health Promotion: The ABCs of Managing Your Organisation's Programme consists of eight Sections, grouped into three series of Pre-planning, Planning and Implementation. This form of organisation mirrors the actual stages of WHP programme planning and implementation.

At different points in each Section, there will be cross-references in italics. This is intended to improve understanding of the inter-relationships between different concepts in different sections.

In these Sections, you will find:

- concise flow charts
- clear definitions
- simple explanations
- essential survival tips
- useful examples
- helpful checklists
- ready-to-print templates.



icons



Ideas you can apply



Technical information



Case studies of companies



Essential survival tips



Frequently-asked questions



Useful notes

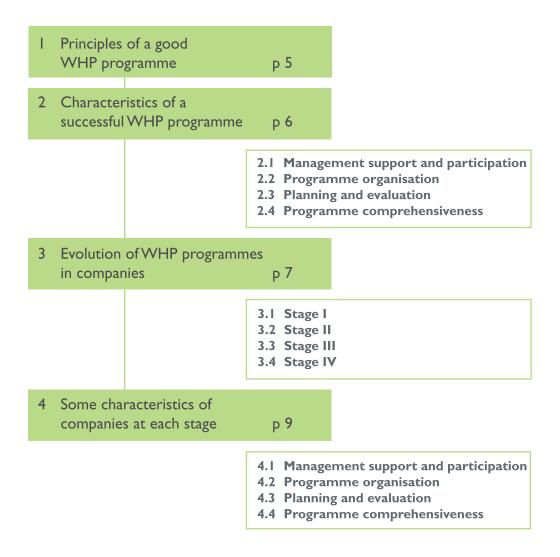


Quick summary

Overview

Designing and implementing an effective workplace health promotion (WHP) programme often happens in a cumulative way. It does not happen all at once. In most companies, it undergoes stages of development in various aspects of the programme. And it does not always follow a straight-line growth pattern.

In this Section, we provide a road map of how effectively organised WHP programmes evolve through four stages, as well as some markers you will find at each stage.



Principles of a good WHP programme

Principles of a good WHP programme

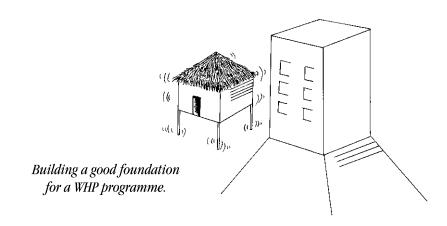
Since no two companies are alike, it is not possible to have a fixed formula for an effective WHP programme that will fit every company. There are, however, certain principles that good WHP programmes share. These are the working principles of an effective WHP programme.

A WHP programme should...

- Meet the needs of all employees regardless of their current level of health. The WHP programme should not be seen as either something only for fitness enthusiasts or those who require medical attention. It should address the needs of employees regardless of their health status.
- Take into account the needs, preferences and attitudes of different groups of participants.

Assessing and understanding employees' needs is essential. If a WHP programme is to be successful, it should accommodate needs and interests.

- Adapt to special features of each workplace environment. Choose strategies that take into account of your organisation's business, structure and culture.
- Recognise that an individual's lifestyle is influenced by environmental factors, personal choices and ability to control or sustain healthy lifestyle choices. The WHP programme should holistically address all aspects that influence an individual's health.
- Support the development of a strong overall health policy in the workplace. The WHP programme should not affect only individuals. It should help to build an organisational culture that expresses itself through health policies and practices.



Characteristics of a successful WHP programme

2 Characteristics of a successful WHP programme

Here are some aspects you can use to develop a WHP programme:

2. I Management support and participation

Management support and participation is essential to the success of the WHP programme. Given the busy schedule of management, it might not be possible to attend all WHP activities.

2.2 Programme organisation

A coordinating body needs to be set up to plan, oversee and execute the programme. Members of this committee should have representatives from all levels and sectors of the organisation, including union members, if possible.

While staff members managing a WHP programme do not necessarily have to be health experts, they should have the relevant training needed to organise an effective programme.

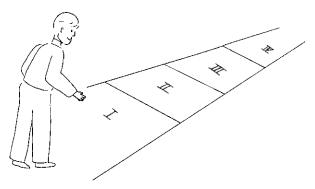
2.3 Planning and evaluation

Beyond just a collection of ad hoc activities, a well-planned WHP programme is a structured, needs-based programme with clear goals, strategies and evaluation mechanisms which can measure the programme's results.

2.4 Programme comprehensiveness

A comprehensive WHP programme covers all four key areas: physical activity, healthy eating, smoking control and mental wellbeing. It also uses both mass and targeted interventions focusing on:

- · Health education and promotion to increase awareness and encourage attitude and behaviour change
- Environmental support which creates a supportive environment that promotes workplace health
- Organisational policies that ensure a safe environment and healthy workforce.



Four-fold path to WHP programme success

Evolution of WHP programmes in companies

3 **Evolution of WHP programmes in companies**

In Singapore, most companies see their WHP programmes evolve through several stages.

3.1 Stage I

At Stage I, there is little awareness of WHP and its benefits. As a result, there is minimal management support and programme organisation.

Ad hoc activities which do not take a holistic approach towards health are conducted. Programmes are not based on real needs but on interests or availability of programmes. Often the focus is on social activities.

3.2 Stage II

At Stage II, there is some awareness of the benefits of WHP. However, WHP is still seen as a form of social recreation. Committees are predominantly sports- or recreation-based. Management support is still at its infancy.

A milestone at this stage would be conducting of health screening. However, the information obtained from health screening is not used to plan WHP programmes.

Most activities revolve around awareness talks, and mass interventions are the norm. There is little intervention in terms of policy or environmental changes.

3.3 Stage III

At Stage III, companies have heightened awareness of WHP and are convinced of its benefits. More resources and commitment are shown through management support and dedicated committees.

Milestones at this stage would be:

- A well-represented committee with senior executives
- Committee members trained in WHP
- Needs assessment such as health screenings, physical fitness assessments and lifestyle surveys
- A WHP programme that is based on needs
- Process and impact evaluation
- Interventions that cover all four key areas (i.e. physical activity, healthy eating, smoking control and mental wellbeing)
- Interventions that include policies and environmental support.

3.4 Stage IV

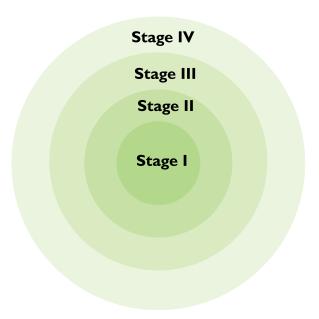
At Stage IV, companies are convinced of the connection between employee health and business objectives. Thus management support is strong, with resources dedicated to WHP.

The corporate culture emphasises employee health in tangible ways – the values and norms of the company are aligned with the WHP goal of employee wellbeing. Participation in WHP is encouraged at every level.

Milestones include:

- Rigorous planning of WHP, from needs assessment to planning and evaluation
- Monitoring of trends in organisational indicators (e.g. medical costs, medical leave and staff turnover rate)
- Implementation of health-linked policies (e.g. work-life balance) beyond just the basic health-related policies (e.g. smoke-free policy)
- · Interventions including work systems for reducing organisational stress, promotion of healthy eating and physical activity, and smoking control.

The development of a WHP programme does not follow a straight-line growth pattern. Rather it is more like a concentric circle moving outwards from Stage I characteristics.



Some companies excel in certain areas of the WHP programme but need improvement in other areas. The following pages will cover in detail the milestones at each stage of the WHP programme.

Some characteristics of companies at each stage

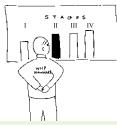
Some characteristics of companies at each stage 4





Stage	II	Ш	IV
Does not see link between employee health & productivity Management does not regard employee health & wellbeing as being important to business objectives.	Does not see link between employee health & productivity Employee health is seen as important, but strictly the individual's responsibility, not linked to business objectives or productivity.	Associates employee health with productivity Management sees link between employee health & business objectives, & interested in curbing medical costs.	Convinced of the link between employee health & business objectives Sees WHP programme as a part of business strategy, competitiveness & sustainable growth.
• Uninformed Management is not aware of WHP activities.	• Informed but Management is kept informed on activities but does not request evaluation of WHP programme.	• Well-informed Management is kept informed on activities & progress of WHP programme (e.g. minutes of meeting).	 Keen interest in WHP programme outcomes Management takes a keen interest in WHP programme outcomes.
Does not participate Management rarely participates in WHP activities.	• A few in senior management sometimes participates in major events Management participates but sees WHP activities as social activities which strengthen cohesiveness.	 Most senior management participates regularly Management is active in WHP activities. 	 Most senior management participates regularly & promotes participation Management actively participates & promotes participation.
Does not know enough to provide leadership Management provides passive support & sees WHP programme as a non-business-related activity.	Does not provide active leadership Management approves of WHP programme but does not lead or initiate programmes.	• Supportive of health-related policy changes but Management is supportive of minor policy changes (e.g. healthy workplace catering policy and subsidies for activities) but is cautious in supporting health-linked policy changes which impact HR or production (e.g. flexi-work & time off for WHP activities).	• Leads in making policy changes Management actively promotes employee health and wellbeing as part of company's core values, policies & practices at all levels. Management initiates health-linked & health-related policy changes to ensure a healthy workplace.
May not allocate a budget for WHP programme	Budget for ad hoc activities	Dedicated budget Adequate manpower & finances are allocated to WHP programme.	 Dedicated budget Adequate manpower & finances are allocated to WHP programme.

4.2 Programme organisation



			\ A \
Stage	II	Ш	IV
No specific structure for WHP programme Social & recreation committee organises ad hoc activities for employees.	• A loose structure for WHP programme There may or may not be a structure set up for WHP activities.	Organised structure The WHP programme has a well-conceived structure supported by procedures for proper documentation & handover.	 Organised structure The WHP programme has a well-conceived structure supported by procedures for proper documentation & handover.
No committee for WHP programme One person is tasked to oversee & implement all WHP activities.	• Committee There may be a committee set up to oversee WHP activities. WHP activities are mainly seen as HR's responsibility.	Well-represented committee led by senior management WHP committee comprises members from all departments & levels.	• Well-represented committee led by senior management WHP committee comprises members from all departments & levels.
	• Isolated committees Committees on sports, welfare & organisational issues may exist but run their own programmes independently of each other.	• Established links between committees WHP committee is well connected to sports, welfare & occupational committees.	• Established links between committees WHP committee is well-connected to sports, welfare & occupational committees.
		• Trained managers Core members of the WHP committee have received relevant training.	 Trained managers Core members of the WHP committee have received relevant training.
		• Recognised Contributions of committee members are recognised by management informally (e.g. thank-you lunches & gifts).	• Recognised Contributions of committee members are formally recognised by management (e.g. staff appraisals) & are rewarded for participation.
	 No specific structure for WHP programme Social & recreation committee organises ad hoc activities for employees. No committee for WHP programme One person is tasked to oversee & implement all 	 No specific structure for WHP programme Social & recreation committee organises ad hoc activities for employees. No committee for WHP programme One person is tasked to oversee & implement all WHP activities. WHP activities are mainly seen as HR's responsibility. Isolated committees Committees Committee There may be a committee set up to oversee WHP activities. WHP activities are mainly seen as HR's responsibility. Isolated committees Committees on sports, welfare & organisational issues may exist but run their own programmes independently of each 	 No specific structure for WHP programme Social & recreation committee organises ad hoc activities for employees. • No committee for WHP programme

What is a WHP programme?

Planning and evaluation 4.3



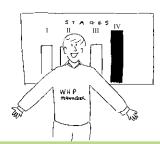
Stage	II	III	IV
Mechanical planning No formal data collection.	Health screening is conducted Health screening is merely used to let employees know their own health profile. Interest surveys are usually done.	• Basic needs assessment is conducted Basic needs assessment (fitness assessment & lifestyle survey) is conducted. Health screening is merely used to let employees know their own health profile.	• Programme planning is based on regular needs assessment Extensive needs assessment (demographic profile, health screening, fitness assessment, lifestyle survey, interest survey & climate survey) is conducted.
	• Information not used The information collected from surveys is not used to create a corporate profile or to plan or evaluate WHP programme.	Information used The information collected from surveys contributes to planning of WHP programme.	Information used The information collected from surveys are used for planning WHP programme.
 Programmes are based on fads Planning of programme is done merely to provide a calendar of activities. Programmes are based on the latest fads. 	• Programmes are based on employees' interests Ad hoc activities are conducted to cater to employees' current interests.	• Programmes are needs-based Activities are planned based on health needs derived from findings of health screening, lifestyle survey & fitness assessment.	• Programmes are accessible, well-timed & appropriate In addition to being based on needs assessment, issues of accessibility, timing & the profile of the workforce are considered.
	No goals are set The programme has no goals or objectives.	• Goals are unclear General goals (e.g. to improve health of employees) are set.	• SMART objectives are set Clear goals & objectives are set which are simple, measurable, action-oriented, realistic & time-bound.
	Some process evaluation is done Evaluation is done by observing participation rate or through formal (e.g. survey) or informal (e.g. verbal) feedback.	• Process evaluation is done Participation rate & feedback from participants are used to identify areas for improvement (e.g. accessibility & appropriateness of interventions). Basic impact evaluation is done to monitor change in health status.	 Process & impact evaluation are conducted The programme is evaluated to measure the change in attitude, knowledge, health status & health practices. Outcomes are measured Outcomes are measured by monitoring medical leave, staff turnover & medical costs.

Programme comprehensiveness 4.4

Stage I	II	Ш	IV
• Focuses on social activities Emphasis is placed on social activities (e.g. family day & dinner dance).	Focuses on physical activities & talks Programme focuses on physical activities & health education interventions (e.g. talks & workshops).	 Attempts to cover four key areas Physical activity Healthy eating Smoking control Mental wellbeing. 	 Covers four key areas Physical activity Healthy eating Smoking control Mental wellbeing.
		• Includes change of policies & physical environment Interventions include changes in policies & physical environment (e.g. gym, water coolers & canteen).	Corporate culture emphasises employee health Employee health is strongly advocated in company's culture.
	Mass activities preferred The activities are organised to allow a maximum number of employees to participate.	Mass activities preferred The activities are organised to allow a maximum number of employees to participate.	 Applies mass & targeted interventions The activities are designed not only for the masses, but also for targeted groups (e.g. high-risk groups). Influences policies The WHP programme advocated health-related and health-linked policies.

Each company is unique. Some companies show some Stage II characteristics in management support but could have achieved most of Stage III milestones in planning and evaluation.

Use Appendix A to identify strengths of your programme. Capitalise on these strengths. Identify also areas needing improvements and work on them.



Appendix AChecklist for a WHP programme



Identifying gaps in our WHP programme.

Checklist for a WHP programme

Programme Positioning and Organisation Management support and participation

I.	Our senior management has insight into the significance of WHP and its	No	Can be improved	Yes
	relation to business outcomes (i.e. how it can contribute to the bottom-line and that it is a shared responsibility between employer and employee).			
2.	Our senior management actively leads and is accountable for the WHP programme (e.g. the goals and objectives on workplace and employee health and wellbeing issues are incorporated in the organisation's strategic planning).			
3.	Senior management has initiated or supported at least one health-related or health-linked policy improvement in the past year.			
4.	Most senior managers participate regularly in WHP activities.			
5.	Our middle management actively encourages employees to get involved in the programme and participate in its activities.			
6.	We have an effective mechanism for keeping management informed regularly of the progress and impact of the WHP programme.			
7.	Our senior management proactively considers employee health and wellbeing issues in its decision-making process (e.g. when making decisions in regard to business or organisational development).			
Int	tegration with organisation's mission and culture			
8.	The value of employees and hence the importance of a healthy workforce is referenced within our organisation's statement of core values or in some other strategic policy documents such as a health charter.			
9.	Our employees across the organisation perceive that actions of management encourage a healthy lifestyle and work-life balance.			
10.	Our employees across the organisation understand how WHP contributes to the organisation's strategic directions, priorities and success.			
11.	Employee health and wellbeing issues are managed as part of a human resource development strategy that aims to maximise staff performance.			
12.	Our organisation works at improving management practices to foster a culture that reinforces the goals of the WHP programme.			

Programme Positioning and Organisation (cont'd) Adequate resources No Can be improved 13. A dedicated budget is available for our WHP programme. **Programme structure** 14. We have a representative committee to plan and oversee the WHP programme. 15. There is cooperation and coordination with other related committees (e.g. occupational safety and health, sports and recreation, canteen and staff welfare). 16. Our WHP committee members are actively engaged in planning and implementing the WHP programme. 17. The contributions of WHP committee members are recognised in some specific manner by management (e.g. in staff appraisals). Managed by properly trained staff members 18. Our staff members involved in the WHP programme have received relevant training (e.g. workplace health promotion course and counselling course). **Programme Planning and Evaluation** Based on actual and perceived needs I. We have a good understanding of the demographic profile of our employees (i.e. age and gender breakdown, educational level and marital status). 2. We offer regular health screening, which includes tests for hypertension, high blood cholesterol, diabetes and obesity, to all our employees. 3. We participate in a regular physical fitness assessment (e.g. Walk/Run/ Step Test). 4. We have a good understanding of the lifestyle and health practices of our employees from a regular survey (i.e. on extent of physical activity, dietary practices and smoking habits).

Programme Planning and Evaluation (cont'd) Based on actual and perceived needs

5.	We have a good understanding of the sources of organisational stress, and the level of staff morale from regular employee feedback surveys and/or focus groups.	Can be improved	Yes
6.	We have assessed the adequacy of the physical work environment including availability of sports and recreational facilities and other support facilities such as water coolers, pantries and canteens.		
Aı	n established programme plan		
7.	We have used information gathered from the needs assessment to identify and set specific priorities for our WHP programme.		
8.	We have goals and objectives that indicate what we hope to achieve from the WHP programme.		
9.	Our goals and objectives have been communicated to all employees.		
10.	Our programme objectives are SMART (Specific, Measurable, Action-oriented, Realistic and Time-bound).		
11.	We have considered the strategies that will be required to achieve our objectives including seeking advice on the types of interventions that are effective in addressing our health priorities.		
12.	Our marketing methods have proven successful in gaining the support and participation of employees.		
13.	We have a written programme plan that summarises the goals and objectives, the strategies for achieving goals and objectives, and the methods for evaluating progress against goals and objectives. (Please note that an activity schedule or a calendar of events is not a programme plan.)		
C	onduct programme evaluation		
14.	We regularly conduct process evaluation such as measuring participation rate, gathering participants' feedback, and examining accessibility and appropriateness of interventions.		

Programme Planning and Evaluation (cont'd) Conduct programme evaluation

15.	We regularly conduct impact evaluation to assess the impact/mid-term effects of our WHP programme through indicators such as fitness status, lifestyle and health practices, and staff morale.	Can be improved	Yes
16.	We regularly conduct outcome evaluation to assess the long-term effects of our WHP programme through indicators such as health risk status, medical costs, medical leave and staff turnover rate.		
Pr	ogramme Results		
I.	We have data for a minimum of one indicator to assess the effect of the WHP programme on organisational outcomes (e.g. medical costs, medical leave and staff turnover rate).		
2.	We have data for a minimum of one indicator to assess the effect of the WHP programme on employee health risk status (e.g. health screening data such as prevalence of high blood pressure, high blood cholesterol, high blood sugar and obesity).		
3.	We have data for a minimum of one indicator to assess the effect of the WHP programme on employee fitness status (e.g. results of the Walk/Run/Step Test or in-house assessment).		
4.	We have data for a minimum of two indicators to assess the effect of the WHP programme on employee lifestyle and health practices and staff morale (e.g. percentage of employees who exercise regularly, eat healthier, do not smoke and/or level of employee satisfaction).		
5.	We have analysed the results over time for the above key programme results indicators.		
6.	We have seen improvements over time in at least one key programme results indicator (i.e. positive trends).		
7.	We have used the results data to make adjustments to our WHP programme.		
8.	Our senior management takes note of the results of the WHP programme.		
9.	Overall, current goals and objectives of our WHP programme have been met or exceeded.		

Programme Comprehensiveness Covers four key areas No Can be Yes improved 1. Our WHP programme adequately covers all four key areas of healthy lifestyle: physical activity, healthy eating, smoking control and mental wellbeing. Mass and targeted interventions 2. Our WHP programme includes both interventions that target the general workforce and interventions that are specifically designed for those at high risk of lifestyle-related conditions or diseases such as hypertension, high blood cholesterol, diabetes and obesity. A balanced approach 3. Our WHP programme comprises a good combination of health education and promotion activities, supportive environment (i.e. physical and organisational) strategies and organisational policies that promote a healthy workforce. 4. Our WHP programme provides sufficient information and educational opportunities, through a variety of channels, to raise awareness and increase knowledge on a range of health-related topics (e.g. talks, exhibitions, demonstrations, websites, newsletters, classroom instructions and group discussions). 5. Our WHP programme includes motivation and incentive interventions to encourage participation in WHP activities and to motivate or recognise changes in health behaviour or other related achievements (e.g. contests, recognition schemes and incentive schemes). 6. Our WHP programme includes a variety of psychosocial interventions to facilitate attitude and behavioural changes (e.g. mental wellbeing programmes, behaviour modification programmes, individual counselling, goal setting and personal planning). 7. Our WHP programme includes social support interventions to support and maintain behavioural change (e.g. peer support networks, self-help groups and lay health advisor groups). 8. We have developed a supportive physical environment that encourages a healthy workforce (e.g. canteen that serves healthy food choices and provision of water coolers).

Programme Comprehensiveness (cont'd) A balanced approach

9.	We have fostered a supportive organisational culture that encourages a healthy workforce (e.g. clear communication channels and management practices that reduce sources of organisational stress).	No	Can be improved	Yes
10.	We have introduced policies that encourage a healthy workforce (e.g. health-related policies on smoking control, cigarette sale and catering, and health-linked policies such as flexi-benefits schemes, flexi-time and workload management).			