pre-planning

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

planning

- 5a Programme Design
- 5b Programme Design
- 5c Programme Design

• implementation •

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





workplace health promotion: planning series



Uncovering true health needs

Updated Version 2

KEY CONCEPTS

Needs assessment

A note for you

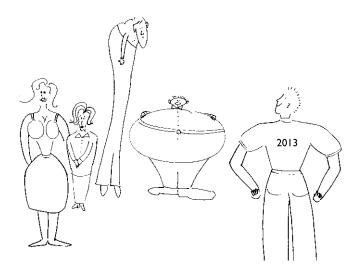
The Workplace Health Manager...

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

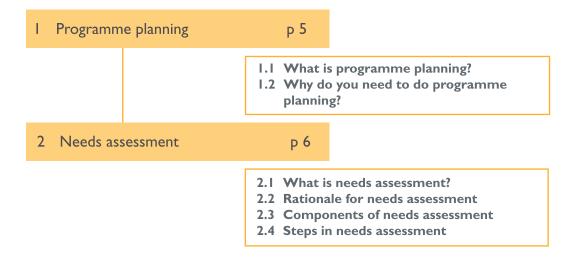


Quick summary

Overview

You are convinced of the benefits of a workplace health promotion (WHP) programme. Now you need to design a programme that keeps a balance between what employees need and what the company is able to do. You will also need a general idea of the resources you must have as well as your goals and objectives for the WHP programme.

This Section shows you the first step in planning a programme - needs assessment, that is, finding out what people truly need.



Programme planning

Programme planning

1.1 What is programme planning?

For a workplace health promotion (WHP) programme to be effective, it should:

- address needs
- have specific and measurable goals
- be evaluated to show health benefits.

Putting an effective WHP programme together requires planning and organisation. Planning involves making decisions about:

- What are the needs?
- Which needs should you set as priorities?
- Which goals and objectives should your organisation set? (see Section 5c:Writing a Programme Plan)
- What are the specific interventions to be used? (see Section 5b: Choosing Interventions)
- How do you evaluate the success of your interventions? (see Section 5c:Writing a Programme Plan)

1.2 Why do you need to do programme planning?

Many organisations have WHP programmes or conduct health-related activities for employees, but not all of these programmes are based on the needs of the employees.

Some activities are conducted because they are:

- part of a tradition within the organisation
- affordable
- easy to conduct
- readily available from service providers.

But ad hoc activities do not yield long-term benefits, and a programme consisting of ad hoc activities is more difficult to sustain.

Having a programme plan helps you to stay on track, prioritise and evaluate the effectiveness of your WHP programme.



Plan your WHP programme to meet the needs of employees.

Needs assessment

2 **Needs assessment**

2.1 What is needs assessment?

Two groups of writers define needs assessment as:

- · 'Needs assessment is a process by which you identify and measure gaps between what is and what ought to be.' (Clark and Cutter, 1994)
- 'Needs assessment is a planned process that identifies the reported needs of an individual or group.' (Gilmore and Campbell, 1996)

2.2 Rationale for needs assessment

Needs assessment allows an organisation to:

- improve participation rate for WHP activities
- establish baseline data for future planning
- · secure management support
- prioritise among various health-related issues
- write clear objectives for the WHP programme
- utilise resources effectively
- get feedback from employees on what they require.

2.3 Components of needs assessment

In doing a needs assessment, you will need to look at information about various factors such as the environment, health status and health practices which affect an employee's health.



Identify real needs before implementing your company's WHP programme.



What is a need?

What exactly do we mean by 'need'? It is a condition which, if absent, will prevent employees from functioning at their optimal best.

But 'need' is a relative concept. It is dependent on values and expectations, and these change over time.

Is it possible then to objectively identify a need? There are basically four different types of need. Each is identified using a different method.

By using these methods, you will be able to form a more complete picture of what an organisation's needs are.

Normative need refers to what expert opinion defines as need. It can be based on national concerns, data from credible surveys or research findings by authorities on health-related issues. For example, the results from the National Health Survey that one in four Singaporeans suffers from high blood cholesterol can be used as a reason to address cholesterol within the organisation's WHP programme. Normative need is essential in programme planning but keep in mind this type of need changes over time.

Comparative need² is determined by comparison with what other similar organisations have. For example, a manufacturing company feels that it needs a back-care programme because a similar company has successfully implemented one. Comparative need is useful but you must be careful not to justify needs solely on the basis of what others are doing.

Felt need³ is defined by what the employees say they need. For example, employees express that they need an in-house gym. Felt needs should be handled carefully as what employees want may not always be what they actually need. Still, it is important to find out what employees say they need since the programmes are organised for them. Felt needs also provide valuable information for planning activities which employees will enjoy.

Inferred need is defined by observing how people behave. For example, a long waiting list for an aerobics class may indicate the need to start another class.

1,2,3 Bradshaw J, The Concept of Social Need, New Society, March 1972; 640–643



To identify needs, you have to collect data about the employees, the organisation and the environment. The following table shows you the types of data required.

TYPES OF INFORMATION	EXAMPLES	OBTAINED FROM/ IN CONJUNCTION WITH
Employee data		
Staff demographics	Age, gender, race, marital status and educational level	Human Resource Department
Health status or risk factors	Blood pressure, blood glucose, blood cholesterol and body mass index measurements	Basic health screening by appropriate service providers
Fitness status	Walk/Run/Step Test	Appropriate service providers
Health practices	Smoking, exercise, eating habits and coping with stress	Health practices survey from Health Promotion Board (see Appendix B)
Staff satisfaction and morale	Views on management practices and commuincation channels	Staff satisfaction survey conducted by external human resource management consultants
Interests and preferences	Types of activities staff would like to participate in and its preferred timing	Focus groups, informal discussions, observation and surveys (see Appendix E)
Mental health status	Stress level, anxiety and depression	Institute of Mental Health or other appropriate service providers
Organisational da	ta	
	Medical care costs, absenteeism and staff turnover	Human Resource Department
Physical environm	nental data	
Internal facilities	Water coolers, hot water dispensers and pantry	Internal facilities management department and through observation
Sports and recreational facilities	Gym, shower and changing rooms	Internal facilities management department and through observation

2.4 Steps in needs assessment

Needs assessment can be carried out in five steps:

Step I - Consultation

Step 2 - Data collection

Step 3 - Analysis of data

Step 4 - Determining priorities

Step 5 - Informing stakeholders

Let's look at each step in detail.

Step I - Consultation

Talk to groups of people

Talk to specific groups of staff (e.g. HR staff, medical staff, opinion leaders and managers to get an idea of issues within your organisation).

Talk about organisational as well as health issues

Organisational issues are issues like absenteeism and staff morale. Health issues could include health risk factors, health practices and health problems (e.g. smoking, obesity, physical activity, high blood pressure, high blood cholesterol and diabetes).

Form a mental picture about the health needs

At the end of the consultation, you will have an idea of the needs of your organisation.

Step 2 - Data collection

Decide on the kind of information you need

Decide on exactly what information you need before you begin collecting data. Plan the kind of data you want to collect, how and from whom you will collect it.

Consider your methods of data collection

There are many methods for gathering information. Each method has its strengths and weaknesses (see Methods for Data Collection).

Step 2 – Data collection (cont'd)

Collect the data

Ideally, data should be collected from all employees within the organisation. When that is not possible, use a representative sample. A representative sample has the same basic characteristics (demographics) as the population that it is drawn from. Organisations should ensure that the sample is representative. Unless an organisation has a large workforce (e.g. over 1,000 employees), all employees should be given the opportunity to take part in the needs assessment. The greater the response, the better the quality of the sample. Tips on how to promote a survey can be found in Appendix A.

Step 3 - Analysis of data

Summarise key findings

Since data is collected using various methods, it is important to summarise the findings from data collected through each method (see Appendix C).

Compare with previous years' data to note trends

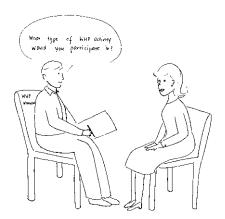
Consider data collected in previous years to identify any trends or new issues.

Compare organisational data with national data and benchmarks

Use national data and recommendations (see Appendix D) as benchmarks for comparisons of your organisation's data.

Identify the links between the various data

Look for links between various data collected. For example, health practices survey results show a low percentage of employees exercising and eating healthily. This may explain the health screening results that show a high percentage of employees with high cholesterol levels.



Collect and analyse data on employee needs.

Step 4 – Determining priorities

Evaluate which issues are more important

All needs must be addressed but resources are limited. So, focus on the more important issues first. Prioritise the issues based on:

Importance

- Magnitude How widely is it experienced? How does this problem compare against the national average? (see Section 3: Programme Positioning, Appendix D)
- Potential impact Is it severe? Is it urgent? (Although a relatively small proportion of employees smoke, remember how damaging it is and how much can be gained from quitting.)
- Nature of work If your employees' work generally involve hard labour, there may be little need to focus on physical activity.

Feasibility

- Crucial impediment Does it affect operational efficiency or productivity?
- Resources Do you have the time, money, manpower or expertise to deal with the issue?
- Likelihood of problem being solved Will employees participate?
- Culture and goals Does this align with the company's culture and goals? Will it allow for maximum staff participation?



Prioritise.

Step 5 - Informing stakeholders

Inform senior management

Senior management can be informed through a formal report which can be discussed at the management meeting. You need to ensure that management understands the data, agrees with the prioritised issues and endorses the follow-up programmes you propose.

Inform staff

You can inform staff by organising a roadshow or forum-cum-exhibition. Other usual communication tools such as e-mail, newsletters, noticeboards and circulars can also be used for dissemination of information (see Section 6: Marketing Your Programme).



It is essential that employees understand your findings and the issues you have prioritised, so that they will be more supportive of the follow-up programmes.



Make sure that:

- your methods are the best for the purpose and are easy to use.
- your methods allow you to gather information in a format that is easy to summarise and analyse.
- you have considered how you might report the results to stakeholders.
- you store the data in a place that ensures responses are kept confidential.



Methods for data collection

Company records

The Human Resource Department should have information on staff demographics, medical costs and absenteeism. You can use these as a starting point.

Employee surveys

Surveys collect information that can be systematically quantified and compared. Information on personal particulars, personal health status, risk factors, behaviours, habits and work environment can be obtained this way. (For information on how to market a survey and an example of a health practice, refer to the Apppendix.)

Self-administered surveys

Administered in the form of written questionnaires, self-administered surveys are cost-effective. They guarantee employees greater confidentiality and encourage them to reply truthfully to sensitive questions. However, less-educated employees may have difficulty interpreting the questions and the interviewer may not always be around to correct misunderstandings and answer queries.

Face-to-face interviews

You can interview HR staff, medical staff, opinion leaders, managers and leaders to obtain their views on health issues and employees' needs. Face-to-face interviews also enable the interviewer to use the language the interviewee is most comfortable with during the interview.

Telephone interviews

In a small organisation, you can obtain staff input through telephone interviews. Just like face-to-face interviews, telephone interviews allow the interviewer to clarify questions, build rapport, use familiar language and ensure that the interviewee completes the survey. However, this method can be time-consuming and inconvenient as the interviewee may not be available or comfortable discussing issues over the phone.

Observation

Observation is a quick and simple method of finding about employee behaviour (e.g. eating habits and level of physical activity) and facilities available. It is inexpensive, fast and usually helps you to form an idea about your organisation's needs.

Methods for data collection (cont'd)

Focus groups

Focus groups are planned group discussions with a small number of carefully selected people. They allow you to gain in-depth qualitative knowledge about a single issue or a narrow range of issues guided by a set of open-ended questions. The questions ask for feelings and opinions rather than facts.

To ensure a productive discussion, people with common interests and experiences are placed in the same group. The ideal size is between 6 to 12 persons. Focus groups are conducted by trained moderators.

Suggestion box

This allows employees to anonymously contribute their opinions, interests, preferences or feedback. It is one way to obtain responses from employees who are not usually outspoken. But it has its limitations because it may not obtain responses from majority of the employees.

Informal discussion groups

Informal discussion groups provide a platform for employees and managers to come together to identify real needs and resolve differences.



Employees may be concerned about sharing personal information and opinions. To encourage them, you need to guarantee total confidentiality.

Case study



CASE STUDY

Needs Assessment

Singapore Police Force

Singapore Police Force's WHP programme is based on assessed needs, both real and perceived. This enables them to plan a coherent and focused programme and to set priorities. Needs assessment is done through many channels.

Through the requirements of their occupation

Physical fitness and smoking cessation are identified as priorities.

Through data mining

Data on demographics, age, marital profiles and shift patterns are analysed.

Through health screening results

All officers are required to undergo the Individual Physical Proficiency Test (IPPT) which acts as an indicator of their physical fitness level. All officers also undergo a medical screening to determine blood sugar, blood cholesterol, blood pressure, body mass index (BMI), body fat analysis and Hepatitis A and B status. Audiometric test and eye screening are also included. Due to the size of the Police Force, screenings for different age groups are staggered. For example, Phase I covers all officers aged 35 and above, and Phase II covers the next age group. Health risk assessment is done through a lifestyle survey, and environmental hazards are identified through feedback from ground officers.

Through surveys

A compulsory Organisational Health Survey conducted by the Police Psychological Unit every two years forms an integral part of the programme planning. This Survey monitors areas contributing to the health of the organisation, one of which is the health and well-being of officers and the work environment they work in.

IDENTIFY PRIORITY AREAS

Despite a 'healthy budget', the needs are prioritised to maximise the effectiveness of the programme.

Guiding principles are:

- Magnitude Does the problem affect a large number of employees?
- Nature of employees' work There may be little need to focus on physical activity if your business involves hard physical labour.
- High risk Does the problem pose a high risk to a concentrated group of employees? (Although a relatively small proportion of your employees are likely to smoke but remember how damaging smoke is and how much is gained from quitting.)
- **Potential impact** Does it affect the health and safety of officers?
- Crucial impediment Does it impede operational efficiency?

Appendix A

Tips on how to promote the health practices survey

Appendix B

Sample health practices survey

Appendix C

Sample final report for health practices survey

Appendix D

Interpreting survey findings

Appendix E

Sample interest survey

Appendix A

Tips on how to promote the health practices survey

Have an overall promotion plan

To ensure a good response rate, you need an overall promotion plan. This plan should highlight every opportunity and method available to promote the survey. A combination of the following could be used:

- Posters Posters can describe the overall purpose, importance of staff response, period of survey administration and contact information of WHP committee members can be displayed at prominent areas.
- Announcements An announcement can be made by the Chief Executive Officer or equivalent, encouraging employees to complete the survey.
- Articles An article can be written in the company newsletter by a senior manager in support of the survey.
- **Electronic messages** Electronic prompting can be done when employees log on their computers.
- Existing channels of communication Promote the survey in the organisation's social events, staff meetings, newsletters and pay envelope inserts.

Dbtain visible management support

Encourage consistent, visible commitment and support for the survey from all levels of management. Managers can prompt his staff to participate in the survey.

Inform employees early

Inform employees of the survey well in advance so that they are prepared.

Provide constant reminders

- Remind employees constantly that the survey is for their benefit, and that everyone's participation is essential to identify the true needs.
- Constant reminders can also be sent through the usual channels of communication to prompt employees to return the survey.
- Have a countdown to remind employees of the deadline and to inform them of the percentage of surveys returned to date.

Use a cover letter

Attach a cover letter from the committee with every survey to inform employees of the deadline, that employees can use half an hour during office hours to complete the survey (if applicable) and about any incentives for returning the survey form.

Guarantee confidentiality

Employees will only be truthful in their responses if anonymity is ensured.

Appendix A (cont'd)

Use office hours

Generally, surveys receive greater response rate if employees are allowed to complete them during office hours.

Add a personal touch

Surveys delivered personally are more likely to receive attention than those sent through internal despatch especially when the despatcher promotes the surveys verbally.

Make it simple

The survey must be simple and employees should be able to complete it within 15–20 minutes.

Give incentives

Give simple incentives for returning the survey forms.

Send thank-you notes

Send thank-you notes to employees for participating in the survey.

Appendix B

Sample health practices survey

We are conducting a simple survey on the health practices among staff. The information will be used to develop and monitor activities for health promotion. You do not need to record your name. All replies will be used in a collective way and treated with strictest confidence.

Some questions require you to circle the number that best describes your answer. For example:

	22.	When was t	the last	time	you had	screening	for h	nigh l	olood	pressure
--	-----	------------	----------	------	---------	-----------	-------	--------	-------	----------

- I. Less than two years ago
- 2. More than two years ago
- 3. Never

If you have never gone for any screening for high blood pressure, you would circle 3.

Other questions require you to circle the number that best describes your view. For example:

31. I am able to deal with day to day stressors.

On the scale of I to 5, how would you rate how you feel the statement best describe you?

Strongly Strongly Disagree Agree I 2 3 5

If you feel mentally fatigued and time-pressured, you would circle 2.

١.	PERSONAL PARTICULARS	
l.	Ethnic group 1. Chinese 2. Malay 3. Indian 4. Others	
2.	Gender I. Male 2. Female	
3.	Age (At last birthday) 1. 18-29 2. 30-39 3. 40-49 4. 50-59 5. 60 and above	
4.	In the past one year, how many because you were sick, injured or	

____ days

D	DINCICAL ACTIVITY
В.	PHYSICAL ACTIVITY
5.	Do you exercise regularly, i.e. 150 minutes of moderate-intensity aerobic activity (e.g. brisk walking) or 75 minutes of vigorous-intensity aerobic activity (e.g running, jogging or playing basketball) a week? Yes No
6.	In a typical week, how many minutes do you engaged in moderate- intensity aerobic activity (e.g. brisk walking) mins/week
7.	Which physical activity do you most frequently participate in?
8.	Is there any physical activity you would be interested to take up?
	If YES, what activity?

Appendix B (cont'd)

С.	ш	н	Е	ľ	n.	М	a	V	P	и	a.	V			C	н.	٧
L.	ь	и	ы	и	н	ľ	٧			n	w	٧	u	ľ	u	ь.	J

9	How many	servings	٥f	fruit	d٨	VAII	consume	۸n	an	average	day
7.	HUW HIAHY	261 411152	UI	Iruit	uυ	you	Consume	UII	all	average	uay:

(Please note that I serving is equivalent to:

- I medium apple, pear, orange, mango or banana
- I wedge of pineapple, papaya, watermelon or honeydew
- 6 rambutans, dukus, lychees
- 10 grapes or logans
- 4 small seeds of durian or jackfruit)
- 10. How many servings of vegetables do you consume on an average

(Please note that I serving = three quarters of a cup of cooked

- 11. What type of rice do you usually eat?
 - I. White rice
 - 2. Unpolished rice e.g. Brown / Red / Black / Multigrain rice
 - 3. Mixture of white / brown rice
 - 4. I don't eat rice
- 12. What type of bread do you usually eat?
 - I. White (Ordinary/enriched)
 - 2. Wholemeal/multigrain
 - 3. A mixture of white/wholemeal
 - 4. I don't eat bread
- 13. What type of milk or milk based drinks do you usually drink?
 - I. Whole milk/full fat
 - 2. Low fat
 - 3. Skimmed/non-fat
 - 4. Sweetened condensed milk
 - 5. I don't drink milk or milk based drinks
- 14. When you eat meat or poultry, how much of the fat and skin do you remove?
 - I. All
 - 2. Some
 - 3. None
 - 4. I don't eat meat or poultry
- 15. What kind of oil do you usually use for cooking at home?
 - 1. Butter, dripping, ghee, lard or any other animal fat (saturated)
 - 2. Hard margarine, vegetable oil, blended oil, palm oil or coconut oil (blended)
 - 3. Soft margarine, corn oil, soya bean oil, sunflower oil or safflower oil (polysaturated)
 - 4. Peanut oil, canola oil, olive oil (monosaturated)
 - 5. Other
 - 6. I don't cook at home at all

- 16. At the table, when do you usually add salt or sauces to your food?
 - 1. Before tasting food
 - 2. When the food is not tasty enough
 - 3. I don't add salt or sauces to my food at the table

D. CIGARETTE SMOKING

- 17. Do you smoke?
 - 1. Daily
 - 2. Occasionally
 - 3. Never [Go to Section E, Qn 22]

18.	Do '	you	intend	to	quit	smoking?	Yes	No

19.	Have you	made any	attempts	to quit	smoking	ξ in the	past 1	2 months?
	Yes	□ No ´	[Go to Se	ection I	E, Qn 2	2]	•	

- 20. How many attempts have you made in the past 12 months?
 - 1.1
 - 2. 2
 - 3.3
 - 4. More than 3
- 21. Which method/cessation aid did you use?
 - I. Cold turkey
 - 2. Delay
 - 3. Gradual reduction
 - 4. Nicotine Replacement Therapy
 - 5. Medication
 - 6. Others. Pls specify

E. ALCOHOL INTAKE

22. On how many days have you drunk alcohol during the past w	22.	On how m	nany days have	vou drunk alcohol	during the past w	veek?
---	-----	----------	----------------	-------------------	-------------------	-------

23.	During the past month, have you drunk	more than 5	drinks in
	any one drinking session?	Yes	□ No

?	times?	,	nanv	w	hο	٢	YF	f
---	--------	---	------	---	----	---	----	---

F. HEALTH SCREENING

- 24. When was the last time you had screening for high blood pressure?
 - I. Less than two years ago
 - 2. More than two years ago
 - 3. Never
- 25. When was the last time you had screening for obesity?
 - I. Less than one year ago
 - 2. More than one year ago
 - 3. Never

26.	When was the last tim 1. Less than three year 2. More than three yea	s ago	screening fo	r diabetes?	34.	I am able t Strongly disagree	•	with life's chal	lenges. 4	Strongly agree 5
	3. Never	Ū				1	2	J	7	,
27.	When was the last time	you had scr	eening for his	gh blood cholesterol?	35.	I have the	strong su	ipport of my	family and fr	iends.
	1. Less than three year	s ago	0 (,		Strongly disagree	2	3	4	Strongly agree 5
	2. More than three yea3. Never	rs ago				I	Z	3	4 _)
	J. Nevel				Н.	WORK ENVIR	ONMENT			
28.	When was the last time y Immunochemical Test (FI	T)? (For resp			36.	I am proud	to say I	work at my	company.	
	 Less than one year More than one year 					Strongly disagree	2	3	4	Strongly agree 5
	3. Never	ago				I	Z	3	4)
For	male respondents, pleas	se go to Se	ction G, Qn	31.	37.	I see the cor overall strat			ork I do and	the organisation's
Fo	r female respo	ndents	only			Strongly disagree				Strongly agree
			····,			I	2	3	4	5
<i>2</i> 9.	When was the last tim I. Less than three year		a Pap smea	r test?	38.	My workload	l is a ca	use of concer	n to me.	
	2. More than three year					Strongly disagree				Strongly agree
	3. Never	Ü				I	2	3	4	5
30.	How long has it been	since you	had a scree	ning mammogram?	39.	My work giv	ves me a	sense of acc	omplishment.	
	(For respondents aged	50 years or		8		Strongly disagree			'	Strongly agree
	 Less than one year : One to two years ag 					I	2	3	4	5
	3. More than two years ag				40	My contribu	tions at	work are reco	ngnised	
	4. Never	Ü			٦٠.	Strongly disagree		work are rece	igniscu.	Strongly agree
G.	MENTAL WELLBEING					I	2	3	4	5
					41	A4			4	
	the following questions, r view.	please circle	the number	that best describes	41.	•	•	s and ideas s	eem to count	
you	i view.					Strongly disagree	2	3	4	Strongly agree 5
31.	I am able to deal with	day to da	y stressors.				_			
	Strongly disagree 2	3	4	Strongly agree 5	42.	I am given my job scop		authority to	make decision	ns appropriate to
22	I generally feel relaxed	and calm				Strongly disagree		2	4	Strongly agree
32.	,	anu Cann.		Samon du a mus		ı	2	3	4	5
	Strongly disagree 2	3	4	Strongly agree 5	43.	I can easily	balance	the demands	of work and	home life.
			,			Strongly disagree		_	_	Strongly agree
33.	I can effectively manage	e my emoti	ons (eg. ange	.,		I	2	3	4	5
	Strongly disagree 2	3	4	Strongly agree 5						
		-		-						

Appendix C

Sample final report for health practices survey

Company X's Health Practices Survey Report (Year	Company	/ X 's	Health	Practices	Survey	Report	(Year)
--	---------	---------------	---------------	------------------	--------	--------	--------

Introduction

This paper presents the findings of Company X's health practices survey _____ (year).

Objectives

The objectives of survey were to establish:

- The physical activity, dietary, smoking and drinking behaviours of Company X's staff
- Staff's exposure to health screening measures
- Staff's experience of stress and adopted coping mechanisms
- Staff's opinions of the work environment.

Methodology

The survey was given to y number of Company X's staff.

The information was collected using a combination of self-administered questionnaire, online and face-to-face surveys.

Findings

Z responses were received, a response rate of [sample/workforce]%. The composition of the sample is compared against that of the workforce in the table below.

A. PERSONAL PARTICULARS

		SURVEY SAMPLE	WORKFORCE
Ethnic group	Chinese Malay Indian Others	Insert Qn frequencies	Company data
Gender	Male Female	Insert Qn 2 frequencies	Company data
Age group	18-29 yrs 30-39 yrs 40-49 yrs 50-59 yrs 60 yrs and above	Insert Qn 3 frequencies	Company data
Absenteeism		Insert Qn 4 frequencies	Company data
Total			

B. PHYSICAL ACTIVITY

- The amount of physical activity required to provide protective health benefits varies according to the intensity of that physical activity. There are two accepted prescriptions for physical activity - moderateintensity aerobic activity for sedentary individuals and vigorous-intensity aerobic activity for greater health benefits.
- [Insert % of Qn 5 responses that said yes] exercised regularly i.e. engaged in 150 minutes of moderateintensity aerobic activity or 75 minutes of vigorous-intensity aerobic activity a week.
- [Proportion of Qn 6 responses with 150 minutes or longer]% engaged in moderate-intensity aerobic activity such as brisk walking for at least 150 minutes per week.
- The most popular activities were [List responses for Qn 7 and their respective %].
- [Insert % of Qn 8 responses that said yes] indicated an interest in taking up a physical activity.
- Activities which staff indicated an interest in taking up: [List activities from Qn 8 and the respective % of responses indicating interest in each activity]

C. DIETARY PRACTICES

	COMPLIANCE WITH RECOMMENDED CONSUMPTION (%)							
Fruit consumption	Insert % of Qn 9 re	Insert % of Qn 9 responses of two or more servings						
Vegetable consumption	Insert % of Qn 10	Insert % of Qn 10 responses of two or more servings						
Rice consumption	White Insert % of Qn 11 res	Unpolished sponses for each optio		Mixed on		Don't eat rice		
Bread consumption	White Insert % of Qn 12 res	Wholemeal sponses for each option		Mixed n		Don't eat bread		
Milk consumption		Low fat Skimmed				Don't drink milk		
Trimming of fat/skin from meat and poultry	All Insert % of Qn 14 res	Some ponses for each option		None 1		Don't eat meat		
Oil used for cooking	Saturated Insert % of Qn 1 <mark>5 res</mark>	Blended Polyuns ponses for each optio				Don't cook at home		
Use of salt and sauces	5 6.6.6	After tasting sponses for each option				Don't use		

D. CIGARETTE SMOKING

	FREQUENCY	PERCENTAGE (%)
Smoked cigarettes	Daily Occasionally Never	% of Qn 17 responses for option 1 % of Qn 17 responses for option 2 % of Qn 17 responses for option 3
Intention to quit	Insert % of Qn 18 responses that s	aid yes
Attempt to quit	Insert % of Qn 19 responses that s	aid yes
Number of attempts to quit	I 2 3 More than 3	% of Qn 20 responses for option 1 % of Qn 20 responses for option 2 % of Qn 20 responses for option 3 % of Qn 20 responses for option 4
Method to quit	Cold turkey Delay Gradual reduction Nicotine Replacement Therapy Medication Others	% of Qn 21 responses for option 1 % of Qn 21 responses for option 2 % of Qn 21 responses for option 3 % of Qn 21 responses for option 4 % of Qn 21 responses for option 5 % of Qn 21 responses for option 6

E. ALCOHOL INTAKE

- [No. of Qn 22 responses that said I or more days]% of staff members reported that they had drunk alcohol in the last week.
- [Insert % of Qn 23 responses that said yes] had drunk more than five drinks in any one occasion (considered binge drinking).
 - Of these people, [insert % of Qn 23 responses] that binge drank on one occasion, [insert % of Q 23 responses] binge drank on two or more occasions.

F. HEALTH SCREENING

	FREQUENCY	PERCENTAGE (%)
Screening for high blood pressure	Less than two years ago More than two years ago Never had any	% of Qn 24 responses for option 1 % of Qn 24 responses for option 2 % of Qn 24 responses for option 3
Screening for obesity	Less than one year ago More than one year ago Never had any	% of Qn 25 responses for option 1 % of Qn 25 responses for option 2 % of Qn 25 responses for option 3
Screening for diabetes	Less than three years ago More than three years ago Never had any	% of Qn 26 responses for option I % of Qn 26 responses for option 2 % of Qn 26 responses for option 3
Screening for high blood cholesterol	Less than three years ago More than three years ago Never had any	% of Qn 27 responses for option 1 % of Qn 27 responses for option 2 % of Qn 27 responses for option 3
Screening for colorectal cancer (It is recommended that individuals aged 50 years and above screen for colorectal cancer through FIT annually.)	Less than one year ago More than one year ago Never had any	% of Qn 28 responses for option 1 % of Qn 28 responses for option 2 % of Qn 28 responses for option 3
Female staff's last Pap smear test	Less than three years ago* More than three years ago Never had an	% of Qn 29 responses for option 1 % of Qn 29 responses for option 2 % of Qn 29 responses for option 3
Female staff's last screening mammogram (It is recommended that women aged 40-49 years receive screening mammogram annually, and women aged 50-64 years biennially.)	Less than one year ago One to two years ago More than two years ago Never had any	% of Qn 30 responses for option I % of Qn 30 responses for option 2 % of Qn 30 responses for option 3 % of Qn 30 responses for option 4

 $^{^{\}ast}$ as recommended in Appendix D

G. MENTAL WELLBEING

Mental wellbeing ratings on a 5-point scale (5 = high) were as follows:

Mental wellbeing rating		
 I am able to deal with day to day stressors. 		
 I generally feel relaxed and calm. 		
 I can effectively manage my emotions (e.g. anger, sadness, anxiety). 		
 I am able to cope with life's challenges. 		
 I have the strong support of my family and friends. 		

H. WORK ENVIRONMENT

Work environment ratings on a 5-point scale (5 = high) were as follows:

Work environment rating		
 I am proud to say I work at my company. 		
 I see the connection between the work I do and the organisation's overall strategic objectives. 		
 My workload is a cause of concern to me. 		
 My work gives me a sense of accomplishment. 		
 My contributions at work are recognised. 		
At work, my opinions and ideas seem to count.		
 I am given adequate authority to make decisions appropriate to my job scope. 		
 I can easily balance the demands of work and home life. 		

Discussion

[Discuss possible interpretations of the data].

Conclusion

[Conclusion can include any other data that you plan to collect and also your possible next steps].

Appendix D

Interpreting survey findings

Benchmarking against recommendations

The most important reason for conducting a survey of employee health practices is to provide a baseline against which you can judge future trends. It can also be useful in helping you to design your programme and determine appropriate targets. Your programme should address the four key health behaviours simultaneously. You may also choose to focus efforts on the proportion of employees who do not meet health promotion recommendations:

Physical activity

- 150 minutes of moderate-intensity (e.g. brisk walking) or 75 minutes of vigorous-intensity aerobic activity (e.g. running, jogging or playing basketball) per week.
- The most popular activities among employees and their indications of interest will help you estimate the potential impact of providing participatory opportunities.

Dietary practices

- Consumption of at least two servings of fruit and two servings of vegetables daily.
- For those who eat rice, consumption of unpolished varieties.
- For those who eat bread, consumption of the wholemeal variety.
- For those who drink milk, consumption of the reduced-fat varieties.
- For those who eat meat and/or poultry, removal of fat and skin.
- The use of mono- or poly-unsaturated oils in cooking instead of varieties with saturated fat.
- The addition of salt and sauces only after tasting

Smoking

There is no safe level of smoking. 16% of the working population in Singapore smoke. Obviously, we would like to see this figure reduced as far as possible.

Alcohol

- Concern here is primarily for those who consume five or more drinks at one time. Examples of one standard drink:
 - Two-thirds of a regular can of beer (220ml)
 - One glass of wine (100 ml)
 - One nip of spirit (30ml)
- Female should not take more than two standard drinks per day, while males should not take more than three standard drinks per day.

Health Screening

Health Screening recommended frequency and test

	RECOMMENDED AGE FOR SCREENING	SCREENING TEST / FREQUENCY
Obesity	18 years old and above	Check body mass index Once every year
High Blood Pressure	18 years old and above	Check blood pressure Once every two years or more frequently as advised by doctor
Diabetes	40 years old and above	Check fasting blood glucose Once every three years or more frequently as advised by your healthcare provider
High Blood Cholesterol	40 years old and above	Check fasting blood lipids Once every three years or more frequently as advised by your healthcare provider
Breast Cancer (Women)	50 years old and above	Screening mammography Once every two years
Cervical Cancer (Women)	25 years old and above, who have ever had sexual intercourse	Pap Smear Once every three years
Colorectal Cancer	50 years old and above	Faecal Immunochemical test (FIT) Once every year

Mental Wellbeing

You should note the proportion of employees who express disagreement (below 3 on the scale) which can be used to gain a better understanding of your workplace's mental health climate.

Work environment

These items are largely exploratory but can be used to identify aspects of your organisation's operation that may benefit from attention. Organisational function has a significant impact on productivity and health.

Appendix E

Sample interest survey

This is to be used by the workplace health manager on how to conduct an interest survey. Below are five steps to help you in developing your own survey.

- I. Skim through the questions.
- 2. Based on the identified needs of the health practices survey, consider the menu of interventions (see Section 5c: Writing a Programme Plan).
- 3. Choose specific interventions depending on the needs identified (e.g. healthy eating, physical exercise, mental wellbeing, smoking control and back care).
- 4. Questions should be as specific as possible to facilitate planning. For example, when asking for the type of activity employees will be interested in:
 - Physical exercise aerobics, kickercise, aqua-aerobics, gym training, table tennis, jogging and street soccer.
 - Recreation line dancing, bowling, excursions, art and craft and karaoke.
- 5. Check if all the questions are necessary.

The interest survey on the following page is not a model interest survey. The activities listed are not exhaustive and are meant to give an idea of what might be included (see Section 5b: Choosing Interventions). Activities chosen for the survey need to be customised to suit the needs of the organisation.

This survey is strictly confidential. Please give us your frank opinion and we will keep you informed about future VVHP activities. Please return the completed survey to		interest survey					
you to take a few minutes to tell us your needs and preferences by filling up this survey. This survey is strictly confidential. Please give us your frank opinion and we will keep you informed about future WHP activities. Please return the completed survey to	De	•					
This survey is strictly confidential. Please give us your frank opinion and we will keep you informed about future VVHP activities. Please return the completed survey to				_	-	_	
future WHP activities. Please return the completed survey to	yo	u to take a few minutes to tell u	ıs your r	nee	ds and	prefe	rences by filling up this survey.
Description		This survey is strictly confid	dential. P	lea	se give	us you	ur frank opinion and we will keep you informed about
Description	fut	cure WHP activities. Please retui	rn the c	om	pleted	surve	y to (name of health promoter)
1. Please tick the activities you are interested in (you can choose more than one), and rank them according to priority, I being the activity you are most likely to participate in. 2. Please tick the to indicate the other preferences. ACTIVITIES 1. HEALTHY EATING							,
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Supermarket tours		(on festival food wrapping e.g. ketupats	i,			5	If it is not possible to use a venue in the company for the activity
- Supermarket tours - Tasty Challenge Makan Recce Group 2. TRIM TEAM - Aqua-aerobics - Street soccer - Superminent - Aqua-aerobics - Street soccer - Superminent - Superminent - Aqua-aerobics - Street soccer - Superminent - S		guilt-free rice dumplings)	• ′			ا ا	
COST INVOLVEMENT I. I would be willing to pay a small amount to help with costs. Yes No		 Supermarket tours 	1	2	3		
Aqua-aerobics		• Tasty Challenge Makan Recce Group	1	2	3		inear the workplace
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Please indicate how much you would be willing to pay: between \$							☐ Yes ☐ No
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Before normal work hours Lunch time (to) After work (starting time)	I.	My preferred timing is					
Lunch time (to) After work (starting time) exciting WHP programmes at our company?	••					- 1	Do you have any other comments that will help us plan fun and
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3. I prefer the activity to be held on (tick all that apply)	3	I prefer the activity to be held on (tick)	all that an	ılv)			(WHP personnel) by
Mon Tue Wed Thu Fri (date). Thank you.	٠.						(date). Thank you.