REPORT BY THE NATIONAL TRIPARTITE COMMITTEE ON WORKPLACE HEALTH

November 2010
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The workplace is recognised by the World Health Organisation as an ideal setting to support the promotion of health within a large community. Workplace health promotion directly influences the physical, mental, economic and social well-being of the employees and their families. In Singapore, the ageing workforce necessitates a greater emphasis on employees’ health, especially in chronic disease management and early adoption of healthy lifestyles. Against the backdrop of an ever-evolving corporate landscape, we need to pay extra attention to factors that affect the workplace and its people, in order to improve and sustain the promotion and management of employees’ health in the long run.

The report is presented in three sections, and highlights recommendations applicable to employers, employees and to government in cross-agency collaborations. This report embodies the vision and experiences of many dynamic leaders from the corporate and public sectors. Besides reaffirming the importance of tripartism in the promotion of workplace health, it also showcases practical and targeted recommendations that we hope will help both employers and employees ease into a sustained journey towards workplace health.

The second National Tripartite Committee on Workplace Health builds upon the work of the previous committee and that of others which address the health of our workforce, such as the Tripartite Committee on Employability of Older Employees. We are grateful to the individuals and organisations who have contributed to this report. We trust that the recommendations distilled from the experience, wisdom and insights of the committee will be helpful in shaping the next stage of developments for workplace health promotion in Singapore.

LUCAS CHOW
Co-Chairperson
National Tripartite Committee on Workplace Health

YEOW GUAT KWANG
Co-Chairperson
National Tripartite Committee on Workplace Health
EXECUTIVE SUMMARY

Singapore’s workforce is ageing rapidly. If not managed properly, employees’ ill-health will threaten our business and economic developments. Our strategies and efforts to promote workplace health need to evolve in addressing these challenges. A resultant healthier and more active working population will in turn increase the competitiveness and productivity of our workforce, allow re-employment of older employees, and keep rising healthcare costs in check.

Improving the health of our workforce is a joint responsibility of the government, employers and employees. In 1999, the first National Tripartite Committee on Workplace Health formalised strategies to improve employees’ health in Singapore. A decade of efforts has yielded commendable results in that three in five private companies practise workplace health promotion (WHP). However, it conversely means that 40% of employees currently still do not benefit from such programmes. More can be done to improve the prevalence of WHP.

In January 2009, the second National Tripartite Committee on Workplace Health (TriCom)¹ was convened to review current WHP efforts in Singapore, as well as take stock of the changing dynamics within the corporate landscape and propose strategies for the next lap (Refer to Figure 1).

Figure 1: Key Thrusts of the National Tripartite Committee on Workplace Health

¹Membership and terms of reference of the committee can be found in Appendices A and B
i. **Enhancing National Ecosystem for Workplace Health**

The TriCom strongly advocates that a comprehensive approach be adopted towards the integration and alignment of various national policies, guidelines and frameworks that have significant influence over the promotion of workplace health in Singapore. Specifically, there are five practical opportunities to consider:

1. Standardise WHP programme quality and processes
2. Integrate WHP with workplace safety and health (WSH) framework
3. Contribute to re-employment policies for older employees
4. Align and collaborate with other topical committees on workplace health
5. Leverage on regulated health checks for selected occupations

ii. **Engendering Mindset Shift Among Employers**

Besides enhancing the national ecosystem for workplace health, the TriCom recognises the need to review the current practices and change mindsets of companies and WHP service providers. We need to engender better design and delivery of effective and targeted programmes to achieve tangible improvements in employees’ health.

Engaging the employers is a critical strategy. To sustain this engagement, we need to deepen our understanding of employers and their underlying business motivations, provide innovative solutions, and constantly seek to overcome structural barriers in employers’ uptake of WHP programmes. The TriCom has come up with four areas where more employers can be included as part of the improved WHP journey in Singapore:

6. Expand accessibility of WHP programmes for Small and Medium Enterprises (SMEs)
7. Increase WHP funding for SMEs to promote uptake of WHP
8. Innovate engagement methods for selected industries
9. Explore the use of incentives to motivate employers and employees towards sustained healthy behaviours

iii. **Engaging Employees in Health Management**

Having a supportive ecosystem and committed employers to provide and facilitate WHP programmes are only the means to encourage individuals to actively manage their health towards good health and well-being. It is equally important that the WHP facilitators\(^2\) and employees themselves understand the rationale and acknowledge the importance of good lifestyles, early detection of chronic diseases and be motivated to seek appropriate care and interventions to manage existing risks and conditions. The TriCom advocates three initiatives to engage individuals in health management:

\(^2\)WHP facilitators are employees who are tasked to oversee the planning and implementation of Workplace Health Promotion programmes in the workplace.
10. Incorporate WHP programmes and services into the Memorandum of Understanding of Collective Agreements
11. Intensify education on the rationale and importance of appropriate health screening and interventions
12. Raise the competencies of WHP facilitators and their expectations for high quality WHP programmes

The recommendations shared in this final report cover an array of areas that collectively work towards improving the health and well-being of our employees. The various recommendations, taken as a whole, will create a new foundation to take Singapore’s WHP efforts to the next level.

The implementation of these recommendations will require careful consideration and coordination among various agencies, and sustained collaborations with tripartite partners. The recommendations and strategies outlined should be reviewed regularly to maintain their relevance and effectiveness.
## List of Recommendations

<table>
<thead>
<tr>
<th>No.</th>
<th>Recommendations</th>
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<tbody>
<tr>
<td><strong>Enhancing National Ecosystem for Workplace Health</strong></td>
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<td>1</td>
<td><strong>Expand Workplace Health Promotion (WHP) components in the Business Excellence (BE) Framework</strong></td>
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<td>• Components of a WHP programme should be articulated clearly in the Interpretation Guide of the BE framework under the ‘People’ category. This will provide specific guidance to applicants and assessors of the BE framework on what constitutes a commendable WHP programme.</td>
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<td>• Health Promotion Board (HPB) and Ministry of Manpower (MOM) should collaborate to introduce a framework on Integrated WSH Services at the workplace which aims to enable companies to look at workplace health issues holistically through an integrated and multi-disciplinary approach. In addition, these agencies should jointly develop support services and infrastructure to build capability and competency of employers and service providers in implementing this framework.</td>
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<td><strong>Incorporate WHP into the supplementary document of the Tripartite Guidelines on the Re-employment of Older Employees</strong></td>
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<td>• WHP programme should form part of the strategy in making re-employment practices sustainable. Advice on healthy lifestyle for older workers and corporate best practices on healthy ageing programme should be incorporated into the NTUC’s Re-employment Guide for employers and employees.</td>
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<td>• Importance of a holistic WHP programme and availability of various corporate support schemes should be articulated to employers. This should be incorporated into the Frequently Asked Questions of the Tripartite Guidelines on the Re-employment of Older Employees.</td>
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<td>Leverage on compulsory health checks and regulations for selected industries and occupational groups</td>
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<td>• HPB should collaborate with MOM, Land Transport Authority (LTA) and National Environment Agency (NEA) to promote essential health screening when employees are due for their compulsory health checks or immunisations. Educational messages can also be weaved into relevant communication materials to be disseminated through various channels.</td>
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| 9   | Explore the use of incentives to motivate employers and employees towards sustained healthy behaviours  
     • The TriCom recommends an integrated model that focuses on effective monitoring and systematic follow-up care for employees to sustain healthy behaviours. Corporate incentives can be considered within the model to encourage desired behaviours.  
     • As this conceptual model is currently not practised in Singapore, the TriCom recommends testing it through a pilot study before adapting for larger-scale implementation. |
|     | Engaging Employees in Health Management |
| 10  | Incorporate clauses on provision of regular health screening and health promotion activities into Memorandum of Understanding (MOU) of Collective Agreements  
     • The TriCom recommends the development of standard clauses on WHP to stipulate the provision of essential health screening and WHP programme on four key pillars of healthy lifestyle.  
     • The recommended WHP clauses should be included in the MOU of the Collective Agreements between employers and unionised employees. |
| 11  | Intensify education and publicity efforts to increase employees’ awareness on the importance of screening and follow-up management  
     • Education and publicity efforts to increase employees’ awareness on the importance of screening and follow-up management after screening should be intensified. Key messages to be included are:  
       - Being fit and healthy improve employability  
       - Essential screening can be affordable  
       - Early detection & optimal management of chronic disease can result in lower healthcare cost and prevent onset of complications  
     • Confidence measures for employers to reassure employees of medical confidentiality should be in place. The ‘Code of Practice on WHP’ should also provide guidance on how to ensure employees’ medical confidentiality during health screening. |
| 12  | Raise competency and expectations of WHP facilitators  
     • The TriCom advocates raising the competency of WHP facilitators in planning and implementing a well-participated WHP programme. HPB should facilitate this through sharing and profiling of best practices to address challenges in employee engagement and participation. |

3 A collective agreement is an agreement between employers and employees on employment, non-employment, terms of employment or the conditions of work. The duration of a collective agreement is specified and by law shall not be less than 2 years or more than 3 years.
BACKGROUND

Three out of five adult Singapore residents work\(^{11}\). Thus, the workplace provides a natural setting to promote healthy lifestyles among our working population. However, the diversity of industries, company sizes, and its people make generic workplace health promotion (WHP) solutions less effective in improving health and well-being at work. There is a need to have a good understanding of the environment and our people so that we can have strategies that work collectively towards good health.

The first National Tripartite Committee on Workplace Health was spearheaded by the Singapore National Employers’ Federation (SNEF) in July 1999. Its final report in September 2000 included flagship strategies such as the WHP Grant that contributed positively to the prevalence and quality of workplace health programmes in Singapore. Ten years ago, only one in three companies had a structured WHP programme; today, we have made much progress with three in five companies having a WHP programme\(^{8}\).

Our workforce is ageing rapidly (Refer to Figure 2), and ill-health poses a serious individual, business, and economic threat to our way of life. Therefore, our WHP efforts should also evolve with the changing demographics and attendant needs. The state of our population’s health is one of the critical factors in shaping national strategies such as the re-employment of older employees and in the management of rising healthcare costs. It is thus important that we expand, synergise and strengthen our efforts in promoting healthy lifestyles to include the promotion of mental well-being, workplace health screening, more effective follow-up and management of those diagnosed with chronic conditions.

Improving the health of our people is a joint responsibility of the government, employers and employees. It is against this backdrop that the Ministry of Health (MOH) and the Health Promotion Board (HPB) formed the second National Tripartite Committee on Workplace Health (TriCom) from January 2009 to December 2010, to develop and evolve strategies to keep our working population healthy.

**Figure 2: Ageing Workforce Projection\(^{14}\)**
ENHANCING NATIONAL ECOSYSTEM FOR WORKPLACE HEALTH

As a nation, Singapore needs to maintain its competitiveness against other economies. A highly-skilled and efficient workforce is the hallmark of Singapore’s competitive advantage. Achieving improvements in employees’ health directly benefits the productivity of the company and improves the quality of their working life.

The TriCom advocates strongly for the adoption of a comprehensive approach towards integration and alignment of various policy intents, guidelines and frameworks that have significant influence over the promotion of workplace health in Singapore. Specifically, there are five practical opportunities to consider:

1. **Standardise WHP Programme Quality and Processes**

   Under the biennial Singapore HEALTH Award (SHA), HPB provides assessment criteria for companies who wish to apply for the award. The SHA comprises different award levels and categories that highlight key areas such as the four pillars of healthy living and leadership in making a company’s WHP programme a formidable advantage.

   Since SHA is the national recognition for good WHP programmes, its principles should also be articulated clearly across other national programmes that have an impact on employees’ health. Synchronisation of efforts on WHP quality and processes among agencies will compound the health benefits across our working population in the long term.

   The TriCom hence recommends that the critical success factors of a WHP programme should be weaved into existing relevant frameworks where possible. One such opportunity is SPRING Singapore’s Business Excellence (BE) framework*. The BE standard provides organisations with a holistic approach to managing people, systems, processes and customers in order to achieve a high level of performance. Key components of a WHP programme should be recognised as enablers for organisations to attain business excellence.

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**Recommendation # 1**

- **Components of a WHP programme should be articulated clearly in the Interpretation Guide of the BE framework under the ‘People’ category. This will provide specific guidance to applicants and assessors of the BE framework on what constitutes a commendable WHP programme.**

- **The ‘Results’ category of the BE framework should be expanded to include measurements and indicators on employees’ health. This will serve to drive the overall quality assurance, effectiveness and success of WHP programmes.**

* Executive summary of the BE framework can be found in Appendix C
2. **Integrate WHP with Workplace Safety and Health (WSH) Framework**

The WSH framework, administered by the Commissioner for WSH under the Ministry of Manpower (MOM), was reformed in 2005. The framework was designed to engender a paradigm shift that focused on greater industry ownership to achieve better WSH outcomes in the workplace. A performance-based approach was introduced which required stakeholders to proactively identify and mitigate WSH risks.

While we have seen marked improvements in the workplace fatality rate over the years, workplace health issues continue to have a significant impact on employees’ health, well-being and workability. MOM and the WSH Council have launched a national workplace health strategy in April 2010 to accelerate Singapore’s progress on workplace safety and health.

Moving forward, we need to adopt a comprehensive, sensible and employee-centric approach that shares common strategic objectives for a healthy and safe workplace. For example, our promotional efforts have to be comprehensive to ensure that the messaging on workplace health is coherent and coordinated across the various agencies, such that occupational diseases attributed to exposure to hazardous chemicals and noisy work processes, and chronic disease management can all be addressed holistically.

The common objectives are:

- Maintain a healthy and productive workforce for Singapore
- Prevent work-related injuries and illnesses, including occupational and chronic diseases
- Maintain and enhance the workability of an individual

MOM is considering the development of WSH Services to effect this integration. Under the World Health Organisation, International Labour Organisation and International Commission on Occupational Health (WHO-ILO-ICOH) Joint Effort on the Development of Basic Occupational Health Services (BOHS) implementation guidelines, there are 12 elements that outline this approach. Half of these elements are currently enforced under the legislative tools for WSH and supported by various industry guidelines.

The TriCom advocates addressing the other half by retrofitting current WHP principles and tools into the WSH Services (Refer to Figure 3). A Code of Practice on WHP should be jointly developed by MOM and HPB to standardise guidance on WHP programme design and delivery. It should then be employed to shape the training for WHP facilitators and WSH professionals to expand their competencies.

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*Recommendations on integration opportunities can be found in Appendix D*
Figure 3: Integrating WHP with WSH Framework

Healthy and Safe Workplace

Strategic Objectives:
1. Maintain a healthy and productive workforce
2. Prevent work-related injuries and illnesses
3. Maintain and enhance workability of individual

Integrated Workplace Safety and Health Services

Orientation and Planning
- General preventive, curative and rehabilitation health services
- Participation in first-aid and emergency readiness

Information and Initiatives
- Evaluation
- Assessment of health and safety risks
- Surveillance of workers’ health
- Diagnosis of occupational and work-related diseases
- Preventive Actions
- Record Keeping

Supportive Environment for WHP:
1. Framework on WHP
   - Code of Practice on WHP
2. WHP Funding
3. Corporate Health Programmes
4. Training on WHP for service providers and WHP facilitators
5. Recognition via the Singapore HEALTH Award

Supportive Environment for WSH:
1. Legislative Framework
   - Workplace Safety and Health Act
   - Subsidiary legislations
2. Guidelines
   - Industry guidelines
   - Codes of Practice
3. Training and certification
4. Recognition via the WSH Award

Code of Practice on WHP
- Framework for workplace safety and health promotion
- Guidelines on elements of a holistic WHP programme
  - Proactive health management
  - Monitoring and assessing
  - Process framework for WHP
  - Plan, Do, Check and Action

Recommendation #2

- Health Promotion Board (HPB) and Ministry of Manpower (MOM) should collaborate to introduce a framework on Integrated WSH Services at the workplace which aims to enable companies to look at workplace health issues holistically through an integrated and multi-disciplinary approach. In addition, these agencies should jointly develop support services and infrastructure to build capability and competency of employers and service providers in implementing this framework.

- HPB and MOM should jointly sponsor a ‘Code of Practice on WHP’, which will be used to provide practical guidance on the implementation of health screening and health programmes in the workplace.

- HPB and MOM should collaborate on cross-training opportunities for WHP facilitators and WSH professionals. This will facilitate greater synergy between WHP and WSH initiatives by involving WSH professionals in planning and organising WHP programmes.
3. **Contribute to Re-employment Policies for Older Employees**

The Tripartite Committee on the Employability of Older Employees set up in March 2005 recommended measures to:

a. Enhance the employability of older employees and help them stay employed longer so as to raise the effective retirement age beyond 62
b. Positively shape the perceptions and mindsets of employees and the public towards the employment of older employees

The government has since accepted their recommendations and will be enacting the re-employment legislation in 2012. This will mean that more employees can work beyond the current retirement age of 62, up to 65, and possibly to 67 in the future*. Employers are required to offer re-employment to all employees who reach the retirement age of 62 years if the employee has satisfactory work performance and is medically fit. The latter criterion thus signifies the importance for employees to stay healthy and fit to benefit from re-employment opportunities.

The TriCom strongly recommends educating both employers and employees on the importance of WHP in light of the introduction of re-employment legislation. Employees should be educated on the importance of staying fit and disease-free. Best practices among companies who have WHP programme for their older employees should also be showcased.

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**Recommendation # 3**

- **WHP programme should form part of the strategy in making re-employment practices sustainable.** Advice on healthy lifestyle for older workers and corporate best practices on healthy ageing programme should be incorporated into the NTUC’s Re-employment Guide for employers and employees.

- **Importance of a holistic WHP programme and availability of various corporate support schemes should be articulated to employers.** This should be incorporated into the Frequently Asked Questions of the Tripartite Guidelines on the Re-employment of Older Employees.

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4. **Align and Collaborate with Other Topical Committees on Workplace Health**

Corporate leaders are often asked to champion and provide vision and directions in matters related to their industry and their employees. Especially for high priority national health topics such as mental well-being and HIV/AIDS, the advice and personal support of leaders on the approach to address these topics at the workplace is invaluable. There are two business alliances that look into mental health and HIV prevention and education for workplaces in Singapore – the iCARE Mental Health Alliance and the AIDS Business Alliance*. Both alliances have representation in the TriCom.

*Summary and terms of reference for iCARE Mental Health Alliance and AIDS Business Alliance can be found in Appendix E
The TriCom thus recommends aligning outreach strategies across all three committees. The two alliances should continue to leverage on each other’s outreach opportunities as well as the existing WHP supporting resources and services.

**Recommendation # 4**

- The TriCom, iCARE Mental Health Alliance and AIDS Business Alliance should regularly share and update on common outreach platforms and tap on each other to promote workplace health, mental well-being and HIV/AIDS awareness.

5. **Leverage on Regulated Health Checks for Selected Occupations**

Different occupations and services are regulated by different public agencies in Singapore. There are requirements for some workers or licensees to undergo periodic medical examinations or immunisations. However, these medical examinations and immunisation requirements often do not include essential health screening for chronic disease conditions. A licensee or worker, who falls under the recommended age for certain types of screening, should make use of the opportunity for early detection when they go through their required medical check-ups.

The TriCom strongly recommends that suitable screening messages be incorporated into these regulatory practices (Refer to Table 1), so that these workers or licensees enjoy greater convenience and easier access to essential health screening.

**Table 1: Extension of Health Screening Messages via Regulatory Agencies**

<table>
<thead>
<tr>
<th></th>
<th>Ministry of Manpower</th>
<th>Manufacturing Industry: Industrial workers (90,000)</th>
<th>MOM to include promotional letters on health screening with the notification letters on medical examination to companies</th>
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<tr>
<td>1</td>
<td>Land Transport Authority</td>
<td>Transport Industry: Vocational license holders i.e. taxi drivers, bus drivers, bus attendants (177,000)</td>
<td>LTA to include promotional flyers on health screening with the notification letters on medical examination to license holders</td>
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<tr>
<td>2</td>
<td>National Environment Agency</td>
<td>Food Services: Food handlers (200,000)</td>
<td>NEA to disseminate promotional message on health screening at various enquiry counters for food services</td>
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**Recommendation # 5**

- HPB should collaborate with MOM, Land Transport Authority (LTA) and National Environment Agency (NEA) to promote essential health screening when employees are due for their compulsory health checks or immunisations. Educational messages can also be weaved into relevant communication materials to be disseminated through various channels.
ENGENDERING MINDSET SHIFT AMONG EMPLOYERS

Besides enhancing the national ecosystem for workplace health, the TriCom recognises the need to review the current practices and change mindsets of companies and WHP service providers. We need to engender better design and delivery of effective and targeted programmes to achieve tangible improvements in employees’ health.

Engaging the employers is a critical strategy. To sustain this engagement, we need to deepen our understanding of employers and their underlying business motivations, provide innovative solutions, and constantly seek to overcome structural barriers in employers’ uptake of WHP programmes. The TriCom has come up with four areas where more employers can be included as part of the improved WHP journey in Singapore:

6. Increase Accessibility and Support of WHP programme for small and medium enterprises (SMEs)

SMEs inherently face more resource constraints than larger companies. This inhibits their readiness to take on programmes that require long-term investment or do not generate short-term tangible benefits that add to their bottom lines.

However, there are at least 700,000 employees employed by SMEs. This indicates a significant proportion of employees not having access to suitable WHP programmes and health interventions (Refer to Figure 4). This could mean increased risk of chronic diseases, falling sick and compromising on overall productivity for the nation.

Figure 4: Prevalence of WHP by Workforce Size (Private sector companies with ≥ 50 workforce)
Since SMEs may also not enjoy economies of scale to bring in providers for health screening and interventions, WHP programme can perhaps be re-designed and anchored at geographical clusters, and promoted through industrial and commercial building landlords and facilities managers (Refer to Figure 5). WHP programme should also be made simple and easy for SMEs to embark on.

**Figure 5: Illustration of the WHP@SMEs’ Doorsteps Programme**

**Recommendation # 6**

- A self-sustaining health ecosystem should be developed at geographical clusters of SMEs by bringing health screening and health programmes to the doorsteps of SMEs (WHP@SMEs’ Doorsteps programme).

- Health screening should be easily accessible to SME employees via programmes such as ‘Screening on Wheels’.

- An off-the-shelf comprehensive and flexible WHP package should be offered to SMEs. The package should comprise health screening and WHP interventions on four key areas of healthy lifestyle (i.e. physical activity, healthy eating, mental well-being and smoking control), to be delivered by pre-selected vendor(s).
7. **Increase WHP Funding for SMEs to Promote Uptake of WHP**

To many SMEs, the most critical support would be in the form of financial assistance. The TriCom recommends that separate terms and conditions be applied to the WHP Grant for SMEs. For example, the co-funding ratio can be calibrated to give more assistance to the SMEs. Reimbursements for off-site health programmes should be allowed since most SMEs do not have dedicated facilities to run on-site programmes for their employees.

**Recommendation # 7**

- WHP Grant funding for SMEs should be enhanced to fund up to 90% for WHP programmes, capped at $10,000 per application.

- The Grant guidelines should be enhanced to fund for off-site health programmes, such as basic health screening at CDMP-GP clinics, chronic disease intervention programmes, registration fees for health talks and workshops, and registration/membership fees for exercise programmes.

8. **Develop Innovative Engagement Methods for Selected Industries**

Although there have been a growing proportion of companies embracing WHP programme over the years, it is a more difficult ascent for some industries due to their business nature and operating environment. While we continue to provide corporate recognition and support schemes for companies, we also need to intensify our efforts for industry sectors that face more obstacles.

The TriCom recommends that the outreach strategies for these companies should take on a more innovative approach. Efforts should be channelled to industry sectors that have relatively lower WHP prevalence than the national average of 59%\(^{(1)}\) (Refer to Figure 6), and yet employ a large workforce. Targeting companies from these sectors would translate to a larger number of employees accessing to and benefiting from basic WHP programme and services.

Instead of focusing solely on getting through to individual companies, there could be more efficient ways to work with potential partners such as trade associations and business chambers, to promote good health and interventions accessible to employees.

**Recommendation # 8**

- Industry sectors with relatively lower prevalence of WHP, namely Hospitality, Wholesale and Retail, Transport and Logistics, IT and Communication, and Finance industries should be targeted through a more customised approach. Industry workgroups, comprising representatives from trade associations, unions and private companies should be set up to provide industry feedback on the needs and challenges of the respective industries. This can be coupled with customised outreach activities and capacity building sessions for these industries.
9. **Explore the Use of Incentives to Motivate Employers and Employees towards Sustained Healthy Behaviours**

A good corporate health and wellness programme can be a key differentiating factor in a company’s ability to attract and retain talent. It is also an important strategy to better prepare the workplace for imminent issues that accompany an ageing workforce. Even as more workplaces embark and embrace workplace health programmes, it is important that these investments be channelled in the most efficient way to reap good health outcomes.

Mercer Singapore was engaged to conduct an environmental scan on international corporate health solutions and local corporate incentives programmes. The objective was to find out how different corporate stakeholders view the use of incentives in promoting desired health behaviours among employees. The subsequent findings were used to design an integrated solution model to sustain healthy behaviours.

Mercer’s findings\(^7\) reaffirmed the need to shape the workplace health ecosystem towards providing a structured process that can better manage employees’ health. Conceptually, the integrated solution aims to address most of Mercer’s findings by helping companies systematically improve employees’ health through the combination of active health management, effective monitoring, and sustainable incentives (Refer to Figure 7).

\(^7\) Executive Summary of Mercer’s report on Corporate Incentives Programmes can be found in Appendix F
Ultimately, the integrated solution hopes to guide companies in designing a health management programme using existing resources or with an initial investment to improve the monitoring mechanism, to create a self-sustaining process that drives higher returns in health outcomes and better manage risks. In turn, companies can be more confident that their workplace health management system is well-designed towards better health for all.

The TriCom recommends piloting an integrated solution model that drives these principles (Refer to Figure 8):

a. Provide systematic follow-up care according to the needs of employees, after a comprehensive health risk assessment
b. Encourage employers to play a more active role in managing and improving their employees’ health
c. Empower and encourage employees to manage and improve their health risks
d. Calibrate corporate incentives to motivate and sustain desired healthy behaviours

Figure 7: Conceptual Model of the Integrated Solution for Workplace Health Management
Figure 8: Pilot Process Model of the Integrated Solution for Workplace Health Management

Recommendation #9

- The TriCom recommends an integrated model that focuses on effective monitoring and systematic follow-up care for employees to sustain healthy behaviours. Corporate incentives can be considered within the model to encourage desired behaviours.

- As this conceptual model is currently not practised in Singapore, the TriCom recommends testing it through a pilot study before adapting for larger-scale implementation.
ENGAGING EMPLOYEES IN HEALTH MANAGEMENT

The final piece of the strategy focuses on the employees themselves. Having a supportive ecosystem and committed employers to provide and facilitate WHP programme are only the means to encourage individuals to actively manage their health towards good health and well-being. All efforts will come to naught if employees are unresponsive towards the supportive infrastructure, educational messages and activities that are available.

Hence, it is of utmost importance that the employees and WHP facilitators understand the rationale and acknowledge the importance of healthy lifestyles, early detection for chronic diseases and be motivated to embark on appropriate care and interventions to manage existing risks and conditions. The TriCom advocates three initiatives to engage individuals in health management:

10. Incorporate WHP Programme and Services into the Memorandum of Understanding (MOU) of Collective Agreements

Embracing and practising the essential pillars of a healthy lifestyle (i.e. physical activity, healthy eating, mental well-being and smoking control) is important to lower one’s risk of chronic diseases, and it also provides wholesome quality of life. A comprehensive WHP programme should comprise all four pillars of healthy lifestyle.

The TriCom advocates that the unions support the inclusion of clauses on WHP programmes and services when the MOUs of the Collective Agreements between employers and unionised employees are negotiated. The multi-angled strategy to permeate WHP across all levels will not be complete without the unions’ support.

Recommendation # 10

- The TriCom recommends the development of standard clauses on WHP to stipulate the provision of essential health screening and WHP programme on four key pillars of healthy lifestyle.

- The recommended WHP clauses should be included in the MOU of the Collective Agreements between employers and unionised employees.

11. Intensify Education on the Rationale and Importance of Appropriate Health Screening and Interventions

The employees need to be aware of when they should be undergoing screening and what conditions they screen for. Unnecessary screenings not only waste resources and may even do harm to the individual. Furthermore, incomplete follow-up care greatly diminishes the value of any screening. Educational messages on the benefits of health screening and follow-up management should thus be specific, yet simple for comprehension and action.

* Recommended WHP clauses can be found in Appendix G
Recommendation # 11a

- **Education and publicity efforts to increase employees’ awareness on the importance of screening and follow-up management after screening should be intensified. Key messages to be included are:**
  - Being fit and healthy improve employability
  - Essential screening can be affordable
  - Early detection and optimal management of chronic disease can result in lower healthcare cost and prevent onset of complications

Employees constantly harbour fears that their medical information will be made known to their employers after a workplace health screening exercise, resulting in discrimination, unfair treatment or wrongful dismissals. This clouds their decision to go for timely health screenings and they might miss opportunities for early interventions and treatment of underlying health conditions.

The TriCom recommends that employers build up confidence measures such as pre-screening communication sessions to employees or through healthcare providers to reassure medical confidentiality.

Recommendation # 11b

- **Confidence measures for employers to reassure employees of medical confidentiality should be in place. The ‘Code of Practice on WHP’ should also provide guidance on how to ensure employees’ medical confidentiality during health screening.**

12. **Build Competencies and Expectations for High Quality WHP Programme among WHP Facilitators**

Managers and facilitators of a WHP programme should be educated on what encompasses a high quality health promotion and intervention programme. With better understanding of these principles, WHP facilitators should be able to work with service providers for better quality and more cost-effective solutions for their employees.

The final recommendation by the TriCom is to build the competency and capacity of the WHP facilitators, with the objective that they can plan and design WHP programme that can best achieve good health for their co-employees.

Recommendation # 12

- **The TriCom advocates raising the competency of WHP facilitators in planning and implementing a well-participated WHP programme. HPB should facilitate this through sharing and profiling of best practices to address challenges in employee engagement and participation.**
CONCLUSION

The recommendations shared in this final report cover an array of areas that collectively work towards improving the health and well-being of our employees. The various recommendations, taken as a whole, will create a new foundation to take Singapore’s WHP efforts to the next level.

The implementation of these recommendations will require careful consideration and coordination among various agencies, and sustained collaborations with tripartite partners.

The recommendations and strategies outlined should be reviewed regularly to maintain their relevance and effectiveness. National indicators such as the prevalence of disease conditions, lifestyle practices and the uptake of WSH services and WHP programme among companies in Singapore should be monitored so as to address future workplace health challenges.
APPENDIX A

Members of the National Tripartite Committee on Workplace Health

Co-Chairpersons
Mr Lucas Chow, Chairman, Health Promotion Board and CEO, MediaCorp Pte Ltd
Mr Yeo Guat Kwang, Alignment Director, Quality Worklife, National Trades Union Congress

Members

Government
Mr Roy Quek, Deputy Secretary (Health Policy), Ministry of Health
Mr Lam Pin Woon, CEO, Health Promotion Board
Mr Ho Siong Hin, Divisional Director, Occupational Safety and Health Division, Ministry of Manpower
Mr Teo Nam Kuan, Group Director, Quality and Standards, SPRING Singapore

Employer & Business Associations
Mr George Huang, President, Singapore Manufacturers’ Federation
Mr Koh Juan Kiat, Executive Director, Singapore National Employers Federation
Mr Bryan Teh, Executive Director, Association of Small and Medium Enterprises

Employers
Mr Zulkifli Bin Baharudin, Managing Director, Global Business Integrators Pte Ltd and Chairperson, AIDS Business Alliance
Mr Lim Eng, former CEO, NCS Pte Ltd and former Member, iCARE Mental Healthcare Alliance
Ms Teresa Lim, Country General Manager, IBM Singapore Pte Ltd
Mr T V Narendran, former President & CEO, NatSteel Holdings Pte Ltd
Mr Teow Boon Ling, General Manager, Cargo Community Network Pte Ltd

Union
Mr Tan Hock Soon, NTUC Central Committee Member, General Secretary of Food, Drinks and Allied Workers’ Union
Mr Nakalingam Silva, NTUC Central Committee Member & President of Union of Security Employees

Secretariat – Ministry of Health
Dr Derrick Heng, Director, Epidemiology and Disease Control
Ms Jamie Ang, Deputy Director, Manpower Planning
Ms Lavinia Low, Assistant Director, Finance Policy
Ms Stephanie Seet, Assistant Manager, Epidemiology and Disease Control
Mr Benjamin Tan, Manager, Mental Health
Ms Tang Gek Hsien, Senior Health Policy Analyst, Manpower Planning
Mr Teo Shyi, Health Policy Analyst, Finance Policy
Secretariat – Health Promotion Board
Dr Annie Ling, Director, Adult Health Division
Ms Lek Yin Yin, former Deputy Director, Workplace Outreach, Adult Health Division
Mr Justin Ng, Deputy Director, Workplace Outreach, Adult Health Division
Ms Kris Ong, Manager, Workplace Outreach, Adult Health Division
Ms Neo Seow Ping, Manager, Workplace Outreach, Adult Health Division
Ms Eunice Yong, Senior Executive, Workplace Outreach, Adult Health Division

Figure 9: TriCom’s Sub-Committee Structure

Main Committee
Lucas Chow & Yeo Guat Kwang (Co-Chairpersons)

Sub-Committee 1
(WHP Framework)
TOR:
• To identify strategies to increase screening and follow-up among employers.
• To dovetail screening and follow-up with older employee initiatives.
• To integrate and align WHP with efforts of ICARE Mental Health Alliance and AIDS Business Alliance.
• To integrate and align WHP with WSH, work-life harmony and business excellence frameworks.

MEMBERS
Mr Lim Eng (former Chair), NCS
Mr Ho Siang Hian (Chair), MOM
Mr Roy Quek, MOH
Mr Lam Pin Woon, HPB
Mr Teo Nam Kuan, SPRING
Mr Zulkifli Bin Baharudin, Global Business Integrators
Mr James Wong, MOH
Ms Lai Wei Lin, MOH

Sub-Committee 2
(Engaging Employers)
TOR:
• To increase prevalence of WHP among employers.
• To formulate strategies targeted at Small and Medium Enterprises (SMEs).
• To formulate strategies targeted at specific industries.
• To recommend a corporate health benefits system that will incentivise employer and individuals.

MEMBERS
Ms Teresa Lim (Chair), IBM
Mr Roy Quek, MOH
Mr Koh Juan Kiat, SNEF
Mr Bryan Teh, ASME
Mr George Huang, SMA
Mr Teow Boon Ling, CCN
Mr birthday, MOH
Ms Chiam Hui Fong, NTUC

Sub-Committee 3
(Engaging Employers)
TOR:
• To formulate strategies to overcome barriers and increase employee participation in WHP programmes.

MEMBERS
Mr Yeo Guat Kwang (Chair), NTUC
Mr Roy Quek, MOH
Mr Tan Hock Soon, NTUC
Mr Nakalingam Siva, NTUC
Mr TV Narendran, NatSteel
Dr Derrick Heng, MOH
APPENDIX B

Terms of Reference of the National Tripartite Committee on Workplace Health

1. Review current status of the Workplace Health Promotion (WHP) programme in Singapore and provide strategic direction to enhance workplace health promotion efforts.

2. Expand the framework of the WHP programme to include measures for control and management of chronic diseases, and promotion of mental well-being.

3. Review the integration of WHP with occupational health and safety, work-life balance and the business excellence frameworks.

4. Recommend strategies and measures to encourage and support employers to implement WHP programmes.

5. Recommend strategies and measures to encourage employee participation in workplace health promotion programmes.
APPENDIX C

Business Excellence Framework Executive Summary

Spearheaded by SPRING Singapore, the Business Excellence (BE) framework (Refer to Figure 10) provides organisations with a holistic approach to managing people, systems, processes and customers in order to achieve a high level of performance. It aims to:

a. Help organisations develop and strengthen their management systems and processes to deliver superior results for their stakeholders
b. Provide organisations with a robust framework to know where they are on the business excellence journey and to guide what they need to do to achieve a higher level of performance

Supporting the BE framework are three niche standards for people, innovation and service, that is, the People Developer & People Excellence Award, the Singapore Innovation Class & Singapore Innovation Award, and the Singapore Service Class.

The BE framework has seven assessment criteria, namely, Leadership, Planning, Information, People, Processes, Customers and Results.

Figure 10: Assessment Criteria of the Business Excellence Framework
## APPENDIX D

### Integrated Workplace Health Promotion (WHP) and Workplace Safety and Health (WSH) Framework

1. **Orientation and Planning**
   - A multi-disciplinary team or committee comprising safety officers, WHP facilitators, human resources and senior managements

2. **Health and Safety Risk Management**
   a. Surveillance of workers’ health
      - Requirements under WSH Act
      - Different types of health examinations
        - Pre-employment
        - Periodic health examination
        - Return to work
        - Termination of assignment
        - General health examination
        - Key priority health conditions
   b. Assessment of health and safety risk
      - Identification and assessment of the WSH hazards, magnitude of risks and control measures
      - Identification of individuals with special vulnerabilities (i.e. those with hypersensitivities or chronic diseases)

3. **Information and Initiatives**
   - Communication and training of relevant personnel on management and control of risks identified
   - Advice on planning and organisation of work
     - Considerations given to individuals with special vulnerabilities

4. **Preventive, curative and rehabilitation health services**
   - Accessibility of health services
   - Provision of personal advice concerning workers’ health in relation to work
   - Include referral for follow-up care for those detected with risk factors (i.e. high blood pressure, body mass index (BMI), blood lipids, blood sugar)
   - Adaptation of work for workers with special needs
   - Provision of alternative employment where necessary
   - General health promotion and introduction to healthy lifestyle

5. **Record Keeping**
   - Appropriate records keeping which include:
   - Data from health examinations
   - Health records
   - Statistics on occupational diseases and injuries, etc.
   - Include data on medical costs, absenteeism, etc.
6. **Other Services**
   - Provide information, training and education in the field of WSH (i.e. WSH hazards and risk factors, recognition of occupational diseases)
   - **Provide training in the area of WHP**
   - Incorporate rewards/incentives for achievement of health and safety outcomes

*Blue text: Proposed preventive health elements*
APPENDIX E

Formed in 2005, the AIDS Business Alliance is made up of senior management personnel from government, private sector, union and employers’ federation, where Alliance members serve as advocates among peers to promote HIV/AIDS education within the workplace.

Terms of Reference of the AIDS Business Alliance

The Terms of Reference of the AIDS Business Alliance are to:

a) Advocate for normalising HIV/AIDS in Singapore
b) Promote best practices on HIV/AIDS education and policies in the workplace
c) Act as spokesperson for HIV/AIDS events
d) Participate and promote HIV/AIDS programmes through speaking engagements, media coverage, case studies, meetings and events

The iCARE Mental Health Alliance is an employer-led alliance, set up in July 2008 to promote the mental well-being of employees. Members of the Alliance serve as industry champions to promote corporate mental health awareness programmes, identify key issues relating to mental health in the workplace and share best practices and establish guidelines for promoting employee mental well-being.

Terms of Reference of the iCARE Mental Health Alliance

The Terms of Reference of the iCARE Mental Health Alliance are to:

a) Promote mental health awareness programmes at the workplace
b) Identify key issues relating to mental health in the workplace
c) Share best practices and establish guidelines for promoting employee mental well-being
APPENDIX F

Executive Summary of Mercer’s Report on Corporate Incentives Programmes

In April 2010, Mercer Singapore Pte Ltd (Mercer) was appointed by HPB to research on corporate incentive programmes for workplace health promotion (WHP) in Singapore. The objective was to find out how different corporate stakeholders view the use of incentives in promoting desired health behaviours among employees.

The study design was carried out over two stages through a desktop research on international practices followed by a local qualitative field research.

The local research consisted of 66 in-depth interviews with the senior management of organisations and representatives from the insurers, health and wellness vendors and unions. Employees’ views were sought through three focus group discussions stratified by age bands.

These respondents were sampled from general industries and five key ones, namely the hospitality, logistics/transport, retail, information technology and finance. Representations from SMEs were also included.

Mercer’s Key Findings

From the study, Mercer has derived the following key findings.

Incentives for Employers

1. Provide resources to design and deliver good quality health management programmes
   The field research unveiled that employers in general, lack the capability to build good quality programmes from scratch. While Singapore’s fitness and healthcare infrastructure and resources are excellent, there is a lack of vendors that can provide high quality behaviour change health management programmes. There is a need to enhance the scope of available health management programmes and reduce the financial barrier to employers investing in these programmes.

2. Adapt the current HPB WHP Grant
   The HPB WHP Grant is critical to help organisations particularly SMEs, start on the journey of WHP and employee health management. The following changes to the WHP Grant were recommended:
   • Simplify approval process
   • Provide additional/greater flexibility for usage
   • Adjust grant quantum
   • Expand the distribution of the grant and proactively sell employee health management together with the grant
3. **Develop return of investment (ROI) calculator**
   The availability of an ROI calculator for workplace health can assist corporate leaders in understanding the cost benefits of their employee health promotion and management programmes. It can be used to design a cost-effective strategy for a corporate health and wellness programme, with the aim of achieving lower health dollars and improved health status among employees.

4. **Incentives for Employees**
   **Provide targeted health management programmes**
   Health management programmes need to be right-sited against the employees’ health risk profiles. Field research findings affirmed the importance of specific relevance to an individual in order to sustain engagement.

5. **Ensure employees identify and appreciate health improvement outcome when they adopt healthier lifestyle**
   To sustain positive behavioural changes, participants of health management programmes must be able to assess how these changes have personally benefited them. Such experiences internalise the benefits of the change and create intrinsic motivations to sustain the change and yield positive health outcomes and improved quality of life. This concept needs to be included in the design of all programmes and also possibly incorporated into broader workplace initiatives.

6. **Incentives for Third Parties**
   **Assess whether health coaching is of value in Singapore**
   Health coaching involves counselling individuals to improve their health. This includes helping them understand their personal health status and risks, developing plans to change modifiable factors, monitoring progress against these plans and providing continual support. Health coaching is a relatively new concept and has only been introduced in the United States.

   It is recommended to assess the degree to which coaching will be effective in Singapore within a pilot setting and provide skills training to clinicians, counsellors, physiologists and fitness specialists to develop coaching credentials if deemed useful.

7. **Improve education and training around health management within organisations**
   This can be done through the development and promotion of a training programme targeted at organisational owners of health management programmes. In addition, an accreditation framework may be of use to provide minimum standards for health coaching.

In conclusion, the research conducted has shown that employers are genuinely interested in helping employees manage their health risks. Employees viewed employers favourably and are appreciative of those providing more than what is currently offered.
APPENDIX G

Recommended Workplace Health Promotion (WHP) Clauses in Memorandum of Understanding (MOU) of Collective Agreements

Health Benefits

1. With an ageing workforce and rising healthcare costs, the Company recognises the need to promote a healthy lifestyle to employees so that they can remain healthy and productive.

2. The Company shall:
   Provide one essential health screening package for all confirmed employees. Essential health screening shall comprise tests of the following:
   a. Body Mass Index (BMI)
   b. Blood pressure
   c. Fasting venous blood glucose
   d. Fasting venous blood lipids

   Offer health promotion activities in one or more of the following areas:
   a. Healthy eating
   b. Mental well-being
   c. Sports and physical activity
   d. Smoking control
# LIST OF ABBREVIATIONS

<table>
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<tr>
<th>Abbreviation</th>
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<tr>
<td>AIDS</td>
<td>Acquired Immune Deficiency Syndrome</td>
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<td>BOHS</td>
<td>Basic Occupational Health Services</td>
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<td>CDMP</td>
<td>Chronic Disease Management Programme</td>
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<td>GP</td>
<td>General Practitioner</td>
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<td>HIV</td>
<td>Human Immunodeficiency Virus</td>
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<td>Health Promotion Board</td>
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<td>ICOH</td>
<td>International Commission on Occupational Health</td>
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<td>ILO</td>
<td>International Labour Organisation</td>
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<td>Land Transport Authority</td>
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REFERENCES


viii Central Provident Fund. 2007