



Evaluation of workplace health promotion

How to counteract the well-known difficulties

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Aims of workplace health promotion (WHP)

employer

- reduction of absenteeism
- lower accident rate
- increase of productivity
- impulse for creativity
- image improvement
- more customer satisfaction

employee

- increase of work satisfaction
- reduction of stress
- improvement of communication
- reduction of work-related complaints
 - increase of participation

Evaluation of WHP

- broad range of aims → many outcome variables
- limited generalisation of the results
- multiple interventions → precise effectiveness not attributable
- high level of evidence difficult to reach → „evidence triangulation“
- sustainability often not evaluated

Health promotion in hospitals: staffs' perspective



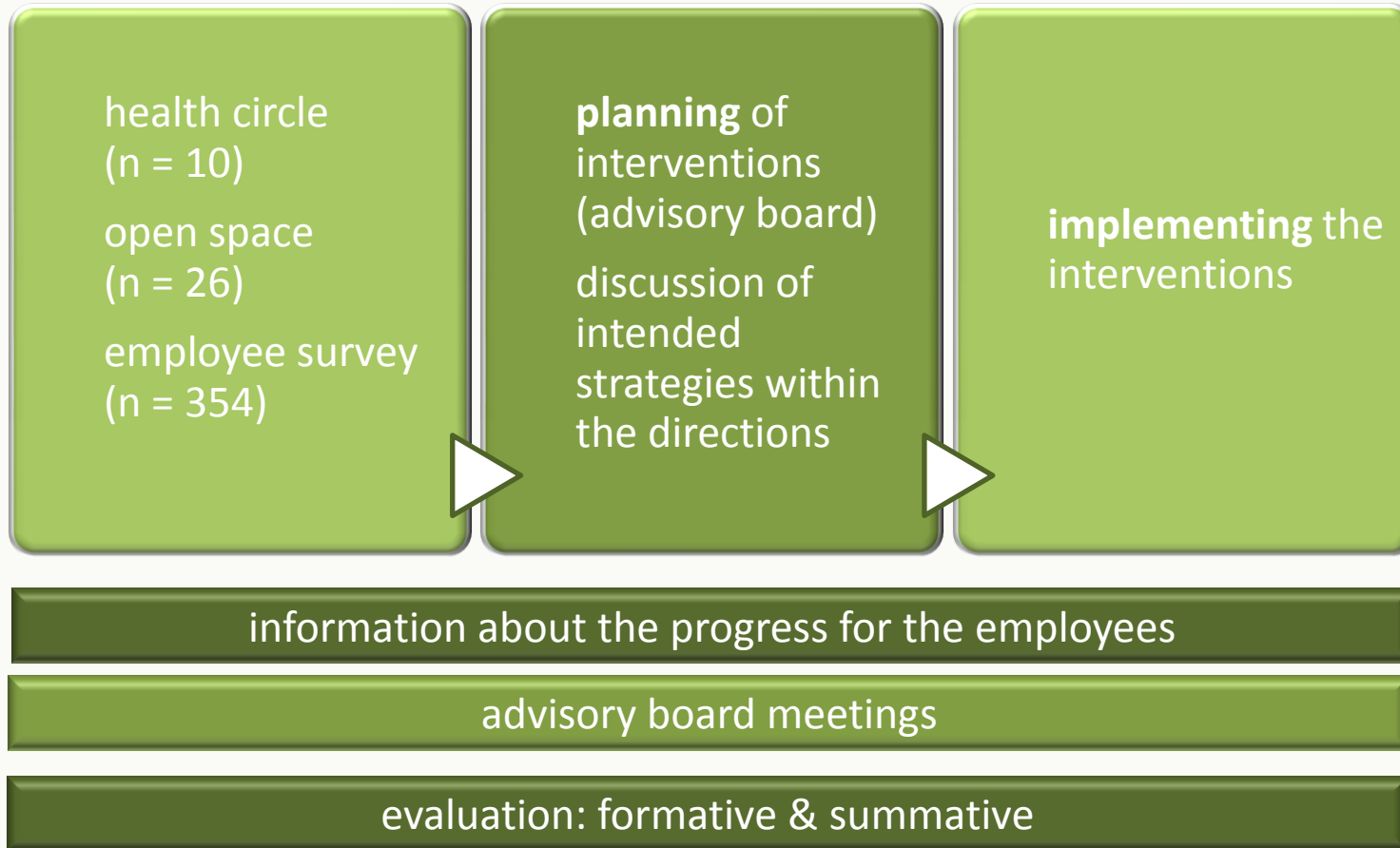
- promoting staff's participatory role
- empowering staff for self care
- reducing strains
- influencing risky behaviour

Target hospital

- general hospital in Carinthia
- 826 employees (78 % female)
 - 59 % responsible to nursing director
 - 12 % responsible to clinical director
 - 29 % responsible to commercial director
- February 2008: official start of the WHP-programme
- advisory board

■ nursing director	■ human resource manager
■ company physician	■ industrial psychologist
■ internal expert for job safety	■ external evaluation expert

Project plan



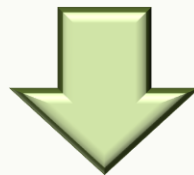
First results: health circle (n = 10)

- identified categories of strains
 - „communication & rules“
 - „time & personnel management“
 - „facilities & inventory“
 - „personal well-being“
- evaluation (1 = exactly true; 4 = not at all true; n = 9)
 - important topics discussed (M = 1.13, SD = 0.35, Md = 1)
 - getting oneself involved in the discussions (M = 1.00, SD = .00, Md = 1)
 - participating in the implementation of HP (M = 1.22, SD = 0.44, Md = 1)
 - having an impact on decision processes (M = 1.67, SD = 1.21, Md = 1)
 - getting to know other work areas (M = 1.22, SD = 0.41, Md = 1)



First results: open space (n = 26)

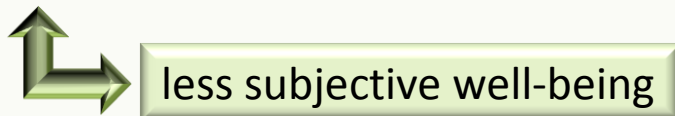
- same categories of strains identified
- evaluation (1 = exactly true; 4 = not at all true; n = 13)
 - important topics discussed (M = 1.15, SD = 0.38, Md = 1)
 - getting oneself involved in the discussions (M = 1.23, SD = .44, Md = 1)
 - participating in the implementation of HP (M = 1.31, SD = 0.48, Md = 1)
 - having an impact on decision processes (M = 2.38, SD = 0.87, Md = 2)
 - getting to know other work areas (M = 1.54, SD = 0.52, Md = 2)



health circle & open space appropriate approaches to strengthen participation

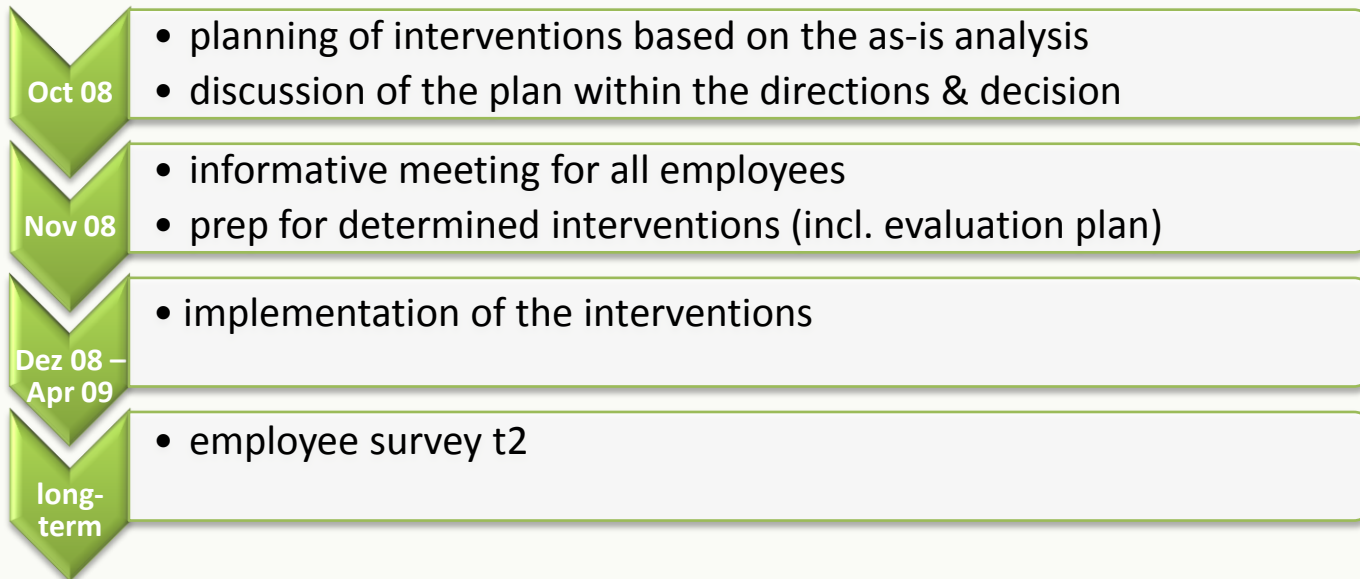
First results: employee survey (n = 354)

- 9 % reported critical values regarding overcommitment
- 17.8 % were strongly emotionally exhausted
- 11.1 % reported high degree of cynicism
- positive report of subjective well-being
- differences according to directions' affiliation
 - staff responsible to commercial director reported
 - less cooperation
 - more emotional exhaustion and cynicism
 - more quantitative work strains
 - less participation and information
 - less perceived fringe benefits



Conclusions and future prospects

- evaluation
 - planned and implemented from the very beginning of the project
 - using mixed methods
 - integrating different perspectives
 - flexibly tailored designs depending on respective intervention
- further steps



Hvala za pozornost!

Danke für die Aufmerksamkeit!

Grazie per l'attenzione!

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