An evaluation of the health and wellbeing needs of employees: An organizational case study

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Abstract: Introduction: Workplace health and wellbeing is a major public health issue for employers. Wellbeing health initiatives are known to be cost-effective, especially when the programs are targeted and matched to the health problems of the specific population. The aim of this paper is to gather information about the health and wellbeing needs and resources of employees at one British organization. Subjects and Methods: A cross-sectional survey was carried out to explore the health and wellbeing needs and resources of employees at one British organization. All employees were invited to participate in the survey, and, therefore, sampling was not necessary. Results: 838 questionnaires were viable and included in the analysis. Employees reported “feeling happier at work” was the most important factor promoting their health and wellbeing. Physical tasks, such as “moving and handling” were reported to affect employee health and wellbeing the most. The “provision of physiotherapy” was the most useful resource at work. In all, 75% felt that maintaining a healthy lifestyle in the workplace is achievable. Conclusions: More needs to be done by organizations and occupational health to improve the working conditions and organizational culture so that employees feel that they can function at their optimal and not perceive the workplace as a contributor to ill-health.

Introduction

Workplace health and wellbeing is becoming a major public health issue for employers and at all levels of government initiatives. Multidisciplinary strategies to improve health and wellbeing at work have been acknowledged to be very effective in addressing both individual risk and the broader organizational and environmental issues. The workplace is the ideal site for health promotion and a wellbeing initiative as it is a specifically defined community with the benefits of social support and the associated economic and organizational productivity. Well planned, comprehensive workplace health and wellbeing initiatives have been shown to be cost-effective, especially when the initiatives are targeted and matched to the health needs of the specific population. Furthermore, studies have repeatedly demonstrated that well-resourced workplace health and wellbeing initiatives not only lower healthcare and insurance costs but also decrease absenteeism and improve performance and productivity. The workplace is often an under-utilized setting for promoting employees’ health and wellbeing. Most employees spend more than a third of their waking hours at work, and therefore large numbers of employees can be reached and encouraged to acquire the knowledge and skills to live a healthy lifestyle.

Despite health and wellbeing programs being initiated in organizations, the views of employees on what specific programs and resources are relevant to them are rarely evaluated. In November 2009, the Steve Boorman Report was launched in the United Kingdom to promote the health and wellbeing of employees working in the National Health Service. One of the report’s recommendations was for organizations to review the health and wellbeing needs and resources within their organization. As a result, this survey was undertaken in order to gather information about the health and wellbeing needs and resources of employees at one British organization.
Subjects and Methods

A cross-sectional survey was carried out to explore the health and wellbeing needs and resources of employees at one British organization. All employees were invited to participate in the survey, and, therefore, sampling was not necessary. This survey was within the scope of good clinical practice, and, therefore, ethical approval was not required.

A questionnaire was designed for the purpose of the survey and distributed by email in April 2014. The design of the questionnaire was based on health and wellbeing literature which ensured face validity. In order to ensure content validity, members of the health promotion committee were consulted to scrutinize a draft copy and provide feedback. Following initial feedback, any changes made to the questionnaire were discussed with members of the health promotion committee to ensure its accuracy.

The questionnaire included both open and closed questions to obtain information in several domains. This included demographic information, factors improving their health and wellbeing, factors affecting their health and wellbeing, and whether or not maintaining a healthy lifestyle in the workplace was achievable.

The information from the questionnaires was coded on spreadsheets, and descriptive analysis was carried out.

Results

Of the 1356 questionnaires that were distributed, 847 were returned. Nine questionnaires were incomplete and were consequently excluded. In total, 838 questionnaires were viable and included in the analysis. The effective response rate was, therefore, 61.8%.

There were 617 (74%) female and 221 (26%) male employees that completed the questionnaire. Most employees fell within the 35 - 44 age group. The highest number of responses that were received according to job profile were registered nurses (n = 184, 22%), doctors (n = 154, 18.4%) and administration support workers (n = 153, 18.3%), respectively. The least number of responses were from porters (n = 2, 0.2%).

Employees were asked about the factors that were important in improving their health and wellbeing at work. In total, 58% of employees (n = 485) reported “feeling happier at work” was the most important factor. Other factors included “wanting to eat a healthier diet” (n = 411, 49%), “increasing levels of physical activity” (n = 387, 46%), and “wanting to be a healthier weight” (n = 331, 40%). A large number of employees (n = 477, 57%) did not feel a “reduction in alcohol intake” was important in improving their health and wellbeing at work.

Employees were asked about the factors affecting their health and wellbeing at work. In total, 819 (98%) employees answered this question. The most common factors were physical tasks, such as “moving and handling” (n = 434, 53%), “work pressures, such as unrealistic deadlines” (n = 312, 38%), and “poor relationship with colleagues” (n = 259, 32%). The issue that least affected employees’ health and wellbeing at work was “inflexible working patterns” (n = 204, 25%).

Employees were asked about the types of resources that could be useful to support their health and wellbeing at work. In total, 568 (68%) employees indicated that the “provision of physiotherapy” was the most useful resource at work. Other types of work assistance employees felt were useful included “better access to healthy, affordable food” (n = 551, 66%) and activities, such as “subsidized gym membership/cycling scheme” (n = 536, 64%). The least useful work resources reported by employees were “smoking cessation” (n = 153, 18%), “advice and support on alcohol intake” (n = 142, 17%), “literature concerning health topics” (n = 26, 3%), and “health promotion events” (n = 25, 2.9%).

All employees were asked to indicate whether they agreed or disagreed with the following statement: “I feel maintaining a healthy lifestyle in the workplace is achievable”. A total of 836 (99.7%) employees answered this question, of which 623 (75%) answered “Yes” and 213 (25%) answered “No.” Of the 213 employees that answered “No”, 145 (68%) gave personal reasons to support why they did not believe a healthy lifestyle was achievable at work. Table 1 highlights some of these personal reasons.

Discussion

This survey shows that employees had clear expectations about the factors that improved and hindered their health and wellbeing at work. In most organizations, health and wellbeing initiatives are not limited to occupational health professionals but also to physiotherapists and psychologists, providing a wide range of resources.

This survey had several strengths, including identifying and documenting those factors that were affecting the health and wellbeing of employees. This provides important information to the organization and occupational health so that a targeted approach can be implemented. Many organizations have limited resources, and a targeted approach ensures that available resources are used effectively and future investment is allocated to appropriate resources. In addition, the evaluation of the health and wellbeing needs is likely to demonstrate to employees that the organization is taking their needs seriously.

The “provision of physiotherapy” was identified as the most useful resource at work to support employee health and wellbeing. Given the high level of moving and handling injuries affecting employee health and wellbeing in this organization, it is not surprising that employees felt
that rapid access to physiotherapy services was a valuable resource. Studies have shown that rapid access to physiotherapy is both clinically and cost effective in dealing with employees presenting with moving and handling injuries⁶,⁷.

A quarter of employees did not believe that a healthy lifestyle is achievable at work. This highlights that more needs to be done by the organization and occupational health to improve the working conditions and organizational culture so that employees feel that they can function optimally at work and not perceive the workplace as a contributor to their ill-health. In addition, occupational health can assist with advising both employees and line managers about how to tackle some of the personal issues affecting employee health and wellbeing at work as outlined in Table 1. This could include referral to counseling services, temporary or long-term adjustments to working hours, or risk assessments in areas where the working environment is unsafe.

In addition, future health and wellbeing initiatives should be developed taking into account the factors and resources that employees felt would be most beneficial. This approach would ensure that these initiatives appeal to a wide range of employees and possibly increase employee engagement and uptake.

As with all case studies, the findings reported in this paper are specific to one British organization, and care should be taken when generalizing the findings to other organizations. However, the details provided in this paper will hopefully enable practitioners to draw conclusions about the applicability of these findings to their own organization or country. Other limitations included some missing data in responses and misinterpretation of a few questions.

### Table 1. Personal reasons

| Reason                                      |
|--------------------------------------------|
| Work pressure/stress                       |
| High workloads                             |
| Long hours of work                        |
| Poor work environment                      |
| No work life balance                       |
| Staff shortages                            |
| Poor managerial support                    |
| Bullying                                   |
| Management attitude                        |

### Conclusion

This case study has demonstrated three key points. Firstly, it has evaluated the health and wellbeing needs and resources of employees at one British organization. Secondly, it has highlighted the health and wellbeing resources that are most valued by employees at this organization. Finally, it has made recommendations for tailoring health and wellbeing initiatives to the needs of employees in order to increase engagement and uptake. In conclusion, it is up to individual organizations or countries to decide if this approach is suitable within the context of their policies, procedures, and legislation in order to inform any future investment in health and wellbeing initiatives for the benefit of their employees.

**Conflicts of interest:** None declared.

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