WorkHealth Improvement Networks

Aimee Chambers: WorkSafe Victoria Relationships Manager
Johnathan Walters: Health, Safety and Wellbeing, Northern Health
Nerida Joss: WIN Evaluation Manager
WorkHealth: From health promotion to an integrated approach to worker health, safety and wellbeing

WorkHealth 1
- Checks
- Grants
- Coach
- Tools

Public Health focus
- CVD
- T2DM

WorkHealth 2 (WINs)
- WorkHealth evaluation
- Employer case studies
- International evidence
- Stakeholder views

Safety focus
- MSDs
- MWB
- CULTURE

Health Promotion
- Occupational Health & Safety
- HR & Employee Benefits
The opportunity

<table>
<thead>
<tr>
<th>Discoveries from WorkHealth</th>
<th>Wicked problem, shared responsibility</th>
<th>Innovative Regulator behaviour</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Culture of care vs. culture of compliance</td>
<td>• Complex OHS issues (e.g. MSDs, MWB) are influenced by work and non-work factors</td>
<td>• Opportunities for new ways of working:</td>
</tr>
<tr>
<td>• Interrelationship between worker health, well-being &amp; safety</td>
<td>• Costs associated predicted to increase with ageing workforce</td>
<td>• Partnerships</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Co-design</td>
</tr>
</tbody>
</table>
What is an Integrated Approach?

Combining OHS and Health Promotion (HP) programs, policies, systems and processes, with Human Resource (HR) management and other related operational functions, in order to enhance the overall health and well-being of the workforce, and prevent work-related injuries and illnesses.

Cooklin et al (2013) Integrated approaches to worker health, safety and wellbeing (Monash university)
Evidence review – integrated interventions are effective for:

- Prevention & management of musculoskeletal disorders
- Reducing stress and poor mental health
- Smoking reduction
- Reduced medical costs*
- Reduced leave usage
- Reduced compensation costs

* Greater relevance in contexts where employers carry cost of health cover (e.g. USA)
Foundations of an integrated approach

- Program’s contribution to the organisational goals have been identified
- As well as OHS systems, policies and resources, the organisation should review WHP and HR infrastructure, and environmental H&S initiative foundations
- OH&S, WHP, and HR domains are integrated so that policies, practices and programs, are co-ordinated
- Address psychosocial and physical factors, balance of org level and individual level outcomes
- Increase emphasis on productivity, absenteeism, and presenteeism as impact and outcome measures of interventions
The model: working in partnership and co-design
In targeted workplaces & industries:

- Improved risk control (e.g., MSDs and mental wellbeing)
- Improved health and safety culture
- New infrastructure and ways of working for WorkSafe
Benefits of participation

A voluntary and free initiative led by industry

Receive grant funding to improve health, safety and wellbeing performance in areas that matter to your organisation

Pioneer solutions to complex organisational issues, such as mental health and MSDs

Network, learn and share ideas and promising practices with peers and leaders from a mix of industries

Comprehensive training and development for key HR and OHS leaders and decision-makers across your business

Active role in the co-design/solution generation that will support and monitor the health, safety and wellbeing of your workforce

Expert support to design your program, and track and measure impact in OHS performance, productivity, engagement and safety culture

Become an industry leader and cement your business as an employer of choice

Input your presentation title here (to access to go View, Header and Footer) - Insert your presentation date here
A systems level approach to change
Northern Health’s integrated approach to Fatigue Risk Management

- Workforce sustainability
  - Absenteeism
- Safety First
  - OHS Incidents & injuries
- My Wellbeing @ NH
  - Multitude of disease states
- Quality, Safety & Risk
  - Fatigue related Clinical errors
- Nursing Workforce
  - Performance/Culture/Brand

Fatigue experienced by staff – work related and non work related factors

An absence of strategic fatigue risk management framework; of an evidence based approach; of key measurables and trend analysis linking results back to business priorities, goals and planning; absence of fatigue related policy; education and guidance materials are not meeting the needs of our employee population demographic; lack of internal and external support services for staff; lack of strategic communication planning and long term advertising; lack of monitoring tools.

Development and implementation of strategic fatigue risk management system,
- Fatigue risk management framework
- Relevant fatigue policies, procedures,
- Rosters, guidance materials, programs
- Internal and external supports, training

Implementation

Monitoring and Evaluation

Outstanding Health Care

Northern Health
www.nh.org.au