Work in tune with life

Model of Good Practice 1

Work in tune with life **contact person (NCO):**

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A. Identification and Motivation

General information about the MOGP company:

Name of organization	IFP Energies Nouvelles
Address	Rond Point de l'échangeur de Solaize BP 3
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Country	France
Contact person (name/function)	Fabien Franchi
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Website	http://www.ifpenergiesnouvelles.fr
Sector	Energy, transport and environment
Number of employees	France : 1 637 employees

(When the company does not want to provide this information a reference to the NCO will be made, which will support the connection to the company if necessary)

A. Identification and motivation

Motivation (max. 100 words) 8 à 10 lignes
Why has this company been selected as MOGP?
What is special for this MOGP?
How many points the company scores on the on line assessment tool?

Based on cases of individual work-related sufferings, IFP has built a structured and transferable collective approach to the prevention of psychosocial risks. Today, this approach focuses on work organisation and management. The steering committee dedicated to this issue has understood the need for creating a common language for all stakeholders in order to foster a pluridisciplinary and participative approach. Thanks to its actions and support to managers, the committee aims to re-engage a work-oriented dialogue between workers and middle management. This approach puts psychosocial risks prevention on a level with other occupational risks.
The company scored a total of 64 points.

B. Policy and Culture (max. 300 words)

Please explain how the **health policy** in the company is organized.
Clarify the approach and the reason why a health policy/initiative was initiated.

Indicate how **mental health is integrated/linked** to this general health policy: Conditions fulfilled concerning the integration; mental health part of mission statement; mental health incorporated in organizations' strategies; systems and processes; specific targets on mental health promotion; comprehensive approach of Workplace mental health promotion (WMHP); management involvement.

The issue of stress at work was actively addressed after worker representatives had pointed out individual sufferings. In 2006, the Human Resources management decided to implement a global strategy of prevention after a collective complaint had raised awareness of potential stress-inducing situations at work and their impact both on the individual's health and on the company's performance. The General Management then asked that a specific working group would be created to establish a formal approach towards preventing psychosocial risks.

The strategy was initially focussed on measures for a treatment of people suffering from stress-related conditions, then a six-part plan of action was progressively implemented: (1) characteristics of tasks and adequacy between workers competences and the job content, (2) roles, responsibilities and decisional latitudes, (3) physical environment, safety and organisational context, (4) work-life balance, (5) social support, (6) professional recognition, ethics and social visibility.

Moreover, employees can complete a stress assessment questionnaire based on the "Karasek model" before their annual medical examination. These questionnaires are a monitoring basis for the steering committee.

Under French regulations, occupational health services (physicians, nurses, social workers) manage health policy and monitor workers' mental and physical health. An annual medical examination is mandatory for all employees. They benefit also from a return-to-work visit after a maternity leave, a sick leave (due to an occupational disease), a long-term sick leave (more than 21 days, linked to a non-occupational illness), a sick leave due to a work-related accident (eight days minimum), or repeated absences for health reasons. A health, safety and working conditions committee (CHSCT) and a risk prevention committee reinforce a plan of measures for the prevention of risks.

C. Organisation and Structure (max. 200 words)

Who is in charge of and/or involved in the organisation and support of the mental health promotion initiatives?
And are these persons acquainted with the mental health topic?: Specific work group; composition of the group; training on mental health; resources etc.

Mental health policies at work are promoted by the Human Resources Department and endorsed by the General Management.

The approach was worked out by the steering committee constituting a specific group of « key stakeholders »: top and middle management representatives, occupational physicians, a social worker, communications department representatives, worker representatives, health and safety environment engineers.

The working group had no particular knowledge of psychosocial risks. First of all, it did a course on psychosocial risks with the help of external consultants in order to gain some knowledge of the subject. Then it worked on a glossary of related terms to ensure they would share a same language. They also studied the links between psychosocial risks and work organisation within the company and worked on each member's role (human resources management, physicians, social worker, etc). Finally, they were trained to conduct face-to-face interviews with workers suffering from work-related stress and to relay the information they acquired.

D. Implementation and Strategy (max. 400 words)

How does the company handles the planning of the initiatives concerning mental health promotion? Who is involved in the planning and implementation of these initiatives? Is the planning linked to a needs assessment? Please explain.

Please describe the initiatives and measures on mental health promotion that were taken in the company: what kind of workplace mental health activities were carried out?
• Promotion of mental health
• Prevention of mental health problems
• Dealing with (workers with) mental health problems at work
• (Re) integration of workers with mental health problems

The steering committee evaluates, initiates and implements necessary prevention measures from an alert follow-up on individual cases, a quarterly follow-up of indicators (sick leave, turnover, workload calculated on work day span) and an analysis of stress measures based on the Karasek model. The steering committee then makes some proposals for taking action on identified causes. It meets quarterly to review approach advances and holds regular informal exchanges.

Some measures were first implemented on a tertiary prevention level (individual and collective support) rapidly evolved towards secondary and primary prevention levels. They were supported by an active communication plan from the human resources department. All employees were made aware of psychosocial risks through a series of conferences and a theatre play followed by a debate on this complex subject. The company intranet has a specific section on psychosocial risks.

In terms of prevention, the management (180 persons) has been trained in the approach and processes, and has also learned to "listen" to employees with mental health problems through role plays. Measures have been carried out on work organisation and accompanying changes. For example, at present, the transfer of about ten people to another department is planned in order to reassess workloads and therefore avoid stress situations. Once approved, the transfer will take place over a six-month period and will be supported by a "team building" exercise in order to ensure a smooth creation

of the new team.

Other measures are to come such as training for health preventers, executive boards and project managers, implementation of management practices sessions, drafting a guide on "Good managerial practices". A training course for new managers including a chapter on "psychosocial risks" is being studied.

"Alert forms" have been created to deal with individual cases of distress. Once submitted, they will be processed within a two-week period after their filling either by the risks committee or by a limited committee (physician, management, health and safety committee representatives and human resources representatives), or with one of these representatives depending on the seriousness of the situation. A large majority of these forms (70%) is related to work organisation.

E. Evaluation and Lessons Learned (max. 300 words)

Please describe how the mental health promotion initiatives are being evaluated in your organization. Who is involved in the evaluation and how are the results communicated?
• What are the results?
• What are the lessons learned from the mental health activities: success factors; barriers and ways to overcome

The strategy is still too recent to measure quantitative results. However, the steering committee observes a real open-mindedness amongst workers who consider that "we take care of them". Furthermore, the management has learned to request help from the committee on managerial difficulties, which helps solve the problems at source.

Moreover, the approach helped enhance a social dialogue and the development of a pluridisciplinary and participative culture: through a common concern for well-being at work, stakeholders have built a strong cooperation and frequent exchanges, thereby creating information feedback and contributing to mental health promotion within IFP.

Success keys rely on an approach supported by the General Management, on the attention given to building a common culture of psychosocial risks within the committee, on a communication policy towards all employees and on a full transparency of measures taken. Furthermore, it is essential to have the necessary human resources available and sufficient time for the implementation of measures.

However, it has been necessary to break through some barriers such as adapting an issue to subjective data which is difficult to measure, or convincing a management that might initially fear the questioning of its managerial abilities.

Trade unions, initially uninvolved in this project, are now negotiating to define and implement a social agreement on the prevention of stress at work. The project manager emphasises that integration at the start would certainly made dialogue easier and helped achieve an agreement in conclusion.

Members of the committee believe it necessary to show the added value of measures taken: thanks to the improvement of working conditions, "good mental health equals good business".