Germany

Workplace Health Promotion in the Municipal Administration of Dortmund

About the city

With 585,000 inhabitants Dortmund is the ninth largest city in Germany. The municipal administration is divided into seven units and apart from general administration responsibilities assumes such varied tasks as financial administration, safety and public affairs, schooling and culture, social affairs, youth and health, civil engineering, trade and industry as well as traffic and transport.

Approx. 8,500 civil servants, employees and blue-collar workers are responsible for these tasks. 53% of Dortmund’s municipal administration employees are women; 25% work part-time and approx. 8.4% of the employees are severely disabled. Compared to the average age of the work force in Germany, the average age of 42 years is actually above average.

Changing from an industrial to a high-tech region

Undergoing the change from what was a classically influenced industrial region to become one of the leading locations in Germany for information and communications technologies, an efficient and citizen-friendly administration has a particularly demanding role to play. The region underwent a major structural change and the challenges attached to such a development can only be effectively addressed with motivated, satisfied and efficient personnel. In times of increased reform and modernisation efforts the staff and work organisation become central resources to increase efficiency and quality.

A human resources challenge

All responsible persons in Dortmund’s municipal administration have accepted this human resources challenge and view workplace health promotion as a suitable instrument to make a positive impact on the ever changing administrative structures in close coordination between employees and senior management. Workplace health promotion is an integral part of the administrative reform process and governed by a formal declaration of commitment duly signed by the Lord Mayor and the central works council.

Setting up a health management system

In order to implement workplace health promotion projects, a workplace health management system has been set up in the municipal administration of the city of Dortmund, which is equipped with its own personnel and budget. As far as the organisation and structure of the project are concerned, health management is approached on two levels. On central level – and at the heart of the undertaking – is a project team that regards itself as being central service provider of workplace health promotion measures. The main operational task of this team is to support and advise the individual units of the municipal authority in their efforts to implement workplace health promotion activities and assess the results thereof; the team also assists the different departments in developing tailor-made problem-solving potential. The various components of internal health strategy

Contact:
City of Dortmund
Dr. Egmont Baumann
Phone: +49-231-5026388
E-mail: dbaumann@stadtdo.de
like occupational medicine, occupational safety, personnel development, the work of the personnel committee and the internal consulting service – which have to some extent stood alone in the past – have now been reunited by means of the team’s co-ordinating and consultancy skills. They regard themselves as partners of an internal network and constitute the advisory body and clearing authority of workplace health promotion within the committee for occupational safety and workplace health promotion on central level.

The second level is made up of decentralised measures, which are executed in and by the individual units. These tailor-made courses of action, developed jointly by employees and senior staff in the respective units, are seen to be the key to the success of workplace health promotion. The initiative to take action comes from the units themselves. The departmental employees have the right to demand workplace health promotion activities, as defined by regulations governing employee participation.

Decentralised problems, on the other hand, are dealt with by calling in the expert knowledge of the internal partners of the health promotion network. They get together in the unit’s working groups for health and are responsible for planning, steering and controlling the total process of the entire department. They define the emphasis and the priorities and develop appropriate health promoting measures to reduce work strain, based on the unit’s health report, in which sick leave is analysed and the results of staff opinion surveys are related. In order to achieve their objectives the working groups for health can consult external experts, i.e. representatives of health insurance funds or employment injury insurance funds or a representative of severely handicapped persons.

Clear objectives

The intent and purpose of this organisational infrastructure, is to effectively contribute towards

- increasing job satisfaction and motivation
- promoting a positive working climate and increasing productivity
- reducing medical costs by reducing absenteeism, which can be influenced internally and concurrently yielding advantages not only to the employees and the administrative office itself but also to Dortmund’s citizens.

Workplace health promotion comprises all combined efforts to improve work organisation and the working environment, promoting active participation and encouraging personal development. (Luxembourg Declaration on Workplace Health Promotion).

Own budget for WHP

Financial resources for the adoption of central workplace health promotion activities and for the management of decentralised projects, i.e. for multidisciplinary measures instigated by the project team, are available within the framework of the project team’s own budget for workplace health promotion. Decentralised measures, which are a result of the adoption of suggestions made by the individual units, are, in principle, financed by the departments themselves.

A step-by-step approach

Despite differing details, each health promotion project is characterised by the step-by-step approach: “Analysis, Action Plan, Adoption, Quality Assurance”. This concept, agreed upon with the individual units and governed by a formal agreement, was first put to test in the civil engineering unit; the knowledge gained there was then transferred to five further departments with high absenteeism rates. For the municipal administration of Dortmund absenteeism is just an indicator and necessitates more concise research as to the real grounds and reasons for its existence. Departmental proceedings ensure an accurate response to the varying job demands and problems of the particular department and help bring about a timely adoption of the suggestions for improvement.

So far a total of 3,957 employees from 6 departments have been involved in workplace health promotion activities. The following example outlines the procedure; this was a project that was carried out in the former Department of Public Parks and Open Spaces.

Cooperation and exchange of experience

The remarkable thing about this project is that the focus of the two external partners (health insurance funds and
accident insurance funds), who co-operated with the internal actors, was on the adoption of measures. According to a joint resolution of the partners, the co-ordination of the combined efforts will be effected by an independent institute for health preventive action.

In addition, an exchange of experience between communities will be organised - in this case with the municipal administration of the city of Stuttgart, whose workplace health promotion focus is also currently its Department of Public Parks and Open Spaces.

**Dissemination of information**

Before commencement of workplace health promotion activities in all three involved sub-divisions of the Department of Public Parks and Open Spaces, informative events on the project are held for employees and senior staff. The objectives, the subject matter and the project plan are publicised in the employees' magazine and/or made available online as an electronic report.

**Systematic needs analyses**

A painstaking analysis of work strain in each individual department is carried out before any measures of workplace health promotion are implemented. In order to initially assess the existing problems, available data and findings from internal administration services such as occupational medicine and occupational safety, personnel development and the internal consulting service are evaluated – i.e. absenteeism statistics, exposure to danger assessments and accident statistics are appraised. In this way, the work strains and job demands causing the most problems can be initially identified. Consequently the following instruments of analysis are put into action:

- analysis of sick leave records of both involved health insurance funds. The epidemiological comparison is the fundamental idea of this analytical step. First of all, the occurrence of sickness absence in the different units is checked to see if there are any peculiarities. To this purpose the sickness absence numbers are first compared to internal administrative figures and then to corresponding federal and/or industrial statistics and it is then determined which types of diseases are conspicuous and/or occur frequently.
- staff opinion surveys: all employees from all 3 subdivisions are requested to surrender information on their work strains, job demands, health complaints and job satisfaction by means of a questionnaire.
- these analytical steps are complemented and accompanied by systematic site visits and motional-ergonomic analyses

**Employee participation in health circles**

Only seldom can recommendations for practical health promotion activities be deduced directly from the findings of these analyses. The health management of the municipal administration of the city of Dortmund foresees health circles for this task. Health circles are small temporary working groups from the respective units, who make use of the experience, knowledge and creative and innovative potential of their employees. According to the situation or task to be tackled, they meet up either as a multi-disciplinary group (i.e. hierarchy-overlap or departmental-overlap) or in a homogeneous format (i.e. employee-circle and senior staff-circle). They discuss work strains, job demands and health complaints in their own department and work at suggestions to reduce or eliminate these in the context of a healthy work organisation.

All the results of these analyses and suggested courses of action are compiled in a report and used as the basis for the adoption of measures in the respective working groups for health. The health circles give the employees the opportunity to define and deal with their problems as “experts in their own right”.

Particular attention is paid to a swift adoption of the suggestions for improvement made by the employees from the health circles. The objective is to execute as many suggestions for improvement as possible during the duration of the project. The employees are continually informed as to the status of implementation within their respective unit.

**Lifestyle issues**

Parallel to the work with health circles, whose focus is on the improvement of health-relevant working conditions,
interdepartmental training courses on behaviour-oriented preventive health activities are continually available i.e. courses on stress management, back exercises, leadership and health or diet.

**Integration into quality management**

In order to guarantee sustained workplace health promotion activities, following the intensive nurturing phase by health insurance funds and accident insurance funds, the process is subsequently integrated into quality management of the respective unit. In this way workplace health promotion is firmly anchored not only in the minds of employees and senior staff alike, but also in organisational structures.

**Quality assurance by learning loops**

The fundamental concept of quality assurance is the development of learning loops for self-observation i.e. receiving feedback from employees and respective unit supervisors, who in turn enable a target-directed adaptation of the range of benefits. For that reason appraisal interviews are conducted in the respective units following workplace health promotion projects and courses and seminars are assessed by the participants. In the context of a feedback-loop the results overflow into the next planning stage. Hence health promotion is organised as a continuous learning process.

The following quality assurance procedures are applied:

- Appraisal interviews with employees of the respective unit
- Interviews with health circle participants
- Feedback from management-level employees
- Interviews with seminar and training course participants
- Analysis of absenteeism – before and after health promotion projects
- Strengths – Weaknesses: Analysis of the involved partners

**WHP as organisational and personnel development**

Our experience so far shows – and this is particularly evident in the assessments of employees and senior staff – that organisational and personnel development from bottom to top i.e. utilizing the knowledge of the work force within the framework of the applied holistic concept of workplace health promotion, is a necessity in times of administrative reform. On that account those departments who have enjoyed particular workplace health promotion coaching, have succeeded in exploiting health promoting potential and minimising health risks by improved levels of ability (advanced qualifications) and revised work sequences.

**Future objectives**

Proceeding unit by unit, all departments of the municipal administration will eventually be included in the processes of workplace health promotion. Moreover, in the context of intermunicipal benchmarking, workplace health promotion is anxious to exchange experiences with other communities and to learn from one another. Hence, cooperation with the city of Stuttgart, involving its corresponding department for the first time, is planned in the project involving the Department of Public Parks and Open Spaces.