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# Evaluation of the Outcomes for Employers Participating in the Corporate Health Standard and Small Workplace Health Award: Summary of Interim Findings



# **Evaluation of the Outcomes for Employers Participating in the Corporate Health Standard and Small Workplace Health Award**

## **Summary of Interim Findings**

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Views expressed in this report are those of the researcher and not necessarily those of the Welsh Government

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# 1 Introduction

- 1.1 In October 2011, the Health Improvement Division of the Welsh Government contracted the Institute for Employment Studies (IES) to conduct an evaluation of outcomes of both the Corporate Health Standard (CHS) and the Small Workplace Health Award (SWHA). These Awards are granted to organisations that demonstrate that they meet national standards in how they deal with staff health and well-being. Different levels of Awards are available (bronze to platinum for the CHS and bronze to gold for the SWHA). The Welsh Government owns the rights to the Awards and contracts Public Health Wales (PHW) to deliver them, both in terms of recruiting organisations onto the schemes and supporting organisations during their application. The final assessments are carried out by independent assessors subcontracted by the Welsh Government.
- 1.2 The purpose of the evaluation was to look at the outcomes of the Awards in terms of:
  - reduced sickness absence
  - improved employee retention
  - improved engagement and motivation of employees, and
  - improved company profile.
- 1.3 In addition, the evaluation was tasked with assessing the economic costs for businesses of applying for the Awards and the additional outcomes achieved by applying for a higher level of Award (e.g. from bronze to silver, silver to gold etc.).
- 1.4 This report describes the interim findings from the evaluation using telephone interview data collected up to the end of July 2012.

## **2 Methodology**

- 2.1 The methodology for the evaluation was adjusted in July 2012 due to difficulties in recruiting sufficient organisations to take part in fieldwork. Details on the original and revised methodologies are described below.

### **Original methodology**

- 2.2 The original methodology for the evaluation of the Awards consisted of three key elements:
- Element 1: Initial and follow-up telephone interviews with 30 new applicants for the Awards (10 CHS, 20 SWHA).
  - Element 2: In-depth longitudinal case studies with 5 new applicants of CHS and 10 new applicants of SWHA.
  - Element 3: Telephone interviews with 12 organisations holding the CHS or SWHA for more than one year and/or progressing from one level of Award to another.
- 2.3 The case study element of the evaluation was designed to include:
- interviews with those responsible for the Award application and other managers and staff within the participating organisations on two occasions, prior to working towards the Award (the pre-level measure) and after obtaining it (the post-level measure)
  - a review of any available organisational data on outcomes, and
  - an online/postal staff survey distributed twice (pre- and post-Award) to all employees in the participating organisation (part of this work included a review and pilot of a pre-existing survey developed by BMG Research).
- 2.4 Underpinning the original plan were the estimates provided by the Welsh Government that 25 new organisations participate in the CHS and 65 participate in the SWHA each year. These figures are based on the amount of throughput in recent years. Given the short amount of time available for the evaluation (around 18 months in total) and the need for a pre and post methodology, it was proposed that all of the initial case study interviews should be completed by May 2012 so that a final evaluation report could be delivered in March 2013.

### **Difficulties recruiting new applicants into the evaluation**

2.5 In early 2012, IES raised concerns about the timetable for the evaluation after receiving very few contacts for newly participating organisations. Between November 2011 and March 2012, IES received just seven contacts from PHW, of which only one was an applicant for the SWHA. This meant that progress with elements 1 and 2 of the evaluation was slow. However, it was difficult at that stage to assess whether the problem was due to fewer employers participating in the schemes than usual or employers being unwilling to pass on their contact details to the evaluation team.

### **Future evaluation plan**

2.6 In July 2012, it was agreed between the Welsh Government and IES that, going forward, resources should focus on the following:

- extending element 3 of the evaluation to include telephone interviews with another three Award holders, preferably private sector organisations holding the SWHA
- conducting additional telephone interviews with Award holders that had held the Award for less than one year
- conducting face to face interviews with Welsh Government and PHW staff to discuss the reasons for the low number of new applicants (both in terms of those participating in the evaluation and the schemes overall)
- reviewing the available literature on the effects of the recession on uptake of workplace health awards/schemes both within the UK and abroad.

### **This report**

2.7 The findings that follow are based on the telephone interviews conducted up to the end of July 2012. This includes interviews with 16 new applicants for the Awards (10 applicants for the CHS and six applicants for the SWHA) and 15 previous Award holders (eight holders of the CHS and seven holders of the SWHA). The individuals interviewed were those responsible for the Award application in the organisation. The report does not include data from the case study element of the evaluation, which will be analysed in the final report in

March 2013. Please note that, throughout this report, the term 'Award' is used to denote either the CHS or SWHA.

### **3 Background of participating organisations**

- 3.1 Participants came from a range of sectors, but most of the large organisations were from the public sector whilst many of the smaller organisations were from the voluntary, education or health and social care sectors. Because of this, many of the participating organisations had links with the Welsh Government.
- 3.2 Some of the large organisations were branches of UK-wide organisations/government agencies so were able to access support and information from head office. These organisations were usually required to adhere to policies devised centrally.
- 3.3 The roles of the interviewees responsible for the application of the Award varied between the organisations. In some of the public service organisations (e.g. police, fire services, armed forces) the interviewees' roles were dedicated to improving staff health and well-being, but in most cases the interviewees also held responsibility for other work. In the smaller organisations, the contact tended to be the overall manager or office manager. These individuals often had to juggle applying for the Award with other business priorities.

## 4 Interim Findings

4.1 This section of the report draws on the key themes emerging from the telephone interviews. It covers the prior awareness of health issues in the organisations, their reasons for getting involved in the Awards, the benefits received and the challenges in both working towards the Awards and sustaining any changes made.

### Prior awareness of health issues

4.2 A number of the organisations included in the research undertook work activities that focussed on health. Some of the charities aimed to address health issues amongst the general public whilst other organisations (e.g. training providers, care homes) were required to consider the health needs of their clients/customers and advise them on how to improve health. In some of the public service organisations (e.g. police, fire services and armed forces) there was a requirement on staff to demonstrate their fitness in order to carry out their role. As a result of their involvement in health-related work, many interviewees described their staff as 'health-aware' prior to getting involved in the Award.

*“Our employees are quite a fit, healthy bunch. They’re really quite motivated themselves. A lot of them go to the gym and they take care of themselves.”*

(Medium-sized private sector organisation)

4.3 A number of the interviewees believed that their organisations had a caring organisational culture prior to getting involved in the Award, particularly the small voluntary sector organisations.

*“We are a caring organisation. We do look after our staff and we want to make sure that they are looked after as they are our most important resource.”*

(Medium-sized public sector organisation)

4.4 Many of the interviewees believed that they were managing staff health and well-being well in their organisations prior to getting involved in the Award, and therefore felt that the main task required was to evidence what they had already done.

*“I went through all the criteria and we actually met all of that already. It’s just a case of slotting that into the portfolio and making sure we continuously meet those...I’d rate us five out of five and I don’t mean that flippantly. I just think that we really do put our people first.”*

(Large public sector organisation)

*“It only took us a couple of months to achieve the Award. We had a lot of stuff in place so it was just a matter of it being checked.”*

(Small private sector organisation)

### **Motivations behind getting involved in the Award**

4.5 For most organisations, sickness absence and staff retention levels were good prior to getting involved in the Award, so these in themselves were not motivating factors. Some of the large public sector organisations had experienced poor sickness absence in the past but had started to tackle this before applying for the Award. Only two organisations got involved specifically to reduce sickness absence and improve staff engagement, one of which undertook the CHS alongside a number of initiatives.

*“There were some concerns around current levels of sick absence within [the branches] within Wales... It was part of a strategy to improve well-being, staff engagement and reduce absence.”*

(Large public sector organisation)

4.6 Some organisations undertook the Award to improve their company profile, including their reputation amongst those they work for, their peers and the general public. A few of the organisations had close links with the Welsh Government and thought that holding the Award would show that they were adhering to its agenda. Others wished to improve their reputation amongst clients.

*“We needed to say that we were a quality company and that we cared about the environment and our staff and health and safety, so we needed some badges to illustrate this to our clients.”*

(Micro-sized private sector organisation)

4.7 Some of the public sector organisations were aware that their peers had received the Award and therefore felt pressure to hold it themselves.

*“There’s a little bit of keeping up with the Joneses.”*

(Large public sector organisation)

- 4.8 A minority of interviewees mentioned that they hoped the Award would make their organisation a more attractive employer.

*“The most important thing for my business is to be able to recruit numbers of high-quality caring people....[The Award] seemed like a sensible thing to do to make us a more attractive employer, to be able to say to existing and potential employees that we take their health and well-being seriously. The Award was evidence of that.”*

(Small private sector organisation)

*“In the wider community obviously it shows that we value our staff and hopefully it will encourage new members of staff to come on board.”*

(Large public sector organisation)

- 4.9 Some organisations were hoping that their involvement in the Award would help to raise the profile of employee health in the organisation, particularly amongst senior management.

*“Introducing it as a complete package identifies to our senior management what they could be doing to improve.”*

(Large public sector organisation)

*“I think the framework does help to focus people’s minds in terms of employee health and well-being.”*

(Large public sector organisation)

- 4.10 A common motivating factor behind getting involved in the Award was to improve staff engagement. Interviewees told how they wanted to demonstrate to their employees that they cared about their health and well-being.

*“I feel that it’s an important aspect to say that we’re looking after the health of all our staff members here, both physical and mental health. So we wanted to get involved to give something back to the staff to say we are being proactive.”*

Large public sector organisation

*“I just want to make sure that staff feel that the organisation cares about their health and well-being.”*

(Medium-sized private sector organisation)

4.11 For some of the new applicants this was particularly important given the recession and the fact that many employees were facing redundancies and pay freezes.

*“These days if you can’t offer them a pay rise or something concrete in their pay packet at least [through CHS] we can offer them some other benefits.”*

(Large public sector organisation)

*“Our organisation here now is going through a period of change. We’re being restructured at the moment so we wanted to make sure our staff are being looked after now more than ever.”*

(Medium-sized public sector organisation)

*“We going for it because it shows you care about how your staff are... If staff can see you are interested in them, you get more loyalty from them.”*

(Large private sector organisation)

4.12 Some organisations had undertaken a lot of work in the area of staff health and well-being prior to getting involved in the Award scheme. Interviewees from these organisations were primarily interested in checking that the work completed was appropriate and in gaining some recognition for what they had achieved already.

*“We thought it would be a challenge for us to look at what we had in place already and find out if we were meeting the standard. We might think that we’re doing it correctly but we don’t actually know until we follow a process.”*

(Large private sector organisation)

*“We’d already done a lot of work at that time so it was ticking off what we’d been doing and to check we hadn’t missed anything.”*

(Large public sector organisation)

*“Sometimes even if you’ve got everything in place it’s nice to know that you’re doing it right.”*

(Small private sector organisation)

*“I think we recognised ourselves that we did a lot for health and well-being prior to getting the Award, and I think we just saw it as getting*

*recognition and bringing together all the things we do into a more strategic plan.”*

(Large public sector organisation)

4.13 Many interviewees were attracted to the framework that the Award offers for dealing with staff health and well-being. This was particularly useful for a couple of organisations that had merged with other departments/agencies and needed to start rebuilding their work in this area. Even those organisations that had already done a lot on staff health and well-being were keen to get some guidance on how to formulate their work into a more strategic plan.

*“It gives you a structure in terms of what you should be looking to achieve and how to implement it.”*

(Large public sector organisation)

*“I think with the Award, although we were doing quite a bit, it may not have been a structured approach. By going down the Award route, you are working to a more structured approach.”*

(Small private sector organisation)

4.14 Some of the smaller organisations were taking or had taken an organisation-wide approach to the Award, whereby all employees, or as many as possible, were involved in the application process. The interviewees from these companies hoped the Award would bring staff together to focus on something that isn't work related but for their own benefit.

#### **Motivations behind working towards higher levels of Award**

4.15 The organisations that had gone on from the bronze level to achieve higher levels of the Award did so in order to keep a focus on staff health and well-being and to sustain the work they were doing in this area.

*“I think that the higher level of Award is helping us with continuing the health promotion within the workplace.”*

(Small private sector organisation)

4.16 Generally the organisations did not see each level of the Award as distinct and considered seeking higher levels as a natural continuation of what they had already been doing. Indeed some had received feedback

during their bronze/silver assessments that they had been close to achieving the next level, so the work involved to get to that level was not considered onerous.

*“When we were going for the bronze we had a variety of things that were so close to the silver anyway that it was a natural progression really to continue.”*

(Large public sector organisation)

### **Benefits obtained from the Awards**

4.17 It should be noted that objective data on the benefits organisations receive through their participation in the Award will be sought in the case study element of the evaluation. Findings from this will be included in the final report due in Spring 2013.

4.18 Most of the interviewees from Award-holding organisations were positive about the benefits obtained from their participation in the schemes. Only one was uncertain about what it had brought (this organisation already had most things in place prior to working towards the Award).

4.19 The benefits reported by interviewees were mainly around improved management of staff health and well-being in the organisation, particularly the improved communication and more joined-up working between different departments. This was partly achieved through the set up of health and well-being groups that drew on staff from different areas within each organisation.

*“I think [CHS] has woven a thread of health through almost everything we do.”*

(Large public sector organisation)

*“I think [responsibilities for health and well-being] tended to be done by the HR team, and what we’ve done is that we have a health and well-being group now, which is made up of different areas within the [organisation], so now it’s more of a wider input into the health and well-being programme ... I think promotion has got better over the last couple of years. We have representatives at each of the [sites] so they will support us getting the message out there.”*

(Large public sector organisation)

*“I would say [the main benefit is] bringing the [organisation] together in terms of health and well-being as opposed to having several different messages coming from different arenas, one from HR, one from comms another from the service area. It’s brought all those together and I would say it’s one message being issued now rather than several different ones.”*

(Large public sector organisation)

4.20 Interviewees from larger organisations generally found it difficult to know whether the Award had led to increased staff engagement. However, one reported an increase in its annual survey engagement scores from 43 per cent to 57 per cent in one year and another believed the improved morale was palpable. Representatives from some of the smaller organisations also believed that engagement had improved as a result of the Award.

*“I think there’s a good feeling in the [organisation]. Morale is up, it’s supported morale.”*

(Large public sector organisation)

*“I think it boosted morale slightly. I think it made them feel that we cared about them.”*

(Small private sector organisation)

4.21 One of the benefits reported by the smaller organisations was that involving all employees in the process of obtaining the Award had worked well to bring staff together. It had also meant that the sense of achievement at obtaining the Award had been felt by all staff rather than solely by management.

*“The staff and the management achieved it, everybody worked towards it. Everybody was participating in it and everybody was keen to celebrate in the outcome.”*

(Large public sector organisation)

*“They feel more valued because they’ve been involved.”*

(Small private sector organisation)

4.22 Many of the interviewees believed that involvement in the Award had raised awareness of health issues amongst their employees, although this was something they could not always prove. Often the interviewees,

particularly those from larger organisations, did not know whether the Award had led to any behaviour change amongst their employees. However, some knew that a number of staff had got involved in healthy activities (e.g. fitness classes) or knew of individuals who had been alerted to health issues through health checks and gone on to receive treatment. One smaller organisation reported that employees were now eating healthier foods in the workplace.

4.23 A handful of interviewees, mainly from the small organisations, reported a reduction in sickness absence as a result of the Award. For example, one organisation that started implementing the Bradford Factor<sup>1</sup> as part of the SWHA reported that this in itself reduced sickness absence by over half.

4.24 However, many of the interviewees from the Award-holding organisations did not believe the Award had led to reductions in sickness absence in their workplaces. This was primarily because sickness absence was low prior to them getting involved in the Award. In a few instances reductions in sickness absence were attributed to other activities outside of the Award. For example, one organisation had seen a decline in sickness absence over the period of obtaining the Award, but this was attributed to the expansion of the business at that time rather than the Award.

4.25 One large organisation reported that the Award had contributed to a reduction in sickness absence but could not be sure how big this contribution was because some staff on long-term sick had left the organisation during this period. However, the representative believed the real benefits of the Award were yet to materialise:

*“It’s difficult to directly connect the reduction in sick absence to achieving the award. I wouldn’t be brave enough to do that... What achieving the award has done is it’s benefited us long term... the idea is that the increased physical activity and increased awareness of nutrition will*

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1 The Bradford Factor is used in human resource management as a means of measuring worker absenteeism. The factor gives a rating to each employee over time based on the number and length of their absences. It highlights employees who have frequent short absences which are considered more disruptive than longer absences.

*protect us in years to come. But we won't see the benefit of that yet, alright?... Because it's about preventable illness I don't think it's that easy to see the immediate impacts."*

(Large public sector organisation)

4.26 Some organisations received positive PR as a result of obtaining the Award, including internal PR (where part of a larger organisation) and external PR. For example, a small care-sector organisation received positive coverage of its achievement in the local press which in turn helped it to attract new clients.

### **Benefits obtained by moving from one level of Award to another**

4.27 Generally those that had moved from one level of the Award to another level found it difficult to say what additional benefits this had brought. In some instances this was because the organisation had been very close to achieving that higher level first time around, so the additional work required was minimal.

4.28 One interviewee believed that moving from one level of the Award to another had helped demonstrate to their employees that the organisation was serious about improving staff health and well-being. *"I think there was an initial thought [amongst staff] that it was only to get the Award, but we've continued with it [after bronze] and people can see that there is a genuine philosophy."*

(Large public sector organisation)

### **Challenges involved in working towards the Award**

4.29 Most of the interviewees felt that they had sufficient time and resources to complete the Award application. In larger firms, running health promotion activities and campaigns were considered the most resource-intensive aspects of the scheme, particularly in respect of the amount of administration required.

4.30 Some of the smaller private sector organisations could not afford for staff to participate in activities during work hours so were reliant on staff giving up their free time for activities (e.g. during lunch or after work). Some of those with flexi-time arrangements found that staff preferred to skip their lunch hour and leave early rather than participate in lunchtime

activities. One of the representatives from a small organisation explained the difficulties in finding time for staff to get involved in initiatives.

*“We want to involve the staff but those are the guys who are actually generating the work or doing the work that we’ve generated to provide invoices and therefore income and it’s a constant battle of time commitment and availability.”*

(Small private sector organisation)

4.31 In some organisations employees were scattered in different locations and/or their hours of work differed so one of the challenges for these representatives was ensuring that campaigns and initiatives reached all employees.

*“I would say the biggest obstacle really was just the size of the site. Because we were 300 staff, if I had somebody who was absent or somebody who was part-time, I had to make sure that that person was just as engaged as the next person.”*

(Large public sector organisation)

*“I think it’s harder for our business because the majority of our staff work remotely, away from the office, in clients’ homes. So we have to actively, carefully consider how we engage with them through team meetings, newsletters, employee forums etc. to make sure they get the messages that we’re trying to share with them.”*

(Small private sector organisation)

4.32 Some interviewees told how the needs of their employees varied between different sites/areas of work, so what worked in one part of the organisation did not necessarily work in another. This meant it was important to try different things to see what suited each group of employees best.

4.33 A minority of interviewees described the fine line between encouraging staff to alter their behaviour and dictating how they behave. A representative from a micro-sized organisation was hesitant to progress to the bronze level of the SWHA because he felt “embarrassed” to ask colleagues to be more healthy.

*“I think it’s none of my business to ask them to get involved. The employer’s responsibility is only to make sure that the work environment*

*doesn't make their health worse. Anything else is crossing the line between OH and personal lifestyle choices."*

(Micro-sized voluntary sector organisation)

*"We don't want to ram [health] down people's throats... Where do you cross the line so that you're not ramming it down their throats? I don't think our staff would appreciate that."*

(Large private sector organisation)

- 4.34 Some interviewees described how certain staff are resistant to living more healthily even after they have been made aware of the benefits. One representative told how it was necessary to continuously come up with new and innovative ways to encourage behaviour change. Linked to this, a number of interviewees reported disappointing levels of take up in some of their health initiatives.

*"We've found that it's difficult to maintain a level of lunchtime walking. You get certain gangs that will join and will start and then all of a sudden they'll drift away."*

(Large public sector organisation)

### **Sustainability issues**

- 4.35 Most Award-holding organisations had managed to sustain their efforts in the area of health and well-being since receiving their Awards. Many of the changes that had been made related to policies and procedures, which once in place were unlikely to be changed.

*"I think the changes that we made in our action plan to obtain the silver were sustainable ones, they were things that happen on a natural basis now."*

Large public sector organisation

- 4.36 The main threat to sustainability was a cut in resources, and concern about this was most prevalent amongst those from the public sector organisations. Some representatives from these organisations told how they had already been required to cut back on their health promotion campaigns. Some public sector organisations were reluctant to be seen to be spending large sums of money on staff health and well-being initiatives when other members of staff were losing their jobs, and some were concerned that this could receive negative press attention.

*“I think it can be a very hard balancing act. I think there does need to be a demonstration of the employer’s willingness to have good employee health and well-being but at the same time I think there needs to be a realistic approach on what may be the public view [public sector] staff as receiving... It’s a fine line between what’s going to be beneficial to the [organisation] and what could be seen as negative.”*

(Large public sector organisation)

- 4.37 Having a number of levels in the scheme to work through was seen as a good way of ensuring that health and well-being stays on the agenda. A representative from a small organisation which had obtained the SWHA at gold level was concerned about how her organisation would keep up the momentum now that it had reached the highest level of the Award.
- “I’m sort of worried now. Where do we go after gold? And does this mean that health and well-being slips off the agenda?”*

(Small not-for-profit organisation)

- 4.38 As described in the section above, some of the organisations told how it was difficult to maintain staff interest in any fitness classes they set up. Whilst initial interest amongst staff was high it often waned over time.

#### **Views on the information and support from Public Health Wales**

- 4.39 The vast majority of comments on the information and guidance provided by PHW practitioners were positive. The documents received were considered comprehensive and clear and organisations appreciated being signposted to other services. Practitioners were considered approachable and good at understanding organisations’ different needs and ways of working.

*“It was really easy to work through. The way it was broken down into modules was really, really helpful. It just allows you not to be overwhelmed. It was a very easy to use format.”*

(Small not-for-profit organisation)

*“With a lot of these awards there can be quite a lot of information that’s put across in a manner that can be confusing at times, which can put you off a little bit. The way the CHS Award is set out we have found quite straightforward and the aims are clear. With the help of [the practitioner] we have been guided through.”*

(Large public sector organisation)

*“[The practitioner] was very helpful, gave us a helping hand and was very understanding of our situation.”*

(Medium-sized voluntary sector organisation)

*“We had great support from our liaison. She was great.”*

(Large public sector organisation)

*“[Our contact] has been great with the support that she’s offered. We’re getting there slowly but she’s always on hand to help with advice.”*

(Large public sector organisation)

*“Yes it was all made very clear and we were supported very well. I’d say it was very good.”*

(Small private sector organisation)

*“She was very informative, explained a lot of grey areas that I had but she was also very supportive as well. We’ll get an email from her saying, “How’s it going? Do you need any more help?” So yeah, it’s really useful.”*

(Small private sector organisation)

4.40 Only a handful of suggestions were made on how PHW could improve the delivery of the Awards. These will be explored with PHW staff in qualitative interviews before being reported in March 2013.

## **5 Next steps**

- 5.1 The next stage of the evaluation includes completing the case study element of the research, specifically the post-Award interviews with staff and online employee survey, and analysis of organisational data on absence and retention. Five organisations will be included in this element. As mentioned in paragraph 2.6, future work will also include additional interviews with organisations already holding the Awards. The qualitative and quantitative data will then be reported in the final report in Spring 2013.
- 5.2 To add context to the research findings, the final report will include a review of any available literature on the impact of the recession on workplace health awards around the world. It will also include feedback from the Welsh Government and PHW staff on reasons for the low number of new applicants over recent months (both in terms of those participating in the evaluation and the schemes overall).