

Workplace Health Promotion - Lombardy WHP Network

Health Promotion and Prevention



THIS REPORT ARISES FROM THE JOINT ACTION ADDRESSING CHRONIC DISEASES AND HEALTHY AGEING ACROSS THE LIFE CYCLE (JA-CHRODIS) WHICH HAS RECEIVED FUNDING FROM THE EUROPEAN UNION, UNDER THE FRAMEWORK OF THE HEALTH PROGRAMME (2008-2013).

Table of Contents

General Data	3
Practice Description	3
Assessment Criteria	7
Associated Contents	12



Workplace Health Promotion - Lombardy WHP Network

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PRACTICE DESCRIPTION

Title

Workplace Health Promotion - Lombardy WHP Network

Summary (abstract)

The Lombardy Workplace Health Promotion Network involves 284 workplaces, employing 139.186 persons in November 2014. It is a public-private network, carried out by building partnerships and collaboration with all workplace main stakeholders: associations of enterprises, trade unions and the regional health system. The development of this Italian pilot project started in 2011 in Bergamo, by identifying and selecting good practices, and by experimenting the feasibility and effectiveness in two mid-sized companies before extending the project to other companies. A system of accreditation was later defined. Member companies should implement good practice activities over three years and 4 new activities every year to maintain the "Workplace Health Promotion Site"-logo. The areas of good practice are: nutrition, tobacco, physical activity, road safety, alcohol and substances, and well-being. The results are surprising in terms of network and adhesion. The WHP Network expanded on a regional scale during 2013 and is made up of companies ("Workplaces") which recognize the value of corporate social responsibility and undertake to be "environment conducive to health" systematizing, with the scientific support of Health Local Unit where necessary, actions (evidence-based) of different nature: informational (smoking cessation, healthy eating, etc.), organizational (canteens, snack vending machines, agreements with gyms, stairs health programmes, walking / biking from home to work, smoke-free environment, baby pit-stop, etc.) and collaboration with others in the local community (Associations, etc.).

Keywords

workplace, tobacco , nutrition , physical activity , road safety

Keywords suggested from MeSH

Workplace, Tobacco, Snacks, Health Promotion, Alcohols, Social Responsibility, Smoke



Country

Italy

Level of complexity**Implementers (authors)**

The Workplace Health Promotion is the result of the joint efforts of employers, employees and society. the company directly choose the strategies and apply them.

The Local Health Unit supports by moving towards evidence based interventions.

The Lombardy region collect , verify the data, and support the entire process.

Main aims and objectives of the practice

The Workplace Health Promotion is the result of the joint efforts of employers, employees and society, with the aim of improving health and welfare in the workplace

WHP addresses the following issues:

- improvement in work organization and working environment;
- encouragement for staff to take part in healthy activities;
- promotion of healthy choices;
- encouragement of personal development (empowerment).

This programme involves accreditation as a “Health Promoting Company” for enterprises undertaking to introduce practices of proven effectiveness and which may be considered “Good Practices” in the field of health promotion and sustainable development.

The objective of the WHP Network is not to award a “certificate of excellence” to just a few leading companies but rather to extend the Network to as many companies as possible in order to promote self assessment and improvement as regards health promotion, welfare and sustainability.

Target population

The target of intervention are workers of all companies involved.

Coverage of the interventions

Regional

What core activities have been implemented?

- The program manual is published in italian and in english (it describes the entire process and collect certified “good practice” to implement).
- A online regional system was created to collect data and share information within the WORKPLACE NETWORK.
- Lombardy WHP Network joined the European Network for Workplace Health Promotion (<http://www.enwhp.org>).
- The programme was conceived around the concept of the UNI-ISO 26000 “Guide to Social Responsibility” according to the definition of sustainable development.
- The WHP Network logo was created.
- The strategic conditions to support the process were created (through DDS n. 11861/2012 “health promotion in workplace: ASL suggestions for the development of effestive and sustainable interventions”).



What are the main results obtained from the development of the practice?

- 1) The main result is the participation and involvement of the companies in the region (103% increase in the subscriptions to the network from 2013 to 2014).
 - 2) Maintenance of the actions undertaken in the three years is a guarantee of a real structural change in the work environment.
 - 3) Best practices are evidence-based activities (continuous updating of the catalog of evidence-based actions by the Local Health Units) so they are proved to be effective in other contexts.
 - 4) Evidence-based actions are of different natures: informational (smoking cessation, healthy eating, etc.), organizational (canteens, snack vending machines, agreements with gyms, health Programmes stairs, walking / biking from home to work, smoke-free environment , baby pit stop, etc.) and collaboration with others in the local community (Associations, etc.).
 - 5) a one year impact estimation was conducted in Bergamo province (with 94 companies and 21.000 workers) and showed that after 12 months there was a reduction in some important risk factors for chronic diseases (particularly for fruit and vegetable intake and smoking cessation). It will be important to monitor the effects of the programme on other risk factors in the medium and long term, and also the impact of employment status and gender so as to adjust the programme interventions accordingly. Cooperation with occupational/authorized physicians with use of their data collected from health surveillance, together with a limited set of general risk factor indicators, would be a desirable development for further studies.
 - 6) Take care of the health of workers through a broad public health approach allows to set the conditions for a healthy and active aging and prevent chronicity (according to the logic of the Expanded chronic care model)
- However, the evaluation of initiatives to change lifestyle (especially the changes in diet and physical activity) needs a long time work and an appropriate Follow Up.

Did the practice succeed regarding the main aim and objectives outlined earlier?

Yes

Has the practice been formally evaluated?

Yes

Main lessons to be learned

INTERSECTORAL PARTNERSHIP AND ALLIANCES:

The program has a strong intersectoral character, the interest groups involved are, in particular: Confindustria Lombardia, Assolombarda, Sodalitas Foundation and Directions Strategic Health Authorities Subjects or units that manage social and socio-medical offers, public institutions, other Non Profit Organizations (with particular reference to social promotion associations and sports, voluntary organizations), national associations representing municipalities and provinces in Lombardy, trade unions, professional associations, scientific societies, universities.

IMPACT: The spread of registered actions that facilitate the adoption of healthy lifestyles and the empowerment of workers and, indirectly, their families contributes to improve the health of the population, it promotes healthy aging and prevent chronic diseases.

The choosed interventions and strategies influence multiple levels of the organization including the individual employee and the organization as a whole

The evidence based actions are continuously updated according to the literature data.

The one year Bergamo impact evaluation showed that after 12 months there was a reduction in some important risk factors for chronic diseases in workers participating in the programme, particularly for fruit and vegetable intake and smoking cessation. It will be important to monitor the effects of the programme on other risk factors in the medium and long term, and also the impact of employment status and gender so as to adjust the programme interventions accordingly.

SETTING: the workplace is a privileged setting for health promotion interventions. On average, Italians working full-time spend one-third of Their day, five days per week at the workplace.

SUSTAINABILITY: The increased subscriptions to the network and the participation of companies over time have shown the organizat ional and economic sustainability of the programme.



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Barriers to knowledge transfer

The programme is embedded in the National Prevention Plan 2014-2018 in order to test feasibility and scalability on national level.

Type of funding

Public

Sources of funding

The programme is funded by Lombardy Region (it was part of Regional Prevention Plan 2010-2013 and now it is part of the Regional Prevention Plan for 2014-2018).

The programme is linked to Territorial Networks of Conciliation, established in each province of Lombardy, to promote the adoption by businesses and public institutions in paths of social responsibility such as: good practice of conciliation life - work, improvement of organizational wellness, corporate welfare for the well-being of the employees and the link with health services in relation to prevention programs (screening, etc.).



ASSESSMENT CRITERIA

Description of the practice

The Lombardy Workplace Health Promotion Network involves 284 workplaces, employing 139,186 persons in November 2014. It is a public-private network, carried out by building partnerships and collaboration with all workplace main stakeholders: associations of enterprises, trade unions and the regional health system. The development of this Italian pilot project started in 2011 in Bergamo, by identifying and selecting good practices, and by experimenting the feasibility and effectiveness in two mid-sized companies before extending the project to other companies. A system of accreditation was later defined. Member companies should implement good practice activities over three years and 4 new activities every year to maintain the "Workplace Health Promotion Site"-logo. The areas of good practice are: nutrition, tobacco, physical activity, road safety, alcohol and substances, and well-being. The results are surprising in terms of network and adhesion. The WHP Network expanded on a regional scale during 2013 and is made up of companies ("Workplaces") which recognize the value of corporate social responsibility and undertake to be "environment conducive to health" systematizing, with the scientific support of Health Local Unit where necessary, actions (evidence-based) of different nature: informational (smoking cessation, healthy eating, etc.), organizational (canteens, snack vending machines, agreements with gyms, stairs health programmes, walking / biking from home to work, smoke-free environment, baby pit-stop, etc.) and collaboration with others in the local community (Associations, etc.).

Was the design of the intervention appropriate and built upon relevant data, theory, context, evidence, previous practices (including pilot studies)?

Yes

Did the design thoroughly describe the practice in terms of purpose, SMART objectives, methods (i.e. recruitment, location of intervention, concrete activities, and timeframe (sequence, frequency, and duration))?

Yes

Target population

The target of intervention are workers of all companies involved.

Was the target population/s defined on the basis of needs assessment including strengths and other characteristics?

Yes

Was the engagement of intermediaries/multipliers used to promote the meaningful participation of the target population?

Yes

Equity

This is a setting based community programme and all company workers are involved. Since 2015 special attention will be given at the involvement of blue collar workers that at present are less than white collar. The programme involves all workers (male and female, from local or urban areas, with different socioeconomic status). No specific vulnerable social group is targeted.

In design, were relevant dimensions of equity adequately taken into consideration and targeted (i.e. gender, socioeconomic status, ethnicity, rural-urban area, vulnerable groups)?

Yes

During implementation, were specific actions taken to address the equity dimensions?

Yes



Empowerment and participation

The Workplace Health Promotion is the result of the joint efforts of employers, employees and society. The company directly choose the strategies and apply them.

The Local Health Unit supports it by moving towards evidence based interventions.

The Lombardy region collect , verify the data, and support the entire process.

The intervention wasn't directly designed with the workers, but it was implemented in consultation with the companies involved.

The intervention involves all company workers and indirectly acts also their families.

Yes, the intervention aims to support the healthy choices of the workers and their family and to empower them.

Was the intervention designed and implemented in consultation with the target population?

No

Did the intervention achieve meaningful participation among the intended target population?

Yes

Did the intervention develop strengths, resources and autonomy in the target population? (I.e. assets-based, salutogenic approach)

Yes

Comprehensiveness of the intervention

The intervention aims to address subjects health behaviour, that are clearly related to social, environmental and interpersonal determinants.

An effective partnership is in place (between the regional health system, private enterprises and public associations) and it is based on a corporate social responsibility. It spread actions "recommended and/or proven" that facilitate the adoption of a healthy lifestyle in all the staff of the organization, with repercussion on families and on the local community. It's oriented on organizational and economic criteria.

The programme "workplace health promotion, Lombardy WHP Network" is inserted in the National Prevention plan 2014-2018, in the Regional Prevention Plan for 2010-2013 and 2014-2018 and fits into the strategies of EUROPEAN INNOVATION PARTNERSHIP on Active and Healthy Ageing (EIP -AHA).

Lombardy WHP Network is a member of of the European Network for Workplace Health Promotion. (<http://www.enwhp.org>).

The programme was conceived also around the concept of the UNI-ISO 26000 "Guide to Social Responsibility" according to the definition of sustainable development.

Did the intervention have a comprehensive approach to health promotion addressing all relevant determinants, (i.e. including social determinants) and using different strategies (i.e. setting approach)?

Yes

Was an effective partnership in place during the implementation of the practice (i.e. multidisciplinary, inter-sector, multi-sector, and alliances with main stakeholders)?

Yes

Was the intervention aligned with a policy plan at the local, national, institutional or at international level?

Yes



Ethical considerations

The company directly chooses the strategies and applies them.

Every company can choose the level of implementation proportional to its specific needs.

There aren't potential burdens or harms because the implemented activities are evidence-based and may be considered "Good Practices" in the field of health promotion and sustainable development.

The company has to organize for all employees a presentation of the programme. There is a manual available that describe pre-requisites, aims, process and strategy.

Was the intervention implemented equitably (proportional to needs)?

Yes

Were potential burdens (including harm) of the intervention addressed (for the target population)?

Yes

Were the intervention's objectives and strategy transparent to the target population and stakeholders involved?

Yes

Evaluation

The programme was evaluated by expert health promotion peer reviewers using the national good practice assessment form, before being adopted at regional level (http://www.dors.it/alleg/bp/201412/griglia_naz_en.pdf).

Every year the companies declare what actions (good practice) have been implemented and what they will intend to do.

To plan the more consistent actions in the business context and to assess the improvements achieved, it is important "in the start" to measure the actual situation with respect to the behaviors (determinants of health and risk factors) of the workers in the organizational business aspects.

To this end, within 3 months from the enrollment, it is expected to :

- distribute an anonymous questionnaire to all employees for the evaluation of their lifestyle (the data are not yet available);
- complete a "company" questionnaire for the development and/or the re-orientation of actions already in place within the Company and to observe and present changes/modifications on the medium-long term.

Both instruments are used again at 36 months from the first distribution.

One year impact in Bergamo province was evaluated (Med Lav 2015; 106, 3: 159-171).

At the end of 2014 we can count the adherence of 284 companies to the network and a total of 139,186 employees are involved. From 2013 to 2014 the regional increase was equal to 103% in relation to the number of companies and 132% in relation to the number of employees.

At the end of each year, the Companies through the regional online database, have to:

- certify, the implementation of the best practices (ie actual actions to facilitate the ability of workers to adopt healthy behaviors in Company) and
- report their problems and needs.

Did the evaluation results achieve the stated goals and objectives?

Yes

Did the intervention use a defined and appropriate evaluation framework for assessing structure, processes and outcomes? (i.e. validated tools, evidences of the results of the evaluation linked to actions to reshape the implementation accordingly, efficiency assessment of the intervention (after implementation)(e.g. cost versus outcome)

Yes

Did the intervention have any information/monitoring system in place to regularly deliver data aligned with evaluation and reporting needs?

Yes



Specifically, what has been measured? Process (respondents, method, and participants' satisfaction); effects (impact/outcomes); others.

Yes

Sustainability

The programme is embedded in the National Prevention Plan 2014-2018 and in Lombardy's Regional Prevention Plan 2009-2013 and 2014-2018.

The programme is embedded in the annual system that assign the objectives to the general managers of local health authorities and hospitals. (Determination for the management of the regional social health services year 2015).

The company choose to join the Network and give a broad support to the process.

The Lombardy Region supports and appreciates the involved companies.

The company workers participate in a satisfactory way to all the proposed activities.

They are not able to support directly the intervention

Is the continuation of the intervention ensured through institutional ownership that guarantees funding and human resources, and/or mainstreamed?

Yes

Is there a broad support for the intervention amongst those who implement it?

Yes

Is there a broad support for the intervention amongst the intended target population?

Yes

Governance and project management

There aren't specified sources of funding because the programme is a "system action" (it is embedded in an annual system that assign the objectives to the general managers of local health authorities and hospitals. "Determination for the management of the regional social health services").

The company interested in joining the Network must first of all check on the following pre-requisites:

- 1) being in compliance with security contributions and insurance;
 - 2) having drawn up the Risk Assessment as required by Legislative Decree 81/08, as amended and comply with the provisions on health and safety in the workplace;
 - 3) being on compliance with environmental regulations (Legislative Decree 152/06, as amended). 4) the company must not in the five previous years have received convictions related to the application of the Legislative Decree 231/2001.
- Then the company must follow the procedure described in the Network Manual.

The Prevention Department of Local Health Unit update, through the scientific literature, the list of evidence based good practice.

The Lombardy Region supports the involved companies, analyses the annual online data and maintains alliances.

Did the intervention include an adequate estimation of the human resources, material and budget requirements in clear relation with committed tasks?

Yes

Were sources of funding specified in regards to stability and commitment?

No



Were organisational structures clearly defined and described (i.e. responsibility assignments, flows of communication and work and accountabilities)?

Yes

Potential of scalability and transferability

At the moment, there are data from a pilot study in Bergamo with promising results.

A controlled non-randomized, before-after evaluation was carried out. Data were collected through anonymous questionnaires before (t0) and after participation in a 12-month health promotion programme (t1). The “control” group consisted in workers of companies participating in the programme who had not yet undertaken any interventions in the theme areas covered by the assessment.)

The programme is embedded in the National Prevention Plan 2014-2018 in order to test feasibility and scalability on national level.

The knowledge transfer strategies are:

- a presentation of the programme to all employees by the company;
- the manual describing process and strategy ;
- local journal articles;
- scientific publications.

An analysis of requirements for eventual scaling up is not yet available. The programme is embedded in the National Prevention Plan 2014-2018 in order to test feasibility and scalability on national level.

Is the potential impact on the population targeted assessed (if the intervention is scaled up)?

No

Are there specific knowledge transfer strategies in place (evidence to practice)?

Yes

Is there an analysis of requirements for eventual scaling up such as foreseen barriers and facilitators, available? (i.e. resources, organisational commitment, ...)

No



ASSOCIATED CONTENTS

Title: Good practice assessment form for health promotion and prevention
Type of Content:  Document
Link: http://www.dors.it/alleg/bp/201412/griglia_naz_en.pdf



Title: Workplace health promotion: evaluation of evidence of efficacy and methodological recommendations
Type of Content:  Document
Link: <https://www.ncbi.nlm.nih.gov/pubmed/19848100>



Title: Assessment of the impact over one year of a workplace health promotion programme in the province of Bergamo
Type of Content:  Document
Link: <https://www.ncbi.nlm.nih.gov/pubmed/25951863>



Title: Promoting physical activity: An inter-sectorial activity between health and spatial planning
Type of Content:  Document
Link: http://urbani-izziv.uirs.si/Portals/uizziv/posebne_izdaje/UI-thematic-issue-2015-1.pdf#page=34



Title: European Network for Workplace Health Promotion



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Type of Content:

 Web page

Link:

<http://www.enwhp.org/about-enwhp.html>



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