

# Health and well-being at work: a survey of employers

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## Background and survey objectives

The Health and Well-being Survey of Employers was jointly commissioned by the Cross-Government Health, Work and Well-being Strategy Unit (HWWB)<sup>1</sup> and the Department for Work and Pensions (DWP).

In March 2008, Dame Carol Black's review of the health of Britain's working-age population was published<sup>2</sup>. This review recognised the beneficial impact that work can have on an individual's state of health and that work is generally good for both physical and mental health. The response to Dame Carol Black's review<sup>3</sup> was published in November 2008 and identified seven key indicators against which to develop baseline measures.

The employer survey was commissioned to provide new evidence to address gaps in knowledge about:

- employers' perceptions of the importance of work to health and health to work, and to what extent investment in health and well-being was deemed a priority;
- the promotion of health and well-being at work through the availability of health and well-being initiatives or support;

- evidence of how organisations engage with their staff, by exploring the methods used to communicate with the workforce and to what extent organisations acted on employee feedback;
- measures of business productivity, namely incidence and management of sickness absence, and measures of labour turnover; and
- information regarding employers' occupational sick pay (OSP) policies.

The data from the survey have been used in DWP's baseline indicators report against which progress will be measured in the future<sup>4</sup>.

## Research method

The survey interviewed a stratified, random sample of employers at head office level in Great Britain. The survey was carried out using Computer Assisted Telephone Interviewing by GfK NOP's telephone interviewing field force between 24 February and 20 May 2010. The questionnaire averaged 20 minutes in length and in total 2,250 interviews were achieved with organisations with two or more employees in Great Britain.

The survey data were weighted so that they could be analysed in two ways. First, the data were weighted to make them representative of employers in Great Britain, and secondly to be representative of employment in Great Britain<sup>5</sup> (to provide a picture in terms of the volume of employees represented by the results).

<sup>1</sup> HWWB is sponsored by five government partners: DWP, Department of Health, the Health and Safety Executive, the Scottish Government and the Welsh Assembly Government.

<sup>2</sup> <http://www.dwp.gov.uk/docs/hwwb-working-for-a-healthier-tomorrow.pdf>

<sup>3</sup> <http://www.dwp.gov.uk/docs/hwwb-improving-health-and-work-changing-lives.pdf>

<sup>4</sup> Health, Work and Well-being Baseline Indicators Report (HWWB, 2010); <http://www.dwp.gov.uk/docs/hwwb-baseline-indicators.pdf>

<sup>5</sup> Data were weighted to adjusted counts supplied by the Inter-departmental Business Register for organisations with two or more employees and by industry size in Great Britain.

## The importance of health to work and work to health

There was overwhelming agreement among employers that organisations had a responsibility to encourage employees to be physically and mentally healthy and that there was a link between work and employees' health and well-being. However, only a slim majority of employers agreed that 'the financial benefits of spending money on employee health and well-being outweighed the cost', and half thought 'their employees would not want them to intervene in terms of their physical and mental health'.

Large organisations were more likely than small organisations to recognise the financial benefits of investing in employee well-being. Small employers were more likely than large employers to think that employees would not welcome interference in matters concerning their health.

A quarter of respondents agreed 'that sickness absence was a real barrier to productivity in their organisation' at the time of the interview, and this was more likely to be the case among those working for large organisations, where the data indicated that levels of sickness absence were higher.

## Promotion of health and well-being at work

### Health and well-being services and benefits

In terms of measures used to promote or encourage healthy lifestyles and improved well-being, those most commonly cited as being provided to workers in the last 12 months were 'health and safety training', 'more than 20 days' holiday (excluding bank holidays)' and 'work area assessments and adjustments'. Large organisations were more likely than medium and small organisations to say they provided almost all of the 19 benefits and initiatives that were explored by the survey.

A third of employers had taken at least one action in the last 12 months to keep employees with health problems in work or facilitate their return to work. These were most likely to be large organisations (who were more likely to have encountered long-term absence), public sector and trade unionised employers. The most commonly cited measures used by employers in the last 12 months were 'Allowing employees to work reduced or different hours' and 'Meetings to discuss extra help that employees might need to return to or stay in work'.

### Flexible working

Around six in ten organisations (61 per cent) offered flexible working practices to their staff, such as flexi-time, working from home and job sharing arrangements and this was more likely to be the case among large employers than amongst medium or small employers.

In terms of the volume of employees covered by the data, 82 per cent of employees were working for organisations that provided flexible working practices. Although it should be noted that flexible working arrangements may not have been available to all employees.

### Stress management

Seventeen per cent of organisations provided stress management support or advice, and this was most likely to be the case among large employers, those in the public sector and in organisations with trade union presence.

If the findings are considered in terms of all organisations (i.e. including organisations that provide no support measures in this regard), 14 per cent of all employers used 'Informal discussions' and 12 per cent used 'Appraisals'; at the other end of the spectrum, two per cent specifically cited the 'HSE Stress Management Standards Programme'.

### Job satisfaction

Respondents were asked to what extent they agreed or disagreed with the statement 'this organisation takes steps to increase employees' job satisfaction'.

The overwhelming majority of respondents (89 per cent) agreed to some extent and just two per cent disagreed. Levels of overall agreement did not vary significantly by size of employer, type of organisation or by the presence of a trade union.

## Worker engagement

From a list of ten specified methods, the most common ways in which senior managers communicated with employees were 'Informal verbal communications between senior management and staff'; 'Regular meetings between management and staff'; 'Notice boards', and the 'Regular use of the management chain to cascade information'. Generally speaking, large organisations were more likely than small organisations to cite all the methods of communication explored by the survey, and employers in the public admin/education and health/social work sectors were more likely than those in other sectors to use most channels of communication.

Of those employers that used channels of communication where feedback was potentially sought from employees, three-quarters said they acted on employee feedback all or most of the time.

## Productivity and performance

### Sickness absence

Eight in ten employers had a system in place for recording sickness absence and this was most likely to be the case among large, public sector organisations.

In general, large employers were more likely to have a higher incidence of sickness absence than medium and small employers. When the evidence was examined in terms of whether higher sickness absence correlated with the payment of occupational sick pay, the findings were inconclusive.

## Retention

The survey measured retention by means of a 'wastage' measure<sup>6</sup>, i.e. the number of employees who had left an organisation in the past year as a proportion of the average number of employees over that same period.

Half of all organisations reported no wastage in the past year, and this was more likely to be the case for small employers. Analysis by industry sector<sup>7</sup> showed that health/social work organisations were most likely to report any wastage in the past year, while respondents in the hotels/restaurant sector were more likely than all other respondents to report wastage at a level of 25 per cent or more.

## Occupational sick pay

Nearly half of employers paid OSP to all, or a proportion of, their staff. Large organisations were mostly likely to provide OSP: 88 per cent compared with 71 per cent of medium and 47 per cent of small employers. Four in ten employers did not pay OSP and the remainder of employers did not have a policy on OSP. Smaller organisations were more likely to either not pay OSP or did not have policy on the payment of OSP.

The maximum length of time for which employers paid any OSP for a period of absence averaged 67 working days. The maximum length of time at which OSP was paid at a rate of 100 per cent of salary averaged 52 working days.

<sup>6</sup> As adopted by the Chartered Institute of Personnel and Development (CIPD) in their Recruitment, retention and turnover: annual survey report 2009; London.

<sup>7</sup> Industry sector was defined using the Standard Industrial Classification, see [http://www.statistics.gov.uk/methods\\_quality/sic/downloads/UK\\_SIC\\_Vol1\(2003\).pdf](http://www.statistics.gov.uk/methods_quality/sic/downloads/UK_SIC_Vol1(2003).pdf)

## Government-sponsored health and well-being initiatives and information

The survey asked about awareness and take up of five government initiatives: Regional health, work and well-being co-ordinators; the Workplace Well-being Tool (previously known as the Business Health Check Tool); Occupational health helpline for small business; the Fit for work service and the National Institute for Health and Clinical Excellence (NICE)<sup>8</sup> public health guidelines.

Awareness was highest for the Fit for work service and Occupational health helpline for small businesses (around a fifth recognised these).

NICE public health guidance was used by 16 per cent of those who were aware of it (and by two per cent of all employers that were interviewed), and this was the highest level of use across all the initiatives examined.

## Conclusions

As well as providing new evidence about sickness absence and organisations' policies in relation to OSP, the survey has shown that activities to promote the health and well-being agenda were present in organisations of all sizes. Such activities, however, were more prevalent in large organisations, especially those in the public sector and those with a trade union presence.

This trend was also observed in the parallel employee survey<sup>9</sup> undertaken for HWWB.

The challenge going forward will be to transfer the practices that are happening widely in large organisations to small and medium-sized enterprises, which are often less able to invest in this area and tend to have less structured systems of management in place.

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<sup>8</sup> NICE, <http://www.nice.org.uk/>

<sup>9</sup> See Section 2.3 for more details

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The full report of these research findings is published by the Department for Work and Pensions (ISBN 978 1 84712 984 0. Research Report 750. July 2011).

You can download the full report free from: <http://research.dwp.gov.uk/asd/asd5/rrs-index.asp>

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