

Research report

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

by Viv Young and Claire Bhaumik

Department for Work and Pensions

Research Report No 750

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

Viv Young and Claire Bhaumik

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Department for Work and Pensions

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# Abbreviations

CATI	Computer Assisted Telephone Interviewing
CIPD	Chartered Institute of Personnel and Development
CVTS	Continuing Vocational Training Survey
DWP	Department for Work and Pensions
GB	Great Britain
FFWS	Fit for Work Service
HSE	Health and Safety Executive
HWWB	Health, Work and Well-being
IDBR	Inter-Departmental Business Register
IQCS	Interviewer Quality Control Scheme
NICE	National Institute for Health and Clinical Excellence
ONS	Office for National Statistics
OSP	Occupational sick pay
SIC	Standard Industrial Classification
SME	Small and medium-sized enterprises
SSP	Statutory Sick Pay
SWASH	Survey of Workplace Absence Sickness and Health
VAT	Value Added Tax

# Summary

## 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 engaged 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 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.

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<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 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>

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).

The remainder of this summary discusses what the survey measured and the key findings that emerged.

### 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' (Section 2.1).

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 (Section 2.1).

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 (Section 2.1).

### 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 (Section 3.1).

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 (Section 5.2). 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' (Section 5.2).

#### Flexible working

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 among medium or small employers (Section 3.2).

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<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.

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 (Section 3.2.2). 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 (Section 3.3).

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’ (Section 3.3.1).

### **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 (Section 3.4).

### **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 administration/education and health/social work sectors were more likely than those in other sectors to use most channels of communication (Section 4.1).

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 (Section 4.2).

## 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 (Section 5.1).

In general, large employers were more likely to have a higher incidence of sickness absence than medium and small employers (Section 5.1.2). When the evidence was examined in terms of whether higher sickness absence correlated with the payment of occupational sick pay, the findings were inconclusive (Section 6.5).

### 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 (Section 5.4).

### Occupational sick pay

Nearly half of employers paid occupational sick pay (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 (Section 6.1).

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 (Section 6.3).

### 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 Businesses; the Fit for Work Service and the 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) (Section 7.1).

‘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 (Section 7.2).

### 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

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

<sup>8</sup> National Institute for Health and Clinical Excellence (NICE), <http://www.nice.org.uk/>

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

# 1 Introduction

## 1.1 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>10</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>11</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. It also identified the importance of healthy workplaces designed to protect and promote good health, and the central role that such workplaces play in preventing illness arising in the first place. The response to Dame Carol Black's review<sup>12</sup> was published in November 2008 and identified seven key indicators against which to develop baseline measures.

This survey develops the evidence base and explores the links between health and work, as well as providing baseline data so that progress on health and well-being at work can be measured and monitored over time.

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 when ranked against other organisational priorities;
- the promotion of health and well-being at work through the supply of health and well-being initiatives or support;
- evidence of how organisations engaged 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>13</sup>.

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<sup>10</sup> HWWB is sponsored by five government partners: DWP, Department of Health, Health and Safety Executive (HSE), the Scottish Government and the Welsh Government.

<sup>11</sup> <http://www.dwp.gov.uk/docs/hwwb-working-for-a-healthier-tomorrow.pdf>. Op cit.

<sup>12</sup> <http://www.dwp.gov.uk/docs/hwwb-improving-health-and-work-changing-lives.pdf>. Op cit.

<sup>13</sup> Health, Work and Well-being Baseline Indicators Report. Op cit.

## 1.2 Overview of the survey method

Full technical details about the design and administration of the survey are provided in the appendices to this report (see Appendix B). The survey interviewed a stratified, random sample of employers in Great Britain (GB) and the sample was drawn in order that medium and large organisations<sup>14</sup> were represented in sufficient numbers to permit analysis by size of organisation. Although such organisations are relatively few in number, they employ a large proportion of the total labour force and are, therefore, important in terms of their impact on employee health and well-being. The sample covered public, private and third sector organisations.

Employers were sampled at head office level from the Inter-Departmental Business Register (IDBR)<sup>15</sup>, and the survey was conducted with the most senior person with responsibility for personnel issues across the whole organisation in GB (or the owner or manager in smaller settings).

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. All fieldworkers working on the study were fully trained to Interviewer Quality Control Scheme (IQCS)<sup>16</sup> standards, and all attended a formal briefing given in person by members of the GfK NOP executive team.

In total 2,250 interviews were achieved with organisations with two or more employees in Great Britain, broken down by sample type as follows<sup>17</sup>:

- Small (2- 49 employees) 1,076
- Medium (50-249 employees) 604
- Large (250+ employees) 570

The questionnaire averaged 20 minutes in length and asked employers to answer in terms of their entire permanently employed workforce. The questionnaire comprised six key sections as follows (the final survey questionnaire can be found in the appendices):

- 1 **Organisation details:** a range of information, including type of organisation, number of full- and part-time permanent staff, ages of staff and the length of time the organisation had been established.
- 2 **Perceptions of employee health and well-being:** to what extent employers agreed with six statements about the importance of employee health and well-being, and their responsibilities in this regard.

<sup>14</sup> Small organisations had 2-49 employees, medium organisations had 50-249 employees, and large organisations had 250+ employees. It should be noted that analysis by size of organisation in the tables of the report show different figures and these do not sum to 2,250; this is because employers were asked to classify the size of their organisation during the interview and some provided details that contradicted the information on IDBR (or they 'did not know', n=5).

<sup>15</sup> IDBR is a government database maintained by the Office for National Statistics and covering all tax and VAT registered businesses in GB. It was the preferred sampling frame because of its coverage, particularly of smaller companies and of head offices (rather than individual sites).

<sup>16</sup> IQCS is an independent organisation, working with providers and buyers of social and market research fieldwork to develop and maintain high standards of data collection in the social and market research industry.

<sup>17</sup> Sample type was based on size of organisation and reflects information held by IDBR.

- 3 **Health and well-being:** information about the benefits and services provided to staff in the organisation, methods for managing employee stress, communication and feedback methods, and priorities for investment over the coming year.
- 4 **Absence and absence management:** information on the proportion of working time lost to absence and the reasons for absence, the usefulness of medical statements and what, if anything, the employer had done to keep employees with health problems in work or to facilitate their return to work.
- 5 **Uptake and awareness of government-sponsored health and well-being initiatives and information:** information about employers' knowledge and use of government initiatives and information sources to help employers improve the health and well-being of their staff.
- 6 **OSP:** information about the incidence of payment of OSP and patterns of payment.

The questionnaire was piloted in two stages (with probing at each stage to check respondents' understanding of the survey questions), and refinements were made after both pilot stages. As a result of the testing phase, a facility was put in place for following-up employers that could not provide key information on first contact. All employers that were unable to access information or were unsure of their organisation's policies were asked if they were happy to be called back, and where possible, were sent an automated email that summarised the information required. In this way a more complete data record was secured. Further detail on the piloting phase is provided in the appendices to this report (see Appendix B).

The survey data were weighted to ensure they were representative of the universe of head office organisations in GB with two or more employees<sup>18</sup>. Two weighting schemes were used and are referred to throughout this report, as follows:

- 1 the data were weighted to be representative of **all employers** in GB with two or more employees by size band and industry group (using the Standard Industrial Classification<sup>19</sup>).
- 2 the data were weighted to be representative of **all employment** in GB within organisations with two or more employees. To explain, the 2,250 organisations in the sample represented a total workforce of 25,267,000 employees; therefore, weighting the data to the profile of employment provided the findings in terms of the volume of employees represented by the data.

Information on the final sample is provided in Table 1.1 and shows key characteristics of the sample in terms of both weighting schemes described above. For example, when considering what proportion of the sample belonged to the private sector, Column A shows that 88 per cent of organisations in the sample were in the private sector, while Column B shows that 69 per cent of the employees represented by the results were employed by private sector organisations. In the case of organisations size, Column A shows that 95 per cent of employers in the sample were small organisations but Column B shows that 24 per cent of employees represented by the results were employed in small organisations.

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<sup>18</sup> Further details about the adjusted universe can be found in Section B.9.1.

<sup>19</sup> 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).  
Op cit.

**Table 1.1 Sample profile weighted by employer unit (Column A) and employee volume (Column B)**

	<i>Unweighted</i> <b>2,250</b>	<i>Column A: weighting by employer unit</i> <b>2,250</b>	<i>Column B: weighting by employment (employee volume)</i> <b>25,267,000</b>
Type of organisation	n	%	%
Private sector	1,761	88	69
Public sector	238	3	20
The voluntary sector, including charities or trusts	221	7	9
Private-Public Partnership (PPP)	15	*	1
Part private-owned, part voluntary-owned	4	*	*
<b>Organisation size</b>			
Small (1-49)	1,123	95	24
Medium (50-249)	555	4	13
Large (250+)	568	1	63
<b>Presence of trade union in organisation</b>			
Yes	483	7	36
No	1,747	91	64
<b>Industrial group</b>			
Agriculture, fishing, mining	62	7	2
Manufacturing and utilities	300	11	12
Construction	173	11	5
Finance	57	2	5
Real estate and transport	588	25	22
Public administration and other community, social and personal services	187	7	10
Education	160	2	12
Health	266	7	12
Wholesale and retail	296	18	15
Hotels and restaurants	141	8	6

Base: All.

Note: Some profile figures do not add up to the stated base or to 100 per cent due to respondents that were unwilling or unable to classify themselves into the categories shown during the survey. \* denotes a value of less than 0.5 per cent.

### 1.3 The research series

The Employer Survey forms part of a wider programme of research encompassing:

- an HSE/HWWB-sponsored survey of employees carried out in autumn 2009; and
- an HSE-sponsored survey of line managers, the findings from which will be examined alongside an analysis of the employee survey data.

### 1.4 Report structure

The remainder of this report is divided into six chapters. The next chapter covers employers' knowledge and perceptions about the importance of health to work, and work to health. A discussion of the evidence regarding the promotion of health and well-being within organisations is covered in Chapters 3 and 4:

- Chapter 3 – covers the provision of health and well-being support measures, flexible working options, worker satisfaction, and specific findings relating to the management of stress at work;
- Chapter 4 – covers worker engagement, in terms of how organisations communicated with employees and the extent to which feedback from employees was acted upon.

Improving organisational productivity and performance is discussed in Chapter 5, which covers sickness absence, attendance management and retention. The provision of occupational sick pay is covered in Chapter 6, and government-sponsored health and well-being initiatives are covered in Chapter 7. The final chapter provides concluding thoughts about the findings and next steps.

The report focuses on findings that were found to be statistically significant (based on a confidence interval of 95 per cent) after the effects of weighting and data clustering had been taken into account (unless otherwise stated).

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

### Key findings

- Respondents were asked to what extent they agreed or disagreed with five statements about the importance of work to health and health to work. There was overwhelming agreement with the statements concerning the principles of organisations having a ‘responsibility to encourage employees to be physically and mentally healthy’, and there being a link between work and employees’ health and well-being.
- A slim majority agreed that the ‘financial benefits of investing in employee health and well-being outweighed the costs’ (large organisations were more likely than small organisations to agree with this statement).
- Half thought their employees would ‘not want them to intervene in terms of their physical and mental health’, and this was more likely to be the case among small employers.
- 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 respondents working for large organisations, where levels of sickness absence were higher.
- ‘Improving employee health and well-being’ was ranked the fifth most important investment priority out of a total of six priorities offered to respondents (but for medium and large organisations it received the lowest importance rating).

A key area of interest for Health, Work and Well-being was employers’ knowledge and perceptions about the importance of health to work and work to health; in particular, what weight did employers place on the issue of employee health and their responsibilities towards promoting health and well-being at work, and how did this vary by different organisational characteristics? These issues were explored using a battery of attitude statements, and by examining to what extent the promotion of health and well-being was viewed as a business priority in the next 12 months, alongside other organisational priorities.

### 2.1 Attitudes to employee health and well-being

In order to explore ‘buy in’ to the health and well-being agenda, the survey included five attitude statements and respondents were asked how strongly they agreed or disagreed with each, using a five-point scale ranging from strongly agree to strongly disagree. Figure 2.1 shows the levels of agreement and disagreement with each statement, and the statements are ranked in descending order of the proportion of respondents that agreed with each.

There was an overwhelming recognition of the link between work and health, and employers’ responsibilities in this regard: the vast majority of employers – around nine in ten – agreed that ‘employers 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. There was caution, however, regarding return on investment, with just a slim majority agreeing that ‘the financial benefits of spending money on employee health and well-being outweigh the costs’ (17 per cent neither agreed nor disagreed and nine per cent ‘did not know’). Furthermore, there was evidence of

an unwillingness to get involved where this might be unwelcome: about half (51 per cent) agreed that ‘in general, their employees did not want them to intervene in terms of their physical and mental health’, although 16 per cent were non-committal on this issue and a further seven per cent stated that they ‘did not know’. Finally, a quarter of respondents agreed that ‘sickness absence was a real barrier to productivity in their organisation’, but the majority (68 per cent) disagreed that this was the case at the time of the interview.

**Figure 2.1 Levels of agreement/disagreement with statements about the health and well-being agenda (%)**



It should be noted that several key organisational characteristics are correlated: the public sector has a higher concentration of large organisations when compared to the private sector, and trade union presence is more likely to occur in the public sector. Therefore, similar patterns were often observed in the responses of large, public sector organisations and those with a trade union presence.

First, the patterns in response by size of organisation are considered (Table 2.1 summarises the findings):

- While there were some variations in the overall levels of agreement about employers' responsibility to encourage their workforce to be physically and mentally healthy, and regarding the link between work and employees' health and well-being, these were minor when compared to those seen in relation to the 'financial benefits of spending money on employees' health and well-being'. In the latter case, agreement was notably stronger among respondents in larger settings, as 66 per cent of respondents in medium and 70 per cent of those in large organisations agreed that the financial benefits outweighed the costs, compared with 56 per cent of those in small organisations.
- Small organisations were more likely than medium and large organisations to think that 'their employees did not want them to intervene in terms of their physical and mental health' (51 per cent agreed with this statement compared with 44 per cent and 33 per cent respectively). However, significant minorities of employers of all sizes were non-committal, saying that they neither agreed nor disagreed with this issue (between 16 and 18 per cent).
- In terms of productivity, large organisations were more likely than medium and small employers to agree that, at the time of the interview, 'sickness absence was a real barrier to productivity' (34 per cent versus 25 per cent and 25 per cent respectively). Furthermore, levels of working time lost to absence correlated with the findings for this statement: organisations that **strongly agreed** with the statement lost a higher percentage of working time to absence compared with those that expressed any disagreement<sup>20</sup>.

**Table 2.1 Level of agreement with attitude statements by organisation size**

	Size of organisation			
	Total %	Small %	Medium %	Large %
<b>% Agree (strongly/tend to agree)</b>				
Employers have a responsibility to encourage employees to be physically and mentally healthy	88	88	89	91
There is a link between work and employees' health and well-being	88	88	93	93
The financial benefits of spending money on employee health and well-being outweigh the costs	57	56	66	70
In general, your employees do not want you to intervene in terms of their physical and mental health	51	51	44	33
Currently, sickness absence is a real barrier to productivity in your organisation	25	25	25	34
<i>Unweighted base</i>	2,250	1,122	555	568

Base: All.

Note: Data are weighted to be representative of employers.

<sup>20</sup> This analysis included only those who reported actual numbers of working days lost to absence in the past year, described more fully in the appendices to this report (Section B.10.2)

Findings relating to the type of organisation and industry sector are summarised below (and in Table 2.2), with findings by trade union presence and payment of occupational sick pay (OSP) mentioned where relevant:

- There was a marked contrast in the proportions of public and private sector organisations that strongly agreed that there was a ‘link between work and employees’ health and well-being’: 75 per cent of public sector respondents strongly agreed that this was the case, compared with 48 per cent of those in the private sector (the difference in levels of overall agreement was not significant). This finding may reflect the age profiles of the public and private sector workforces, with the latter tending to be older and, therefore, more prone to ill health.
- Similar proportions of private and public sector organisations agreed that ‘employers had a responsibility to encourage employees to be physically and mentally healthy’. But further analysis showed that manufacturing/utilities, finance/business and retail/wholesale organisations had a lower level of total agreement with this statement (84, 84 and 86 per cent respectively), when compared with those in public administration/education or health/social work (98 and 95 per cent respectively).
- Respondents in the public sector (who tended to work in larger organisations) were more likely than those in the private sector to agree strongly that ‘the financial benefits of spending money on employee health and well-being outweighed the costs’ (42 per cent versus 22 per cent).
  - Whether or not an organisation paid OSP was highly correlated with this statement: those that paid OSP to all staff were far more likely to agree than those that had a policy of paying OSP to only some or to no staff (64 per cent compared with 47 per cent and 51 per cent respectively).
- In terms of perceptions about whether employees would welcome employer intervention in their health and well-being, there were no significant differences in levels of agreement or disagreement between the public and private sector. Further analysis showed some variations by industry sector, with organisations in the retail/wholesale, hotels/restaurants, construction, manufacturing/utilities and finance/business sectors most likely to agree that their employees did not want them to intervene in these matters.
  - Employers with a trade union presence in their organisation were **less likely** to agree that employees did not want them to intervene than those without a trade union presence (33 per cent compared with 53 per cent).
- Finally, considering sickness absence as a barrier to productivity, there were no differences by public and private sector, and robust patterns by industry sector were also hard to detect. However, as a general comment, organisations in the hotels/restaurants sector were particularly likely to agree that sickness absence was a barrier to productivity (40 per cent), while those in the finance/business sectors had particularly low levels of agreement (18 per cent agreed and 75 per cent in this group disagreed with the statement).

**Table 2.2 Level of agreement with attitude statements by organisation type and industry sector (Standard Industrial Classification (SIC) group)**

	Organisation type			Industry sector (SIC group)								
	Total %	Public %	Private %	Manufacturing/ utilities %	Construction %	Retail/wholesale %	Hotels and restaurants %	Transport/ communications %	Finance/business %	Public administration/ education %	Health/social work %	Other service activity %
<b>% Agree (strongly/tend to agree)</b>												
Employers have a responsibility to encourage employees to be physically and mentally healthy	88	95	87	84	91	86	90	86	84	98	95	89
There is a link between work and employees' health and well-being	88	96	88	90	91	85	85	85	88	96	91	81
The financial benefits of spending money on employee health and well-being outweigh the costs	57	70	56	57	54	52	64	56	60	57	67	40
In general, your employees do not want you to intervene in terms of their physical and mental health	51	55	53	52	54	59	58	36	50	42	38	35
Currently, sickness absence is a real barrier to productivity in your organisation	25	28	26	32	26	23	40	32	18	20	30	28
<i>Unweighted base</i>	2,250	226	1,761	300	173	296	141	**74	571	214	266	133

Base: All.

Note: Data are weighted to be representative of employers. \*\* denotes small base (unweighted base less than 100).

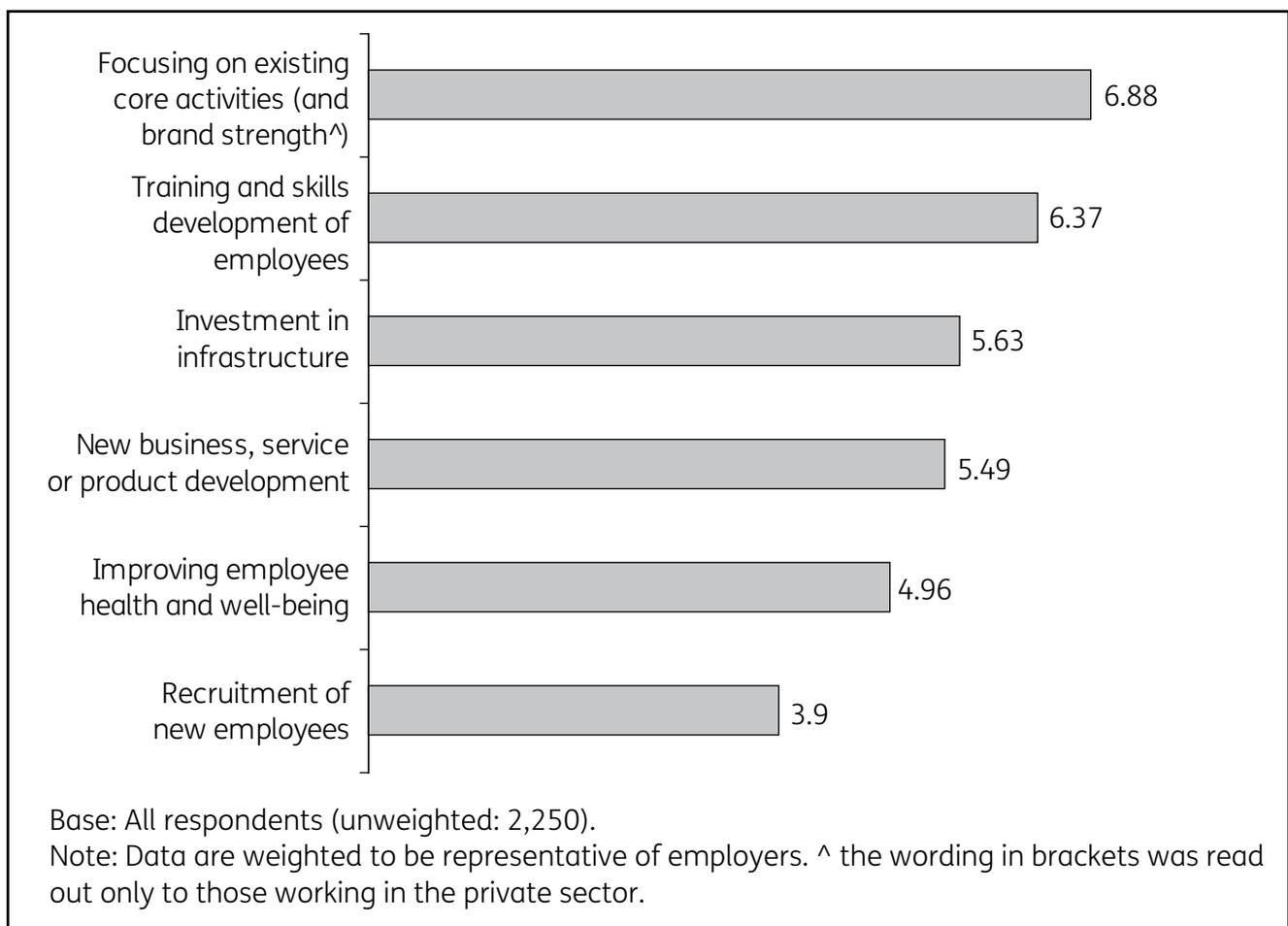
## 2.2 Investment priorities

Having ascertained employers' general views on the health and well-being agenda, it was interesting to place these in the context of wider business priorities. Respondents were asked about the importance of six possible business investment priorities in the next 12 months. Importance was measured on a scale of zero (meaning of no importance) to ten (meaning very important). Figure 2.2 shows the findings based on an average score; the higher the score the greater the importance of each investment priority.

The investment priority that was considered the most important over the next 12 months was 'Focusing on existing core activities and brand strength', followed by 'Training and skills development of employees'. 'Investment in infrastructure' and 'New business, service or product development' were relatively less important, but the least important priority was 'Recruitment of new employees' – it is worth recalling the timing of the survey (early 2010) which followed a period of recession affecting the private sector, but preceded announcements of funding cuts in the public sector.

Within the list, 'Improving employee health and well-being' came second to last in terms of importance. Therefore, while employers largely agreed with the principles of the health and well-being agenda, this was not seen as a top priority for investment in the coming year by most (this was further evidenced by the fact that just over half felt it was a worthwhile investment).

**Figure 2.2 Importance of investment priorities (average score out of 10)**



For each investment priority explored in the survey, medium and large organisations were more likely than small employers to return a higher importance rating (Table 2.3). Notably, in the cases of ‘Focusing on existing core activities and brand strength’, ‘Recruitment of new employees’, and ‘Improving employee health and well-being’, the average importance rating increased as organisation size increased. As a further point, while ‘Improving employee health and well-being’ ranked fifth overall, for large and medium employers this was their least important priority when set in the context of other organisational needs.

**Table 2.3 Rating of importance of investment priorities by size of organisation (average score on a scale of 0 to 10)**

	Size of organisation			
	Total (average)	Small (average)	Medium (average)	Large (average)
Focusing on existing core activities (and brand strength <sup>^</sup> )	6.88	6.83	7.76	8.07
Training and skills development of employees	6.37	6.30	7.74	7.64
Investment in infrastructure	5.63	5.58	6.65	6.37
New business, service or product development	5.49	5.42	6.85	6.74
Improving employee health and well-being	4.96	4.92	5.62	6.08
Recruitment of new employees	3.90	3.78	6.02	6.42
<i>Unweighted base</i>	2,250	1,122	555	568

Base: All respondents.

Note: Data are weighted to be representative of employers. <sup>^</sup> the wording in brackets was provided only to those working in the private sector.

Other patterns in the data are summarised below (see Table 2.4):

- Respondents working in the public sector returned higher importance ratings than those in the private sector for ‘Training and skills development of employees’, ‘Investment in infrastructure’ and, most notably, ‘Recruitment of new employees’.
- Analysis by industry sector echoed these findings, but, in addition, those working in the public/ administration or health/social work sectors returned higher importance ratings than other respondents for ‘Improving employee health and well-being’, while those working in the health/ social work sector returned the highest importance rating for ‘Focusing on existing core activities’ (8.06 versus the average of 6.88).
- Respondents who reported the presence of a trade union in their organisation were more likely than those who did not to return a higher importance rating for investment in ‘Training and skills development of employees’, but were less likely to rate ‘Focusing on existing core activities and brand strength’ as an important investment priority for the next 12 months.

**Table 2.4 Rating of importance of investment priorities by type of organisation and presence of trade union (average score on a scale of 0 to 10)**

	Total (average)	Organisation type		Trade union	
		Public (average)	Private (average)	Yes (average)	No (average)
Focusing on existing core activities (and brand strength <sup>^</sup> )	6.88	7.41	6.74	6.23	6.92
Training and skills development of employees	6.37	7.36	6.25	7.00	6.28
Investment in infrastructure	5.63	6.61	5.60	5.89	5.58
New business, service or product development	5.49	5.42	5.53	4.84	5.53
Improving employee health and well-being	4.96	5.71	4.87	4.96	4.96
Recruitment of new employees	3.90	5.76	3.73	4.29	3.87
<i>Unweighted base</i>	2,250	226	1,761	483	1,747

Base: All respondents.

Note: Data are weighted to be representative of employers. <sup>^</sup> the wording in brackets was provided only to those working in the private sector.

# 3 Promotion of health and well-being at work

## Key findings

- The most common services or benefits provided by organisations to promote or encourage healthy lifestyles and improved well-being were ‘Health and safety training’ (mentioned by 74 per cent of respondents), the provision of ‘More than 20 days of holiday (excluding bank holidays)’ (72 per cent), ‘Work area assessments and adjustments’ (64 per cent) and ‘Further training in injury prevention’ (42 per cent).
- The findings for the other aspects of ‘good work’ explored by the survey were:
  - six out of ten employers (61 per cent) offered some form of flexible working, such as flexi-time, working from home and job sharing;
  - a minority of organisations (17 per cent) offered stress management support or advice (but these policies covered 51 per cent of employees represented by the survey); and
  - the overwhelming majority of employers (89 per cent) agreed to some extent that steps were taken in their organisation to increase employee job satisfaction.

This chapter covers the provision of health and well-being services and benefits, flexible working practices, management of stress in the workplace and efforts to improve employee job satisfaction.

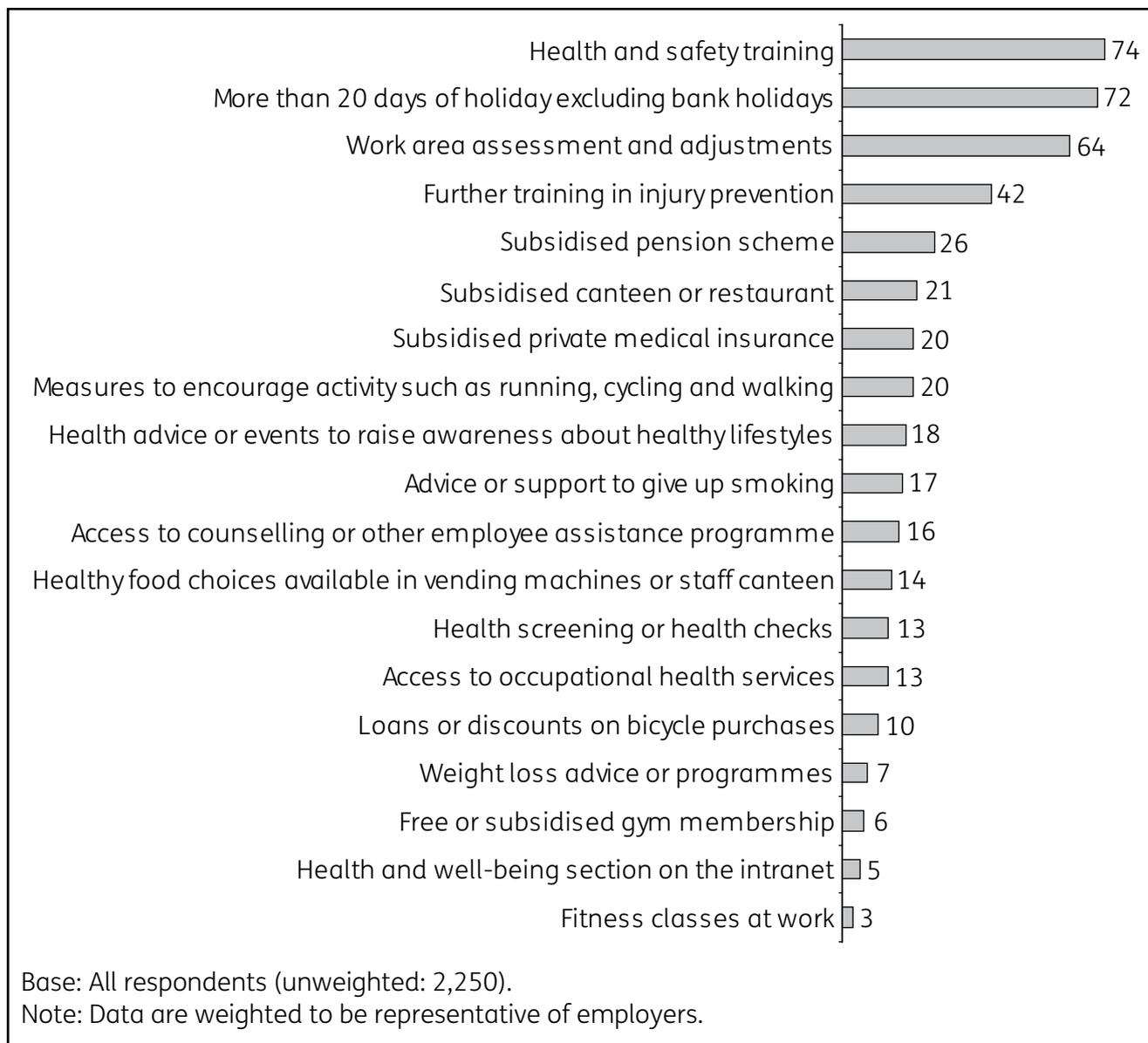
## 3.1 Well-being services and benefits

The extent to which organisations were using a range of initiatives to promote or encourage healthy lifestyles and improve well-being was explored by asking respondents which, if any, of a list of 19 measures they provided to their workforce. This list incorporated the whole spectrum of initiatives designed to promote worker safety, healthy lifestyles and well-being (for example, training in injury prevention, promoting healthy food choices and lifestyles, interventions to give up smoking, etc), and can be broadly divided into four categories:

- General benefits: for example, ‘More than 20 days’ holiday (excluding bank holidays)’, ‘A subsidised pension, subsidised private medical insurance, subsidised canteen or restaurant’.
- Traditional health and safety initiatives: for example, ‘Work area assessments and adjustments’, ‘Training in injury prevention’.
- Dedicated employee support services: for example, a ‘Health and well-being section on the intranet’, ‘Access to occupational health services’, ‘Access to counselling and other employee assistance programmes’, ‘Health screening and health checks’.
- Proactive lifestyle initiatives: for example, ‘Healthy food choices in vending machines’, ‘Fitness classes’, ‘Loans or discounts on bicycle purchases’.

Prompted with the list of initiatives, respondents were asked which their organisation had provided in the last 12 months, regardless of whether the initiatives were provided universally to all staff or to just some. Figure 3.1 shows the initiatives and benefits in descending order of provision.

**Figure 3.1 Provision of health and well-being initiatives or benefits in last 12 months (% of respondents citing each)**



The top seven areas of provision all came under the headings of general benefits and traditional health and safety initiatives. Three-quarters (74 per cent) of respondents said that their organisation provided 'Health and safety training', 72 per cent mentioned the provision of 'More than 20 days of holiday (excluding bank holidays)', 64 per cent cited 'Work area assessments and adjustments' and 42 per cent mentioned 'Further training in injury prevention'.

Much smaller proportions of respondents said that their organisation provided dedicated employee support service benefits or proactive lifestyle measures to improve health and well-being at work. Around a fifth mentioned 'Measures to encourage activity such as running, walking or cycling' (20 per cent), 'Health advice or events to raise awareness about healthy lifestyles' (18 per cent) and 'Advice or support to help give up smoking' (17 per cent). Just 13 per cent mentioned 'Access to occupational health services'.

Table 3.1 shows that the size of an organisation correlated with likelihood of providing health and well-being measures: large organisations were more likely than medium and small employers to say they provided almost all the benefits and initiatives that were explored by the survey (and in turn, medium-sized organisations were more likely than small to cite most benefits and initiatives). For example, 79 per cent of large organisations mentioned the 'Provision of occupational health services' in the last year, compare with 46 per cent and 11 per cent of medium and small employers respectively.

In general, the various initiatives were more likely to be cited by respondents in the public sector than those in the private sector, and by those working in organisations with trade unions rather than those without. These items are linked: public sector respondents were more likely than those in the private sector to work in large organisations, and trade union presence was also a feature of large/public sector organisations.

The notable exception to this rule was 'Subsidised private medical insurance': this was most likely to be reported as an initiative among respondents in the private sector than those in the public sector (21 per cent versus five per cent respectively).

**Table 3.1 Provision of health and well-being initiatives in the last 12 months, by size of organisation, organisation type and trade union presence**

	Size of organisation				Organisation type		Trade union	
	Total %	Small %	Medium %	Large %	Public %	Private %	Yes %	No %
Health and safety training	74	72	96	98	85	72	89	72
More than 20 days of holiday excluding bank holidays	72	71	87	93	77	71	82	71
Work area assessment and adjustments	64	63	88	96	78	63	72	64
Further training in injury prevention	42	41	59	74	51	41	60	41
Subsidised pension scheme	26	23	68	87	56	23	33	25
Subsidised canteen or restaurant	21	21	33	48	28	21	23	21
Subsidised private medical insurance	20	18	53	61	5	21	28	19
Measures to encourage activity such as running, cycling and walking	20	19	31	48	32	18	33	19
Health advice or events to raise awareness about healthy lifestyles	18	17	23	52	39	16	33	17
Advice or support to give up smoking	17	16	29	49	33	16	28	16
Access to counselling or other employee assistance programme	16	13	47	75	38	12	32	14
Healthy food choices available in vending machines or staff canteen	14	13	32	55	16	13	24	13
Health screening or health checks	13	11	39	68	37	11	31	11
Access to occupational health services	13	11	46	79	42	11	32	11
Loans or discounts on bicycle purchases	10	9	24	45	18	9	12	9
Weight loss advice or programmes	7	6	9	25	15	6	13	6
Free or subsidised gym membership	6	5	19	47	8	6	12	6
Health and well-being section on the intranet	5	4	13	37	19	4	8	5
Fitness classes at work	3	2	8	20	8	2	5	2
<i>Unweighted base</i>	2,250	1,122	555	568	226	1,761	483	1,747

Base: All.

Note: Data are weighted to be representative of employers.

Respondents also had the option to say if they supported their employees' health and well-being in ways other than those prompted by the interviewer during the survey. The majority of respondents (76 per cent) did not provide additional support measures, and of those that did, the various support measures were very wide-ranging; for example, eye care vouchers, team building exercises, free refreshments, organised social and sporting events, training/inductions, regular supervision and a good working environment. Two support measures were mentioned by more than one per cent of respondents, and primarily by those in small organisations, as follows:

- 'general listening/communication/talking to each other/openness/one to ones' (mentioned by eight per cent of small organisations, four per cent of medium and two per cent of large employers);
- 'flexible attitude to staff sickness/GP/hospital appointments / dealing with personal problems' (mentioned by three per cent of small organisations, two per cent of medium and one per cent of large employers).

### **3.1.1 How do the findings relate to the volume of employees represented by the data?**

In terms of the volume of employees, the findings show that the largest proportions were covered by 'Health and safety training', 'More than 20 days' holiday (excluding bank holidays)', and 'Work area assessments'. Table 3.2 summarises these findings: the first column shows the proportion of organisations providing each initiative, the second shows the maximum proportion of employees covered by these data<sup>21</sup>.

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<sup>21</sup> The maximum proportion of employees covered by the data is referred to because not all employees in an organisation would necessarily have been eligible for each initiative/benefit.

**Table 3.2 Provision of health and well-being initiatives in the last 12 months: a comparison of findings in terms employers and employment**

	<i>Weighting by employer unit</i>	<i>Weighting by employment (employee volume)</i>
	2,250	25,267,000
	%	%
Health and safety training	74	93
More than 20 days of holiday excluding bank holidays	72	88
Work area assessment and adjustments	64	88
Further training in injury prevention	42	65
Subsidised pension scheme	26	71
Subsidised canteen or restaurant	21	40
Subsidised private medical insurance	20	48
Measures to encourage activity such as running, cycling and walking	20	41
Health advice or events to raise awareness about healthy lifestyles	18	42
Advice or support to give up smoking	17	41
Access to counselling or other employee assistance programme	16	58
Healthy food choices available in vending machines or staff canteen	14	44
Health screening or health checks	13	50
Access to occupational health services	13	59
Loans or discounts on bicycle purchases	10	35
Weight loss advice or programmes	7	19
Free or subsidised gym membership	6	36
Health and well-being section on the intranet	5	27
Fitness classes at work	3	17

Base: All.

Note: Data are weighted to be representative of employers (column 1) and employment (column 2).

## 3.2 Flexible working

Flexible working is generally upheld as a positive working practice as it allows people with family or other caring commitments to fit work around other responsibilities, while for those without such caring commitments it can offer a positive lifestyle choice.

The survey explored what proportion of organisations offered flexible working practices to their staff, such as flexi-time, working from home and job sharing<sup>22</sup>. Six in ten respondents (61 per cent) said their organisation offered such arrangements, and this was more likely to be the case among large organisations (89 per cent said flexible working was offered compared with 73 per cent of medium and 61 per cent of small employers; see Table 3.3).

<sup>22</sup> Flexibility was also examined in terms of the practices used by employers to help people back to work after illness and to facilitate their ability to do their job on a day-to-day basis (see Section 5.2).

**Table 3.3 Provision of flexible working practices by size of organisation**

	Total %	Small %	Medium %	Large %
Yes	61	61	73	89
No	38	39	27	11
<i>Unweighted base</i>	2,250	1,122	555	568

Base: All.

Note: Data are weighted to be representative of employers.

While there were no significant differences by type of organisation or trade union presence, organisations in the finance/business sector were more likely to provide flexible working practices than employers as a whole (78 per cent), as were organisations in the health/social work (70 per cent) and other service activities sectors (73 per cent).

### 3.2.1 How do the findings relate to the volume of employees represented by the data?

In terms of the volume of employees covered by these data, 82 per cent of employees were working for organisations that provided flexible working, although not all would have necessarily been eligible for flexible working.

## 3.3 Stress management

Respondents were asked whether or not their organisation provided any stress management support or advice to employees and/or managers, before exploring what types of support had been provided.

Overall, 17 per cent of organisations provided stress management support or advice, and this was most likely to be the case among large employers (64 per cent versus 15 per cent and 38 per cent in small and medium organisations respectively), those in the public sector (32 per cent versus 14 per cent in the private sector) and organisations with a trade union presence (26 per cent versus 16 per cent in organisations with no such presence). These findings are summarised in Table 3.4.

**Table 3.4 Stress management support or advice, by organisation size, type of organisation and trade union presence**

	Total %	Size of organisation			Type of organisation		Trade union	
		Small %	Medium %	Large %	Public %	Private %	Yes %	No %
Yes	17	15	38	64	32	14	26	16
No	83	85	62	36	68	86	74	84
<i>Unweighted base</i>	2,250	1,122	555	568	226	611	483	1,747

Base: All.

Note: Data are weighted to be representative of employers.

### 3.3.1 Types of stress management support

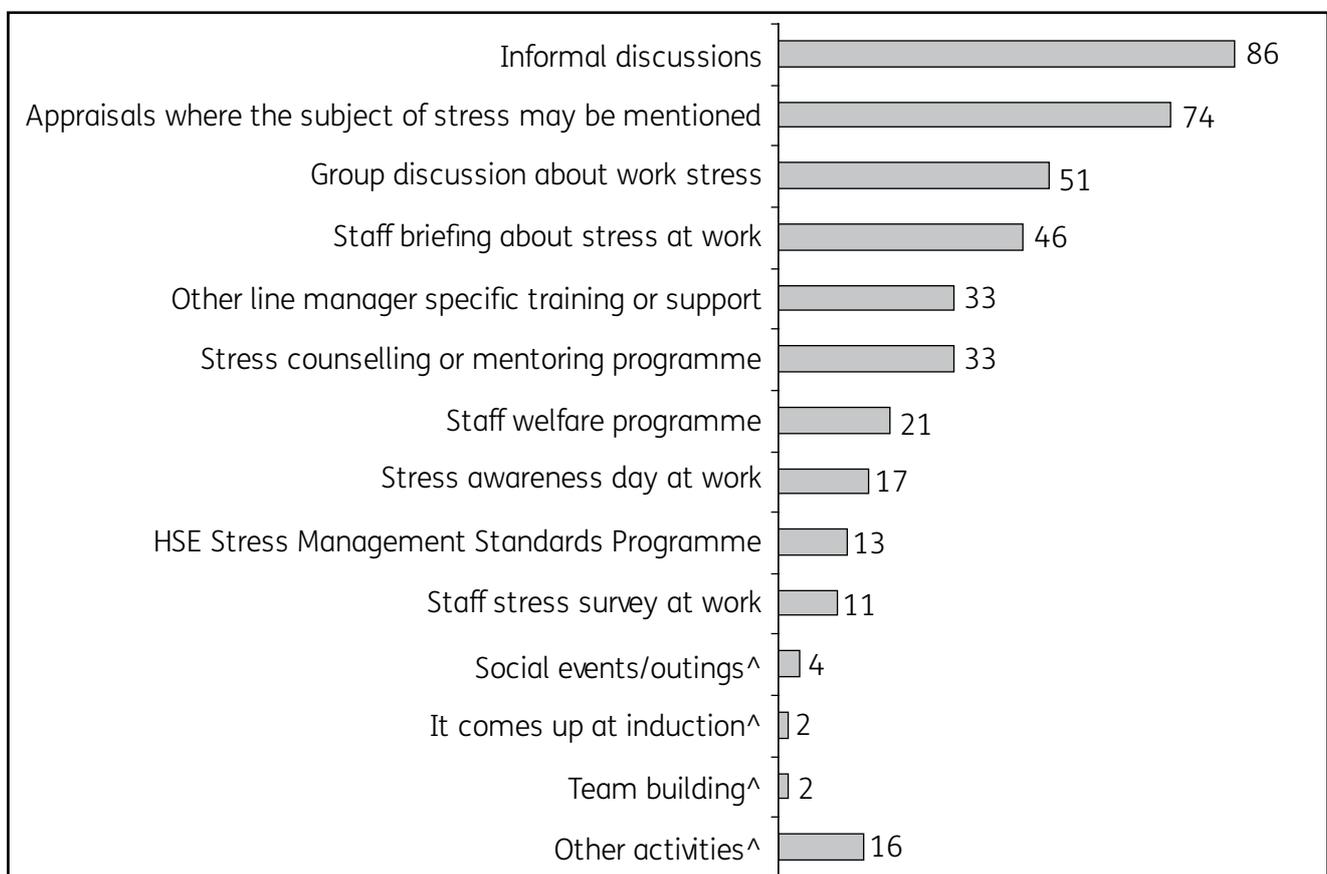
To gain some insight into the types of activities used by organisations to manage stress in the workplace, employers that provided stress management measures were asked which, if any, of a list of ten activities they had put in place during the past 12 months.

Figure 3.2 summarises the findings, and shows that the most common measure was ‘Informal discussions’, mentioned by 86 per cent of those that had provided stress management support. ‘Appraisals where the subject of stress was mentioned’ were cited by three-quarters of this group (74 per cent), followed by ‘Group discussions’ (51 per cent).

Thirteen per cent of this group specifically cited the ‘HSE Stress Management Standards Programme’. However, it should be noted that many of the activities in the list could arguably be classed as components of this programme (for example, informal discussions about stress, reviews of stress during appraisals, staff briefings about stress). Therefore, while most organisations that were providing stress management support activities did not do this under the umbrella of the HSE programme, their various activities in combination may have gone some way towards meeting HSE standards.

Placing the findings in the context of the whole sample, 14 per cent of all employers were offering stress management support by way of ‘Informal discussions’ and 12 per cent were using ‘Appraisals’; at the other end of the spectrum, two per cent specifically cited the ‘HSE Stress Management ‘Standards Programme’ or ‘Staff stress surveys’.

**Figure 3.2 Stress management activities during the past 12 months (% of respondents citing each)**



Base: All who provide stress management advice or support (unweighted: 793).

Note: Data are weighted to be representative of employers. ^ denotes items collected through an ‘other (specify)’ response.

Table 3.5 shows that there were differences by size of organisation and, in many cases, by trade union presence (there were no significant differences by organisation type). For example, significantly larger proportions of large organisations (when compared with medium and small organisations) cited ‘Staff stress surveys at work’, ‘HSE Management Standards Programme’, ‘Staff awareness days at work’, ‘Staff welfare programmes’, and ‘Stress counselling or mentoring programmes’.

**Table 3.5 Stress management activities during the past 12 months by size and trade union presence**

	Size of organisation				Trade union	
	Total %	Small %	Medium %	Large %	Yes %	No %
Informal discussions	86	87	81	82	89	86
Appraisals where the subject of stress may be mentioned	74	73	83	80	87	73
Group discussion about work stress	51	53	34	38	49	51
Staff briefings about stress at work	46	47	38	43	54	45
Other line manager specific training or support	33	28	59	63	49	31
Stress counselling or mentoring programme	33	31	40	59	45	31
Staff welfare programme	21	19	30	41	39	19
Stress Awareness Day at work	17	17	13	25	18	17
HSE Stress Management Standards Programme	13	12	17	30	23	11
Staff stress survey at work	11	8	19	32	23	9
<i>Unweighted base</i>	793	195	222	375	315	474

Base: All who provide stress management advice or support.

Note: Data are weighted to be representative of employers.

### 3.3.2 How do the findings relate to the volume of employees represented by the data?

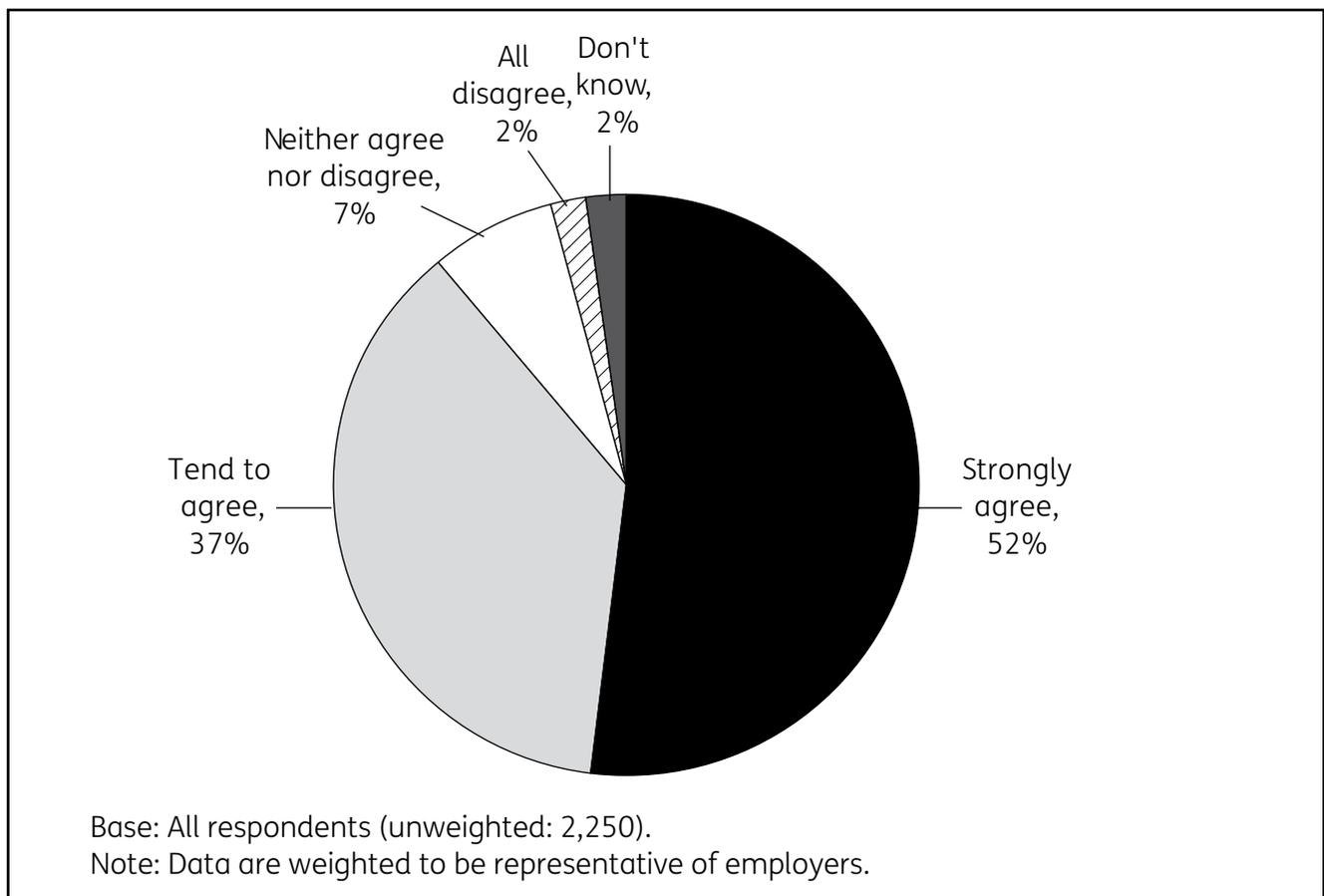
Half of employees represented by the data (51 per cent) were working for organisations that provided stress management support.

## 3.4 Job satisfaction

The employer survey explored job satisfaction by asking respondents the extent to which 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 that their organisation took steps to increase employees’ job satisfaction, with 52 per cent agreeing strongly and 37 per cent tending to agree. Just two per cent disagreed with the statement.

**Figure 3.3 Agreement with the statement ‘This organisation takes steps to increase employees’ job satisfaction’**



Levels of overall agreement did not vary significantly by size or type of employer, presence of a trade union or whether it was a single or multi-site organisation. However, organisations which had been in operation for ten years or less were slightly more likely to say they took steps to increase employees' job satisfaction, compared with employers which had been established for 21+ years (91 per cent compared with 86 per cent). Some differences by industry grouping were also observed, with organisations in the health/social work (98 per cent), public administration/education (98 per cent) and hotels/restaurants (96 per cent) sectors standing out as more likely to agree than organisations in the manufacturing/utilities (85 per cent), construction (85 per cent), retail/wholesale (87 per cent) and other service activities (86 per cent) sectors.

## 4 Worker engagement

### Key findings

- Employee engagement has been recognised as an important element of ‘good work’. Worker engagement was explored in terms of the methods used by senior managers to communicate with their workforce and how often they took action on employee feedback.
- 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 employers were more likely than small organisations to cite all the methods of communication explored by the survey, while employers in the public administration/education and health/social work sectors were more likely than those in other sectors to use most channels of communication.
- Asked about the frequency with which feedback gathered from employees was acted upon, just three per cent said ‘hardly any of the time’ or ‘none of the time’.
- In terms of the volume of employees represented by the results, two thirds (67 per cent) were working for an organisation that acted on feedback ‘most or all of the time’.

In the survey, engagement was explored in terms of the methods used by senior managers to communicate with their workforce in the past year and, where feedback was sought via these communications channels, how often employers took action as a result. This chapter discusses these findings, as well as commenting on how the findings translate into the volume of workers affected by these management practices.

### 4.1 Communication methods used in the last 12 months

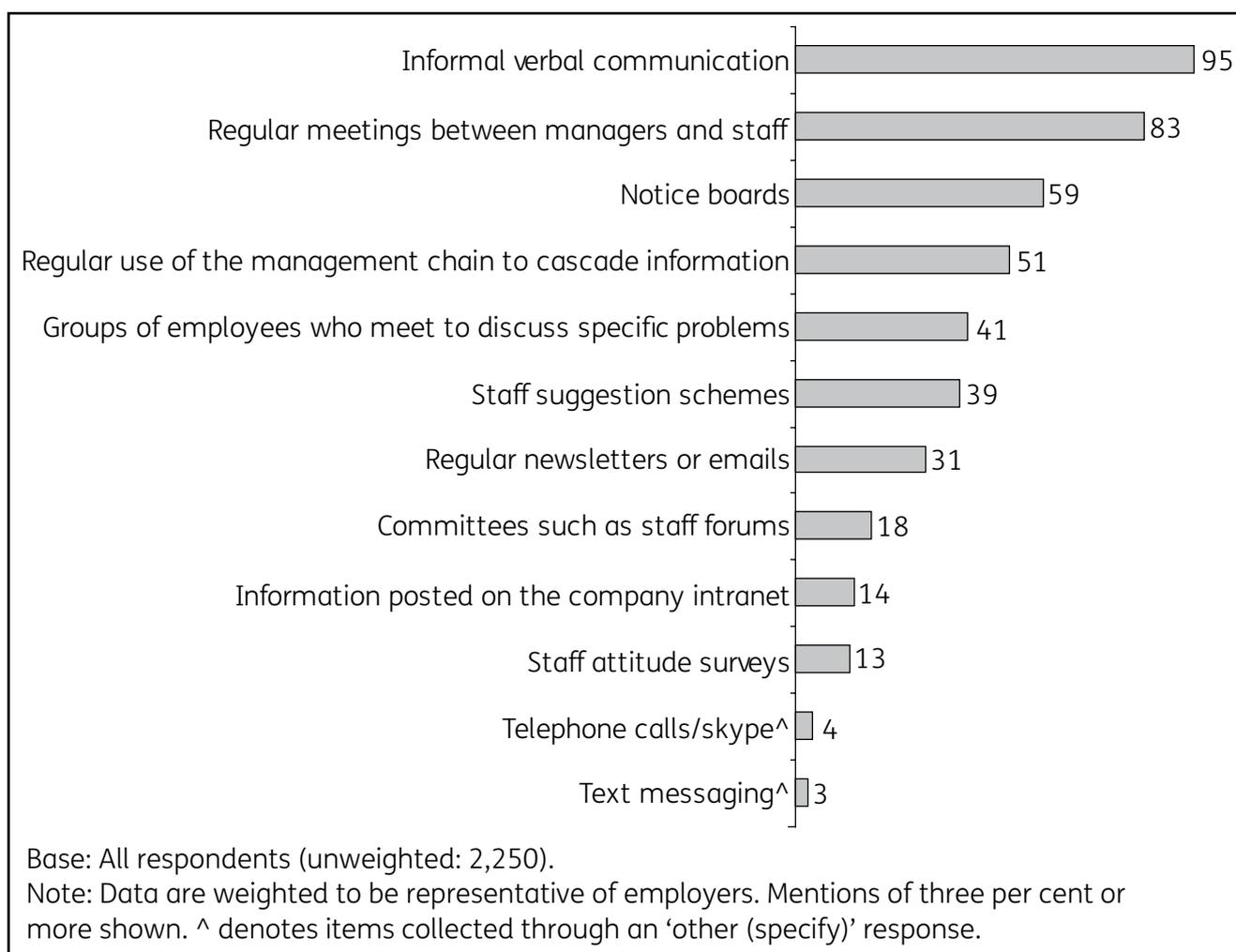
A list of ten methods by which senior managers may have communicated with employees in the last 12 months was read out to respondents, and they were also given the option of describing in their own words other means used by their organisation to communicate with employees<sup>23</sup>.

The overwhelming majority (95 per cent) cited ‘Informal verbal communication between senior management and staff’. This was equally high across all sizes of organisation and across both private and public sector, showing that informal approaches to communication were widespread and not restricted to smaller settings.

Figure 4.1 shows the proportion of respondents who mentioned each form of communication in descending order (from top to the bottom of the figure). Aside from ‘Informal verbal communication’, other methods of engaging staff cited by over half of respondents were ‘Regular meetings between managers and their staff’ (83 per cent), ‘Notice boards’ (59 per cent) and ‘Regular use of the management chain to cascade information’ (51 per cent). Between three in ten and four in ten respondents mentioned ‘Groups of employees who meet to discuss specific problems’ (41 per cent), ‘Staff suggestion schemes’ (39 per cent) and ‘Regular newsletters or emails’ (31 per cent).

<sup>23</sup> Where sufficiently high numbers of respondents gave similar answers in their own words these were converted into individual response codes and appear on the figures and tables in this chapter marked with ^.

**Figure 4.1 Methods used by management in the last 12 months to communicate with employees (% respondents citing each)**



As Table 4.1 demonstrates, broadly speaking, the larger the organisation, the more likely it was to cite each method of communication as having been used in the last 12 months. Other characteristics correlated with the size of the organisation and, therefore, showed similar response patterns, as follows:

- Respondents working in the public sector were significantly more likely than those in the private sector to mention most of the forms of communication. More detailed analysis by industry sector echoed these findings, as respondents working in the public administration/education and health/social work sectors mentioned more methods of communication than those in other sectors.
- Multi-site organisations (which were more likely to be large in size) were more likely than single site organisations to mention all the forms of communication (except for 'Informal verbal communication', which had a universally high level of mentions).
- Employers with a trade union presence were made up of a higher proportion of medium and large organisations than those without (18 per cent versus five per cent respectively), and were more likely than those without trade union presence to mention 'Committees such as staff forums' (31 per cent compared with 17 per cent), 'Groups of employees who meet to discuss specific problems' (52 per cent compared with 40 per cent), 'Staff attitude surveys' (19 per cent compared with 12 per cent), 'Notice boards' (75 per cent versus 58 per cent) and 'Information posted on the company intranet' (30 per cent versus 13 per cent).

**Table 4.1 Methods used by management in the last 12 months to communicate with employees, by size of organisation and organisation type**

	Size of organisation			Organisation type		
	Total	Small	Medium	Large	Public	Private
	%	%	%	%	%	%
Informal verbal communication	95	95	97	97	95	95
Regular meetings	83	82	92	96	92	81
Notice boards	59	57	91	96	75	56
Regular use of the management chain to cascade information	51	49	86	93	66	48
Groups of employees who meet to discuss specific problems	41	39	66	74	58	38
Staff suggestions scheme	39	38	57	61	59	37
Regular newsletters or emails	31	28	74	90	65	27
Committees such as staff forums	18	16	49	73	36	15
Information posted on the company intranet	14	12	51	82	30	12
Staff attitude surveys	13	11	31	54	55	12
Telephone calls/skype^	4	4	2	1	8	3
Text messaging^	3	3	1	*	6	3
<i>Unweighted base</i>	<i>2,250</i>	<i>1,122</i>	<i>555</i>	<i>568</i>	<i>226</i>	<i>1,761</i>

Base: All.

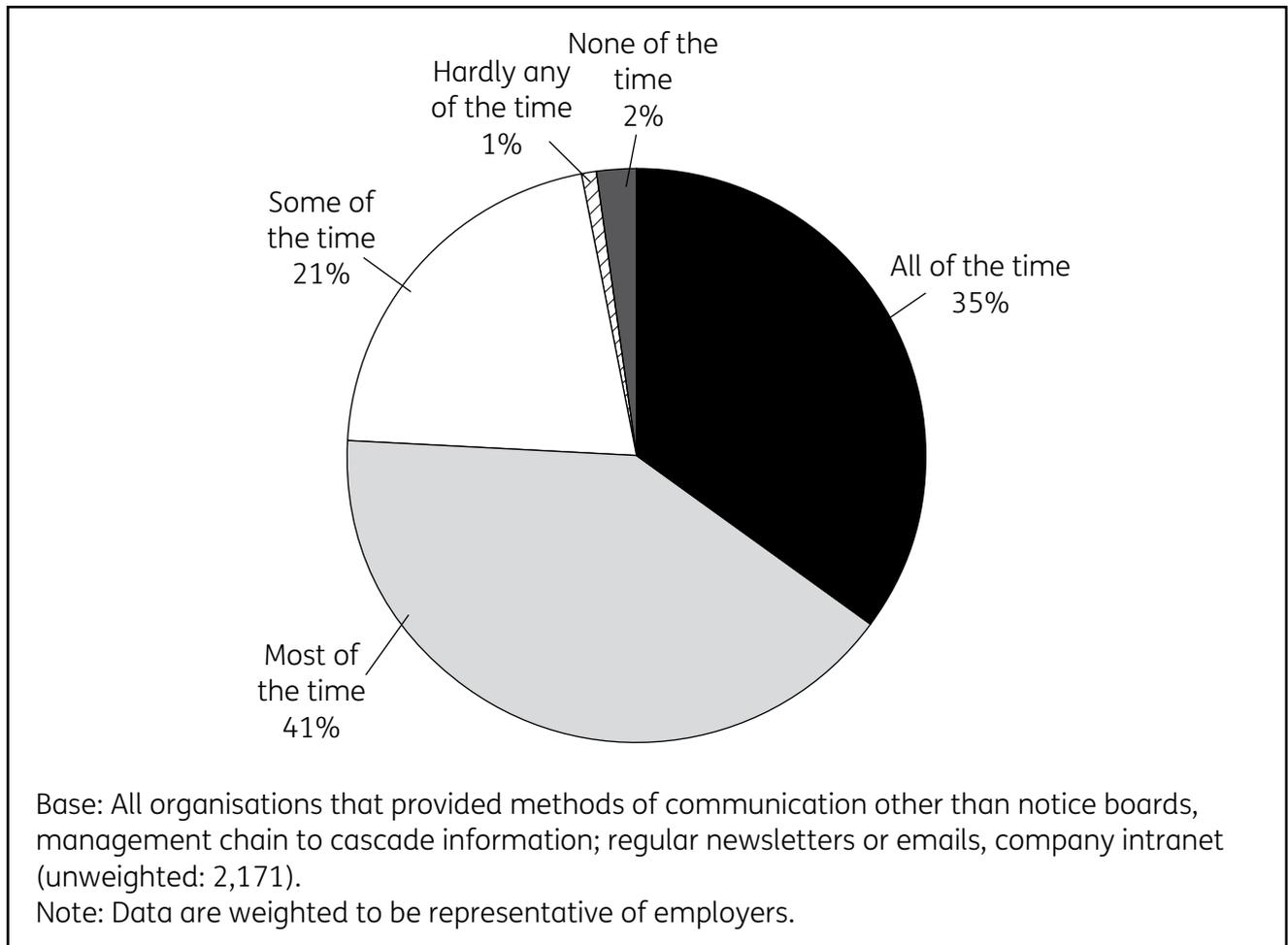
Note: Data are weighted to be representative of employers. Mentions of three per cent or more shown. \* denotes less than 0.5 per cent; ^ denotes answers collected through an 'Other (specify)' response.

## 4.2 Acting on employee feedback

As a means of indicating to what extent organisations valued the input of their employees, respondents who mentioned two-way forms of communication were asked about the frequency with which the feedback gathered during such activity was acted upon by senior managers.

Figure 4.2 shows that just over a third (35 per cent) of this group said that feedback was acted upon all the time, but the largest response category was 'Most of the time' (41 per cent). Only three per cent said 'Hardly any or none of the time'.

**Figure 4.2** Frequency with which respondents acted on feedback from employees



Analysis by organisation size showed notable differences: 36 per cent of respondents working in small organisations said employee feedback was acted upon all of the time compared with 18 per cent of medium and 16 per cent of large organisations. This may highlight greater levels of interaction between senior managers and employees which may be attributed to various reasons, such as physically smaller settings or the greater visibility of senior managers.

**Table 4.2 Frequency of action on feedback gathered from employees during consultation activities, by size of organisation**

	Size of organisation			
	Total %	Small %	Medium %	Large %
All of the time	35	36	18	16
Most of the time	41	41	48	49
Some of the time	21	20	30	32
Hardly any of the time	1	1	2	2
None of the time	2	2	1	1
<i>Unweighted base</i>	2,171	1,054	548	564

Base: All that provided methods of communication other than notice boards, management chain to cascade information, regular newsletters/emails, company intranet.

Note: Data are weighted to be representative of employers.

#### **4.1.1 How do the findings relate to the volume of employees represented by the data?**

In terms of the volume of employees covered by the findings on consultation, 20 per cent were working for organisations that acted on employee feedback 'All of the time', and a further 47 per cent were working for organisations that acted on employee feedback 'Most of the time'. Three per cent of employees across Great Britain had their feedback acted on 'Hardly any of the time' or 'None of the time', and a further two per cent did not have the opportunity to provide feedback in the ways explored by the survey.

# 5 Productivity and performance

## Key findings

- Eight in ten employers had a system in place for recording absence and this was most likely to be the case in large organisations, those in the public sector and those with a trade union presence.
- Both short and medium term absences were characterised by ‘Minor illnesses (such as colds, flu, sickness and diarrhoea)’. The main causes of long term absence were more mixed and were attributed to ‘Problems associated with joints or muscles (excluding back pain)’, ‘Stress/anxiety/ depression, Back pain’ and ‘Cancer related illnesses’.
- A third of employers (33 per cent) said they had taken action to keep employees with health problems in work or facilitate their return to work in the last 12 months. The measures most commonly used were ‘Allowing employees to work reduced or different hours’ (29 per cent) and ‘Meetings to discuss extra help that employees might need to return to or stay in work’ (28 per cent).
- Staff retention was examined in terms of how many employees had left an organisation in the past year. Fifty per cent of respondents reported zero wastage in the previous year, and this was far more likely to be the case amongst small organisations.

In order to set a baseline for some aspects of productivity and performance, the employer survey gathered information relating to sickness absence and staff retention. This chapter discusses the nature of sickness absence.

Actions taken by employers to keep employees with health problems in work or facilitate their return to work are also examined, and the chapter concludes with the findings for staff retention.

## 5.1 Sickness absence

The task of collecting accurate and complete data about sickness absence was not straightforward. Indeed, during the development of the survey it became clear that employers did not always record information about absence, and, where it was recorded, this was not always done in a uniform way making it difficult to collect comparative data from organisations (more detail on the challenges encountered during collection of these data are summarised in the appendices, see Appendix C).

If respondents said they **did not** have a system for recording absence, they were asked no further questions on this subject. Therefore, the findings for the nature of sickness absence cover only a subset of employers interviewed.

In summary, employers that were able to answer questions about sickness absence were characterised as: large organisations, public sector, multiple site and those with a fixed policy on occupational sick pay (OSP). Further information about the organisations that answered questions about sickness absence is provided in Section B.10.2.

### 5.1.1 Recording sickness absence

The majority of organisations (79 per cent) had a system in place to record absence, although small employers were less likely to have such a system (78 per cent compared with 98 per cent of medium and large employers). Related to this, private sector organisations (predominantly small employers) were less likely than those in the public sector to have a system (78 per cent versus 93 per cent respectively). Furthermore, employers with no fixed policy on the payment of OSP were less likely than those with a policy to say they had a system for recording absence (62 per cent versus 81 per cent).

In terms of the volume of employees represented by the data, the majority (94 per cent) were working for an organisation which had a system for recording sickness absence.

### 5.1.2 Working time lost to sickness absence

Respondents who had a system for recording absence were asked about the time lost to illness and injury in the past 12 months. To improve levels of response to this question, respondents were given the choice of providing the information in terms of the percentage of working time lost or the total number of full days lost to absence (a majority opted for the latter). Despite this, one in five respondents (18 per cent) could not provide the relevant information (see Section B.10.2).

Among organisations that gave their answer in terms of the total number of days lost to sickness absence, the general pattern observed in the data was that levels of absence varied by size of employer, with large organisations reporting a greater proportion of working time lost compared with smaller organisations. More detail on this analysis is presented in the appendices to this report (see Section C.3).

### 5.1.3 Nature of sickness absences

#### *Reasons for absence*

Respondents who were able to classify absence in the last year in terms of short-, medium- or long-term illness were asked to state the three main reasons for absence, (these were 'top of mind' responses, that is, respondents were not prompted with a list of possible health symptoms).

Table 5.2 shows that short-term absences were dominated by 'Minor illness' (such as colds, flu, sickness and diarrhoea), cited by 90 per cent of respondents. This was followed by 'back pain' (six per cent), while other causes were mentioned by three per cent or less of respondents.

There was more of a mixed picture for medium-term absence: 'Minor illness' was cited by around a third of respondents (35 per cent), followed by around ten per cent of respondents mentioning 'Problems associated with joints or muscles', 'Stress/anxiety/depression', or 'Back pain'.

The main causes of long-term absence were far more evenly distributed than in the case of either medium- or short-term absences, with between ten and 15 per cent mentioning 'Problems associated with joints or muscles', 'Stress/anxiety/depression', 'Back pain' and 'Cancer-related illnesses'.

## 5.2 Attendance management measures

Management of sickness absence by employers can play a role in reducing its incidence and it is regarded as a component of ‘good work’<sup>24</sup>. For the purposes of the employer survey, absence management was explored in terms of the actions taken by employers in the last 12 months to keep employees with health problems in work or facilitate their return to work.

A third of employers (33 per cent) said they had taken at least one action in this regard in the past year: these were most likely to be large organisations (96 per cent compared with 79 per cent of medium and 30 per cent of small organisations).

Other groups of respondents who were more likely to have used measures to keep employees with health problems in work or facilitate their return to work in the last 12 months were:

- public sector organisations (48 per cent versus 31 per cent in the private sector);
- trade unionised employers (51 per cent versus 31 per cent of non-unionised employers);
- organisations which offered elements of ‘good work’ namely:
  - those which offered flexible working (36 per cent versus 28 per cent who did not);
  - those with stress management support practices (55 per cent versus 28 per cent of those without).

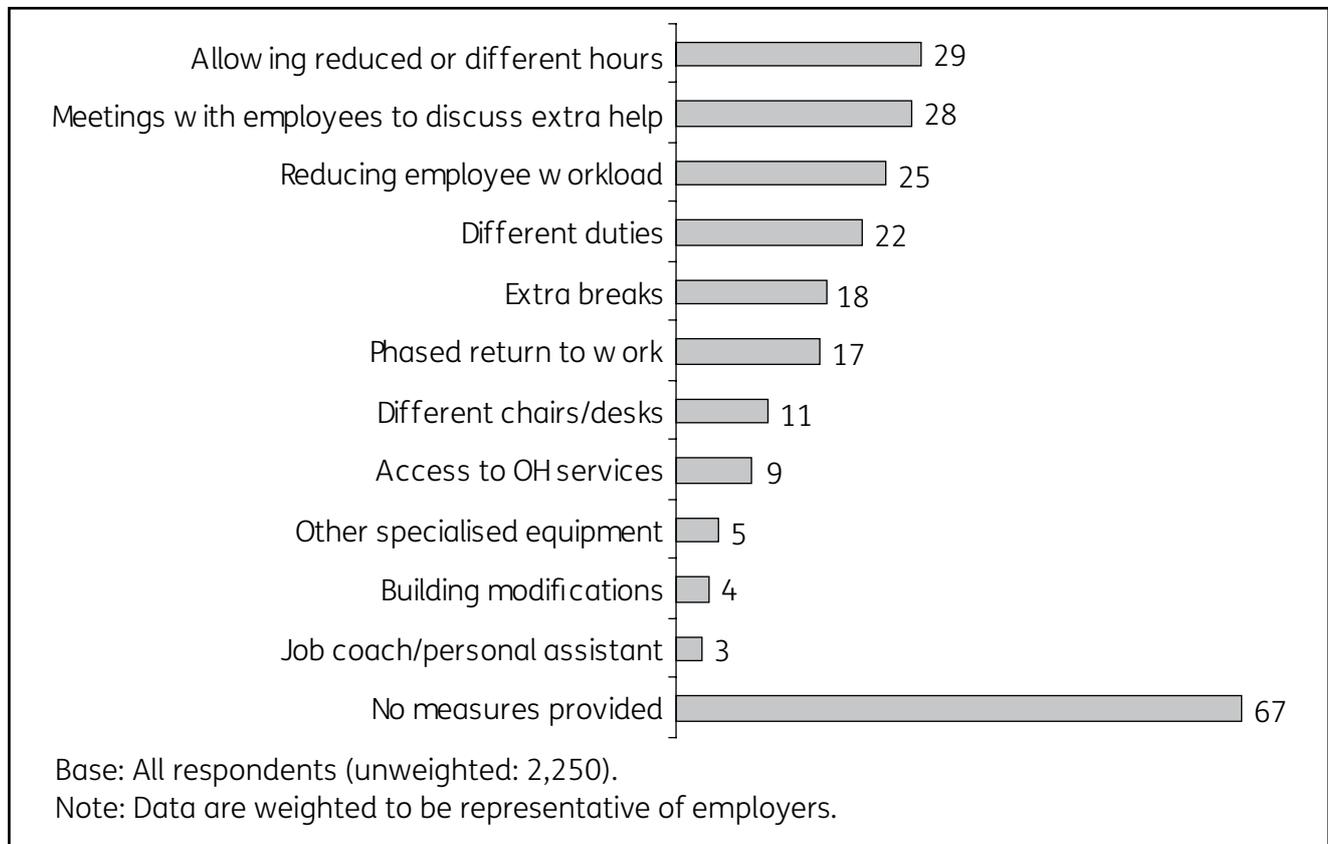
The most commonly cited measures used by employers in the last 12 months were ‘Allowing employees to work reduced or different hours’ (29 per cent) and ‘Meetings to discuss extra help that employees might need to return to or stay in work’ (28 per cent). Figure 5.1 shows, in descending order, how frequently each measure was mentioned.

The characteristics of the organisations that were more likely to have used each individual measure were similar to those already discussed in this section, i.e. large employers, trade unionised and public sector organisations.

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<sup>24</sup> Chapter 4 discusses other elements of ‘good work’ and to what extent they were provided by organisations.

**Figure 5.1 Measures used in the last 12 months by employers to help keep employees with health problems in work or facilitate their return to work (% employers)**



### 5.2.1 How do the findings relate to the volume of employees represented by the data?

Viewing this in terms of the volume of employees represented by the results, 80 per cent were working for an organisation that had provided at least one measure to help keep employees with health problems in work or facilitate their return to work in the last year.

## 5.3 Usefulness of medical statements

Prior to April 2010, medical statements<sup>25</sup> (known as 'sick notes') were issued to employees by doctors after the employees seventh day of absence from work due to illness or injury. In these statements, doctors were able to describe an individual's condition and indicate, in principle, whether or not they were fit to work.

<sup>25</sup> From 6 April 2010 new fit notes replaced medical statements: <http://www.businesslink.gov.uk/bdotg/action/detail?type=ONEOFFPAGE&itemId=1084712563&r.pp=11&r.l1=1075193191&r.lc=en&r.li=1084713119&urlname=fitnote&urlparam=fitnote&ref=http%3A//www.dwp.gov.uk/fitnote/&domain=www.businesslink.gov.uk>

Respondents were asked how useful they felt medical statements were in terms of deciding how fit an employee was to do their job and in terms of indicating what adjustments could be made to their job to facilitate an early return to work. On a four-point scale ranging from very useful to not at all useful, 44 per cent deemed medical statements not very useful or not at all useful, while 30 per cent of employers rated the statements as very useful or useful. A quarter said they did not know or had not seen a statement before (these were predominantly small organisations).

Table 5.3 shows that medium and large organisations were more likely than small employers to say that medical statements were not very or not at all useful (68 per cent and 77 per cent versus 43 per cent respectively). No other patterns were discernible in the data by other organisational characteristics.

**Table 5.1 Rating for usefulness of medical statements, by size of organisation**

	Size of organisation			
	Total %	Small %	Medium %	Large %
Very useful	7	7	6	3
Useful	23	23	21	14
Not very useful	26	25	42	48
Not at all useful	19	18	25	31
Don't know	5	5	2	2
Not applicable (not seen a statement)	21	22	4	2
All useful (net)	30	30	27	19
All not useful (net)	44	43	68	77
<i>Unweighted base</i>	2,250	1,122	555	568

Base: All.

Note: Data are weighted to be representative of employers.

## 5.4 Staff retention

The measure of staff retention adopted by the survey was the same as that used by the Chartered Institute of Personnel and Development in their 2009 Recruitment, retention and turnover report<sup>26</sup>. This can be described more accurately as a 'wastage measure', as it calculates 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. A full description of the calculation is provided in the technical notes, which form part of the appendices to this report (Appendix B).

<sup>26</sup> Op cit.

Table 5.2 shows that half of all employers (50 per cent) reported no wastage in the past year, and, as expected, this was more likely to be the case for small organisations (53 per cent had no wastage compared with three per cent of medium and none of the large employers in the survey). High levels of wastage were also most commonly observed among small organisations: 21 per cent had a wastage level of 25 per cent or more, compared with 13 per cent of both medium and large organisations.

Analysis by industry sector showed that employers in the health/social work sector were most likely to report any wastage in the past year, while those in the hotels/restaurant sector were more likely than all other employers to report wastage at a level of 25 per cent or more in the past year (reflecting the predominance of small organisations in this sector).

**Table 5.2 Level of labour turnover (wastage) by size of organisation and industry sector (Standard Industrial Classification (SIC) group)**

	Size of organisation				Industry sector (SIC group)								
	Total %	Small %	Medium %	Large %	Manufacturing/utilities %	Construction %	Retail/wholesale %	Hotels and restaurants %	Transport/communications %	Finance/business %	Public administration/ education %	Health/social work %	Other service activity %
0% wastage	50	53	3	0	49	50	54	42	41	52	36	31	51
1-9% wastage	10	8	48	55	16	7	10	5	18	7	22	22	8
10-24% wastage	19	18	37	32	19	21	18	16	20	21	30	27	16
25% or more wastage	21	21	13	13	17	22	18	38	21	21	13	20	25
<i>Unweighted base</i>	1,194	1,111	498	385	272	166	275	125	**63	524	157	221	113

Base: All who gave answers about the number of employees in their organisation, and the number of leavers and joiners in the past year.

Note: Data are weighted to be representative of employers. \*\* denotes small base (unweighted base less than 100).

## 6 Occupational sick pay

### Key findings

- Nearly half of employers paid occupational sick pay (OSP) to all or some of their staff (48 per cent) and four in ten did not pay OSP. The remainder of employers did not have a fixed policy on OSP.
- Among those who provided sufficient information about their OSP policy:
  - three-quarters (73 per cent) paid their staff on the first, second or third day of absence;
  - the average maximum length of time for which employers would pay any OSP during any one period of absence was 67 working days, on average;
  - two-thirds (68 per cent) reported that they paid the same level of OSP over the maximum period allowed, while 23 per cent said that payments reduced over time;
  - ninety three per cent of employers paid OSP at 100 per cent of salary when payments commenced;
  - the average maximum length of time that OSP was paid at 100 per cent of normal salary was 52 working days on average.

A key objective of the research was to investigate employers' OSP policies. Also known as company sick pay, OSP is a payment offered by some organisations when employees are absent from work; this payment is in addition to Statutory Sick Pay provided by the Government<sup>27</sup>.

At the time of designing the survey there was little information in the public domain about employers' OSP policies, and the data collected in the survey was, in part, a step towards filling the evidence gap. In particular, answers to the following questions were sought:

- What proportion of organisations paid OSP?
- What proportion of organisations paid OSP in the first three days of absence?
- What percentage of employees was covered by OSP?
- At what rate was OSP paid for the majority of the workforce?

Answering these questions presented a challenge as employers paid OSP in a variety of ways. Following extensive piloting, a set of questions was agreed upon that provided the most complete picture of employers' policies within the constraints of a survey that did not focus solely on this topic.

This chapter provides an account of which organisations paid OSP, how it was paid and whether arrangements varied between employers; it concludes with a comparison of the generosity of sick pay arrangements among employers.

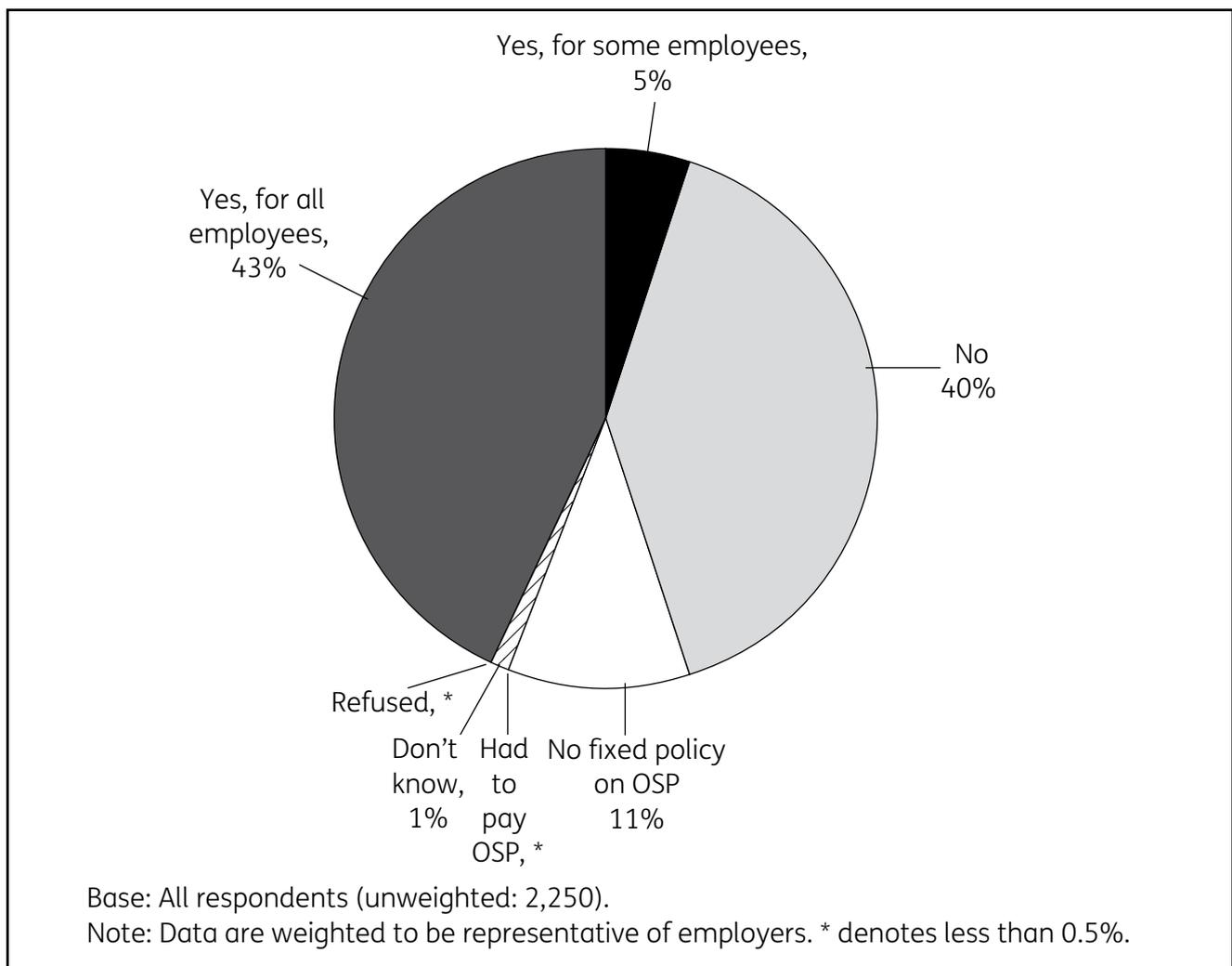
<sup>27</sup> The standard weekly rate for SSP is £79.15, paid for up to 28 weeks ([http://www.direct.gov.uk/en/MoneyTaxAndBenefits/BenefitsTaxCreditsAndOtherSupport/Illorinjured/DG\\_10018786](http://www.direct.gov.uk/en/MoneyTaxAndBenefits/BenefitsTaxCreditsAndOtherSupport/Illorinjured/DG_10018786))

## 6.1 Coverage of OSP policy

The first step in describing the picture of OSP payment is to establish which organisations paid OSP and the characteristics of payers and non-payers.

Figure 6.1 shows that 43 per cent of respondents said that they paid all employees OSP for absence due to illness or injury, and five per cent said they paid some employees; so almost half (48 per cent) paid OSP to some or all of their staff. However, 40 per cent of respondents did not pay OSP, while 11 per cent said they had no fixed policy (and one per cent said they did not know their organisation's policy or refused to give an answer).

**Figure 6.1 Proportion of employers that pay OSP**



Large organisations were most likely to provide OSP: 88 per cent said they provided OSP to all or some of their staff, compared with 71 per cent of medium and 47 per cent of small employers.

Other types of organisations that were more likely to pay OSP were:

- those with a system for recording sickness absence (51 per cent versus 36 per cent who did not have a system);
- those who had a lower proportion of part-time workers (53 per cent with 0–24 per cent part-time staff versus 43 per cent of those with over 25 per cent part-time staff);
- those with a lower annual level of staff wastage (51 per cent with wastage of less than nine per cent versus 44 per cent with wastage of ten per cent or more); and
- those who provided elements of ‘good work’ such as:
  - flexible working (54 per cent versus 39 per cent of organisations that did not provide such practices); and
  - stress management support measures (58 per cent versus 46 per cent of employers that did not provide these).

Table 6.1 summarises the characteristics of organisations that were more likely to be paying OSP and of those who stated they did not have a policy for the payment of OSP.

**Table 6.1 Characteristics of employers in relation to payment of OSP**

Most likely to pay OSP	Most likely to not have a policy on OSP
Large organisations	Small organisations
Low proportion of part-time workers	
Low staff wastage	
Provide flexible working practices	
Provide stress management support measures	
System for recording sickness absence	

**6.1.1 How do the findings relate to the volume of employees represented by the data?**

Based upon the numbers of respondents who reported that they paid OSP to all or some of their workforce, 70 per cent of employees in Great Britain (GB) were working for an organisation that paid OSP.

The figures in the following sections are based on the sub-sample of employers who pay OSP, rather than the total sample.

**6.2 Qualifying period for OSP payment**

There was a desire to understand when OSP payments started for employees who were absent due to illness or injury. To explain, some employers chose to delay the start of payments until a number of qualifying days had passed; indeed, at the time of the survey, employers were under no legal obligation to pay sick pay until the fourth consecutive day of absence.

For practical reasons, respondents were asked about their policy in terms of what applied to the majority of their workforce. Two-thirds (64 per cent) paid their staff on the first day of absence, while nine per cent paid after two or three days and 14 per cent started paying after four or more days of absence. A minority of employers had no fixed policy (eight per cent) or reported that they did not know (five per cent). Figure 6.2 summarises these findings.

Large organisations were more likely to pay OSP on the first day of absence: 81 per cent compared with 73 per cent of medium and 63 per cent of small employers. No other notable patterns (for example by type of organisation or trade union presence) were apparent in the data for these findings.

**Figure 6.2 Commencement of OSP payment by size of organisation**



### 6.2.1 How do the findings relate to the volume of employees represented by the data?

Looking just at those employees working for employers that paid OSP (Section 6.1.2 identified that 70 per cent of employees in GB were working for an employer that paid OSP), the proportion of employees who worked for organisations that paid OSP on the first day of absence was 78 per cent, while 16 per cent were paid after two or more days of absence.

## 6.3 Nature of OSP payment

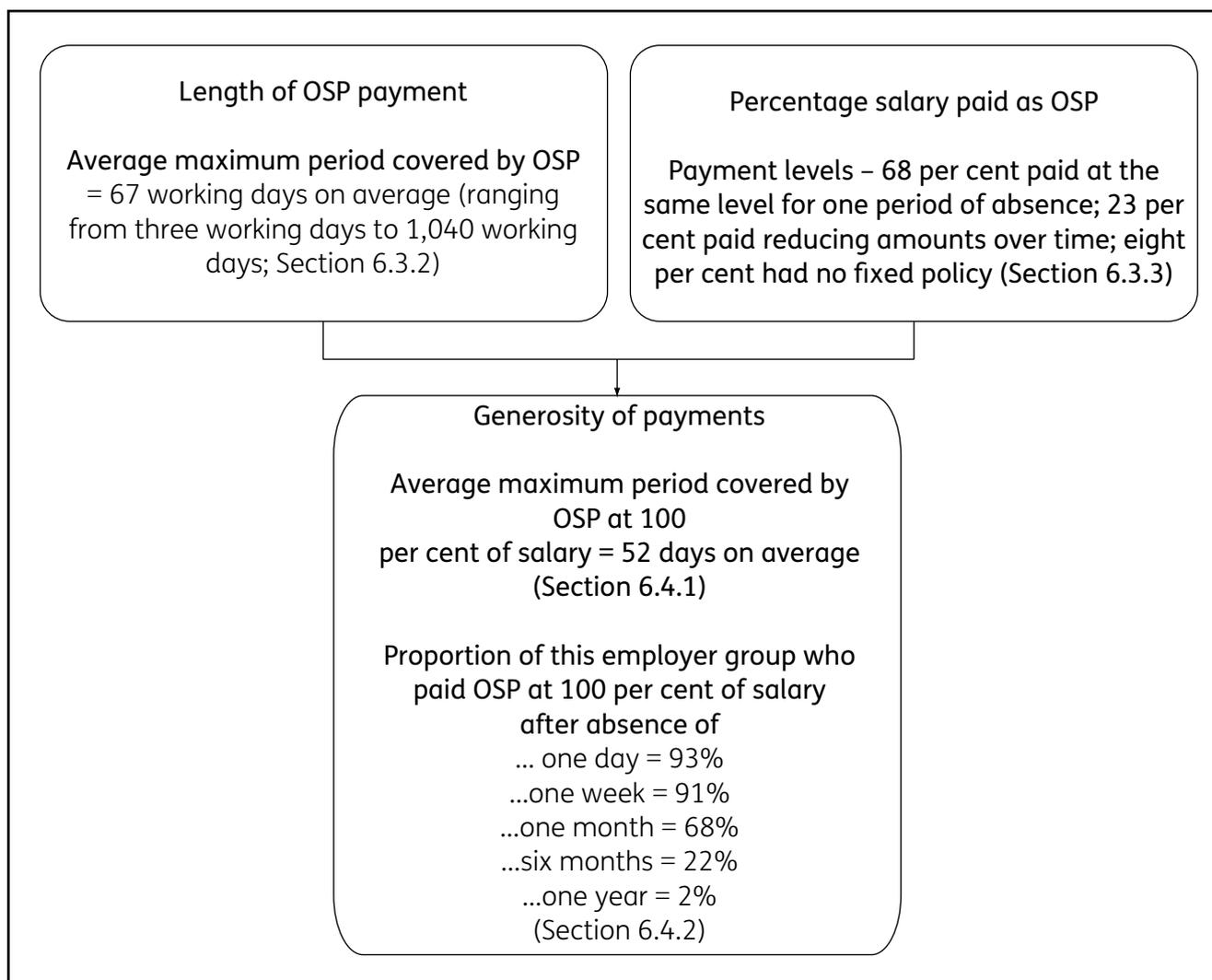
As already mentioned, the piloting phase of the survey revealed a great many variations in employers' OSP payment policies, and it was not possible to accommodate all this detail in a relatively short telephone survey that was covering a range of issues beyond sick pay. The key variations encountered are summarised below, including the agreed remedy for addressing the issue in the survey:

- Levels of OSP were not the same for all staff within an organisation, with variations occurring due to length of service, job role or seniority of staff. Therefore, the survey asked employers about the policy that applied to the **majority** of their workforce.

- The actual value of OSP payments varied depending on how much an employee earned. However, it was beyond the scope of this survey to address this issue in any detail. Instead, employers were asked about the proportion of normal salary paid in OSP for the majority of the workforce.
- OSP was not always paid at the same proportion of salary during the period of absence. Where this was the case, employers were asked about the proportion of salary paid and for how long this was paid, with the questionnaire allowing up to five iterations of these questions (i.e. there was scope for employers to tell us about six payment stages).

To summarise, in order to understand the patterns of OSP payments, three interlocking dimensions were investigated by the survey: the proportion of normal salary paid as OSP, the maximum length of time for which OSP would be paid in any one period of employee absence and how payments varied during that time period. In combination, these elements defined the generosity of OSP policies. Figure 6.3 summarises the key findings for OSP, which are discussed more fully in Sections 6.3.2 to 6.4.2.

**Figure 6.3 Summary of findings relating to OSP policy**



### 6.3.1 Maximum time for which OSP was paid

Respondents were asked about the maximum length of time for which they would pay OSP during any one period of absence. Answers ranged from three working days to over 1,000 working days and the average was 67 working days (just one per cent of organisations that paid OSP to their workforce refused to provide this information).

Comparing the average number of days, organisations that tended to provide OSP for longer periods were characterised as:

- large: 140 days on average, compared with 82 days in medium and 63 days in small organisations;
- trade unionised: 115 days versus 62 days in non-unionised settings;
- having been in operation over 21 years: 71 days compared with 45 days for employers that had been established for 10 years or less.

### 6.3.2 Level of OSP payment over time

Employers that gave information about the maximum period of time for which they would pay OSP were asked whether they paid OSP at the same proportion of normal salary over this period, or whether the proportion of normal salary paid out reduced over time. Of this group, over two-thirds (68 per cent) reported that they paid the same level of salary over the maximum period allowed, while 23 per cent said that payments reduced over time (eight per cent did not have a fixed policy on this matter, and one per cent did not know their organisation's policy).

Respondents in small and medium organisations were most likely to provide payment at one level throughout the full payment period: 69 per cent and 65 per cent respectively compared with 49 per cent of large organisations in this group (Table 6.2). However, as shown previously, large employers were more likely to pay OSP from the first day of absence, to pay OSP for a longer period and to pay at 100 per cent of salary.

The vast majority of respondents who paid OSP at reducing amounts during the maximum period payment had just two stages of payment.

**Table 6.2 Whether OSP paid at one rate or at a reducing rate during period of OSP payment, by size of organisation**

	Size of organisation			
	Total %	Small %	Medium %	Large %
Payment rate stays the same	68	69	65	49
Payment rate reduces over time	23	21	32	49
No fixed policy on OSP payment	8	8	3	1
<i>Unweighted base</i>	1,115	357	333	423

Base: All those who pay occupational sick pay.

Note: Data are weighted to be representative of employers. Column percentages do not always sum to 100 due to rounding.

## 6.4 Generosity of OSP payments

Clearly a discussion about the mechanics relating to the length and level of OSP payments in isolation does not provide a full understanding of how OSP payments differed among employers. The following sections describe various analyses of the data that provide insight into the generosity of payments.

### 6.4.1 Maximum time OSP was paid at 100 per cent of salary

The survey data also permitted the calculation of the maximum length of time OSP was paid at 100 per cent of salary. Among those respondents who were able to provide sufficient information<sup>28</sup>, the maximum number of working days that OSP was paid at the full rate was 52 days on average.

### 6.4.2 Payment of OSP at 100 per cent of salary for varying lengths of absence

In order to visualise the differences in employers' generosity of payments, the data were analysed to show the proportion of respondents who paid OSP at 100 per cent of normal salary at varying lengths of absence: when payment commenced, after one week, one month, six months and one year. It should be noted that the respondents for whom such analysis was possible is a sub group of the total (as not all respondents paid OSP or were able, or willing, to supply information about their policy).

Among employers that were able to provide information about the rate at which OSP was paid<sup>29</sup>, 93 per cent paid OSP at 100 per cent of salary when payments commenced.

Figure 6.4 shows that the vast majority of employers for whom we had data paid OSP at 100 per cent of salary on the first day of absence (93 per cent), and a similar proportion (91 per cent) paid OSP at 100 per cent of salary after one week of absence. However, as the length of absence increased, the proportion paying OSP at 100 per cent of salary steadily decreased: after one month of absence around two thirds (68 per cent) paid OSP at 100 per cent of salary, reducing to 22 per cent after six months and just 2 per cent after one year of absence.

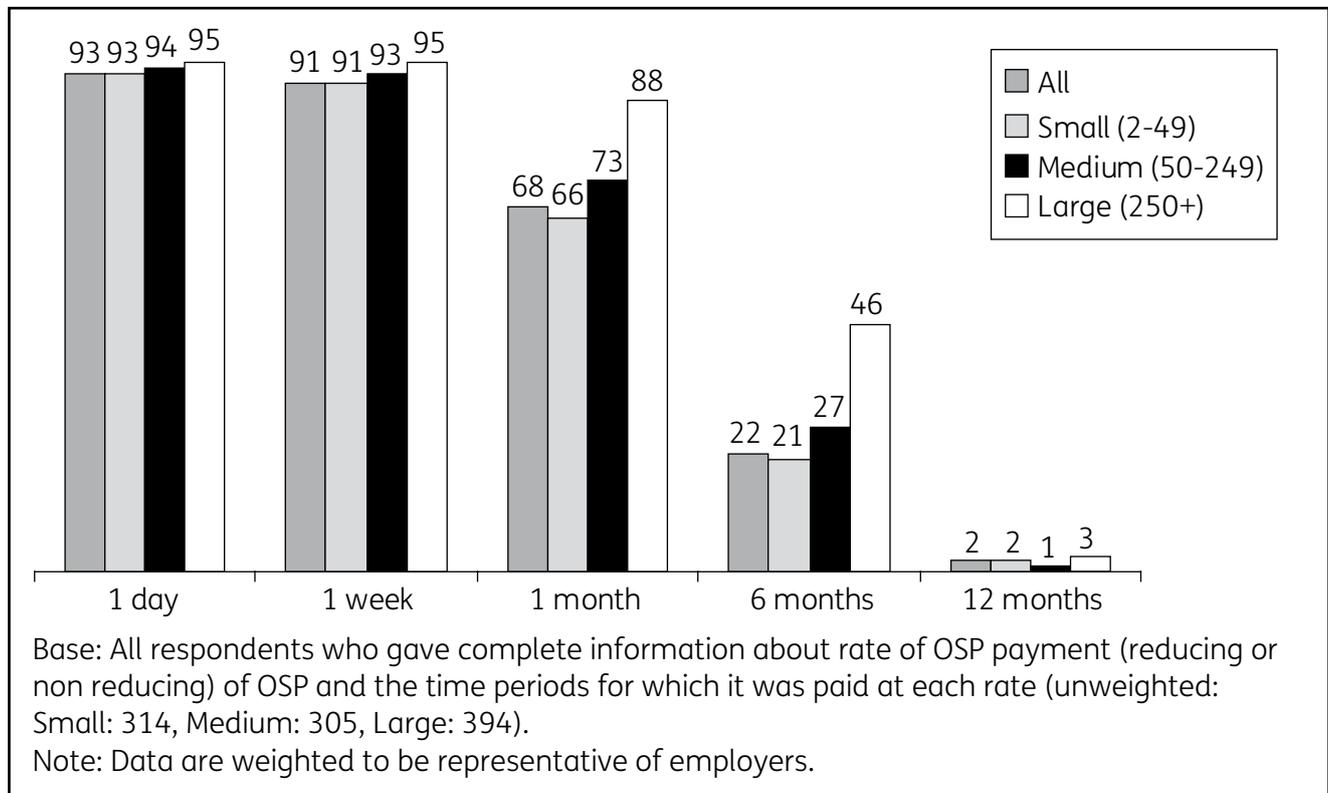
Figure 6.4 also shows the breakdown in the results by size of organisation; the findings suggest that large employers in this group were both more likely than other employers to pay OSP at 100 per cent of normal salary and to pay at this rate for a longer period of time. For example, after one month of absence, 88 per cent of large organisations paid OSP at 100 per cent of salary versus 66 per cent of small organisations, but after six months, the respective proportions were 46 per cent and 21 per cent.

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<sup>28</sup> A sample size of 1,014 employers.

<sup>29</sup> A sample size of 1,014 employers. The calculation included employers that did not pay OSP at the full rate at all, i.e. those with a value of 0 days at full rate.

**Figure 6.4 Proportion of organisations that paid OSP at 100 per cent of salary after one day, one week, one month, six months and one year of sickness absence, by size of organisation**



## 6.5 OSP and sickness absence

The data from the parallel survey of employees suggested that workers in organisations that **did not** pay OSP were less likely to report sickness absence and this finding has certainly been observed in other, larger surveys<sup>30</sup>.

Working to the same hypothesis, it would be reasonable to expect that organisations with a lower than average proportion of working time lost to absence would be less likely to offer OSP payment. However, among organisations that were able to give the necessary information, this pattern was not evident in the data when organisations of all sizes were considered. Further analysis **within** size band of organisation proved inconclusive due to the small sample sizes involved. The fact that we have not been able to prove this hypothesis from the survey data does not mean that the relationship between OSP and sickness absence does not exist – rather we would need to study a larger sample of employers to be sure that this was the case.

<sup>30</sup> For example, Survey of Workplace Absence Sickness and Health 2005: report on emergent findings, Health and Safety Executive.

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

## Key findings

- The survey explored levels of awareness of five health and well-being initiatives put in place by the Government, and four in ten respondents had heard of one or more of these initiatives.
- Greatest awareness was recorded for the 'Fit for Work Service (FFWS)' followed by the 'Occupational Health Helpline for Small Businesses'.
- When the findings were considered in terms of how they related to the whole sample, levels of use for all the initiatives were low (between one and two per cent for each of the five initiatives). However, several of the initiatives were pilots and had not been rolled out nationally, so low levels of awareness and use are to be expected.

This chapter considers employers' levels of awareness of the government's initiatives to help organisations improve the health and well-being of their employees, and to what extent such initiatives were being used.

## 7.1 Levels of awareness

Respondents were asked whether they had heard of four initiatives listed below as well as the National Institute for Health and Clinical Excellence (NICE)<sup>31</sup> public health guidance<sup>32</sup>:

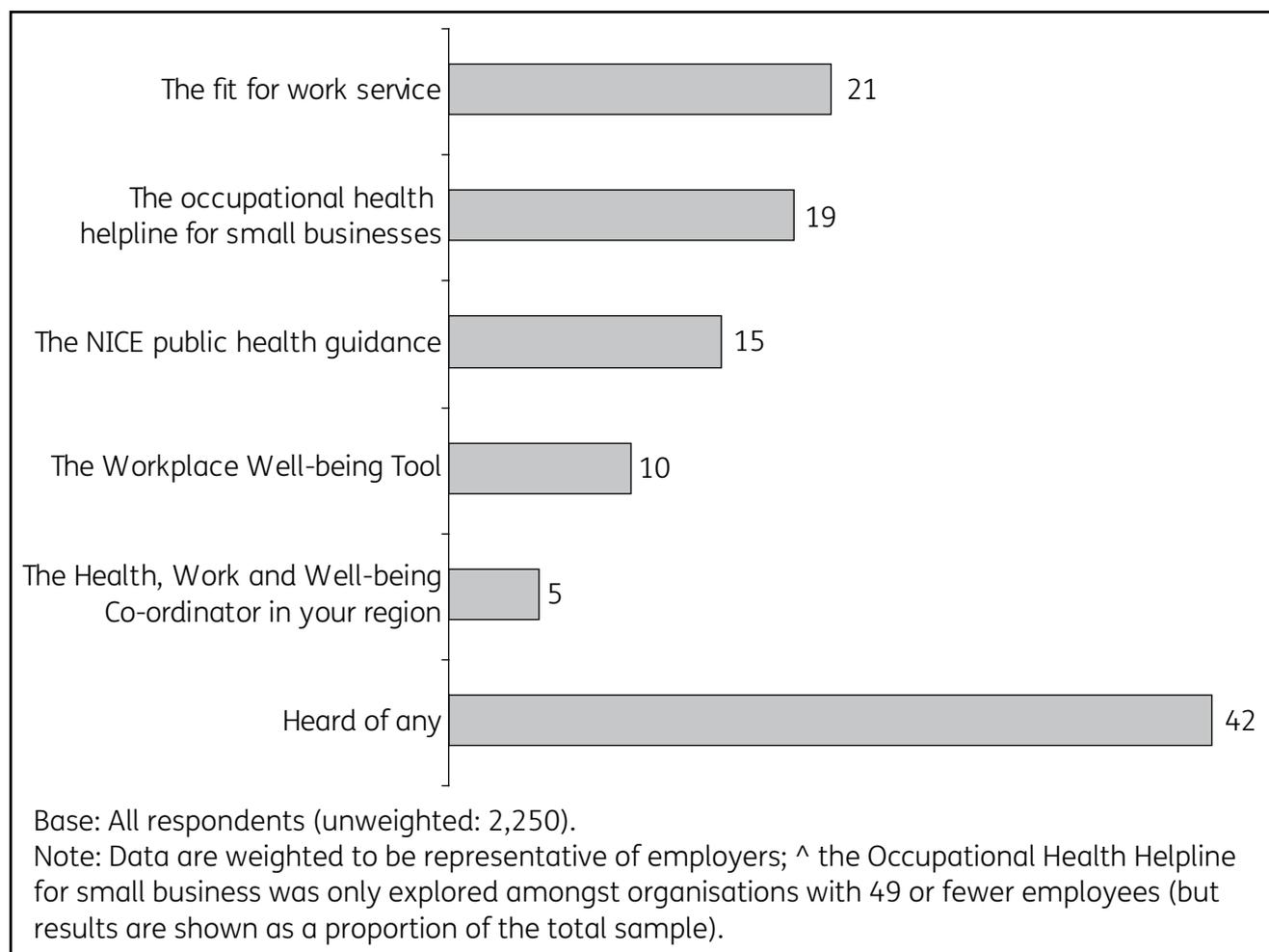
- Regional Health, Work and Well-being Co-ordinators
- Workplace Well-being Tool (previously known as the Business Health Check Tool)
- Occupational Health Helpline for Small Businesses (only organisations with 50 employees or fewer were asked about this initiative)
- FFWS

Figure 7.1 shows that four in ten respondents had heard of one or more of the initiatives. Awareness levels were highest for the 'FFWS', recognised by a fifth (21 per cent) of respondents, and lowest for regional 'Health, Work and Well-being Co-ordinators' (five per cent had heard of this role). A fifth (19 per cent) had heard of the 'Occupational Health Helpline' for Small Businesses (when we look at this in terms of the group to whom it was applicable, i.e. for those with 49 or fewer employees, the level of awareness was 20 per cent). As all of these are pilot initiatives and the 'FFWS' and 'Occupational Health Helpline for Small Businesses' have not been rolled out nationally, low levels of awareness were expected. The levels found in the survey are higher than anticipated and could reflect employers confusing the initiatives with other programmes or projects designed to promote health and well-being.

<sup>31</sup> See <http://www.nice.org.uk/>

<sup>32</sup> More details on each initiative may be found in the appendices to this report, see Appendix A.

**Figure 7.1 Awareness of government-sponsored health and well-being initiatives and information (% respondents citing each)**



As Table 7.1 shows, respondents' awareness of some initiatives correlated with the size of organisation they worked for: those in large organisations had higher levels of awareness of all initiatives (with the obvious exception of the 'Occupational Health Helpline for Small Businesses').

Some differences by type of organisation were also apparent, with those working in the public sector more likely than those working in the private sector to have heard of the FFWS (48 per cent compared with 19 per cent) and the 'NICE public health guidance' (29 per cent compared with 13 per cent).

Notably, respondents working for organisations with trade union presence were twice as likely as those with no trade unions to have heard of the 'Health, Work and Well-being Co-ordinator' in their region (11 per cent compared with five per cent).

**Table 7.1 Awareness of government-sponsored health and well-being initiatives and information, by size of organisation, type of organisation and trade union presence**

	Size of organisation				Type of organisation		Trade union	
	Total %	Small %	Medium %	Large %	Public %	Private %	Yes %	No %
FFWS	21	20	35	44	48	19	28	20
Occupational Health Helpline for Small Businesses <sup>^</sup>	19	20	-	-	23	19	23	18
NICE public health guidance	15	15	18	25	29	13	19	15
Workplace Well-being Tool	10	10	12	16	13	10	13	10
Regional Health, Work and Well-being Co-ordinator	5	5	6	11	5	5	11	5
Any	42	41	52	58	61	40	56	41
<i>Unweighted base</i>	<i>2,250</i>	<i>1,122</i>	<i>555</i>	<i>568</i>	<i>**89</i>	<i>271</i>	<i>150</i>	<i>277</i>

Base: All.

Note: Data are weighted to be representative of employers. <sup>^</sup> denotes an initiative only explored with respondents working for organisations employing 49 employees or less, but results are shown as a proportion of the total sample. <sup>\*\*</sup> denotes small base (unweighted base less than 100). – denotes that an initiative was not applicable to this sub-group.

Differences by industry sector were also observed (Table 7.2). Respondents from the transport and communications sector were significantly more likely than those working in other sectors to say that they were aware of the ‘Health, Work and Well-being Co-ordinator’ in their region (23 per cent versus 11 per cent or less). It is unsurprising that those in the health/social work sector were much more likely than other respondents to be aware of the ‘NICE public health guidance’ (40 per cent versus 27 per cent or less).

**Table 7.2 Awareness of government-sponsored health and well-being initiatives and information, by industry sector (SIC group)**

	Total	Industry sector (SIC group)								
	Total %	Manufacturing/utilities %	Construction %	Retail/wholesale %	Hotels and restaurants %	Transport/ communications %	Finance/business %	Public administration/ education %	Health/social work %	Other service activity %
Regional Health, Work and Well-being Co-ordinator	5	3	4	5	7	23	2	11	10	2
Workplace Well-being Tool	10	13	9	8	16	12	10	11	8	7
Occupational Health Helpline for Small Businesses <sup>^</sup>	19	22	17	18	17	22	20	18	17	19
FFWS	21	22	21	18	16	30	20	33	29	21
NICE public health guidance	15	14	9	12	11	27	12	16	40	10
None of these	42	42	37	37	41	50	41	46	54	38
<i>Unweighted base</i>	2,250	300	173	296	141	**74	571	214	266	133

Base: All.

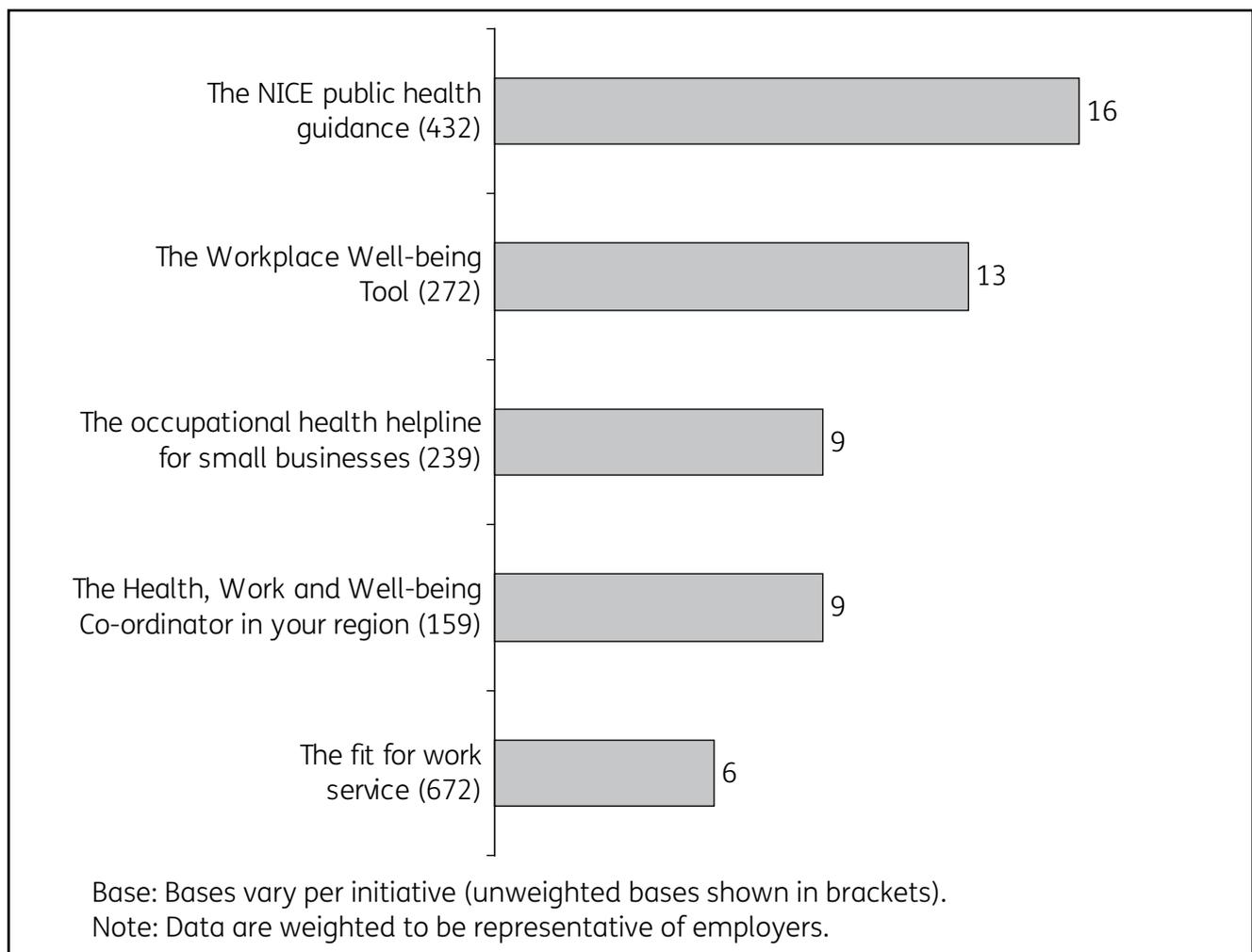
Note: Data are weighted to be representative of employers. <sup>^</sup> denotes an initiative only explored with respondents working for organisations employing 49 employees or less, but results are shown as a proportion of the total sample. \*\* denotes small base (unweighted base less than 100).

## 7.2 Use of the initiatives

All respondents who were aware of an initiative were asked whether they had made use of it, and Figure 7.2 displays the results.

Levels of use were low but this is to be expected given that several of the initiatives were not nationally available and others were relatively new.

**Figure 7.2 Use of the government-sponsored health and well-being initiatives and information (% respondents aware of each initiative who had used it)**



To provide a more complete picture of levels of use, the findings were recalculated on the basis of the **total sample**. Levels of use are as displayed below:

- NICE public health guidance Two per cent
- Occupational Health Helpline for Small Businesses Two per cent
- Workplace Well-being Tool One per cent
- FFWS One per cent
- Regional Health, Work and Well-being Co-ordinator One per cent

The finding for the Occupational health advice line is much higher than anticipated given management information about the numbers of calls this service had received, and it is possible that employers were confusing this with another service.

Size of organisation correlated with levels of use, although this was only detectable for some initiatives where sample sizes were sufficiently large, as shown in Table 7.3. In the case of both the ‘FFWS’ and ‘NICE public health guidance’, large organisations were more likely than medium or small organisations to say they used the initiative.

**Table 7.3 Use of selected health and well-being initiatives, by size of organisation**

	Size of organisation			
	Total %	Small %	Medium %	Large %
FFWS	(672) 6	(228) 6	(191) 6	(251) 22
NICE public health guidance	(432) 16	(175) 15	(106) 21	(151) 34

Base: All who have heard of the initiative (unweighted bases shown in brackets).

Note: Data are weighted to be representative of employers.

# 8 Conclusions

Returning to the objectives for the survey, Health, Work and Well-being (HWWB) and the Department for Work and Pensions (DWP) wished to collect data relating to the following:

- employers' perceptions about the importance of work to health and health to work, and to what extent investment in health and well-being was deemed a priority when ranked against other organisational priorities;
- employers' promotion of health and well-being at work through the provision of health and well-being initiatives or support;
- evidence of how organisations engaged 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 the incidence and management of sickness absence and measures of labour turnover; and
- employers' occupational sick pay (OSP) policies.

The survey has provided evidence in relation to each of these areas and, as noted in relation to the findings from the parallel employee survey undertaken for HWWB, there is evidence to suggest that activities to do with promoting health and well-being are more prevalent in large organisations, especially those in the public sector and those with a trade union presence. In addition, the survey has provided detail on the nature of sickness absence and OSP arrangements for organisations that were willing, and able, to supply such information.

## 8.1 Knowledge about the importance of work to health and health to work

A key area of interest for HWWB was the weight placed on the issue of employee health by organisations and how employers viewed their responsibilities towards promoting health and well-being at work. There was widespread acknowledgement among respondents that a link existed between work and employees' health and well-being, and there was overwhelming support, in principle, that employers had a responsibility to encourage employees to be physically and mentally healthy. Employers were, however, less certain about the financial benefits to be gained from investing in this area (and there was no evidence of a higher level of agreement with the statement if they already had a system in place for recording sickness absence), and half thought that their workforce would not want them to intervene in issues relating to their health.

Differences in attitude by size of organisation were also apparent: large organisations were more convinced than small employers of the gains to be had from investment in employee health, while small organisations were more cautious than large employers about whether their employees would welcome such interventions.

Looking at the health and well-being agenda in a wider context, respondents as a whole placed the concept of improving employee health and well-being fifth in a list of six business priorities for the coming year, showing that other organisational concerns took precedence. Furthermore, among respondents in medium and large organisations (who were generally more open to the notion of investment in this area), improving employee health and well-being came last in their ranking of the six specified business priorities.

Thus, the findings suggest that while employers are generally supportive of the principles of the health and well-being agenda, they are less certain as to whether investment in this area is worthwhile, and it came low down on a list of investment priorities for employers. This makes investment in the health and well-being agenda vulnerable in times of economic difficulties.

## 8.2 Promotion of better health and well-being at work

### 8.2.1 Health and well-being initiatives/support

The wide ranging nature of health and well-being initiatives was reflected in the list of 19 initiatives and support measures drawn up for exploration by the survey; these were compiled to harmonise, as far as possible, with the list used in the parallel survey of employees. The list incorporated the whole spectrum of measures designed to promote worker safety, healthy lifestyles and well-being.

The well-being measures most commonly provided by organisations were 'Health and safety training' and 'More than 20 days' holiday (excluding bank holidays)'. In terms of the volume of employees, the findings showed that the largest proportions would have potentially been covered by 'Health and safety training', 'More than 20 days' holiday (excluding bank holidays)' and 'Work area assessments'.

When the results from the employee and employer surveys were compared, smaller proportions of employees said their organisation provided each benefit or initiative when contrasted with the employee volume figures derived from the employer data. This finding, however, was expected, given that not all employees would have been aware of the policies of their organisation, especially if the policy did not extend to them personally. Nonetheless, both data sets confirmed that large public sector organisations were more likely to be providing almost all the benefits and initiatives that were explored by the surveys.

### 8.2.2 Flexible working

Flexible working is generally upheld as a positive working practice and the survey explored how many organisations offered flexible working practices, such as flexi-time, working from home and job sharing. Six in ten employers offered such arrangements, and this was more likely to be the case among large organisations.

In terms of the volume of employees represented by the data, 82 per cent were working for organisations that provided flexible working practices. This contrasts with the results from the employee survey (57 per cent said that flexible working practices operated in their organisation), pointing up a gap in employee awareness of what is on offer within organisations, but the patterns in relation to size of organisation were borne out by both data sets.

### 8.2.3 Stress management

The government's response to the Black Review cited that stress was increasingly a common reason for absence. The employer survey showed that steps were being taken to manage stress in the workplace, and provided insights into the types of activities being adopted by organisations.

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

In terms of the volume of employees covered by these findings, half (51 per cent) were working for organisations that provided stress management support. While this was a higher percentage than was recorded in the employee survey (32 per cent), this may again be attributed to levels of awareness of what was deemed to be ‘stress management support’ among workers themselves. It was the case, however, that the Employer Survey findings echoed those of the Employee Survey, in that support was more prevalent in large, public sector, trade unionised organisations.

The most common activities used by organisations to manage stress in the workplace were ‘Informal discussions’, ‘Appraisals where the subject of stress was mentioned’ and ‘Group discussions’. While a minority of those providing stress management support specifically cited the ‘HSE [Health and Safety Executive] Stress Management Standards Programme’, it was noted that, in combination, many of the other activities being used by organisations would have gone some way to meeting the HSE standards.

#### **8.2.4 Job satisfaction**

Another measure of the promotion of health and well-being at work that was of interest was the extent to which employees were satisfied in their employment. An overwhelming majority of organisations (89 per cent) agreed to some extent that they took steps to increase employees’ job satisfaction, and employers in the health/social work, public administration/education and hotels/restaurants sectors stood out as more likely to be doing so than those in the manufacturing/utilities, construction, retail/wholesale and other service activities sectors.

#### **8.2.5 Worker engagement**

Employee engagement has been recognised as an element of ‘good work’, and the employer survey looked at engagement from the point of view of how senior managers communicated with their workforce and to what extent action was taken as a result of feedback gathered from employees.

Senior managers were found to most commonly communicate with staff via ‘Informal verbal communications’, ‘Regular meetings between management and staff’, ‘Notice boards’ and the ‘Regular use of the management chain to cascade information’. The usual pattern emerged in the data regarding size of organisation, with large employers more likely to cite all the methods of communication explored by the survey, even the most informal methods.

When considering action taken as a result of employee feedback, however, small organisations were more likely than large and medium employers to say that feedback was acted upon ‘all of the time’. From this it may be hypothesised that senior managers were being held more accountable by employees where feedback was sought in physically smaller settings and/or settings where the management team was more visible.

### **8.3 Productivity and performance**

The specific areas of performance and productivity that HWWB and DWP wished to monitor as part of the employer survey were levels of sickness absence and staff retention. The survey showed that systems for monitoring sickness were by no means universal: while eight in ten respondents had a system in place (and this was more likely to be the case for large, public sector employers), around a fifth did not, typified by small, private sector organisations.

A quarter of respondents agreed that sickness absence was a real barrier to productivity in their organisation, and this was more likely to be the case among large employers; there was also evidence that the working time lost to sickness absence was higher in large organisations than in other settings (although it should be borne in mind that larger organisations were more likely to be formally monitoring this).

The vast majority of working time lost to sickness absence was attributed to short term absence of up to one working week (80 per cent). Both short and medium term absences of up to four working weeks were characterised by ‘Minor illnesses’ (such as colds, flu, sickness and diarrhoea). However, the main causes of absence of at least four weeks were more varied and were often attributed to ‘Problems associated with joints or muscles (excluding back pain)’, ‘Stress/anxiety/depression’, ‘Back pain and Cancer related illnesses’.

In terms of managing absence, a third of employers had taken action to keep employees with health problems in work or facilitate their return to work in the last 12 months, and this was mainly observed amongst large organisations (where the need for such measures was greater due to a greater proportion of working time lost to absence). The approaches most commonly used 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’. Whilst the findings were not directly comparable, similar themes came through from the Employee Survey: workers with continuous sickness absence of five or more days had mainly received support via ‘Reduced working days or hours’ and ‘Changed duties/ workloads’.

Staff retention was examined in terms of ‘wastage’, i.e. how many employees had left an organisation in the past year (as a proportion of the average workforce size). Fifty per cent of respondents reported zero wastage in the previous year, and this was far more likely to be the case amongst small organisations.

## 8.4 Occupational sick pay

The survey has provided new evidence on organisations’ policies in relation to OSP. Nearly half of those interviewed paid OSP to all or some of their staff, and in terms of the volume of employees, 70 per cent were working for an organisation that paid OSP to some or all of the workforce.

Large organisations were most likely to be paying OSP to their staff. This is intuitive: large employers have a greater need to operate on a systematic basis; indeed, those who had other management information systems in place, such as a means of monitoring sickness absence, were more likely to pay OSP. In contrast, smaller organisations were more likely to say they had no fixed policy on OSP, perhaps reflecting a more ad hoc approach to management.

Not all organisations were willing or able to share detailed information about their company policy, but among those who did, three-quarters paid OSP to staff on their first, second or third day of absence, and the overwhelming majority paid OSP at 100 per cent of salary when payments started.

As a final point, the data suggested that larger organisations were more likely than other employers to report longer term absence, and the findings from other data sets such as Survey of Workplace Absence Sickness and Health (SWASH)<sup>33</sup> have shown that longer than average sickness absence was associated with workers in large organisations and those receiving pay when absent due to illness or injury. However, while the Employer Survey data suggested a similar link between length of absence and pay, the differences were not statistically significant. It should, however, be borne in mind that there were challenges around the collection of data on time lost to sickness absence (described in the appendices to the report, see Section B.10.2), which resulted in partial data for the working time lost calculation, and, therefore, much reduced sample sizes on which to base our observations.

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<sup>33</sup> Op cit.

## 8.5 Next steps

The survey has shown that organisations of all sizes recognise the link between work and health and that they have a responsibility for the health of their workers. The importance of the health and well-being agenda, however, is yet to be viewed on a par with other business priorities and that makes it vulnerable in times of economic hardship.

It is HWWB's intention to repeat the employer survey so that, by tracking key measures over time, the extent to which the well-being agenda is being embedded within organisations can be monitored. As concluded in the employee report, the challenge going forward will be to transfer examples of best practice from larger organisations to small and medium-sized enterprises (SMEs); such organisations are often less able to invest in health and well-being interventions and also tend to operate on a more ad hoc basis, for example, dealing with issues such as absence and sick pay as and when they arise.

From our experience of both surveys, there is evidence that SMEs may use a less formal language in relation to the health and well-being agenda, for example, some support activities that occur within these settings may be seen as part of an everyday camaraderie and, therefore, lack the labelling of 'stress management', 'communication' or 'well-being'. While both surveys went some way to embracing this concept, it may be that qualitative work with SMEs would provide additional insight and allow for subtle changes to the language used when investigating these areas in the future.

There are, however, some unique outcomes for SMEs. The employer survey has shown that employee feedback was more likely to be acted upon 'all the time' in small organisations. In addition, the employee report pointed to the fact that the less formal structures of communication and reduced layers of 'remote' management in these settings appeared to foster more positive views of senior managers. So, while SMEs tend to have fewer formally recognised support measures in place, this may be mitigated to some extent by the nature of the relationships between work colleagues.

In terms of understanding more about employers' policies in relation to sickness absence and the payment of OSP, the survey has provided a depth of new evidence. The data collected is by no means a full picture, but the findings regarding which employers were paying OSP and the generosity of those payments fit with widely held hypotheses on this matter. As a general observation, without a statutory demand in place, there will always be challenges connected to collecting information that could be deemed to be sensitive to the organisation, and future data collection exercises will need to take this into account.

Taken as a whole, the findings from the employer and employee research suggest that policy makers should continue to focus on communicating existing and new evidence for the business case for promoting health and well-being in the workplace.

In terms of additional activities, as already mentioned, this survey ran in parallel to a survey of employees, the results of which are also in the public domain. Further analysis of that dataset is being led by HSE, who are exploring, in tandem, the findings from a survey which considers line managers' views of their team's quality of working life.

As well as providing data to support the ongoing monitoring of health and well-being at work, both the employee and employer surveys have provided evidence that may be of interest to policy makers responsible for the promotion of 'good work' (linking to health outcomes) and employee engagement, as illustrated by the recommendations of the Marmot Review<sup>34</sup> and Macleod Review<sup>35</sup> respectively.

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<sup>34</sup> Op cit.

<sup>35</sup> Op cit.

# Appendix A

## Government health and well-being initiatives and information

### Health, Work and Well-being Co-ordinators<sup>36</sup>

Regional Health, Work and Well-being Co-ordinators were created with the aim of stimulating local action on health, work and well-being issues, and helping to reduce the overall incidence of work-related ill health through the promotion of best practice and innovation on health, employment and skills.

The co-ordinators work across departmental and partner boundaries in all the English regions and in Scotland and Wales. Using existing public health networks as a starting point, they share health, work and well-being best practice with healthcare professionals, primary care and mental health trusts, local partnership boards and business networks.

A particular focus of the co-ordinators was to engage with smaller businesses through their work with Regional Development agencies and other strategic partners across Great Britain. The co-ordinators administer the Health, Work and Well-being Challenge Fund for small businesses to establish health and well-being initiatives and to help local partnerships kick-start health and work activity.

### Workplace Well-being Tool (*previously known as the Business Health Check Tool*)<sup>37</sup>

This was launched as the Business Health Check tool in July 2008 to enable businesses: to estimate the costs of sickness absence, turnover, worker ill-health and injury in their organisation; to enable employers to identify the savings that could be generated by investing in health and well-being programmes; and to help them measure the return on investment. Organisations can also use the tool to compare their health and well-being measures to those in other, similar organisations, and to build a business case for action.

The tool is a free online resource available to all businesses and organisations.

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<sup>36</sup> See <http://www.dwp.gov.uk/health-work-and-well-being/our-work/hwwb-co-ordinators/> and <http://www.dwp.gov.uk/docs/hwwb-improving-health-and-work-changing-lives.pdf>

<sup>37</sup> See <http://www.dwp.gov.uk/health-work-and-well-being/our-work/workplace-well-being-tool/> and <http://www.dwp.gov.uk/docs/hwwb-improving-health-and-work-changing-lives.pdf>

## Occupational Health Helpline for Small Businesses (now called adviceline)<sup>38</sup>

The Occupational health advice line is a free service being piloted until March 2011. Its objective is to help small businesses keep employees healthy at work and support employees back to work as soon as possible. Advisers give guidance on occupational health-related issues and help small businesses to draw up action plans based on their particular problems.

In England and Wales, the adviceline is available to owners, managers and employees in businesses with fewer than 250 employees; no such restriction on business size exists for the adviceline in Scotland.

## Fit for Work Service<sup>39</sup>

The Fit for Work Service (FFWS) is an early intervention, case-managed and multi-disciplinary service designed to help individuals on a period of sickness absence, including those with mental health conditions, return to work more quickly than would otherwise have been the case. Working in partnership with employers, healthcare professionals and wider 'social' services, such as housing, debt and skills advice, it is currently testing a number of pilot delivery models with a view to identifying those with the greatest potential for success. This allows partners to develop their own tailored services, which the FFWS aims to bring together in a seamless service focused on the needs of the working population.

Each FFWS pilot has received short-term funding from central Government until March 2011 and each is committed to ensuring their FFWS is sustainable over the longer term.

## NICE public health guidance<sup>40</sup>

The National Institute for Health and Clinical Excellence (NICE) currently produces guidance on medical and public health interventions. The Government has agreed with NICE that their public health guidance should include work-related outcomes.

This NICE public health guidance comes in the form of a series of publications on health-related topics, containing advice on how to plan and run initiatives relating to these topics, and also provides employers with business cases and costing reports for these initiatives.

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<sup>38</sup> See <http://www.dwp.gov.uk/health-work-and-well-being/our-work/oh-adviceline/> and <http://www.dwp.gov.uk/docs/hwwb-improving-health-and-work-changing-lives.pdf>

<sup>39</sup> See <http://www.dwp.gov.uk/docs/hwwb-plenary-edinburgh.pdf> and <http://www.dwp.gov.uk/docs/hwwb-improving-health-and-work-changing-lives.pdf>

<sup>40</sup> See <http://www.nice.org.uk/guidance/index.jsp?action=byType&type=4> and <http://www.dwp.gov.uk/docs/hwwb-improving-health-and-work-changing-lives.pdf>

# Appendix B

## Technical notes

### B.1 Introduction

In 2009, the cross-Government Health, Work and Well-being Strategy Unit (HWWB) and the Department for Work and Pensions (DWP) commissioned GfK NOP Social Research to undertake a survey to gather data from employers on their views on the importance of, and action taken to improve, employees' quality of working life, and provide baseline data on some of the key indicators that HWWB is responsible for monitoring.

In total 2,250 interviews were achieved with organisations with two or more employees in Great Britain (GB), broken down by sample type<sup>41</sup> as follows:

- Small (2-49 employees) 1,076
- Medium (50-249 employees) 604
- Large (250+ employees) 570

The survey was conducted at a 'head office' level with the most senior person with responsibility for personnel issues (or the owner or manager of the organisation if no such person existed). The survey was carried out by Computer Assisted Telephone Interviewing (CATI).

### B.2 Sample selection

The sample was obtained from the Inter-Departmental Business Register (IDBR). The IDBR is a Government database maintained by the Office for National Statistics (ONS) which is based on Value Added Tax (VAT) and Pay As You Earn records. It includes all tax and VAT-registered businesses in England, Scotland and Wales. It was the preferred sampling frame due to its greater coverage, particularly of smaller companies, and head offices rather than individual sites, and the amount of detail that could be obtained from the frame such as number of employees and Standard Industrial Classification (SIC) 2003 (SIC03)<sup>42</sup> code. The main drawback with the IDBR for this particular survey was that only a small proportion of records had telephone numbers, so a tracing exercise had to be carried out prior to formal sampling.

As the survey was only concerned with organisations who employed individuals, extremely small businesses consisting only of owner-proprietors or owning partners (i.e. with no employees) were excluded. Therefore, the universe for the survey was defined as all organisations in GB employing two or more employees including the owner/manager.

Table B.1 shows the profile of the employer universe by size band as recorded by the IDBR in January 2009. To ensure sufficient leads for the survey (and allowing for a low proportion of telephone numbers on the matching exercise), five per cent of small organisations and all organisations with more than 50 employees were drawn from IDBR.

<sup>41</sup> Sample type was based on size of organisation and reflects information held by IDBR.

<sup>42</sup> [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)

**Table B.1 Counts of employers by size band in Great Britain**

Size band (number of employees)	Number of units	%
2-49	1,257,070	96.7%
50-249	33,582	2.6%
250+	8,940	0.7%
Total	1,299,592	100%

Source: IDBR Jan 2009.

An initial sample of 102,523 organisations was supplied by ONS. Table B.2 shows the original issued sample by small, medium and large organisations, both before and after the tracing exercise for telephone numbers. Telephone numbers were obtained for 58.8 per cent of the original sample via an electronic tracing technique for organisations where an 11 digit telephone number was not already included in the IDBR. In agreement with HWWB, the tracing exercise was carried out by a third party, UK Changes<sup>43</sup>. Where numbers were still missing for the larger organisations, these were traced, where possible, via web searches.

**Table B.2 Samples pre- and post-telephone trace exercise, by size band**

Size band (number of employees)	Pre-trace (initial sample from ONS)	Post-trace (all with a telephone number)	% of initial sample with a telephone number after trace exercise
Small (2-49)	60,001	22,484	37
Medium (50-249)	33,582	29,443	1
Large (250+)	8,940	8,352	1
Total	102,523	60,279	

Note: Percentages are shown as row percentages.

To draw the final sample, organisations with telephone numbers were stratified by size, industry sector category and region, and Table B.3 shows the number of organisations selected at random by industry sector and size. The sample design placed a great emphasis on medium and large organisations. Although such organisations are relatively few in number, they employ a large proportion of the total labour force and are, therefore, important in terms of how they treat employees' health and well-being; for this reason medium and large organisations were over-sampled in the survey (employers were selected by industry sector SIC group so as to be representative within size band).

<sup>43</sup> <http://www.ukchanges.com/>

**Table B.3 Organisations selected for issued sample by industry sector (SIC03) and size**

<b>SIC03 category</b>	<b>Small (2-49)</b>	<b>Medium (50-249)</b>	<b>Large (250+)</b>
A (Agriculture, hunting and forestry)	334	20	7
B (Fishing)	6	0	1
C (Mining and quarrying)	2	5	10
D (Manufacturing)	339	448	390
E (Electricity, gas and water supply)	1	2	7
F (Construction)	503	148	82
G (Wholesale and retail trade)	878	305	271
H (Hotels and restaurants)	407	149	99
I (Transport, storage and communication)	155	105	112
J (Financial intermediation)	66	52	93
K (Real estate, renting and business activities)	1,160	528	490
L (Public administration and defence)	5	7	102
M (Education)	60	125	233
N (Health and social work)	228	235	240
O (Other community, social and personal services)	354	121	115
<b>Total</b>	<b>4,498</b>	<b>2,250</b>	<b>2,252</b>

At the start of interviewing, some organisations were screened out due to ineligibility, either because they had no employees or because they were based outside GB. For this reason, some in the small organisation category were replaced to ensure the requisite number of interviews was achieved within the fieldwork period. Replacement sample, drawn from the original database, was stratified and selected in an identical way as the original sample. In total, an additional 1,090 records were added giving a total issued sample size of 10,090.

## B.3 Questionnaire development

The questionnaire contained some questions that had provenance, but a proportion of questions was designed from scratch. This necessitated an extensive questionnaire testing and piloting phase to ensure that the questions worked well (in terms of respondent understanding and in terms of providing the necessary data for HWWB and DWP), and that the average interview length met the required target.

### B.3.1 Piloting

A two-stage pilot was conducted prior to the questionnaire being finalised. Due to difficulties in securing IDBR within a short timeframe, both pilots used sample from Dunn and Bradstreet<sup>44</sup> (the main stage sample from IDBR was screened to check that any organisations contacted in the pilot were removed before interviewing commenced).

<sup>44</sup> <http://www.dnb.co.uk/global-b2b-data.asp>

The first pilot took place between 15 December 2009 and 8 January 2010 (with a break for Christmas) with 20 organisations covering a variety of sizes. A team of fully trained telephone interviewers (see Section B.5) was briefed face to face by the executive team, and interviews were listened to at the telephone centre or, where the executive team could not be present at the time of the interview, from recordings.

A probing exercise was used at the end of each pilot interview to test understanding. The interviewers used cognitive techniques to establish what the respondent thought various questions meant and the ease of supplying an answer.

After the first pilot, in consultation with the HWWB and DWP team, the survey was amended, with a greater emphasis on the collection of information relating to the payment of occupational sick pay (OSP).

A second pilot tested the changes to the questionnaire and was conducted with another 30 organisations between 2 and 9 February 2010. Again a (shorter) cognitive probing exercise was used at the end of each pilot interview. The second pilot showed that minor question re-wording was required to add clarification to some areas of the survey. In addition, some questions were dropped from the survey due to it exceeding the budgeted length.

As a result of the two pilot stages, it was recognised that a facility for following-up employers who could not provide key information on first contact was required (especially in relation to information regarding sickness absence and their policy regarding OSP). All employers who were unable to access information or were unsure of their organisation's policy were asked if they were happy to be called back, and where possible, were sent an automated email that summarised the information required. In this way a more complete data record was secured.

### B.4 Main stage questionnaire

The final questionnaire consisted of seven sections (including the screener), and averaged 20 minutes in length.

- 1 **Screener:** used to establish that the organisation had two or more employees and was based in GB. It also established who the best person was in the organisation to answer the questions. If those contacted were sceptical about taking part, they were offered the chance to receive a letter of endorsement from HWWB, by email.
- 2 **Organisation details:** a range of information about the organisation, including type of organisation, sector (SIC), number of full- and part-time staff, ages of staff and the length of time the organisation had been established.
- 3 **Perceptions of employee health and well-being:** to what extent employers agreed with six statements about the importance of employee health and well-being and their responsibilities in this regard.
- 4 **Health and well-being initiatives:** information about the benefits and services provided to staff in the organisation, methods for managing employee stress, communication and feedback methods and priorities for investment over the coming year.
- 5 **Absence and absence management:** information on the proportion of working time lost to absence and the reasons for absence; the usefulness of medical statements and what, if anything, the employer had done to keep employees with health problems in work or to facilitate a return to work.

- 6 Uptake/awareness of Government sponsored health and well-being initiatives: information about employers' knowledge and use of Government initiatives to help employers improve the health and well-being of their employees.
- 7 OSP: information about the incidence of payment of OSP and patterns of payment.

## B.5 Fieldwork

Mainstage fieldwork was conducted between 24 February and 20 May 2010.

All interviewers working on the main stage interviewing task were trained to Interviewer Quality Control Scheme (IQCS) standards<sup>45</sup> and were personally briefed by members of the GfK NOP project team (a member of the HWWB team also attended the briefing). During the briefing, executives explained the background to the research, the terminology used in the questions and the filtering processes, and all interviewers ran through a dummy version of the script on CATI as a means of familiarising themselves with the interview wording. A number of additional measures were put in place to maximise response, as follows:

- A letter of endorsement (bearing the contact details for a member of the project team at HWWB) was made available to interviewers to fax or email to respondents who needed reassurance about the survey. As well as assisting in securing the participation of the target respondent, the letter was, in some cases, useful in gaining access to the respondent, i.e. getting past 'gatekeepers'.
- The fieldwork period was as long as was practical, given the overall timetable for the project. Calls were spread over the fieldwork period to provide the maximum opportunity to reach respondents within organisations of all sizes, and at least eight calls were made to each piece of sample before it was classified as a non-contact (in reality, many more calls were made to some pieces of sample).

The use of CATI and GfK NOP's Sample Management System also offered a number of advantages:

- All questions and routing were programmed automatically, meaning that interviewers were free to concentrate on respondents' answers and data were recorded accurately. This was an important consideration for this type of research where complex and detailed information was recorded.
- The telephone approach meant that it was possible to schedule appointments with respondents at a time suitable to them; this is very important with 'time poor' individuals in head office settings. Indeed, interviewers were briefed to be flexible when making appointments and to offer to call back respondents at a time that was suitable.
- The sample was managed electronically so that if an appointment was made the respondent was dialled automatically at the appropriate time and the survey conducted by the next available interviewer. If an appointment was broken, the piece of sample was automatically reloaded to be tried again later.
- The sample was monitored and supervised at all stages. This permitted overall response and response among certain types of organisation to be monitored during fieldwork.

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<sup>45</sup> <http://www.iqcs.org/standards.asp>

## B.6 Response

As previously mentioned, 10,090 organisations were selected from which to obtain interviews. Table B.4 shows that from that initial issued sample, a total of 1,691 leads were out of scope. Overall, the response to the survey was at least 26.8 per cent.

**Table B.4 Response rate**

	Issued sample	
	<i>n</i>	%
<i>Total issued sample</i>	10,090	100
<b>Out of scope</b>		
One employee only/not based in GB	727	7.2
Number unobtainable	417	4.1
Wrong number	259	2.6
Organisation moved/closed down	103	1.0
Computer/fax/modem	163	1.6
Duplicate number	22	0.2
Total out of scope	1,691	16.8
Total eligible sample	8,399	100
<b>Unproductive outcomes</b>		
Abandoned/incomplete interviews (+ stopped)	73	0.9
Refusals (+quit)	2,180	26.0
Away during fieldwork	506	6.0
Tried more than eight times (+ no answer/engaged/voicemail)	1,902	22.6
Other cannot continue	314	3.7
Appointments not kept	1,174	14.0
Total unproductive	6,149	73.2
Total complete interviews	2,250	26.8

**Table B.5 Response by organisation size band**

Size band (number of employees)	Issued sample	Out of scope	%	Total in scope	Total non- effective	Inter- views <sup>^</sup>	Response rate (%)
Small (2-49)	5,428	1,283	23.6	4,145	3,070	1,075	25.9
Medium (50-249)	2,242	214	9.6	2,028	1,423	605	29.8
Large (250+)	2,420	194	8.0	2,226	1,656	570	25.6
Total	10,090	1,691	16.8	8,399	6,149	2,250	26.8

Note: <sup>^</sup> the analysis uses figures based on size band categories based as defined by IDBR. The analysis in the main report uses size band categories based on information supplied during the telephone interview, therefore the number of interviews achieved in each size band will not match the tables in the main part of the report.

Clearly we cannot be certain how the response code ‘tried more than eight times’ would have turned out had the telephone been answered. At best we could estimate that these were evenly distributed between out of scope and unproductive outcomes in the same proportions as seen with the sample for which we did have a firm outcome. This would produce a response rate of 26.8 per cent. However, it would seem logical that companies that had not replied after eight calls on different days of the week and at different times of day were more likely than average to be ineligible than unproductive.

### **B.6.1 Follow-up calls**

As already mentioned, after considering a number of different ways to improve the quality of the data it was agreed that the use of a recall interview was the best approach. Where the respondent could not provide key information on first contact, interviewers would attempt to call them back to give the respondent an opportunity to look up the missing information (if they agreed to this). This approach gave us a more complete data record: an improvement from 59 per cent of respondents providing us with information on key issues on the first call, to 77 per cent providing more complete data after the call-back exercise.

In total, 41 per cent of employers were eligible for a follow-up call; of these 72 per cent agreed to be called again (30 per cent of all respondents), and we successfully followed-up 59 per cent of that group within the survey timeline (18 per cent of the total sample).

## **B.7 Coding**

Coding was required on eight questions in the questionnaire, where the question was either completely open-ended or where an ‘Other (specify)’ code existed in the response option list. The verbatim responses recorded at these questions were reviewed by GfK NOP’s coding department.

In the case of the open-ended question A2, verbatim responses were coded using one- and two-digit SIC03 coding. In the case of pre-coded questions with an ‘Other (specify)’ response, we aimed to reduce the number of respondents under this code: where the verbatim answers corresponded to pre-existing codes, these were back-coded accordingly. Where the verbatim comments did not correspond to existing codes, additional codes were created where there were a sufficient number of verbatim comments that could be grouped together.

## **B.8 Data editing**

In the process of carrying out some sense checks on the data for quality control purposes, several respondents were identified as having given inconsistent or implausible answers at certain questions. In order to verify, and where necessary recode, these data, we carried out a series of follow-up calls. In a minority of cases where a follow up call was not possible, we removed implausible responses from the data set. Further details are provided below on a section-by-section basis.

### **B.8.1 Section A: Organisation characteristics**

Our quality control checks in this section highlighted anomalies at Questions A15 and A16a. Question A15 asked how many permanent staff had left the organisation in the last 12 months, and Question A16a asked how many staff had joined the organisation in the same period. This revealed two cases where the number of joiners and leavers in the 12-month period far exceeded the average number of employees in the same period. The follow-up calls confirmed that incorrect data had been entered at the main stage and the data were replaced with the correct values.

In addition to the above checks, we looked into outliers at Question A5 (the number of permanent employees on the payroll in GB). One respondent gave a value of 100,000 at A5 and online investigations confirmed that this was the number of employees at an **international level**. Follow-up calls to ascertain the correct figure went unanswered after several attempts, so the response at A5 was recoded to 'Not Stated'.

### **B.8.2 Section D: Sickness absence**

Our quality control checks in this section highlighted issues at Questions D2 and D4. Question D2 asked respondents how many full days of absence had been taken off due to illness or injury across their whole organisation in GB in the last 12 months; D4 asks for the same information but as a percentage of the total working time. When carrying out our sense checks, we looked at the number of days taken off as a percentage of the total working time (converting D2 into a percentage by dividing the number of days given in D2 by the total number of working days in the year)<sup>46</sup>.

When looking at absence as a percentage of working time lost we paid particular attention to respondents who had unusually low rates of employee absence (i.e. under one day's absence per employee per year), and those that had unusually high rates (looking into all those with a 25 per cent rate of absence or higher). Decisions regarding which respondents would be contacted in the follow-up calls were made on a case-by-case basis, looking at both absence rate and number of employees in the organisation. Implausible responses were followed-up where possible and those where further information could not be obtained were excluded.

Data anomalies were also identified at Question D4b (proportion of absences of different time periods). Three respondents gave an implausible combination of responses at this question, and their responses at D4b were recoded to 'Don't know'.

### **B.8.3 Section E: Occupational sick pay**

Discrepancies between the number of days' sick pay stated at Question E17, and the number of days stated at the iterations in E24 relating to their payment of OSP were also used to validate the data. These iterative questions were administered to those respondents who stated at E19b that the rate of sick pay in their company reduced over time; at each iteration respondents were asked what rate sick pay reduced to, and for how many days/weeks they paid sick pay at that rate.

Where the cumulative number of days given in the iterations was greater than the total number of days' sick pay stated at E17 there were two explanations; either the original number of days stated at E17 was incorrect, or the number of days given at some of the iterations was incorrect. As it was impossible to tell where the error had occurred in each case, we recoded the response at E17 to 'Not stated' in all cases, and deleted the data for all questions following E17 in Section E.

Four respondents had incorrect data at the iterations at E23. In all four cases the rate given at the first iteration equalled the rate given at the second iteration, where there should have been a reduction. In these cases, a decision was taken to recode E22 to 'Not stated' and to delete responses to that in the remainder of the questions in Section E.

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<sup>46</sup> As agreed with HWWB, the number of working days in an organisation was calculated by multiplying the number of employees in the organisation by the number of full working days in the year (making the assumption that there are 228 full working days in a year for a full-time employee, an assumption also used in Chartered Institute of Personnel and Development calculations).

Four high outliers were detected at E18/E19 ('for how many days/weeks in total would you pay occupational sick pay for any one period of absence?'). Follow-up calls were answered by three respondents who confirmed that the original figure was correct. Therefore, data for all four outlying responses were preserved.

For consistency purposes, 22 respondents who said they had not had to pay OSP at Question E13 but then said they had no policy on OSP at E13a were recoded to code 5 ('No fixed policy on OSP') at E13.

## B.9 Weighting

There were two aims in the weighting of the employer survey data. The primary aim of the analysis was to be able to look at all employers as a whole, representing the universe of employers and to compare survey results between employers of the different size bands (i.e. small, medium and large). The second objective was to examine all employers relative to the number of employees each one had (i.e. their volume of employment).

### B.9.1 Coverage discrepancies

The first issue we needed to reflect on for the weighting was whether the universe data was reliable or not; specifically whether there was any coverage discrepancy between the actual and recorded size and industry sector (SIC group), sometimes referred to as stratum jumping. It was apparent from a comparison of the achieved sample and the IDBR data that there were some discrepancies, both in terms of size band and sector. However, these were relatively small and, for sector, in no cases did any cell off the diagonal (i.e. where the claimed and actual codes do not match) exceed one per cent. For size band, the discrepancies were a little larger, predominantly among employers in the mid-size range who were found to actually lie in the small or large range. However, the instances of this were still relatively few and the cells off the diagonal were typically only one–three per cent in size.

The initial view was that we should make an appropriate adjustment to the target universe based on this discrepancy. So, for instance, if the sample indicated that the 'large employers' group was a net two per cent larger than expected, we would increase the 'large employers' overall target by the same amount. The argument against doing this would be that (a) we were then deviating from widely accepted IDBR counts and (b) we would have had an element of sampling error in our estimate of the inaccuracy in our target universes and it would be open to question as to whether or not our estimate of the adjustment to be made was robust or not. After reflection, our recommendation was to retain the use of the IDBR figures for the purposes of applying final post-stratification weights.

There was, however, another issue in relation to the coverage, and this was the fact that we had to screen out a large number of 'employers' who turned out not to have any employees (e.g. cases where there are two owner-managers or owner-employees). Discussions with IDBR as to why this was the case were inconclusive. There may have been inaccuracies in the IDBR records due to out-of-date information, or alternatively the way in which our survey classified 'employment' may have differed, semantically, to that used by IDBR, leading to the differences observed.

In this instance, we felt there was a justification for making an adjustment to the target population. Our approach was as follows:

- All employers in the two–nine employees category (in IDBR) were split into three categories: two employees, three employees and four–nine employees. Within each group, the drop-out rate (i.e. those which were ineligible) was calculated and recorded as a proportion of the total number of interviews in each of the categories.
- An estimate of ineligibility was calculated for each category by multiplying the drop-out rate by the total issued sample.
- Summing the estimate of ineligibles across all categories gave us an estimate of the total number of ineligibles within the two–nine size band which, when divided by the overall sample issued, gave us an estimate of the overall dropout rate.
- Multiplying this rate by the IDBR universe figure in the two–nine employees size band gave us the figure by which the universe for small companies was reduced by, in order to gain an optimal estimate of the eligible population in that band.

### **B.9.2 Probability of selection**

As we were sampling separately within size band, we need to account for the differing probabilities of selection that would result from this. When we were examining the sample as a whole, probability of selection was taken into account in the first stage of the weighting scheme, as there were considerable differences in the probability of selections within each of the size bands. This was not an issue for industry grouping (SIC). Similarly, when considering the analysis by employee volume, the probability of selection was clearly very different from how it would have been had the sampling been conducted with probability proportional to size of employment.

### **B.9.3 Non-response**

In construction of the weighting scheme, we took into account the varying non-response in each of the size/SIC cells. However, in practice, when we applied the targets based on the slightly modified universe (from the previous stage), this accounted for both any differential non-response and any other incidental differences between the profile of the sample and the target universe.

### **B.9.4 The weighting schemes**

The data were weighted to make them representative of (adjusted) IDBR counts supplied at the outset of the project (dating from January 2009). Two weighting schemes were devised for the data:

- **Weight 1 – weighting by employer unit:** the sample was specifically designed to enable us to be able to compare small, medium and large organisations, and medium and large organisations made up half the total sample. However, in terms of the population of organisations (based on IDBR figures), this means that medium and large organisations were heavily over-represented and small organisations were under-represented. The first weight (weight 1) was applied to make the data representative of organisations relative to their proportion in the universe.
- **Weight 2 – weighting by employment:** weighting the sample to be representative of the proportion in which they exist in the universe according to SIC and employee size band does not reflect the volume of employees overall (to explain, large organisations are rare in the population but employ a large proportion of the total workforce). So a further option was to use the number of employees as a weight (alongside SIC industry group), to give a de facto employee survey, as the results are then representative of the volume of employees across all organisations. This weight was run in two ways: a scaled weight (to show the proportion of employees represented by a survey item) and a grossed weight (to show the actual number of employees in GB represented by a result).

The following table provides a profile of the sample on key characteristics, for the two weights. It should be noted that the main report uses weights 1 and 2 (scaled only) in the discussion of the survey results.

**Table B.6 Sample profile weighted by organisation unit (weight 1) and employee volume, grossed (weight 2)**

Characteristic	Unweighted	Weighting by employer unit (weight 1)		Weighting by employment (weight 2)	
	n	n	%	n (grossed) (1,000s)	%
<b>Type of organisation</b>					
Private sector	1,761	1,985	88	17,417	69
Public sector	238	75	3	5,130	20
The voluntary sector, including charities or trusts	221	159	7	2,323	9
Private-Public Partnership (PPP)	15	11	*	241	1
Part private-owned, part voluntary-owned	4	5	*	41	*
<b>Organisation size</b>					
Small (1-49)	1,123	2,126	94	6,168	24
Medium (50-249)	555	97	4	3,255	13
Large (250+)	568	26	1	15,802	63
<b>Presence of trade union in organisations</b>					
Yes	483	167	7	9,069	36
No	1,747	2,050	91	16,066	64
<b>SIC</b>					
Agriculture, fishing, mining	62	152	7	389	2
Manufacturing and utilities	300	247	11	3,071	12
Construction	173	247	11	1,226	5
Finance	57	42	2	1,158	5
Real estate and transport	588	571	25	5,442	22
Public administration and other community, social and personal services	187	160	7	2,441	10
Education	160	46	2	2,933	12
Health	266	168	7	3,130	12
Wholesale and retail	296	412	18	3,775	15
Hotels and restaurants	141	181	8	1,509	6

Base: All employees (unweighted 2,250, weighted (weight 1) 2,250; weighted (weight 2 gross) 25,267,000\*\*).

Note: Profile figures which do not add up to 2,250 (employer units) are due to respondents who were unwilling or unable to classify themselves. \* denotes a value less than 0.5 per cent. \*\* Figure taken from the IDBR.

## B.10 Creating derived variables

The questions in the survey were designed to be as easy as possible to answer for respondents; this ensured that the survey had a high response and that accurate information was collected. For some issues we asked more than one question as a means of ensuring we had sufficient data to ‘derive’ other information. For example, we did not ask employers about their labour turnover but we did ask about the number of employees they employed and how many had left and joined their organisation in the past 12 months. These new variables that were created are called ‘derived variables’. This process allowed us to comment on labour turnover and various aspects of sickness absence and OSP arrangements, all of which are described below.

### B.10.1 Staff retention

Employee retention was based on the CIPD<sup>47</sup> summary measure and calculated as follows:

$$\text{Staff retention} = \frac{\text{number of leavers in past year}}{\text{average number of employees in past year}} \times 100$$

We asked organisations about the number of leavers in the past year at question A16 but the average numbers of employees in the year also had to be calculated. We used the following formula:

$$\text{Average number of employees in past year} = \frac{\text{number of employees 12 months ago} + \text{current number of employees}}{2}$$

Where:

- A5 = the number of employees in the organisation
- A16a = number of leavers in the last year
- A15 = number of joiners in the last year

### B.10.2 Measuring employee absence

One of the survey objectives was to collect data on the incidence of sickness absence among employers. In order to make it as easy as possible for respondents to provide this information they were given a choice of two ways to do this. They were asked to give employee absence due to illness or injury over a 12-month period as either:

- (a) the total number of full days of absence (given at question D2); or
- (b) a percentage of total working time (given at question D4).

When the survey was designed the intention was to combine the answers from these questions in order to maximise the number of responses that could be analysed. However, due to the way these questions were asked it was decided that harmonising these questions was not appropriate; the issues are explained in more detail below:

<sup>47</sup> Calculation of employee turnover on CIPD website:  
<http://www.cipd.co.uk/subjects/hrpract/turnover/empturnretent.htm?IsSrchRes=1>

In order to convert question D2 into a comparable figure with D4 we would have needed to collect the total number of full days that all staff worked across a year in the survey (to take into account variations owing to part-time working). This information was not collected which meant that a response that was exactly comparable with D4 could not be created from the D2 responses.

As a further point, only whole percentages were accepted from respondents for question D4, meaning that no response was less than one per cent. Respondents did not attempt to provide percentages during the development phases of the survey, nor did we receive feedback that this was a requirement during main stage fieldwork. However, it is a possibility, for at least some of the employers who gave employee absence as a per cent of the total working time at D4, that their figure was ‘rounded up’, i.e. they may have had a figure that was less than one per cent but rounded this up to one per cent when giving their answer.

As D2 and D4 could not be combined, a choice had to be made over which question to use in the analysis. Whilst question D2 had its flaws (namely, it does not take into variations due to part-time workers, thereby skewing the results for organisations with a high proportion of part-time staff) more employers responded to it providing more scope for analysis. For this reason D2 was used as the measure of working time lost due to illness and injury in the last 12 months.

### **B.10.3 Calculating sickness absence from D2**

For ease of analysis it was decided that D2 should be converted into a percentage. As agreed with HWWB and DWP, the number of working days in an organisation was calculated by multiplying the number of employees in the organisation by the number of full working days a year (making the assumption that there are 228 full working days in a year for a full-time employee, an assumption also used in CIPD calculations).

#### B.10.4 Profile of those who gave an answer at D2 compared with the total sample

The following profile (by size, industry and type of organisation) compares the respondents who provided the level of sickness absence at D2 and the total sample:

**Table B.7 Profile of respondents answering question D2 (total number of days lost to sickness absence in past year) versus the profile of the total sample**

	D2 respondents %	All sample %
<b>Size of organisation</b>		
2-49	97	94
50-249	2	4
250+	*	1
Total	100	0
<b>Industry</b>		
Agriculture, fishing, mining	7	7
Manufacturing and utilities	9	11
Construction	12	11
Finance	2	2
Real estate and transport	25	25
Public administration and other community, social and personal services	8	7
Education	3	2
Health	7	7
Wholesale & retail	17	18
Hotels and restaurants	10	8
<b>Type of organisation</b>		
Private/commercial sector	87	88
Public sector	4	3
Voluntary sector	8	7
Private-Public Partnership (PPP)	0	1

Note: \* denotes a value less than 0.5 per cent.

#### B.10.5 Occupational Sick Pay as a percentage of employees' salary over a one week, four week, six month, 12 month period

For these variables, we calculated the rate at which employers paid OSP over a certain time period. These time periods were one week (five days), four weeks (20 days), six months (120 days), 12 months (240 full working days). For example, if an employer paid OSP at full rate for ten days, then after five days they would be paying 100 per cent of salary as OSP. If a different employer pays OSP at full rate for two days but nothing from then on, after five days they would have paid out 40 per cent of salary as OSP ( $2 \div 5 = 40$  per cent).

Another example is an employer who pays a reducing amount of OSP over time. The organisation pays OSP for six months (120 working days) over three stages of payment: 100 per cent for the first 20 working days, 50 per cent for the next 40 working days and 25 per cent for the remaining 60 working days. The data for that employer was summarised as shown in Table B.8.

**Table B.8 Example payment stages of OSP**

<b>Time period (no of working days)</b>	<b>% of salary paid in OSP across whole period</b>
5 days (1 week)	100
20 days (1 month)	100
120 days (6 months)	45.8
240 days (one year)	22.9

Note: Where the time periods for each rate of OSP were given in weeks, we converted this figure into days by multiplying by five (see Section 6.4.2).

### **Max number of days that OSP is paid at the full rate**

This variable calculated the number of days for which OSP was paid at the full rate (as bandings and as a mean score in the tables), and included those organisations that paid OSP at the full rate and those that did not pay OSP at the full rate at all (i.e. with a value of 0 days). This is reported in Section 6.4.1.

# Appendix C

## Survey challenges

In the course of developing the employer survey, there was much interest in adding more information to the evidence base about employers' choices and behaviours in relation to recording sickness absence and reasons for absence, as well as sourcing, for the first time, information about occupational sick pay (OSP) arrangements from a large sample of organisations.

These topics are not straightforward in themselves; in the course of piloting the survey we spoke to many employers and found that the ways in which they recorded information and made payments during sick leave varied widely. As a rule of thumb, the smaller the employer, the more ad hoc the system used for recording management information and making payments during employees' sick leave (although this was by no means a universal pattern). The following points summarise the main challenges encountered and provides additional insight, where relevant, about employers' practices.

### C.1 Systems for recording management information

From the pilot we were able to understand something about the ways in which employers recorded information. Some smaller employers recorded management information in hard copy format, with individual records for staff members stored in a filing cabinet or, in one case, marked on the office calendar. For such employers, the process of retrieving information about their workforce as a whole over a given period took some time. Even in the case of larger organisations with more sophisticated means of recording management information, the abilities of respondents to interrogate systems to answer our survey questions were sometimes limited (e.g. a particular functionality was not available within the system, or it was not a way in which the respondent had tried to use the system in the past, so more time was needed to retrieve the required data).

### C.2 Nature of sickness absence

Many surveys make use of a list of symptoms in order to classify health problems. However, there were two problems encountered in attempting to secure detailed information from employers about the nature of sickness absence: firstly, some employers, especially those with smaller workforces, were not familiar with some terminology used to describe health symptoms, despite attempts to simplify the language as far as possible. Secondly, from the pilot phase, we know that many employers did not like to pry regarding the exact nature of sickness absence, and that very general classifications were used as a result, e.g. 'stress', 'sickness/diarrhoea', 'cold'. Attempting a more detailed classification of symptoms is, therefore, a challenge in the total absence of more detailed information on the employers' part.

### C.3 Working time lost to sickness absence

Respondents who had a system for recording absence were asked about the time lost to illness and injury in the past 12 months. In order to make the survey as inclusive as possible, when asking for information about sickness absence, employers were allowed to give an answer as a total number of days of sick leave across their organisation as a whole in the past year or as a percentage of working time lost. Had we asked all employers to provide their data in just one format, there would have been a risk that certain employers would have refused to do so and this could have resulted in a less complete data record.

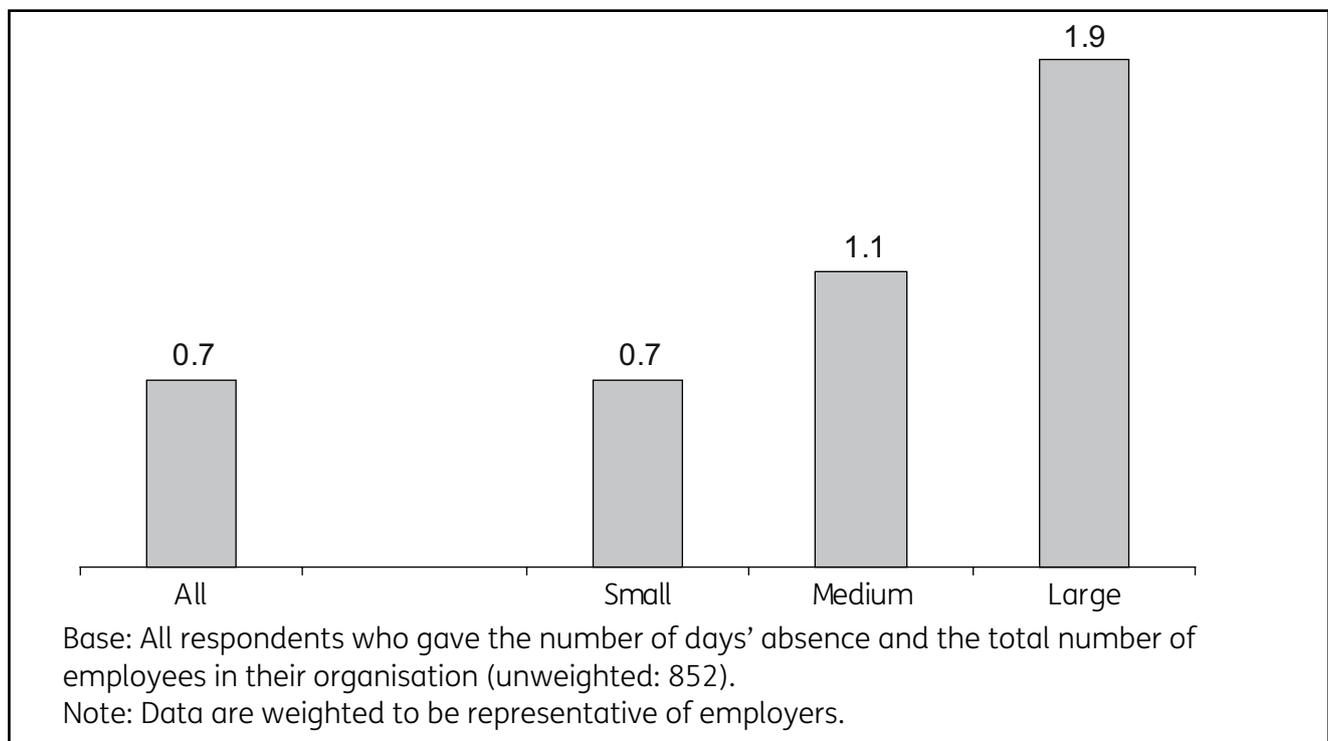
Despite this, one in five respondents (18 per cent) could not provide the relevant information (in some cases it was deemed to be company sensitive information) or said that it was not available in the format required by the survey; this group was characterised by large organisations (51 per cent versus 41 per cent of medium and 16 per cent of small employers).

Smaller organisations were more likely than larger organisations to opt to give their answer in terms of a total number of days lost, while the larger employers were more likely to have systems that they could interrogate to provide an overall percentage of working time lost.

In designing the survey, the intention was that these two sources of data would be combined; however, on processing the data it was clear that this was an unsatisfactory means of providing an overall figure, due to the different assumptions surrounding the two measures (and, therefore, the greater biases introduced when combining the two – Section B.10.2 provides more detail). For this reason, the main report does not focus on the findings for working time lost, as there are too many caveats around the results.

Nonetheless, some analysis is presented at this point from the group of respondents on which we gathered the most information, namely those who gave their answer in terms of the total number of days lost to sickness absence<sup>48</sup>. For this group, on average, 0.7 per cent of working time was lost due to illness and injury in the last 12 months<sup>49</sup>. As predicted, the level of absence varied by size of employer: large organisations reported 1.9 per cent of working time lost compared with 1.1 per cent in medium and 0.7 per cent in small organisation (Figure C.1).

**Figure C.1 Proportion of working time lost by size of organisation (average per cent)**



<sup>48</sup> Merging responses in terms of number of days and percentage of working time lost would have added unknown levels of error to the survey estimates. Therefore, this section presents data on working time lost to absence only from a sub-group of respondents; more detail about this sub-group is provided in Section B.10.4.

<sup>49</sup> Details of the calculations used to derive working time lost to absence are provided in Section B.10.3.

## C.4 OSP payment variation

For some smaller employers, payment of OSP was done on a case-by-case basis; in other words, there was no written policy in place, making it difficult to generalise about their approach. For other employers, variations in OSP payment were based on multiple criteria, e.g. level of seniority, length of time served, job role etc. It was, therefore, necessary to ask employers to provide information in terms of how OSP was paid for the majority of the workforce, thereby glossing over much of the finer detail and making generalisations to the whole population of employers less robust. In other words, the data gathered by the survey is a crude indicator; nonetheless, it fills a gap that previously existed in the evidence base.

A further complication with OSP was the variation in payment over time. This was accommodated in the survey by allowing employers to give us information for up to six phases of payment: at each phase they were asked for how long OSP was paid and at what percentage of salary. This took some explanation on the part of the interviewing team and it is no surprise with the complexities involved that many respondents did not have the answers immediately to hand.

## C.5 Improving the data record

These issues highlight the challenges in gaining a complete data record. In adopting a telephone approach, we often found employers who were unable to answer our questions on first contact (for example, as mentioned above, regarding the details surrounding the phases of OSP payment). For that reason, and having considered various alternatives, we decide to use a follow-up call strategy, whereby employers who were unable to supply key information when we first called were asked if they were happy to be called back. Where permission was granted, employers were sent an email to confirm this agreement and to remind them of the types of information we would need when we called again. In practice, this had the effect of improving the completeness of our data record (in terms of the numbers of employers who gave us some or all of the information that was missing after we had first made contact).

However, not all employers agreed to the follow-up call, nor was it possible to follow-up all employers in the time available for the survey. Furthermore, not all were able (or willing) to supply information regarding their workforce or their management practices. This latter point will always be a challenge for a survey of this nature, regardless of the data collection approach. Unless there is a statutory requirement for employers to share management information (with penalties if they do not), there will be a core of employers who are not prepared to do so.

Thinking to the future and the possibility of repeating the survey, our key recommendation is to permit a longer period for the overall survey, to allow more time for instrument testing/ piloting and for data collection. We know from other surveys of businesses requiring detailed information (such as the Employer Pension Provision (EPP)<sup>50</sup> survey series and the Continuing Vocational Training Survey (CVTS)<sup>51</sup> series) that long fieldwork periods are crucial to maximising response and allow more scope for making advance contact with busy professionals.

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<sup>50</sup> For example, see <http://research.dwp.gov.uk/asd/asd5/rports2009-2010/rrep687.pdf>

<sup>51</sup> For example, see [http://www.bis.gov.uk/assets/biscore/corporate/migratedd/publications/d/dius\\_rr\\_08\\_17.pdf](http://www.bis.gov.uk/assets/biscore/corporate/migratedd/publications/d/dius_rr_08_17.pdf)

Some other considerations for future survey waves are:

- The advance recruitment of employers by phone (along the lines of the approach used in EPP), followed by a letter with prominent client endorsement and a data sheet. In the 2010 Employer Survey there was insufficient time in the survey timetable to incorporate such an approach, so it was dismissed as an option. However, it should be borne in mind that there is always a danger that by revealing how much information is required upfront, some employers will be put off from participating in a survey of this nature.
- If a data-sheet approach were adopted, allowing employers the option of providing their answers via an online link, then a shorter telephone interview would be needed for collecting more ‘standard’ information. The downside to this approach is that there would be no-one to ‘coach’ the respondent through the data requirements, should queries arise.
- Setting up a bespoke website for the survey with a “Frequently Asked Questions’ section and a section where all survey documentation can be downloaded if it is mislaid. The site could also show how data have been used in the past (e.g. example reports, press releases).
- Increasing the number of call backs (or email reminders) to further minimise item non-response, and as a last resort, sending an interviewer to visit the respondent in person. This option requires a long fieldwork period as well as greater investment, so needs to be considered in light of the resources available for the survey.

# Appendix D

## QWL employer questionnaire

### Screener

ASK ALL

S1 Good morning / afternoon my name is .... Calling from GfK NOP, an independent research organisation, on behalf of some Government departments. Can I just check, is this [INSERT ORGANISATION NAME FROM SAMPLE]?

IF NECESSARY - I am calling to conduct a survey that seeks employers' views of employee health and well-being and will help inform government future strategy.

IF NECESSARY - the government partners are the Department for Work and Pensions, the Department of Health, the Health and Safety Executive, the Scottish Government and the Welsh Assembly Government

Yes - continue to S2

No - Go to s1A SMS

IF CODE 2 AT S1

S1A Has your organisation ever been known by this name?

Yes - continue to S2

No - Go to SMS

S2 Can I speak to the most senior person here who has responsibility for personnel issues for [name of organisation from sample] in Great Britain. If you have more than one site, that person should be responsible for personnel issues across all sites where your HR policy applies.

INTERVIEWER PROMPT: If no such role exists within the organisation then please ask for the owner, managing director or general manager

IF NECESSARY – we are carrying out an important research project about employers' views of employee health and well being.

INTERVIEWER: offer to fax or email the letter of endorsement if respondent requires additional reassurance

Yes – speaking (go to S3)

Yes – but need to transfer to another person AT SAME SITE (go to S4)

Yes – but need to transfer to another person at a DIFFERENT SITE (go to S4X)

No - Go to SMS

IF CODE 3 AT S2

S4X May I just check, is that site located in Great Britain?

IF NECESSARY – Great Britain excludes Northern Ireland

Yes – continue to S4xx

No – screen out

ASK IF YES AT S4X

S4XX – Can you transfer me now?

IF NECESSARY - Great Britain excludes Northern Ireland.

(9) SP

Yes – to correct person.....1 GO TO S4X

Yes – to the switchboard 2 GO TO S1

No -.....3 GO TO SMS AND ENTER PHONE NUMBER FOR NEW SITE

IF CODE 1 AT S2

S3 Interviewer please code whether speaking to

Senior HR

Owner/ proprietor/ Managing Director

Other senior manager (non HR)

Other

IF CODE 2 AT S2 OR CODE 1 AT S4XX

S4 (READ OUT) Good morning/afternoon my name is .... calling from GfK NOP, an independent research organisation. I am calling on behalf of the Cross-Government Health Work and Well-Being Strategy Unit, a cross-Government programme sponsored by five Government partners. May I just check, are you the best person to talk to about this organisation’s human resource and personnel policies, across all of its sites in Great Britain?

IF NECESSARY

- We are carrying out an important research project to explore employers' views of the health and well being of their permanent staff.
- Depending on your answers, the survey will take approximately 20 minutes
- All the information we collect will be kept in the strictest confidence by GfK NOP and used for research purposes only. It will not be possible to identify any particular person or organisation in the results.
- the survey is on behalf of the Cross-Government Health Work and Well-Being Strategy Unit, a cross-Government programme sponsored by five Government partners including the Department for Work and Pensions, the Department of Health, the Health and Safety Executive, the Scottish Government and the Welsh Assembly Government.
- Organisations have been randomly chosen from a list of businesses taken from the Inter-Departmental Business Register held at the Office for National Statistics

The project manager at the Cross-Government Health Work and Well-Being Strategy Unit is Moritz Flockenhaus, telephone number 020 7449 5574

INTERVIEWER: offer to fax or email the letter of endorsement if respondent requires additional reassurance or respondent can visit the following website:

<http://www.workingforhealth.gov.uk/News-and-updates/News-Summary.aspx?NewsID=69>

Yes – continue

No – someone else (available now) loop S4 again

No – someone else (not available now)

IF YES AT S4

S4a Interviewer please code whether speaking to

Senior HR

Owner/ proprietor/ Managing Director

Other senior manager (non HR)

Other

ALL

S5 We are carrying out an important research project to explore employers' views of the health and well being of their permanent staff.

Depending on your answers, the survey will take approximately 20 minutes. All the information we collect will be kept in the strictest confidence by GfK NOP and used for research purposes only. It will not be possible to identify any particular person or organisation in the results.

Are you happy to continue?

IF NECESSARY – the survey is on behalf of the Cross-Government Health Work and Well-Being Strategy Unit, a cross-Government programme sponsored by five Government partners including the Department for Work and Pensions, the Department of Health, the Health and Safety Executive, the Scottish Government and the Welsh Assembly Government.

-Organisations have been randomly chosen from a list of businesses taken from the Inter-Departmental Business Register held at the Office for National Statistics

The project manager at the Cross-Government Health Work and Well-Being Strategy Unit is Moritz Flockenhaus, telephone number 020 7449 5574

INTERVIEWER: offer to fax or email the letter of endorsement if respondent requires additional reassurance or respondent can visit the following website:

<http://www.workingforhealth.gov.uk/News-and-updates/News-Summary.aspx?NewsID=69>

Yes – continue

No – call back (go to appt screen)

No - Go to SMS

## A Enterprise details

Throughout the survey I would like you to think about permanent employees in the whole of your organisation in Great Britain. If you have more than one site, this means thinking about all sites where your Human Resources policy applies, rather than thinking just about the site where you work. To begin, I would like to ask you some general questions about the organisation.

MOVED POSITION

A5 Including yourself, how many employees do you currently have on the payroll in the organisation in Great Britain? Please include both full-time and part-time permanent employees. Please do not include contractors or agency staff or other temporary staff.

TYPE IN NUMBER

(If 1 - then end interview and thank and close – SCREEN OUT)

DO NOT READ OUT: Ref (SCREEN OUT)

DO NOT READ OUT: don't know [FOLLOW UP AT H1]

IF DON'T KNOW AT A5

A5B Prompt to range

over 2 and under 24

25 to 49

50-99

100-149

150-199

200-249

250-299

300-349

350-399

400-449

450-499

500-749

750-999

1000-1999

2000-2999

3000-3999

4000-4999

5000-5999

6000-6999

7000-7999

8000-8999

9000-9999

10000+

Don't know [CATI FOLLOW UP AT H1]

DO NOT READ OUT: REF [SCREEN OUT]

IF NOT DK AT A5 OR A5A

A5C Of the [no. from A5/A5A] employees what percentage / number [if 20 or less at A5] work full time, that is, 30 or more hours a week? If you are unsure please give your best estimate

OR - TYPE IN PERCENTAGE / NUMBER

DO NOT READ OUT: DON'T KNOW [CATI: CREATE DUMMY VAR FOR FOLLOW UP AT h1]

DO NOT READ OUT: REFUSED

[CATI logic check] READ OUT: So that means XX% / number [if 20 or less at A5] work part time? Is that correct?

ASK ALL APART FROM SIC CODES 7487, 9133 AND 9305

A 1 I have [READ OUT 2 DIGIT SIC DESCRIPTION FROM SAMPLE- FIXED FIELD IF CORRECT] as a general classification for your organisation. Does that sound about right as a description of your organisation?

Yes

No

IF NO AT A 1 OR SIC CODES 7487, 9133 AND 9305

A 2 What is the main business activity of this organisation?

PROBE AS NECESSARY:

What is the main product or service of this organisation?

What exactly is made or done at this organisation?

What material or machinery does that involve using?

A 3 MOVED POSITION TO AFTER A8

A 4 MOVED POSITION TO AFTER A8

A 5 MOVED POSITION

ASK IF SIC = 75 (EXCLUDING 7523 OR 7524 OR 7525) AT A1

A 6 Do you consider yourself to be part of...? READ OUT. SINGLE CODE.

Central government

Or local government

DO NOT READ OUT: Neither

DO NOT READ OUT: Other (SPECIFY)

DO NOT READ OUT: Don't know/not sure

ASK ALL EXCEPT IF PART OF CENTRAL OR LOCAL GOVERNMENT (1 OR 2 AT A 6)

A 7 Would you classify this organisation as part of the...

READ OUT ALL RESPONSES BEFORE CODING

SINGLE CODE

Private or commercial sector, that is, run for private profit

Or, the public sector, i.e. owned or controlled by central or local government

Or the voluntary sector, including charities or trusts

Other (WRITE IN)

DO NOT READ OUT: Private-Public Partnership (PPP)

DO NOT READ OUT: Don't know

A 8 Is the site at which you are based... READ OUT. SINGLE CODE

The only site, or

One of a number of sites within a larger

organisation in Great Britain

DO NOT READ OUT: Don't know

ASK IF NOT CODE 2 (TRANSFER TO ANOTHER SITE) AT S2

A4 And I understand that this site is based in [insert REGION from sample – FIXED FIELD IF CORRECT]. Is that correct?

Yes

No

IF CODE 2 AT a4 OR CODE 2 (TRANSFER TO ANOTHER SITE) AT S2

A4A So that we understand in which region you are based, please may I take the postcode for this site?

[enter postcode]

DO NOT READ OUT: ref

A4b DELETE

A 9 DELETED

A 10 DELETED

A 11 DELETE

IF CODE 1 (Private sector) AT A 7

A 12 How many years ago did your organisation start its operation in Great Britain?  
Please think of when it first started its operations rather than when it may have  
been subject to mergers or takeovers

IF NECESSARY: Please give me your best estimate

WRITE IN NUMBER OF YEARS - '0' = LESS THAN ONE YEAR

A 13 DELETE

A 14 DELETE

A 15 How many permanent employees, if any, have left the organisation between  
[textfil – month 12 months ago/year] and [textfil – current month/ year]?

IF NECESSARY: Please give me your best estimate

TYPE IN NUMBER

NONE

REF

ASK IF NOT NONE AT A15

A 16 And how many of those, if any, left due to redundancy?

IF NECESSARY: This could be either voluntary or compulsory redundancy

IF NECESSARY: Please give me your best estimate

TYPE IN NUMBER

NONE

REF

A16a And how many, if any, have joined the organisation between [textfil – month 12 months ago/year] and [textfil – current month/ year]?

IF NECESSARY: Please give me your best estimate

TYPE IN NUMBER

NONE

REF

[CATI LOGIC CHECK] A16A< OR EQUAL TO A16

A 17 I'd like to get a rough idea of the ages of employees in your organisation in Great Britain. Could you tell me the approximate percentage / number [if 20 or less at A5] of employees who are

IF NECESSARY: Please give me your best estimate

[if 21 or more at A5] For Interviewer: If respondent wants to give answer in numbers please select 'Give answer in numbers'

- aged under 25?

Give answer in numbers

Aged between 25 and 50?

[READ OUT] So that leaves [%]- aged over 50? [CATI PLEASE CALCULATE THIS % / NUMBER [if 20 or less at A5] BASED ON 100% / TOTAL AT A5 [IF 20 OR LESS AT A5] LESS THE FIRST TWO ANSWER CATEGORIES]

DO NOT READ OUT: don't know

DO NOT READ OUT: ref

INTERVIEWER - ALTHOUGH THIS IS APPROXIMATE, THESE FIGURES ADD UP TO LESS THAN 100%. PLEASE VERIFY THE RESPONSE IN EACH CASE. YOU'LL NOW BE TAKEN BACK TO THE BEGINNING OF A17

A 18 DELETE

A 19 Is there a recognised trade union within your organisation?

Yes  
No  
DK

## B Perceptions of employee health and wellbeing

B 1 I am now going to read out a series of statements to do with employee health and well being. As far as possible, I would like you to answer in terms of the views held by your organisation rather than giving your personal opinion. Please tell me to what extent you agree or disagree with each.

PROMPT: is that tend to or strongly [agree/disagree]?

ROTATE STATEMENTS

1. Employers have a responsibility to encourage employees to be physically and mentally healthy
2. In general, your employees do not want you to intervene in terms of their physical and mental health
3. DELETE
4. Currently, sickness absence is a real barrier to productivity in your organisation
5. The financial benefits of spending money on employee health and well being outweigh the costs
6. There is no a link between work and employees' health and well being
7. This organisation takes steps to increase employees' job satisfaction

ONLY ORGANISATIONS WITH 50+ EMPLOYEES AT A5

8. DELETE

Strongly agree  
Tend to agree  
Neither agree nor disagree  
Tend to disagree  
Strongly disagree

- B 2 DELETE

## C Health and well being initiatives

Next I'm going to ask you about benefits and services that you may or may not provide for your employees. We realise that some types of organisations are able to offer many more services than others and we just want to know how things vary across organisations at the moment.

C 1 In the last 12 months has your organisation provided any of the following things to any employees in your organisation:

Interviewer - is say for some or all please code yes

ROTATE LIST

Yes

No

More than 20 days of holiday for full time employees, EXCLUDING bank holidays

A subsidised pension scheme

Health and safety training

Further training in injury prevention

Work area assessments and adjustments for example checking or adjusting equipment such as chairs

Subsidised private medical insurance

Subsidised canteen or restaurant

C 2 In the last 12 months has your organisation provided any of the following things to any employees in your organisation:

Interviewer - is say for some or all please code yes

ROTATE LIST

Yes

No

Access to occupational health services

Health screening or health checks

Access to counselling or other employee assistance services

Healthy food choices in vending machines or canteen

Advice or support to help give up smoking

- Weight loss advice or programmes
- Health advice or events to raise awareness about healthy lifestyles
- A health and wellbeing section on the intranet
- Loans or discounts on bicycle purchases
- Measures to encourage activity such as running, walking, cycling
- Free or subsidised gym membership
- Fitness classes at work

C 3 Other than what I've already covered, are there any other ways in which you offer support to your employees in terms of their health and wellbeing?

OPEN ENDED

C 4 DELETE

C4A DELETED

C 5 DELETED

C 6 DELETE

C 7 DELETE

C 8 DELETE

ASK ALL

C9a Do you provide Stress management support or advice for employees and/or managers

Yes

No

IF Yes at C9a

C 9 Thinking about the last 12 months what types of activity have your managers or employees been involved in where the subject of stress was a specific focus?

ROTATE

READ OUT. CODE ALL THAT APPLY.

- Staff briefings about stress at work
- Stress Awareness Day at work
- Staff stress survey at work
- Group discussion about work stress
- HSE Stress Management Standards Programme
- Other line manager specific training or support
- Stress counselling or mentoring programme
- Staff welfare programme
- Informal discussions
- Appraisals where the subject of stress may be mentioned
- Any other activities (specify)

C 10 I would now like to ask you about the methods used by management in this organisation to communicate with employees. In the last 12 months has your organisation arranged or provided any of the following:

ROTATE

READ OUT. CODE ALL THAT APPLY.

- Regular meetings between managers and their staff
- Committees such as staff forums
- Groups of employees that meet to discuss specific problems
- Staff attitude surveys
- Staff Suggestion schemes
- Notice boards
- Regular use of the management chain to cascade information
- Regular newsletters or emails sent to all employees
- Information posted on company intranet
- [CATI THIS CODE SHOULD ALWAYS SIT IN THIS POSITION] Informal verbal communication between senior managers and staff
- Any other ways of communicating? (specify)

IF ANY OF CODES 1 to 6 or CODE 12 AT C10

C 11 In your opinion how often is the feedback from employees gathered during consultation activities acted upon by senior managers in your organisation? Would you say it is...

READ OUT

- All the time
- Most of the time
- Some of the time
- Hardly any of the time
- Or none of the time

C 12 DELETE

C 13 Now I am going to read out six possible spending or investment priorities for your organisation in the next 12 months. I would like you to tell me how important each is to your organisation using a scale of zero to 10, where zero means no importance or no investment planned, 1 is of very little importance and 10 is of extreme importance.

IF MULTIPLE SITE OPERATION Please think about spending or investment priorities across the organisation as a whole in Great Britain.

[CATI - allow score of 0 to 10 for each investment. Rotate list.]

ALLOW DON'T KNOW

1. Training and skills development of employees
2. New business, service or product development
3. Focussing on existing core activities [private sector only - code 1 at A7] and brand strength
4. Recruitment of new employees
5. Improving employee health and well-being (e.g. via pay, benefits and flexible working options)
6. Investment in infrastructure (e.g. machinery, property, equipment)

## D Absence management

Now thinking about absence within your organisation.

ASK ALL

D 1 Is there a system in place for recording the number of days taken off due to illness and injury by your permanent employees?

Yes

No [GO TO D10]

If yes at D1

D1a Are you able to tell me the total time taken off due to illness or injury across your whole organisation in Great Britain in the last 12 months in terms of either:

A percentage of total working time

Or the total number of full days of absence

DO NOT READ OUT: Don't know/Information not available [CATI CREATE DUMMY VAR FOR FOLLOW UP AT H1]

DO NOT READ OUT: no absence encountered within organisation in last 12 months

ASK IF CODE 2 AT D 1a

D 2 And how many full days of absence is that? Please exclude authorised leave of absence, employees away on secondments or courses, or days lost through industrial action

IF NECESSARY: Please give me your best estimate

ENTER NUMBER

DO NOT READ OUT: Ref

D 3 DELETE

IF CODE 1 D 1a

D 4 And what is the percentage of total working time? Please exclude authorised leave of absence, employees away on secondments or courses, or days lost through industrial action.

IF NECESSARY: Please give me your best estimate

ENTER PERCENTAGE

DO NOT READ OUT: Ref

ANY FIGURE GIVEN AT D2 OR D4

D4B Now thinking about ALL the [D2 days / D4 working time] lost due to illness or injury in the last 12 months, what proportion of these was due to:

Absences of up to one working week [enter %]

Absences of between 1 and 4 working weeks [enter %]

Absences of over 4 working weeks [enter %]

CATI LOGIC CHECK: percentages should sum to 100%

For each absence period:

DO NOT READ OUT: don't know

DO NOT READ OUT: no absence of that length in past 12 months [CODE AS NULL] – GO TO D10

DO NOT READ OUT; ref

D 5 DELETE

FOR EACH ABSENCE PERIOD AT D4B WHERE % GIVEN

D 6 And across your organisation in Great Britain in the last 12 months, which types of illness or injury were the main causes of....

FOR EACH ABSENCE PERIOD AT D4B WHERE DON'T KNOW GIVEN

D6 - And across your organisation in Great Britain in the last 12 months, can you give me the main causes of illness or injury for:

Absence of up to one working week? You may name up to three

Absences of one to working four weeks? You may name up to three

Absence of over four workling weeks? You may name up to three

DO NOT READ OUT. CODE UP TO THREE FOR EACH TYPE OF ABSENCE.

Minor illness, including colds, flu, sickness and diarrhoea

Back pain

Stress/anxiety/depression

Heart/blood pressure problems

Respiratory problems

Cancer related

Work related injuries

Other problems associated with joints or muscles (excluding back pain)

Other illness (specify)

OR (DO NOT READ OUT – use don't know): don't record by length of absence/ can't categorise in this way

DO NOT READ OUT: Ref

D 7 DELETED

D 8 DELETED

D8A DELETED

D 9 DELETED

D9a DELETED

ASK ALL

D 10 From the point of view of helping you to decide how fit someone is to do their job and what adjustments your organisation can make to facilitate an early return to work, how do you rate the usefulness of the information currently provided on medical statements? Is it...

IF NECESSARY: By medical statement I mean a GP's sick note

Very useful

Useful

Not very useful

Not at all useful

DO NOT READ OUT: Don't know

DO NOT READ OUT: NOT APPLICABLE, NOT SEEN ANY GP MEDICAL STATEMENTS (USE NULL)

ALL THOSE WITH ANY GP AUTHORISED ABSENCE AT D 9

D 11 DELETED

D12a Within the last 12 months, across your organisation have you done anything to

keep employees with health problems in work ([If not no sickness recorded at D1a] or facilitate their return to work)? For example, this could be reducing employee hours, workload or responsibilities, building modifications, access to occupational health services

Yes

No

If yes at D12a

D 12 Can I check then, in the last 12 months, which of the following have you used to keep employees with health problems in work or facilitate their return to work?

[If no sickness recorded at D1a] Can I just check, in the last 12 months, which of the following have you used to keep employees with health problems in work?

READ OUT

Meetings with employers to discuss extra help they may need

Allowing employees to work reduced hours or different hours

Extra breaks at work

Different duties

Reducing employee workload

NEW CODE [If sickness recorded at D1a] Phased return to work

Providing access to occupational health services

A job coach or personal assistant (e.g. a sign-language interpreter for meetings)

Different chairs or desks

Building modifications e.g. handrails or ramps, easy-to-access work area, toilets or lift

Other specialised equipment (e.g. a telephone with text display)

Anything else? (Specify)

## F Uptake /awareness of HWWB initiatives

F1 The government has put in place a number of initiatives to help employers improve the health and well-being of their employees. Have you heard of any of the following?

Rotate list

... the Health, Work and Well-being Co-ordinator in your region

...the Business Health Check tool

[ask only of organisations with 50 employees or less at A 5] Occupational health helpline for small business

... the fit for work service (FFWS)

... NICE public health guidance

FOR EACH MENTIONED AT F1

And have you made use of [textfil]?

Yes

No

DO NOT READ OUT: don't know

## E Other provisions and benefits

E 1 Does your organisation provide any flexible working practices? For example flexi-time, working from home, or job sharing,etc?

Yes- any

No

Don't know

E 2 DELETE

READ OUT: I would now like to ask you about the pay that permanent employees receive when they are off work sick.

E 3 DELETED

E 4 DELETED

E 5 DELETED

E 6 DELETED

E 7 DELETED

E 8 DELETED

E 9 DELETE

E 10 DELETE

E 11 DELETE

E 12 DELETE

E 13 Do you pay occupational sick pay for absences due to illness or injury, in other words, do you pay above the statutory sick pay level set by the government?

Interviewer: If yes, probe: 'is that for all employees or for some employees only'

Yes for all employees

Yes for some employees

No [go to END]

DO NOT READ OUT: don't know [GO TO I1]

DO NOT READ OUT: no fixed policy on occupational sick pay [GO TO END]

DO NOT READ OUT: not had to pay occupational sick pay [go to END]

DO NOT READ OUT: refused [GO TO END]

If 'not had to pay occupational sick pay'

E13a Even though you have not paid occupational sick pay, does your organisation have a policy about how occupational sick pay would be paid?

Yes [REPEAT E13]

No [GO TO END]

Don't know [GO TO I1]

ASK IF CODE 2 (SOME EMPLOYEES) AT E13

E 14 What percentage of employees is entitled to receive occupational sick pay?

If necessary: please give me your best estimate

Enter %

DO NOT READ OUT: don't know [GO TO I1]

DO NOT READ OUT: refused [GO TO END]

IF % AT E14

ASK IF CODES 1 OR 2 AT E13

E 15 And [if code 2 at E13: for employees who are eligible to receive occupational sick pay,] after how many days of absence do you start paying occupational sick pay? If this varies for different employees, please tell me about the situation for the majority of your workforce.

DO NOT READ OUT. PROBE TO PRECODES

On the first day of absence

After 2 or 3 working days' absence

After 4 or 5 working days' absence

After more than 5 working days' absence

DO NOT READ OUT: No fixed policy [CONTINUE]

DO NOT READ OUT: don't know [CONTINUE]

DO NOT READ OUT: refused [CONTINUE]

ASK IF CODE 1 OR 2 AT E13

E17 I'd like to know for how long in total you would pay occupational sick pay to eligible employees in any one period of absence. Would you prefer to give your answer in terms of working days or working weeks?

IF NECESSARY: By occupational sick pay, I mean payment over and above statutory sick pay

working days

working weeks

DO NOT READ OUT: don't know how long payment is for [GO TO I1]

DO NOT READ OUT: no fixed policy [GO TO E19B]

DO NOT READ OUT: refused [GO TO END]

ASK IF CODE 1 AT E17

E18 For how many working days in total would you pay occupational sick pay for any one period of absence? If payment varies for different employees, please answer in terms of the situation that applies to the majority of your workforce.

Enter number of working days

DO NOT READ OUT: refused [GO TO END]

ASK IF CODE 2 (working weeks) AT E17

E19 For how many working weeks in total would you pay occupational sick pay for any one period of absence, where one working week is five working days? If payment varies for different employees, please answer in terms of the situation that applies to the majority of your workforce.

Enter number of working weeks (CATI CONVERT TO DAYS – 1 week=5 working days)

DO NOT READ OUT: refused [GO TO END]

IF NOT REF AT E18 or E19

ASK IF CODE 1 OR 2 AT E13

E19B Over the course of one period of sickness absence, does the rate at which you pay occupational sick pay to eligible employees reduce over time?

Yes

No

DO NOT READ OUT: don't know [GO TO I1]

DO NOT READ OUT: no fixed policy [GO TO END]

DO NOT READ OUT: refused [GO TO END]

ASK IF CODE 2 (no) AT E19B

E20 As a percentage, at what rate do you pay occupational sick pay? If payment varies for different employees, please answer in terms of the situation that applies to the majority of your workforce.

If necessary: please give me your best estimate

ENTER %

DO NOT READ OUT: pay a fixed sum rather than % of salary

DO NOT READ OUT: don't know [FLAG DUMMY VAR H1]

DO NOT READ OUT: refused (GO TO END)

## 102 Appendices – QWL employer questionnaire

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IF % AT E20

ASK IF CODE 1 (yes) AT E19B

E21 You said that the rate at which you pay occupational sick pay reduces over time. In the first instance, at what rate do you pay occupational sick pay? If payment varies for different employees, please answer in terms of the situation that applies to the majority of your workforce.

If necessary: please give me your best estimate

ENTER % (at next screen)

DO NOT READ OUT: pay a fixed sum rather than % of salary (GO TO END)

DO NOT READ OUT: don't know [CATI: CREATE DUMMY VAR FOR FOLLOW UP AT H1]

DO NOT READ OUT: refused (GO TO END)

IF % AT E21

E21 PER At what rate do you pay occupational sick pay, in the first instance?

1 to 100

Reply may not be NULL or DK or REF

.. Reply may be a numeric value

IF % AT E21

ASK IF % AT E21

E22 For how many [textfil from E17 Code 1 working days or code 2 working weeks] would you pay occupational sick pay at [textfil from E21], [If code 2 at E17: where one working week is five working days?]

IF NECESSARY: Please think about the situation that applies to the majority of your workforce

Enter number [CATI CHECK: CANNOT EXCEED ANSWER GIVEN AT E18/ E19]

DO NOT READ OUT: DON'T KNOW [CATI: CREATE DUMMY VAR FOR FOLLOW UP AT H1]

DO NOT READ OUT: refused [GO TO END]

ASK IF % AT E21 AND NOT REF AT E21

E23 And after [textfil from E22: x working days/weeks], please tell me at what rate of pay occupational sick pay reduces to.

DO NOT READ OUT – PROBE TO PRECODES

If necessary: please give me your best estimate

ENTER %

DO NOT READ OUT: Don't know [CATI: CREATE DUMMY VAR FOR FOLLOW UP AT H1]

DO NOT READ OUT: refused (GO TO END)

ASK IF % AT E23

E24 For how many [textfil from E17 Code 1 working days or code 2 working weeks] would you pay occupational sick pay at [textfil from E23] [If code 2 at E17: where one working week is five working days?]

IF NECESSARY: Please think about the situation that applies to the majority of your workforce

Enter number [CATI CHECK: CANNOT EXCEED ANSWER GIVEN AT E18/ E19]

DO NOT READ OUT: DON'T KNOW [CATI: CREATE DUMMY VAR FOR FOLLOW UP AT H1]

DO NOT READ OUT: refused [GO TO END]

CATI LOGIC CHECK: IF RUNNING SUM [E22 AND E24] OF WORKING DAYS LESS THAN ANSWER AT E18/ E19 THEN REPEAT QUESTIONS E23 TO E24A IN A LOOP UNTIL RUNNING SUM OF DAYS=E17/E18. ADD LOGIC CHECK FOR RESPONDENT. ALLOW FIVE LOOPS IN TOAL

F moved position to before Section E

H FOLLOW UP

NEW QUESTION I1

IF DON'T KNOW AT E13, E14, E17 OR E19B

Thank you. You seem a little unsure about the occupational sick pay policy in your organisation. It is important for us to collect accurate information about the proportion of employees that are entitled to occupational sick pay, for how long this is paid in any one period of absence, the rate at which it is paid and whether this rate reduces over time. We understand that occupational sick pay arrangements may vary for different employees, so we want to understand the situation for the majority of your workforce. May I call you back to collect this information?

Yes

No [GO TO READ OUT AT END]

ASK IF DON'T KNOW AT A5, A5b A5c or D1a, E20 or E20c, E21, E22, E23 (+ LOOPS), E24 (+ LOOPS)

For some questions during the interview you were unable to give me an accurate answer. If I were to call back again at a convenient time, would you be able to give me more accurate information I can send you an email listing the things I need you to tell me about

IF Yes at I1: When I call you back, would you also be able to give me more information about these topics?

Yes (or not sure)

No [GO TO READ OUT AT END]

DELETED:

H1A

H2

H2A

H3

H4

H5

IF ANSWER YES AT H1 OR YES AT I1

H6 Is there a time of day or day of the week you are more likely to be contactable on this number?

CHECK PHONE NUMBER (BRING FORWARD FROM SAMPLE/ OR OVERWRITE AT S4XX)

INTERVIEWER: RECORD IN NOTES, DO NOT TAKE SERIAL.

IF ANSWER YES AT H1 OR YES AT I1

H5a I can send you an email that provides a reminder about what I need to know. Please may I take down your name and your email address?

INTERVIEWER TYPE IN NAME, CHECK SPELLING

INTERVIEWER TYPE IN EMAIL ADDRESS. CHECK ALL SPELLING

[ALLOW REF]

Thank you, that is the end of the interview.

If you have any queries please contact the project manager at GfK NOP - Tim Buchanan 020 7890 9786

*The Health and Well-being Survey of Employers* was jointly commissioned by the Cross-Government Health, Work and Well-being Strategy Unit and the Department for Work and Pensions. 2,250 GB employers were interviewed between February and May 2010.

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 engaged 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 policies.

If you would like to know more about DWP research, please contact:  
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<http://research.dwp.gov.uk/asd/asd5/rrs-index.asp>

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