PAS 3002:2018

Code of practice on improving health and wellbeing within an organization

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Contents

Foreword

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Acknowledgement is given to the following organizations that were involved in the development of this PAS as members of the steering group:

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Use of this document

It has been assumed in the preparation of this PAS that the execution of its provisions will be entrusted to appropriately qualified and experienced people, for whose use it has been produced.

Presentational conventions

The provisions of this PAS are presented in roman (i.e. upright) type. Its recommendations are expressed in sentences in which the principal auxiliary verb is "should".

Commentary, explanation and general informative material is presented in smaller italic type, and does not constitute a normative element.

Where words have alternative spellings, the preferred spelling of the Shorter Oxford English Dictionary is used (e.g. "organization" rather than "organisation").

Contractual and legal considerations

This publication does not purport to include all the necessary provisions of a contract. Users are responsible for its correct application.

Compliance with a PAS cannot confer immunity from legal obligations.

Introduction

The health of working-age people has moved higher up the policy agenda in recent decades due to a series of trends, substantiated by recent reports. Such trends include the following.

a) An ageing society and a need to keep workers able to continue to work for as long as they wish. The *Taylor Review of Modern Working Practices* [1] indicates that just as it has become conventional for both parents of small children to work, in an ageing society, we need to get better at supporting those with caring responsibilities and health conditions to remain active contributors over longer working lives.

b) Increasing stress in the workplace. *Psychology at work: Improving wellbeing and productivity in the workplace* [2] [1] builds on the recognition of the role of work in providing positive psychological and social support. It recommends all organizations to proactively seek to improve workforce wellbeing by developing well-designed jobs, monitoring them and seeking to increase individual engagement.[2]

c) An increased awareness of mental illness. *Thriving at work* [3] [3] by Stevenson and Farmer is an independent review commissioned by the UK Prime Minister into how organizations can better support the mental health of all people currently in employment including those with mental health problems or poor wellbeing to remain in and thrive through work.

d) Support and encouragement for a diverse workforce. The HSE identified organizational justice as a significant factor in workplace health in its review of the managerial standards for addressing stress at work, and the recognized importance of fair treatment at work has been embedded in anti-discrimination legislation in many jurisdictions.[4]

e) The addition of a non-communicable disease burden due to lifestyle choices.[5]

What becomes apparent from reports on health and wellbeing in the workforce is the depth and breadth of the scope of wellbeing and its relationship to organizational culture and the role of line managers. Wellbeing is often perceived as a range of characteristics pertaining to an individual, whereas evidence suggests that the organization and organizational culture play an instrumental role in the wellbeing of individuals [4].

Health is everybody's concern and this PAS is focussed on the potential contribution of the organization to overall health and wellbeing. In the UK, the NHS and DWP (and hence the taxpayer) effectively subsidize poor management practice as the actions taken to prevent this public health issue are not taken and the consequent costs of stress-related damage are not met by the employing organizations.

Increasingly organizations are being asked to meet their responsibilities and needs in relation to health and wellbeing in order to:

- "provide healthy workplaces and work to protect people from harm;
- provide early intervention to help prevent people being absent for health reasons;
- improve opportunities for rehabilitation from illness while at work;
- use the workplace to promote individual health and wellbeing; and
- enhance employee wellbeing and engagement." [5]

[1] See https://beta.bps.org.uk/sites/beta.bps.org.uk/files/Policy%20-%20Files/Psychology%20at%20work%20-%20improving%20wellbeing%20and%20productivity%20in%20the%20workplace.pdf

[2] See HSE Management Standards (http://www.hse.gov.uk/stress/standards/index.htm) and the What Works Well website (https://whatworkswellbeing.org) for an analysis of job quality.

[3] See https://www.gov.uk/government/publications/thriving-at-work-a-review-of-mental-health-and-employers

[4] See https://www.healthandsafetyatwork.com/mental-injury

[5] See http://www.who.int/mediacentre/factsheets/fs355/en/

There are good reasons for an organization to meet these responsibilities. A summary is provided in *Occupational health: the value proposition* [5]:

• "protecting and promoting employee health is integral to corporate social responsibility;

• employees think employers should be more proactive in providing workplace health interventions;

• work-related ill health is a significant cost to individuals, employers and the taxpayer;

• employer paid interventions may save more money at a societal level (health and social care)". [5]

In addition:

• 137 million working days were lost to sickness absence in the UK in 2016; [6]

• the cost of presenteeism in the UK alone is estimated to be £29 billion; and

• organizations in the UK spend £9 billion each year on sick pay and associated costs.[7]

Occupational health: the value proposition [5] states: "Leading companies which connect health and productivity strategies to business objectives report employee health improvements, lower costs, reduced work loss and higher productivity. These are also linked to significant competitive and financial advantages, including higher revenues per employee and total shareholder return. It should be acknowledged that the employers who introduce such programmes are likely to be the type of enlightened employer who utilises a range of practices that affect productivity and competitiveness; and that employers who are already profitable may be more likely to afford such programmes. Nonetheless it is appropriate to view employee health as a social investment to be leveraged rather than a cost to be justified."

This PAS aims to provide a benchmark for organizations around the world regardless of jurisdiction, country, size and sector in relation to the health and wellbeing of its workers and so help to "improve the health of the working population, help prevent work-related illnesses, provide early interventions for those who develop a health condition thus preventing avoidable sickness absence and increase the efficiency and productivity of organisations" [5]. This PAS helps to provide organizations with the ability to audit and benchmark against recommendations – identifying what the organization already has in place and what gaps there might be in the health and wellbeing of its workers – and form part of an organization's overall values and commitment to meet its wider social responsibilities.

It is important that users of this PAS are aware of the following points.

1) Attention is drawn to legal requirements to which an organization's policies and actions are subject to in the relevant jurisdiction, with particular reference to the organization's health and safety at work obligations, regulations relating to accidents, data handling and sensitive data provisions and general employment rights.

2) The underpinning ethos of this PAS is that it is evidence-based, both in material referred to and in the way in which organizational data are used. A key evidence-based guide relevant to this code of practice is the NICE guidelines NG13 [8] [8] on workplace policies and management practices to improve the health and wellbeing of workers, which is a consolidation of the WHO material [9] for the UK. The NICE guidelines cover how to improve the health and wellbeing of workers, with a focus on organizational culture and the role of line managers.

A selection of health and wellbeing case studies is given at Annex A.

NOTE The case studies given at Annex A are intended as illustrative and not to promote any one organization, project or approach.

This PAS is structured in a plan-do-check-act model as shown in Figure 1. The correspondences to ISO management system standards are shown in Annex B.

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[6] For further information see the Office for National Statistics *Sickness absence in the labour market: 2016* available from: https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/labourproductivity/articles/sicknessabsenceinthelabourmarket/2016 [6].

[7] For further information on the cost of sickness see IPPR *Working well* report available from: http://www.ippr.org/publications/working-well-a-plan-to-reduce-long-term-sickness-absence [7].

[8] See https://www.nice.org.uk/guidance/ng13

[9] See http://www.who.int/occupational_health/publications/en/

Figure 1 – Structure of the health and wellbeing principles described in this PAS

Plan (Planning)

4. HEALTH AND WELLBEING PRINCIPLES

5. HEALTH AND WELLBEING STRATEGY AND POLICY

7.1 IDENTIFY THE HEALTH AND WELLBEING NEEDS AND EXPECTATIONS FROM INTERESTED PARTIES

7.2 DETERMINED HEALTH AND WELLBEING OBJECTIVES AND ACTION PLAN

Act (Improvement)

11. REVIEW HEALTH AND WELLBEING PERFORMANCE

Do (Support and Operation)

6. LEADERSHIP

7.3 OPERATIONAL IMPLEMENTATION

Check (Performance Evaluation)

8. MONITOR HEALTH AND WELLBEING

9. ANALYZE HEALTH AND WELLBEING INFORMATION

10. REPORT ON HEALTH AND WELLBEING

Maturity models for health and wellbeing management are discussed at Annex C.

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1 Scope

This PAS provides recommendations to establish, promote, maintain and review the health and wellbeing of workers within an organization. It considers how health and wellbeing are incorporated into the working environment and how leadership is demonstrated by way of health and wellbeing related services available.

This PAS presents five key principles to form the basis of an organization's approach:

a) capitalize on diversity and inclusion as an organizational strength;

   NOTE Unfairness is a key hazard at work.

b) proactively support the physical and psychological health and wellbeing of workers;

c) foster a work culture that offers strong, ethical relationships, a collaborative and communicative management style, and an organizational culture in which learning and development are encouraged;

d) ensure jobs are designed so that they offer meaningful work; and

e) support good people management policies and practices.

This PAS is applicable to any organization regardless of size, type and nature. The target audience of the PAS is top management within large organizations but it could also be of use to small and medium-sized enterprises and worker representatives.

NOTE 1 The recommendations in this PAS are not intended to replace the legal requirements placed on the organization by relevant health, safety and wellbeing legislation.

NOTE 2 The recommendations in this PAS go beyond an organization's workers and also impact, for example users of a service and former workers.