

Results of the implementation of a holistic health management system into the tax administration of North-Rhine Westphalia

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Abstract

In order to ensure the well-being and employability of the workforce, it is essential to integrate worksite health promotion (WHP) into the daily activities of the organisation. Based on the framework of a healthy work organisation and of a holistic health management system, the aim of the project is the development, implementation, evaluation and transfer of a holistic health management system within the tax administration of North-Rhine Westphalia, Germany. Key elements of the implemented management system incorporate processes, structures and activities of human resource management. The organisational change process was firmly based on top level commitment and strong participatory support of employees. The implementation and continuing improvement of the holistic health management system into the organisation of the nine tax offices yielded significant and distinct improvements in the domains of the management system itself as well as in health related outcomes. To reach long term sustainability, a new position of a health manager at the level of the ministry of finance has been established. At the second level - Oberfinanzdirektion Rhineland - the health promotion group, which was responsible for planning, coordination and evaluation of the health management system, has been set up as a permanent function. Health promotion structures and processes have been adapted and readjusted at all levels of the fiscal authorities.

1. Introduction

Similar to other working environments, tax offices' employees in North-Rhine Westphalia have gone through major changes in recent years. The working environment of the tax offices can be characterized by an increasing high level of work load as well as of complex and changing work tasks. Moreover, the tax offices and the fiscal administration as a whole operate in a phase of radical change. The bureaucratic philosophy and structure is going to be changed into a modern, public oriented management and customer service orientation.

The tax administration of North Rhine-Westphalia operates 137 local tax offices counting approximately 30,000 employees. The project proceeds in nine local tax offices of the tax administration Rhineland which volunteered to participate in the pilot project. They were chosen according to geographical characteristics and transaction volumes. In 2007, the tax administration

Rhineland employed 16,693 workers; the nine pilot tax offices 2,136. Each tax office counts between 138 and 380 employees organized in 10-15 functional units. Average age in 2007 was 43.8 years; however, this number steadily increases. While the ratio of male/female workers was 41.33%/58.67%, the proportion of full/part time workers was 69.48%/30.52%.

2. Aims

In order to ensure the well-being and employability of the ageing workforce, it is important to integrate Worksite Health Promotion (WHP) into the daily routines of the organisation. Based on the framework of a healthy work organisation and of a holistic health management system, the aim of the project is the development, implementation, evaluation and transfer of a holistic health management framework within the tax administration. In reviews of benchmarking and best-practice studies the following system elements of WHP are described repeatedly as effective practices: 1) Integrating WHP into the organisation's central operations; 2) addressing individual, environmental, policy, and cultural factors; 3) developing a healthy organisational culture, 4) targeting several health issues simultaneously; 5) implementing health-screenings, 6) tailoring programs to address specific needs of the population, 7) attaining high participation rates; 8) networking with local and regional healthcare providers and institutions; as well as 9) evaluating and continuously improving WHP.

The team "Health Promotion" under the scientific direction of Prof. Dr. Elke and Prof. Dr. Zimolong from Ruhr University Bochum was responsible for the planning, coordination, and evaluation of the intervention measures. It was supported by the Unfallkasse Northrhine-Westphalia. Members of the team were employees of the Oberfinanzdirektion Rhineland, who should take on responsibility for health promotion at the end of the project to assure the continuous improvement and transferability of health management.

3. Method

The organisational change process was firmly based on top level commitment and strong participatory support of employees. Starting point was an update of previous and ongoing work site health activities and programs at the level of the local tax offices, an assessment of their outcomes, a health survey, and the participatory implementation of steering committees in each of the tax offices. The responsibility of the steering committees was to plan, coordinate, evaluate and improve health promotion activities. The senior manager, first-level managers, employees, members of the local employee committee, and health and safety representatives participated in this committee. The president of the tax administration Rhineland chaired the central steering committee of the nine tax offices. This committee incorporated all senior managers of the tax offices, central health and safety representatives, members of the central employee committee, and scientific consultants.

Key elements of the implemented management framework incorporated structures, processes and activities of human resource management, e.g. leadership accountability for WHP objectives linked with appraisal and reward systems. Managerial tasks in the information and communication domain included the establishment of top-down and bottom-up information and communication channels and platforms on health issues, installation of an intranet-based communication platform called "Healthy Fiscal Authority", and the start-off of internal communication processes promoted by incentives and personal communication ownerships. Management of job and work design emphasized the allocation of accountability to first line managers and teams. This was linked to an ongoing monitoring and improvement loop with the focus on ergonomic as well as psychosocial aspects of worksite environment. Teams developed work process improvements and were encouraged to adjust test characteristics of their software program for the check of tax returns.

The implementation and continuing improvement of the health management system was started, controlled and shaped by three health surveys carried out with the questionnaire "Fragebogen Arbeits- und Gesundheitsschutz, Betriebliche Gesundheitsförderung" (FAGS BGF) in 2005, 2006, and 2007. Subsequently, tax offices offered target specific promotion activities such as health education, physical activity programs (exercise facilities or time-off for exercise), stress management trainings, healthy nutrition as well as healthy food choices in cafeterias. They also enacted policies

that supported a healthier work site environment, such as a smoke-free workplace. In most cases, WHP interventions provided at the work site were offered free of charge to encourage participation. A notable part of the offers resulted from networking with local and regional healthcare providers and institutions.

The "Healthy Back" program offered a screening of back health risks, followed by tailored risk group health education and back health promotion. Activities covered counselling and coaching of employees at risk, offers to join behavioural management programs or physical activity classes, and support activities via telephone aimed at encouraging or assisting employees in their efforts to adopt healthy behaviours.

4. Results

The outcomes of the project after three years can be grouped into results related to new health promotion structures at the first and second level of the fiscal authorities and to outcomes of the participating nine tax offices, respectively.

At the first level of the fiscal authority the function of a health manager at the ministry of finance was introduced. At the second level - Oberfinanzdirektion Rhineland - the health promotion group, which was responsible for planning, coordination and evaluation of the health management system, was set up as a permanent function. The intranet communication platform on health topics is operated on a regular basis to serve as a communication platform for health promotion issues. Moreover, the project specific health surveys will be administered as regular health surveys every two years, and health promotion as policy has been embedded not only into the tax offices, but in the administration as well.

The implementation and continuing improvement of the holistic health management system into the organisation of the nine tax offices yielded significant and distinct improvements in the domains of the management system itself as well as in health related outcomes (see table 1). The domains include (1) policy, structure, and strategy; (2) health promoting leadership; (3) job design, (4) health culture and climate, (5) health resources of employees; (6) health of employees, and (7) lost workdays due to back pains. Data cover results of FAGS BGF (2005/2007;N=1,515/1,029), of documented participation and attendance rates, and of the implementation of new health promotion functions.

Health promoting leadership has been clearly improved by feedback from the surveys, goal agreements, and specific health promoting leadership trainings. As assessed by the subordinates adoption of responsibility for health promotion of subordinates increased by 9.2% and promotion of participation and involvement of subordinates into health promoting activities by 16.4%. Additionally, promotion of work autonomy, i.e. of decision latitude and job variety, was improved by 7.4% as well as health culture and climate by 7.7%. Although participation rates of health surveys decreased from 72.3% to 52.7%, overall participation remained on a high level. Whereas the attendance rate of back health screening was 49.7%, the attendance rate of target group specific back health prevention offers 25.9%. Health resources of employees indicated by coping strategies with stress (+ 7.9%), attendance rates of health promotion activities offered by the tax offices (+ 527%) and private health promotion activities such as physical activities, nutrition, stress management (+49%) increased overwhelmingly. With respect to the health of employees, the frequency of back pains dropped by 3.9%, the weekly/daily back pains by 5.5%, and impairment due to back pains by 8.7%. As a result lost workdays due to severe back pains dropped by 12.3%. This percentage accounts for a reduction of 540 lost workdays due to severe back pains for 2,000 employees of the nine tax offices.

However, work demands have not decreased, but instead have increased from 2005 to 2007 by 5.4% (FAGS BGF, scale work demands). Therefore, employees have difficulties appreciating health promotion at work. Nevertheless, the participants appreciated the project in a constructive and critical way and appraised it as a successful project on the final meeting.

Moreover, participation and attendance rates of gender and of age groups, respectively, differ considerably. Regarding the potentials for improvement there is a need to address target specific information and communication for these groups together with target specific health promotion activities.

Table 1: Evaluation results of the implementation of the holistic health management system

Domains of the OHS management system	Period from 2005 (start) to 2007 (end of project) New set ups, participation rates, and changes in health status
1. Policy, structure, and strategy	New set up of <ul style="list-style-type: none"> - position of a health manager at the ministry of finance - health promotion group at second level of administration - intranet platform on health topics - regular health surveys every two years - embedding health promotion as policy into the tax offices
2. Health promoting leadership assessments of subordinates by FAGS BGF	<ul style="list-style-type: none"> - adoption of responsibility for health promotion of subordinates (+ 9.2%) - promotion of participation and involvement of subordinates into health promoting activities (+16.4%) - transfer of information including health issues (+ 6.3%) - social support of subordinates (remains stable on high level with a scale value of 3.72 on a 5 point Likert scale)
3. Work design self-assessments by FAGS BGF	<ul style="list-style-type: none"> - promotion of work autonomy (scale decision latitude and job variety; FAGS BGF + 7.4%)
4. Health culture and climate self-assessments by FAGS BGF	<ul style="list-style-type: none"> - the private subject "health promotion" has been turned into an official corporate task - employees have been sensitized to the subject of health, appears as a regular topic on the agenda of business meetings - improved communication on health issues backed by the recently introduced intranet platform on health topics (increase of participation rates) - participation rates of health surveys remain on a high level (72.3% - 52.7% of all employees) - attendance rate of back health screening: 49.7% of all employees - attendance rate of target group specific prevention offers to improve back health: 25,9% of all employees - improvement of the health climate (scale norms and values, FAGS BGF) (+ 7.7%)
5. Health resources of employees self-assessments by FAGS BGF	<ul style="list-style-type: none"> - improvement of coping strategies with stress (+ 7.9%) - empowerment of employees, i.e. the degree of exerting influence on ongoing decision processes is on a high level (3.82 on a 5 point Likert scale) - attendance rate of health promotion activities offered by the tax offices: 29.8% (+ 527%) - attendance rate of private health promotion activities (physical activities, nutrition, and stress management): 73.6% (+ 49%)
6. Health of employees self-assessments by FAGS BGF	Reduction of <ul style="list-style-type: none"> - strain intensity (-2.5%) - persisting tiredness and irritability (- 2.5%) - overall frequency of musculoskeletal pains (2006-2007; - 3.9%) - weekly/daily musculoskeletal (back) pains (- 5.5%) - back pain intensity (- 5.5%) - impairment due to back pains (- 8.7%)

<p><i>7. Lost workdays due to back pains</i></p> <p>calculation from data of FAGS BGF, public services insurers, fiscal authority NRW</p>	<p>Reduction of</p> <ul style="list-style-type: none"> - lost workdays due to severe back pains (-12.3%) - 540 lost workdays due to severe back pains for 2,000 employees of nine tax offices
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5. Success factors

Success factors are affiliated with the introduction and continuous improvement of the holistic health management system: Integrating worksite health promotion into the organisation's central operations; addressing individual, environmental, policy, and cultural factors; implementing health-screenings, tailoring programs to address specific needs of the employees and specific target groups, promoting participation and involvement of employees into health promoting activities, evaluating and continuously improving worksite health promotion. To reach long term sustainability, new responsibilities and structures have been established at all levels of the fiscal authority:

- a new position of a health manager at the first level of the ministry of finance,
- at the second level - Oberfinanzdirektion Rhineland - the health promotion group, which was responsible for planning, coordination and evaluation of the health management system has been set up as a permanent function,
- at the third level, new health promotion structures and processes have been introduced into the tax offices

6. Transferability

The health management system is now being implemented into other tax offices and will be finally introduced fiscal authority-wide in North-Rhine Westphalia, Germany. In order to support the transferability of the system, a toolbox was developed and implemented at the intranet health platform. The toolbox covers the handbook, which describes how to implement the system in seven steps, together with helpful techniques, procedures, questionnaires and proposals how to cope with barriers and unforeseen events.

Generally, the health management system can be recommended for the public service and for other administration businesses as well.

7. References

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