

# Managing well-being: relationships between management policies, superiors' behaviour and employee well-being

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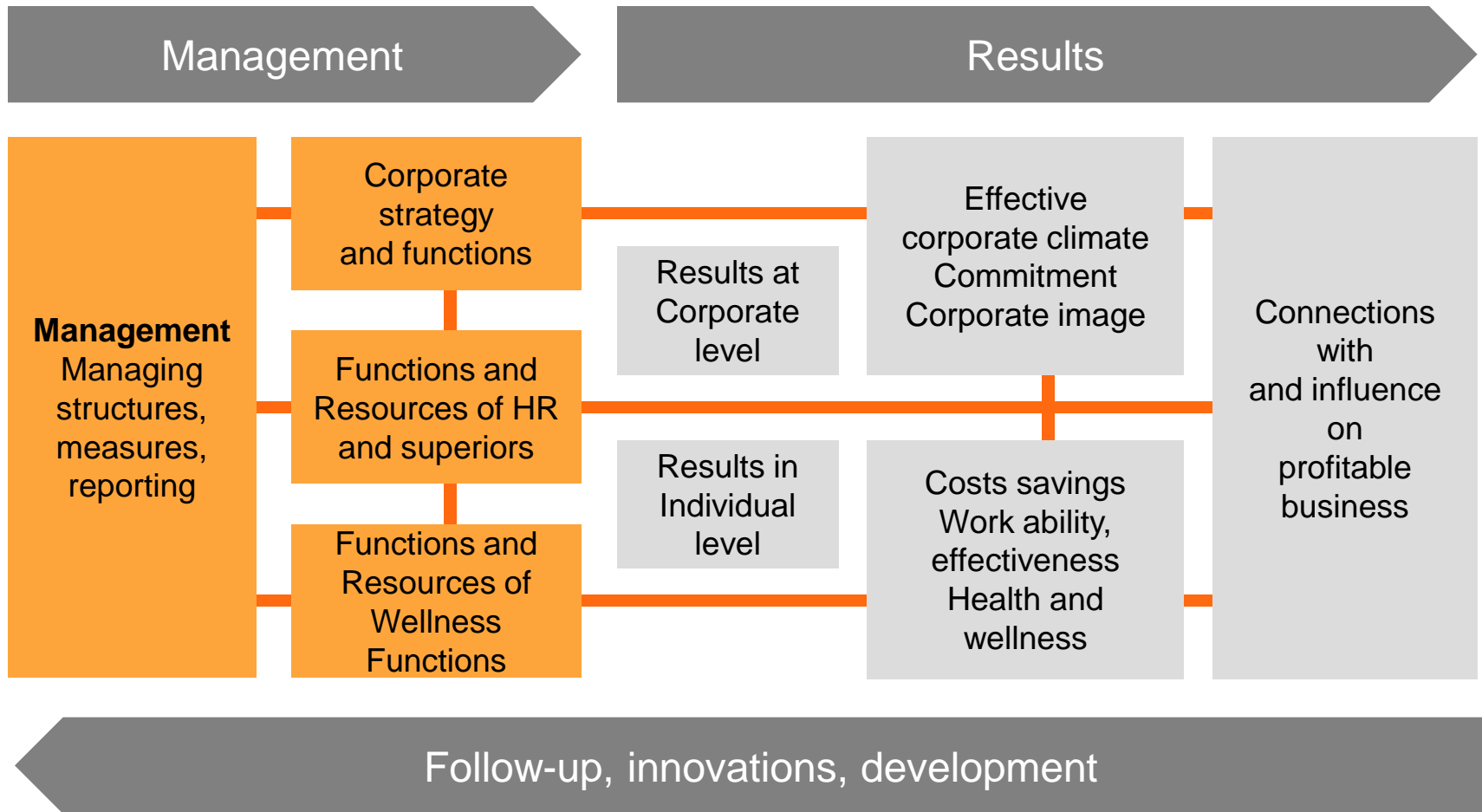
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# Overall scheme of the study



Large employer; 6000 employees, 620 superiors, 40 units

# Model for managing well-being



Well-being management (WBM) procedures were studied in 40 units with **formalised** questionnaires answered by Human Resource managers

Management



See: Aura O., Ahonen G., Ilmarinen J. (2010 Strategic Wellness Management in Finland. The First National Survey of the Management of Employee Well-being. *JOEM* 52, 12, 1249-54

# Superiors' competence in Well-being management was studied in 384 superiors divided 40 units and

- Internet questionnaire
- Importance of different areas of well-being at work
- Leadership capabilities in managing well-being at work
- Procedures of inner communication
- Competence in well-being management
  - The concreteness of the objectives
  - Use of measures
  - Role of superiors
  - Responsibilities of superiors
- Response rate was 62%



# Well-being of employees

## *Unit level indicators were utilized*

- Human Resource Reporting
  - Age, gender, education
  - Staff turnover, time spent in training, costs on training, occupational health, corporate fitness, etc
- Personnel **climate** study
  - Job satisfaction, stress, evaluations of leadership, competence, corporate climate, corporate image, trust on superiors, etc
- Occupational health indicators
  - Sick leave %, health-% (no sickness absences)

# Productivity **at** unit level

- In operative units each work process **had certain** time bound criteria
- Work done was related to these criteria
- Productivity was calculated by dividing **the** sum of these processes **by** total working time
- Productivity was work done by the employees – more work, better productivity

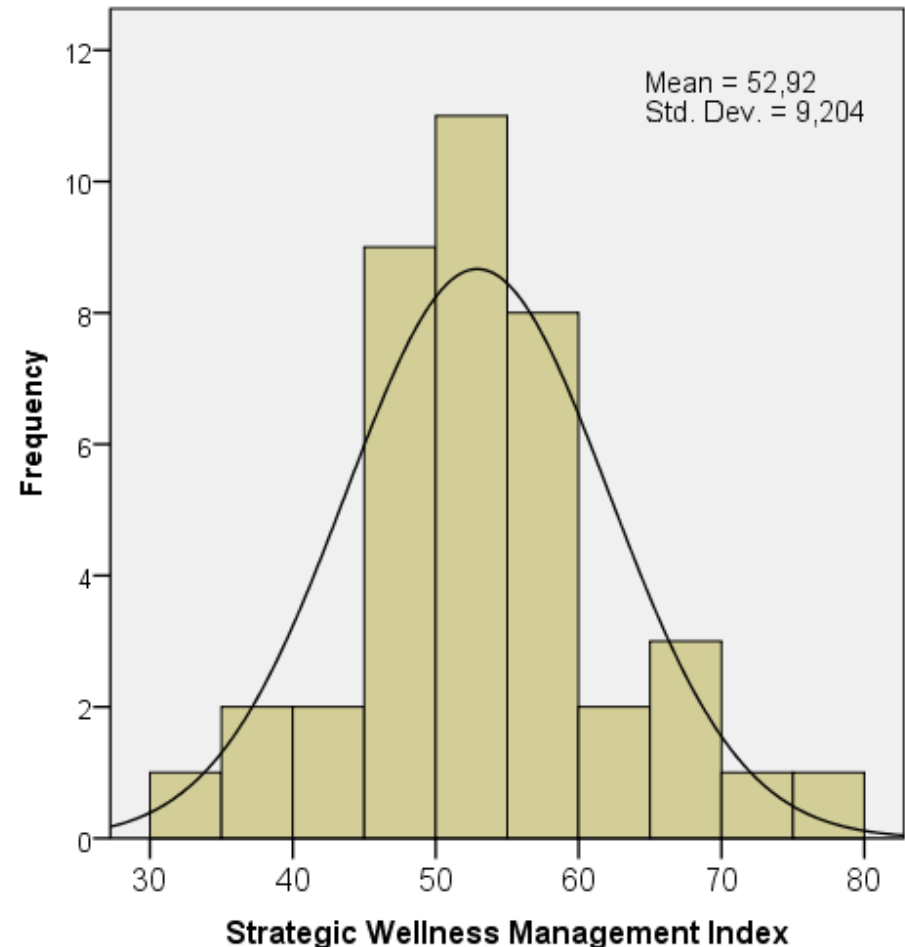
# Results



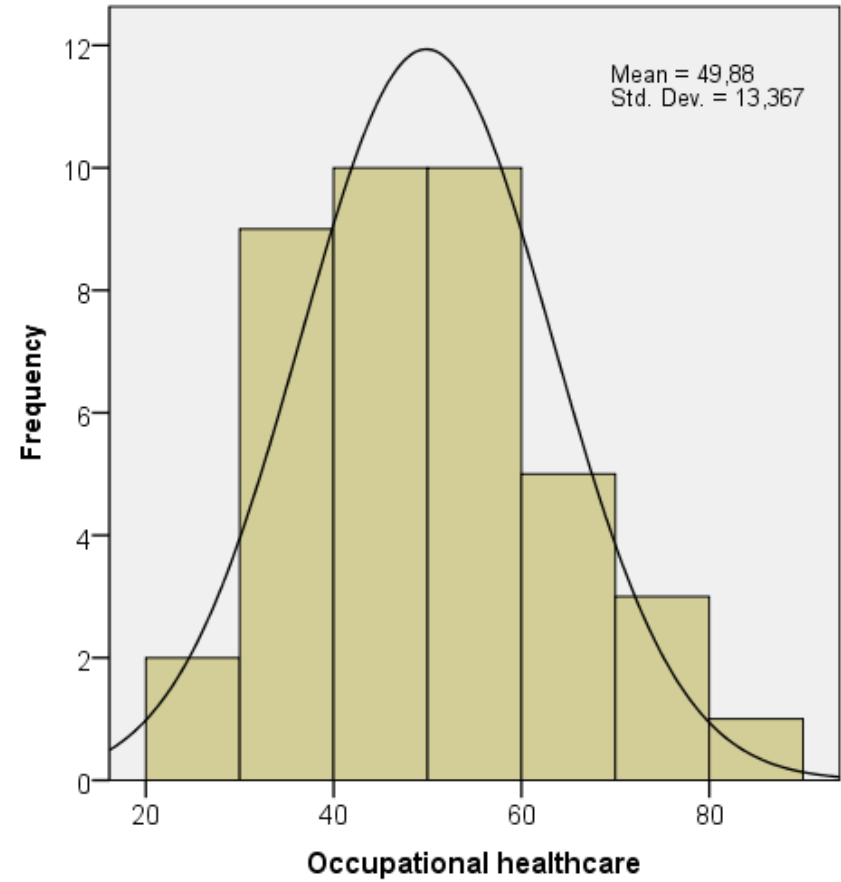
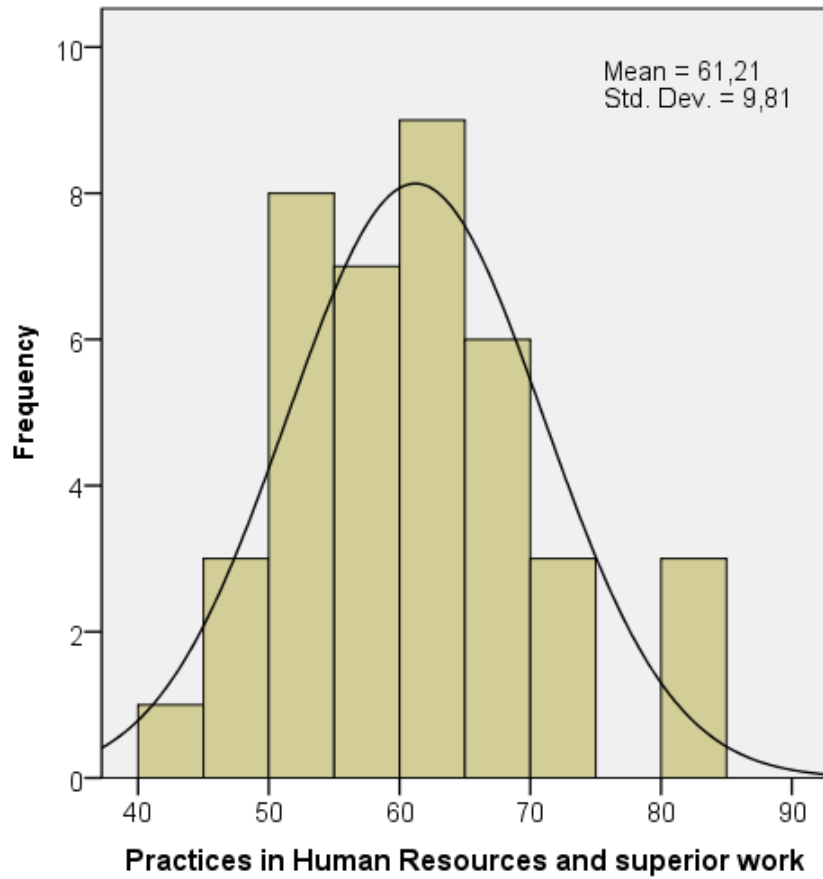
# Managing well-being **at** unit level

The results demonstrated great variation between units **for** Strategic Wellness Management Index, SWMI, ( $52,9 \pm 9,2$ ).

The employer had distinct policies in all areas of Well-being at work, but the everyday practices were different.



# Managing well-being: Practices in Human Resources and **Superior** work, Occupational healthcare

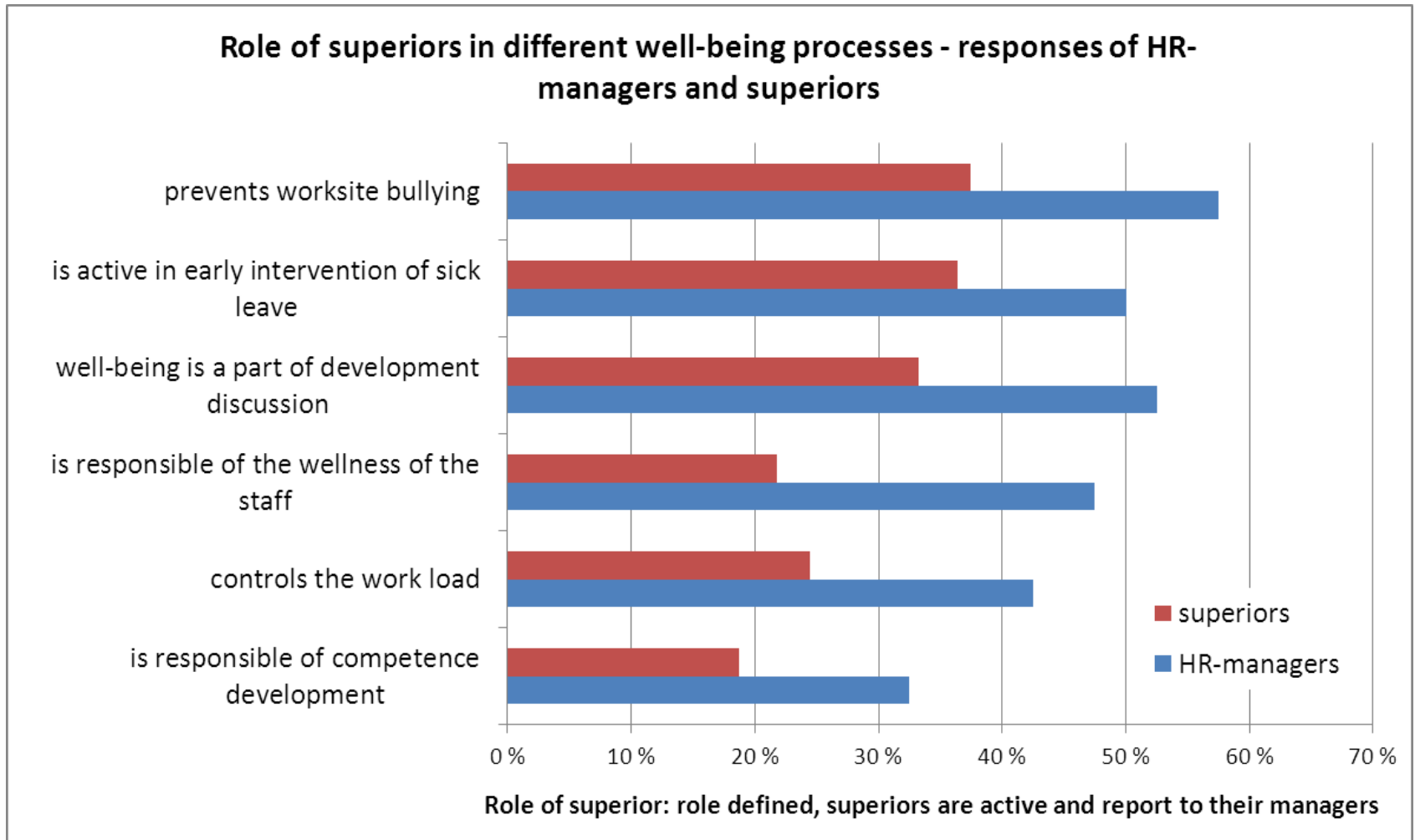


# Sick leave

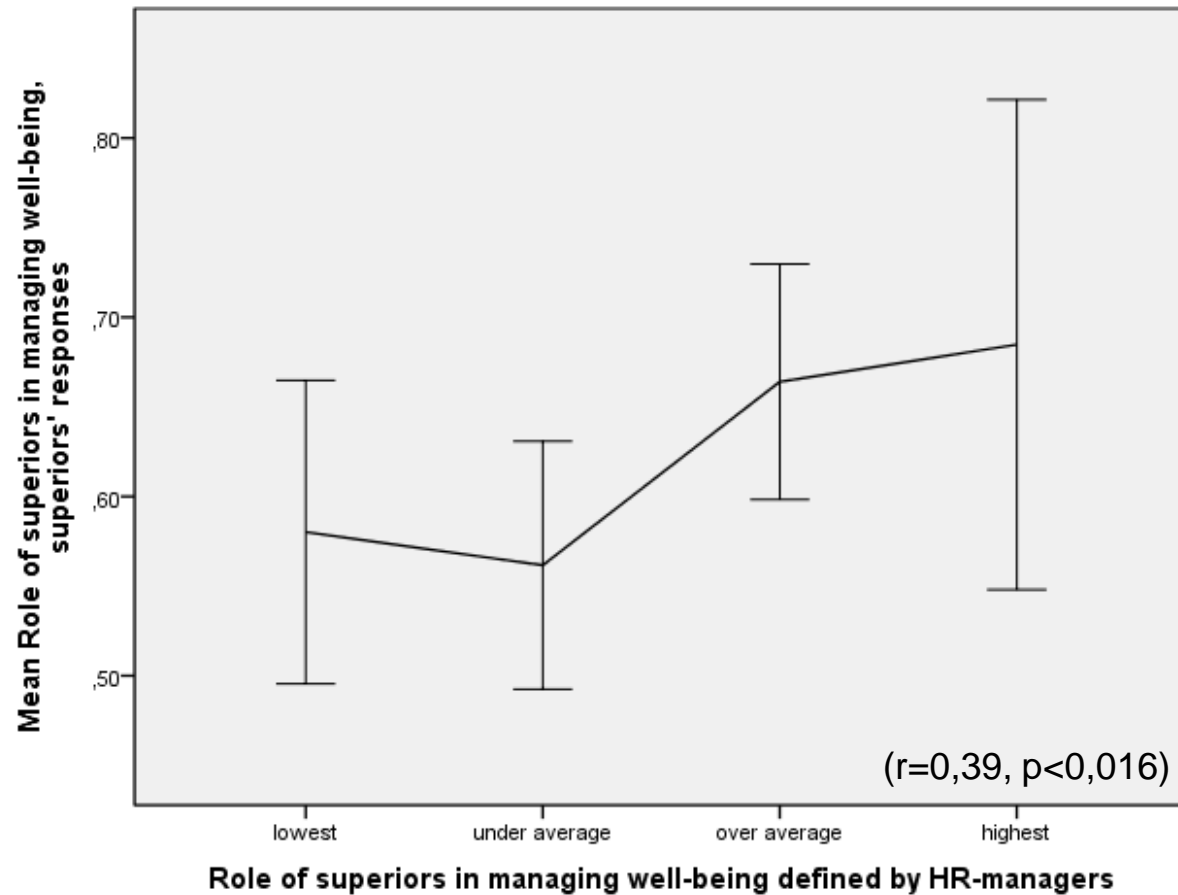
average 4,6 1,5% of working time in 40 units

- Active joint planning and reporting procedures in Occupational Health Services and activity in Health Promotion interventions correlated with lower sick leave
- Superior's role in return to work process and activity of management in WBM steering group were related to higher absenteeism rates in working units
- This regression model explained 34,7% of the variation in sick leave in unit level.

# Role of superiors

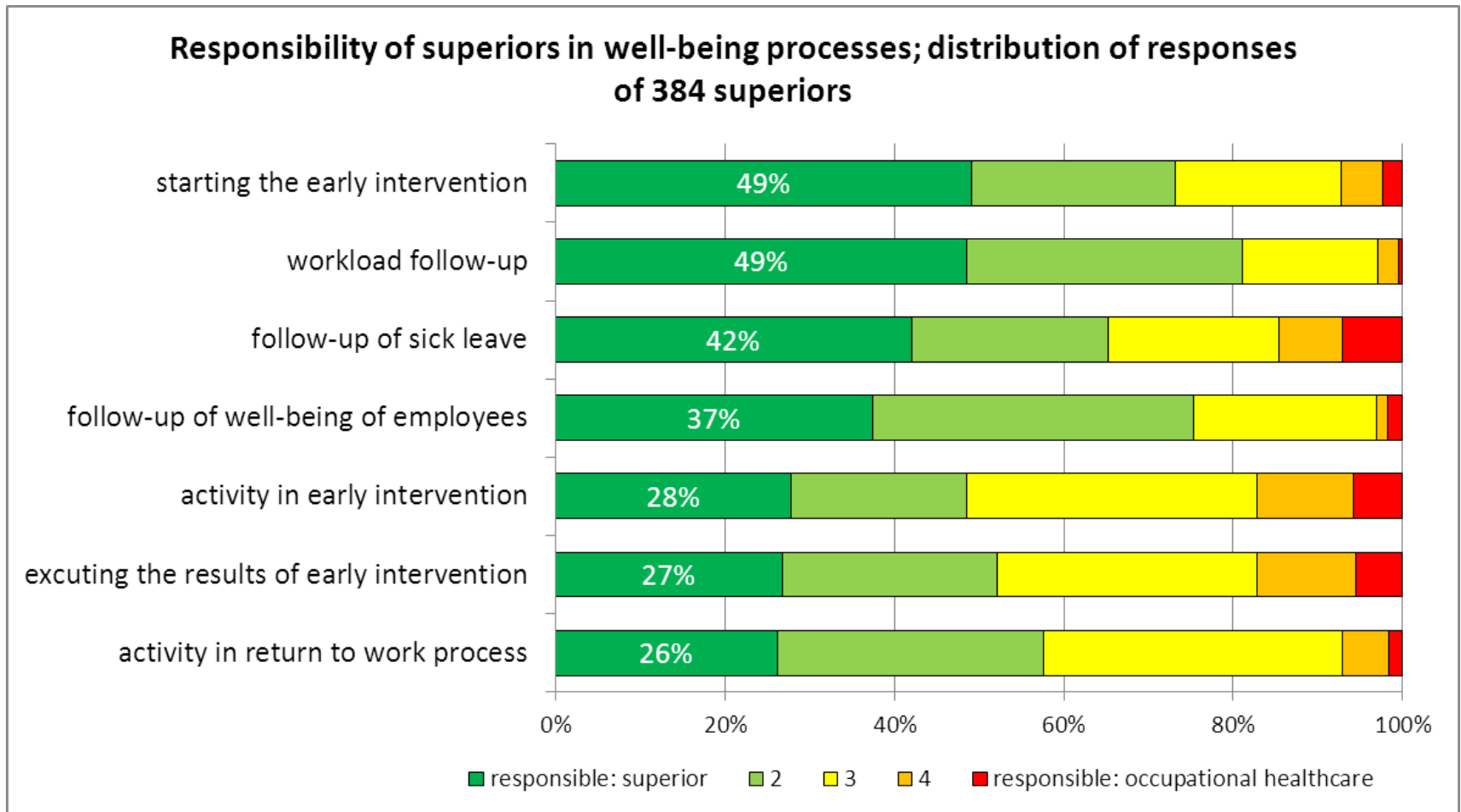


# WBM polices vs. role of superiors



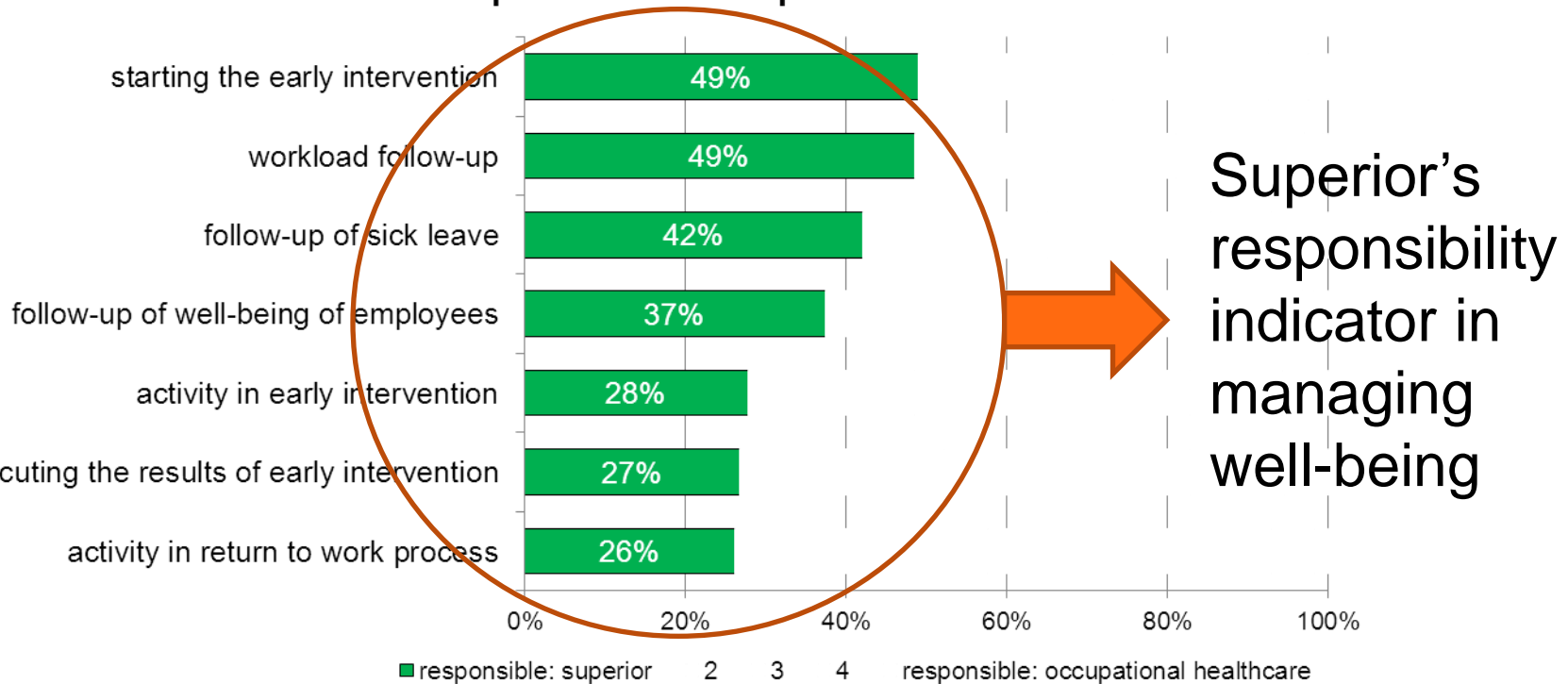
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# Responsibility of superiors in WBM-processes



# Responsibility of superiors in WBM-processes

Responsibility of superiors in well-being processes; distribution of responses of 384 superiors

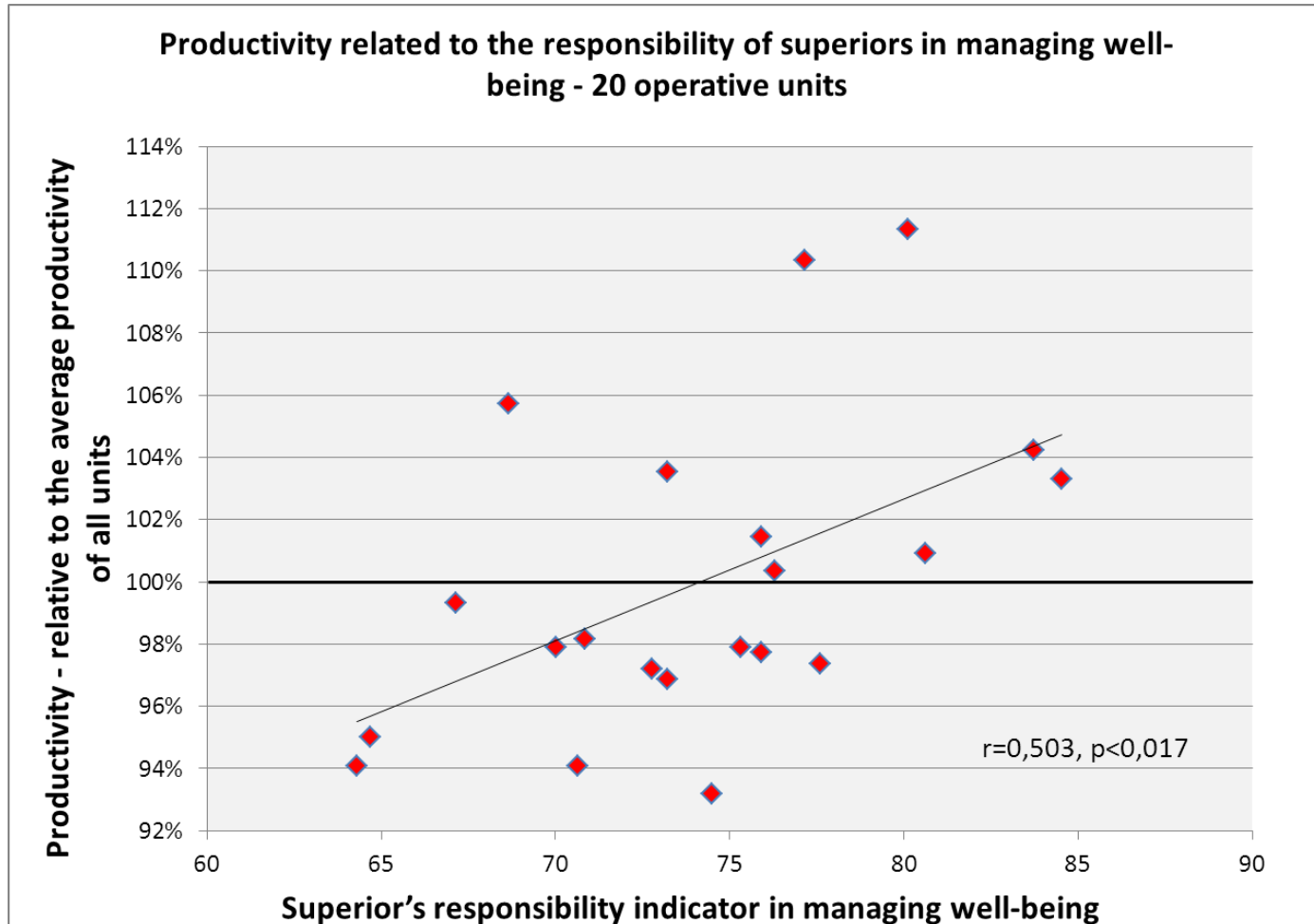


## Superior's responsibility indicator in managing well-being **correlated with:**

- job satisfaction ( $r=0,520$ ,  $p<0,001$ ),
- satisfaction **with** superiors leadership qualities ( $r=0,501$ ,  $p<0,001$ )
- trust to immediate superior ( $r=0,527$ ,  $p<0,001$ )
- These results from all units (40)



# Superior's responsibility indicator in managing well-being **correlated** with productivity



# Business case for well-being

