Trends in workers compensation claims reflect what is happening in individual workplaces and society more generally. In Australia and elsewhere, the rate of claims has been declining for decades, most likely due to the reduction of risks associated with the automation of work, but we in occupational health and safety like to think improvement in OHS management has helped too.

During major change in an industry such as the privatisation of prisons, or the amalgamation of councils, workers compensation claims rates often rise, although this is not inevitable. I have seen good managers hold health and productivity indicators such as absenteeism, morale, quality and claims rates pretty steady during major change. To do so, they have maintained a focus on this goal throughout the process.

During recessions, claims rates tend to go up. There are a variety of factors at play here. One is that people who have lost their jobs, or know they are likely to, may be more likely to claim in order to supplement their income. In other workplaces, people may do the opposite and hide illness to protect their employment. We will soon be at the point where workers compensation claims for diseases are more frequent than those for injuries. The question for councils and other employers is how well are your health and safety management systems geared up for preventing and managing mental illhealth, slow onset musculo-skeletal disorders, heart disease, and type 2 diabetes?

Stress at work can contribute to all of these. A famous study in England, the Whitehall study, has been measuring the extent to which some 10,000 public servants are exposed to stressors and tracking their health outcomes, especially coronary heart disease, for over 12 years now. The study has found that workers exposed to chronic work stress have a 68% higher risk of coronary heart disease than workers not exposed to stress at work over a long period. Furthermore, the study has shed light on how stressors at work cause illhealth. About two-thirds of the increased risk is due to stressors having a direct effect on the neuro-endocrine mechanisms of the body and thereby causing increased blood pressure, heart rate, blood sugar and other effects. Over time, this leads to poorer cardiac health. The other third arises from the way we react to pressure at work, which includes adopting unhealthy behaviours such as excessive drinking, unhealthy eating, smoking and not exercising.

Workplace stressors which are important can arise from the way jobs are designed: the demand, or workload, control (how much decision-making latitude someone has in their work) and support - the extent that the organisation provides the resources needed to do the job. Problems can also arise from people management: role clarity (the extent to which people know what their role is, how it relates to others and how it contributes to achieving the overall goal of the organisation), relationships at work and change management. Poor relationships at work are the commonest cause of problems and can include conflict with supervisors, between peers, with customers and other stakeholders.

Mindful of the surge of chronic diseases about to swamp our health services the National Health and Hospitals Reform Commission has called for workplaces to do much more to promote health, saying, “Business and employer groups have also become increasingly engaged in health promotion and prevention. This makes sense given the close relationship between a healthy workforce and economic productivity. At the level of individual businesses, the traditional focus of workplace health on occupational health and safety issues is expanding to include new programs targeting wellness, health promotion, risk screening and self-management for workers with chronic diseases”.

Which is true, but what the interim report of the Commission does not say is that bolting health risk
screening and health education onto traditional OHS programs is not the best way of dealing with these multifactorial problems. We need integrated workplace health programs which tackle organisational factors, as well as individual factors. An American study, WellWorks, showed that if you approach workplace health by dovetailing strategies to deal with employer obligations to provide a safe and healthy working environment with education strategies to assist employees to make changes to their own health behaviour, you get the best result. The authors hypothesised that this may be because if employees see employers making an effort to create healthy work environment, they feel an obligation to make an effort to do their bit.

Associate Professor Tony LaMontagne, an Australian academic, reached the same conclusion about occupational stress prevention after reviewing ninety studies published between 1990 and 2005. He found that what worked best was to combine strategies which optimised the quality of the working environment by improving work design and people management, with strategies which aimed to assist and support individuals to cope better at work.

So if you are a manager in a council and your antenna is telling you morale is slipping and tensions are rising, what can you do? Here are some ideas:

- **Set some specific goals** - What will be the organisational impact of not doing anything and letting the quality of the working environment slide? What would be the benefits to your organisation of having a healthier, more satisfied workforce? Too often OHS is just something we do, not properly strategically aligned to the organisation’s overall goals.

- **Decide which health and productivity indicators are appropriate for your organisation:** absenteeism, employee opinion, quality, productivity, utilisation of employee assistance program, workers compensation claims rates, sustainability of the workforce? Select a few, set some targets for the organisation as a whole and for senior managers as a part of the key performance indicators.

- **Assess the quality of your working environment and develop recommendations for improvement.** The UK Health and Safety Executive developed voluntary stress management guidelines in 2005. OHS authorities in Australia are starting to follow suit. Check that your OHS personnel are up-to-date with psycho-social risks and are familiar with these tools. Ask them to conduct a baseline audit, with external assistance if needs be, if they are not yet comfortable with the methodology. Usually this involves collecting and analysing existing statistical information, and conducting a survey if needed. This is followed by interviews and focus groups, to collect qualitative information. Finally workshops are held to develop improvements to the way work is organised, and the way people are managed.

- **Check that you are getting the most out of your employee assistance program.** Do employees know about them? Do supervisors know of them and how to guide people to them? Is the Employee Assistance Program assisting to mediate in situations where conflict has not been able to be resolved and mediation is required? Would a peer support and referral program be appropriate? Do you get aggregated information back from the EAP to help you understand common workplace problems and where they are occurring in sufficient numbers to warrant further investigation?

Councils around Australia are just starting to come to terms with occupational stress and chronic disease. Tasmania could show leadership here and be the first to introduce an industry best practice program.

Professor Niki Ellis was born in Launceston and graduated from the Tasmanian University Medical School in 1978. She learned how to be an occupational physician whilst employed at the Tasmanian Department of Health in Hobart. She is now the Deputy CEO of the Australian Health Workforce Institute, University of Queensland. Her television show, Stressbuster, was shown on the ABC last year.
health and wellbeing

Opt-in. Wellbeing the Central Coast Way

Central Coast and North West Tasmania generally has a high incidence of preventable chronic health problems. Despite the good intentions of many, the problem is becoming worse.

The Central Coast Council believes that a way forward is to mobilise and support the community to take more collective and individual responsibility for our own health and wellbeing. The Council, with the support of some key community and health promotion groups and the private sector, has developed a comprehensive and integrated annual program of physical, nutritional, social and health promotion activities that will contribute to a healthier, happier, active, more informed and socially inclusive community.

The Tasmanian Community Fund will be the major program funding partner for the next three years. The Heart Foundation, Cancer Council, and Life. Be In It, Eat Well Tasmania and other organisations have agreed to become the program’s health promotion partners. The Tasmanian Community Fund will be the major program funding partner for the next three years. The Council is also in the process of finalising some commercial sponsorship and supplier arrangements. The Council will act as facilitator to co-ordinate and align the efforts and resources of our program partners and community groups to deliver health and wellbeing outcomes. The program will run over three years initially, with the Council taking a leading role.

The key themes of the program are physical activity, nutrition and social inclusion. The annual program will feature a range of sporting, recreation, social and lifestyle activities. The Opt-in healthy cooking program will be the flagship for the overall program and will include cooking demonstrations, cooking classes and healthy eating programs at schools and community facilities and at community and sporting events and festivals. Monthly healthy food demonstrations will occur to give people the opportunity to learn about nutrition, using Tasmania’s fresh local produce.

Opt-in Corporate Games

As part of the program, the Central Coast Council is issuing a challenge to all businesses to a ‘Corporate Games’ to be held at The Ulverstone Recreation Centre, Flora Street, Ulverstone, on 13 November, from 6.00pm - 9.00pm. Teams of eight will compete in a variety of modified games such as basketball, soccer, netball and an egg and spoon race. The emphasis is on fun and family, and teams should consist of a mixture of male and female, both young and old. A trophy will be presented to the winning team, and a BBQ will be provided. The cost is $40.00 per team.

To register your team, contact Kerry Gillard at the Central Coast Council on (03) 6429 8927, or email kerry.gillard@centralcoast.tas.gov.au by 13 October.

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Planning That Priorities Walking

Planning that prioritises walking, cycling and public transport ahead of motor cars is the centrepiece of Healthy Spaces and Places, a major national initiative, unveiled on 12 August at the annual Built Environment Meets Parliament Summit at Parliament House, Canberra.

In an Australian first, health, Local Government, planning and design experts have worked together to produce a national guide for creating sustainable communities in which healthy living is a key priority. Funded by the Australian Government Department of Health and Ageing and announced by the Minister for Indigenous Health, Rural and Regional Health and Regional Service Delivery, Warren Snowden, Healthy Spaces and Places is a unique collaboration between the Australian Local Government Association (ALGA), the National Heart Foundation of Australia and the Planning Institute of Australia (PIA).

ALGA President Clr Geoff Lake said the recent announcement by the Australian Government of the $1 billion Community Infrastructure Program underlines the importance of designing and creating healthy environments to nurture active and vibrant communities. “I strongly believe councils and governments can work together to plan sensitive, well-designed facilities and public spaces that will meet the needs of local residents now and into the future,” he said. “Healthy Spaces and Places achieves this important goal.”

For more information about Healthy Spaces and Places, go to www.healthyplaces.org.au.

Are You Safe at Work?

Nanotechnology, eating well at work, disability in the workplace and safe driving practices at work are just some of the many topics on offer during Safe Work Tasmania Week 2009, which runs from 25-31 October.

As part of Safe Work Tasmania Week, WorkCover Tasmania is running a series of free seminars and workshops across the state and is encouraging everyone to get involved. A program of events for the week is now available which outlines all of the free occupational health and safety focused seminars and workshops on offer. Events will be held in Hobart, Launceston and Burnie.

Now in its 14th year, Safe Work Tasmania Week aims to get people talking about and acting on workplace health and safety issues and presents a focused time for workers and employers to make a specific effort to talk about safety, and what is and isn’t working in their workplace.

In 2008, 10,017 Tasmanians were injured at work - equating to 27 Tasmanians injured at work every day - demonstrating that there is a great deal of room for improvement. By participating in Safe Work Tasmania Week and increasing your OHS knowledge, you could avoid becoming one of these injury statistics. No one wants a workplace injury and its potentially serious consequences, such as losing your job, your business, your workers, or even your life.

For the program of events, or to register, visit the WorkCover website at www.workcover.tas.gov.au, or call Callum on (03) 6233 3928.
Bernie Links Community to Valuable Services

Bernie the Blue Tongue Lizard has been the perfect mascot for the Burnie City Council, aimed at linking local families with young children with council and community activities, programs and services.

The successful project was showcased to more than 1,500 delegates at the 10th National Rural Health Conference in Cairns recently. Mobile Family Support Services Project Officer, Meg Arvier, had the pleasure of escaping the Tassie chills and said the conference was a great networking opportunity which helped place Burnie on the national map. Meg made a special presentation to more than 70 delegates, revealing why Bernie had been so successful since its inception.

Meg said the conference was a great chance to network with lots of people from all over Australia. “After my presentation, I received a lot of questions about Bernie, which continued throughout the entire conference,” she said. “While there aren’t any other projects similar to Bernie in Australia, there were a lot of other ones that were also focused on doing fun things which reach out to people who do not use mainstream services.”

The National Rural Health Conference provided the opportunity for participants to exchange views and discuss research reports, practical case studies and arts-in-health activities, and to also take part in an exhibition.

National Squalor Conference

People who live in squalor come from all backgrounds and age groups. They may reside in their own homes, rental accommodation, or public housing and may have a mental illness, memory loss, or confusion associated with dementia, or a disability. They are most likely to be the most marginalised and disadvantaged people in our society.

After researching best practice nationally and internationally, Catholic Community Services have developed an effective service model for squalor, including liaison with Local Government and providing ongoing support. In order to bring a greater focus to this issue, the inaugural National Squalor Conference, Pathway through the Maze, will be held in Sydney from 5-6 November.

The conference will focus on sustainable long-term interventions, through exploring the experiences of severe domestic squalor within themes such as social isolation, societal structures, sustainable housing, the moral cost and the need for collaboration.

Full details are available online at www.nationalsqualorconference.com.au.