

Liechtenstein/Switzerland

Community Offices, Munchenbuchsee

Background

Munchenbuchsee is a community on the outskirts of Berne. Most of its 9,600 residents work in Berne or in the agglomeration. The day-to-day running of the community is handled by the community council. It is presided over by the chairman of the community council. As well as the executive department, the community offices consist of a financial department, a construction department and a public security department. 45 members of staff, roughly four of whom are always trainees, work in two separate buildings. The community offices are not responsible for the social services and the public works department. The latter is responsible for maintaining the local road network and the community's outdoor public facilities. The social services are an independent section responsible for different communities in the area. As is the case with the public works department, it is not directly liable to the community and, therefore, is not answerable to the community offices. The majority of decisions, particularly those taken in the construction department and the department for public security, are also determined by the community council. A motion proposed by the community offices is often amended by the community council. This has frequently resulted in an increase in the employees' workload in the community offices. As a result, the current chairman of the community council decided to adopt a holistic approach in order to integrate workplace health promotion into the community office's strategy.

Project infrastructure

Control of the project was placed in the hands of the community council. The council's task was to select the instruments to be used for an analysis, to weight the results of the latter and to determine the measures to be taken. In addition, the steering committee was also responsible for nominating the project leader as well as those persons responsible for implementing the health-promotion measures together with the monitoring and the optimisation of the project procedures. The chairman of the community council assumed the task of project management and was responsible for the project budget and other means required. He set up a working group consisting of the community recorder and four co-workers from different departments in the community offices and coordinated the tasks that arose.

Clear objectives

- The health of all co-workers is the responsibility of senior staff
- An improvement in the general welfare of all co-workers at the community offices
- A reduction in lost working hours
- The integration of workplace health promotion into the management system of the community offices in line with the principles of new public management
- The development of a modern management culture that would promote health.



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External support

A Suva (Swiss National Accident Insurance Fund) expert was consulted for the implementation of the analysis of resources and problems. This expert carried out an analysis of the problems, evaluated this analysis and presented the results to the steering group, the project leader and the project group. He also chaired all meetings that were important for the project group and assisted the group when planning the initial measures. Suva also assumed responsibility for monitoring the goals as well as for solving any problems that arose in the course of the project. External consultants recommended by Suva were also consulted for the actual implementation of the health-promotion measures.

Subjective needs analysis

The preparatory and analysis phases chaired by Suva took place as follows: First of all, the employees at the community offices were informed verbally about the course of the project. This was followed by the internal formation of a working group (q.v. above) and the designation of an internal manager as a multiplier. This multiplier was given training in advance by Suva experts. In a third step, a salutogenetically oriented, subjective working analysis was carried out among all co-workers using the SALSA questionnaire developed by Professor Ivars Udris. The SALSA tool is a well-known instrument used in

working psychology to identify the following factors of influence:

- General well-being: among other things rooms for breaks, exercise at the workplace
- Social resources and workloads: among other things staff-oriented behaviour by senior staff, the social support of staff by their superiors, the social support given by co-workers
- Organisational resources, or workloads: among other things wages, working hours, opportunities for training, internal information, rooms used for breaks, the holistic aspects of duties, the variety of duties
- Resources and workloads by environmental factors: among other things noise, lighting, room temperatures, waiting times, the quality of computer screens and other pieces of technical equipment

The questionnaires were evaluated by Suva experts and the results were weighted. In order to extend the depth of the analysis, twelve co-workers were also interviewed verbally on the same topics. The members of the steering organ as well as the chairman of the community council oriented the staff on the results obtained and the measures for action derived from them. Internal figures on lost working hours were also used to arrive at the measures required.

Implementing WHP

The following health-promotion measures were implemented:

- Team formation: all co-workers were trained by an outside expert in order to promote their social skills and ability to work in a team
- Development of an in-house communication system: a new structure was introduced for internal communication; in future, internal information is also to be electronically coordinated both temporally and in line with hierarchy
- Restructuring and regulation of trainee training: the attention given to the trainees themselves as well as the trainees' training schedule were set forth in the form of regulations together with all lines of responsibility involved from the first moment of contact through to their passing their final examination; the trainees' tasks, duties and possibilities were set out in a list
- Integration of the information and trainee training system in the social services: trainee training at the community offices and in the social services was coordinated and/or harmonised
- Introduction of discussions in accordance with the principle of management by objectives: target agreements were introduced for all members of staff in order to promote dis-

cussions and thus relations between superiors and their staff

- Promotion of staff participation in decision-making processes: staff commitment was promoted by their involvement in the community offices' decision-making processes

Improvement areas

The return rate for the questionnaires amounted to 92%; given this high degree of compliance, the evaluation was representative of Munchenbuchsee's community offices. The positive aspects of staff satisfaction were in the majority and were better than the Swiss average. The majority of the staff enjoyed the work they did. The scope as well as the variety of demands made by their duties at the community offices proved to be wide in general.

Potential improvements were largely identified in the following areas:

- Cooperation between the departments
- General internal information policies and information media
- Trainee training
- Social climate
- Senior staff managerial practices
- Working procedures
- Ongoing staff training and further training
- Introduction of new members of staff
- Promotion practices
- Customer loyalty as well as contact with the general public

In summary, the most important factors were the practices of senior staff as well as internal communication. The primary goal was to implement measures for improvement in these areas.

Learning lessons for the future

The example of the community offices in Munchenbuchsee shows that health-promotion measures can only be implemented if the philosophy of workplace health promotion can be integrated into the management system. The community offices succeeded in achieving this goal. The trainees are now trained and promoted on the basis of written guidelines not only in the community offices in Munchenbuchsee but also in the social services of the surrounding communities. A range of further training opportunities is now available to the staff, particularly in the field of team formation as well as the promotion of social skills. New members of staff are introduced to their duties in accordance with a check-list. All these measures have had a positive effect on staff and thus also on customer satisfaction. In this way, the community has also assumed the function of a poster child for the population.

In order to guarantee that this will continue, workplace health promotion must, however, not be seen as a one-off project but must be integrated into all business processes. This was introduced and implemented thanks to the commitment of the chairman of the council.