Summary

The GDA work program "Healthy and successful work in the office" was carried out nationwide in the years 2008 to 2012 by the bodies responsible for the Joint German Occupational Safety and Health Strategy (GDA). Work program objectives were formulated at two levels: the promotion of effective prevention culture at company level and the development of adequate health competence among executives and employees.

The project plan called for three phases: an initial survey in the period from April 2010 to December 2010 and a follow-up contact in selected companies in the period from January to September 2012. In the period between the first and the second contact the companies had the opportunity to carry out actions that were derived from the initiated processes. The work-program had to provide information, advice and training to support the companies during this phase.

During the term of the work program inspection services have carried out 16,837 inspections, primarily in small and medium-sized enterprises. The site visits were supported by a joint public relations work, which, among other things, consisted of the issuance of ten information sheets, nine publications in journals and nine conferences and several regional events.

The site visits were evaluated on the basis of standardized documentation forms. As a result most significant indicators for occupational safety and health were recorded. Most of the establishments were visited only once. Among the 11,965 evaluated site visits 9,745 were unique inspections. 2,220 companies were visited twice.

The main results, based on the total sample of 11,965 operated, were as follows:

Nearly half of the establishments visited (49.5%) did not meet the basic needs of occupational safety and health or they showed deficiencies.

In 67.8 percent of all the establishments visited the prevention culture was found as "under-developed". They met no more than three of the 11 indicators for prevention culture. For only 2.6 percent of the establishments the prevention culture has been determined "developed". These companies complied with more than three indicators for prevention culture. Therefore it was supposed that the employer needed subject-specific advice on how the culture of prevention can be developed. 29.6 percent of the establishments belonged to the "advanced" category. For them it was found that prevention culture and health competence were actively promoted by the management and were well developed.

By combining the results with the minimum requirements for occupational safety and health and the prevention culture three types of stages could be distinguished. Half of the companies were indicated as the type C because they did not meet the minimum requirements for occupational safety and health. Slightly more than a quarter belonged to type B (without any shortcomings in the minimum requirements for occupational safety and health, but appeared only "developing" or "underdeveloped" in the prevention culture) and nearly a quarter belonged to type A (without any
complaints in the minimum requirements for occupational safety and health and exercising a "progressing" prevention culture).

A comparison sample made possible the comparison between the data of the initial survey and the second inspection. This was based on the selection of 2,220 companies that had a higher need for advice or showed deficiencies concerning occupational safety and health. These are the most important results:

56.1 percent of the inspected establishments examined in the comparison sample had not met the minimum statutory requirements for occupational safety and health in the initial survey, in the second visit it were only 44.4 percent.

In terms of indicators for prevention culture and health competence during the initial survey in 66 percent of the establishments an “underdeveloped” stage was found. After the second inspection the proportion of these companies had decreased to 58 percent. The stage of “developed” prevention culture was found in 3 percent of the establishments. This proportion remained about the same. In the first survey the stage of "advanced" prevention-culture was found in 30 percent of the companies. This proportion increased to 39 percent in the second visit.

Among all indicators for prevention culture and health competence the most common improvements observed concerned the indicators "health prevention approach in the industrial medicine", "support for behavioural prevention of musculoskeletal disorders", "executive training courses" and "training courses in psychoskeletal competence ". Few changes were observed in the criteria "management system for occupational health and safety" and "workplace health promotion".

In the initial survey 56 percent of the establishments were assigned to type C, after the follow-up visit there were only 44 percent. The proportion of companies assigned to type B increased from 22 to 25 percent. The proportion of type A enhanced from 22 to 31 percent. The type's level could be improved in 19.3 percent of all establishments visited twice.

The evaluation results show, that the GDA work program "Healthy and successful work in the office" has achieved its objectives. This affects not only the number of visits and the focus on small and medium sized enterprises. It also could be demonstrated that the involved bodies responsible provided a significant contribution to the reduction of defects in the implementation of health and safety requirements. Furthermore they made considerable contributions to the promotion of effective prevention culture at company level and to the development of adequate health competence among executives and employees.

The concept of controlled cooperation on the basis of a jointly defined work program has proven itself in practice. The experience gained in the planning and start-up phase shall be included in the new GDA target period beginning in 2013.