

Research Summary: Research Modelling the impact of the WorkHealth program

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MODELLING THE IMPACT OF THE WORKHEALTH PROGRAM

Purpose of research

The purpose of the modelling work undertaken in this report is to forecast the effect of the WorkHealth program on absenteeism, presenteeism, and compensable workplace injury. By doing so we are able to infer the program's effect on the productivity of Victorian workers, and enable evidence based policy decisions to be made.

Implications for WorkSafe

This report provides WorkSafe with an opportunity to better understand the potential productivity impacts of the WorkHealth Program, and highlights potential areas of the WorkHealth program where optimization is likely to help achieve the targeted goals set for the WorkHealth program. It enables WorkHealth to better understand the effects of each of the program elements, and their impact on the health of Victorian workers. The analysis predicts that the current roll-out of the program is likely to achieve the set program targets for absenteeism and compensable workplace injury. In addition, scenario analyses demonstrate that increasing the uptake of the WorkHealth Coach program elements by those eligible could double these effects. The outcomes of this report allow WorkHealth to make informed decisions as to the future allocation of funding, and demonstrates the likely return on previous investments made into the program.

Issues addressed

This project sought to forecast the effect of the WorkHealth program as implemented to June 30 2012 on the Workhealth check participants' short-term (1-2 year) levels of absenteeism, presenteeism, and compensable workplace injury, based on the uptake of the various elements of the WorkHealth program. It also sought to use scenario analyses to explore the effect of potential changes to uptake of specific WorkHealth program elements on these productivity outcomes.

Research findings

For the 560,000 Victorian workers who underwent a WorkHealth check between the start of the program in 2009 and June 30 2012, we predict a potential reduction in absenteeism of around 11% within the two years following the WorkHealth check. As the uptake of the WorkHealth grants and WorkHealth Coach and Life! Taking action on Diabetes programs increased over time, for those Victorians participating in WorkHealth checks between January 1st 2012 and June 30th 2012 a reduction in absenteeism of around 15% was forecast.

Reductions in claims for compensable workplace injury/illness were also forecast- at around 3% for all those participating in the WorkHealth check program, and around 5% for those participating between January 1st 2012 and June 30 2012. Similar reductions in presenteeism were forecast- at around 3% for all those participating in the WorkHealth check program, and around 5% for those participating between January 1st 2012 and June 30 2012.

The potential impact of the WorkHealth program on productivity outcomes is strongly dependent on both the effectiveness of the individual program elements, and their reach and uptake. The model demonstrated that increasing uptake of the WorkHealth grants and WorkHealth Coach and Life! Taking action on Diabetes programs even further (to 50% and 30%, respectively) has the potential to double the impact on productivity measures of the overall WorkHealth program. Further scenario analyses demonstrated that increasing the effectiveness of the WorkHealth program elements (such as by increasing uptake of the most effective WorkHealth grant activities, and encouraging completion of the WorkHealth Coach and Life! Taking action on Diabetes programs) has the potential to further improve productivity beyond the original targets for WorkHealth.

Research conclusions

Based on the current coverage of the WorkHealth program elements, and the best available evidence on effectiveness of programs similar to the WorkHealth program elements, it is expected that the WorkHealth targets for absenteeism and compensable workplace injury/illness will have been achieved.

In addition, we forecast complementary improvements in presenteeism, which was not originally specified as a target within the WorkHealth program but is now well recognised as also contributing significantly to productivity savings. Achieving maximum productivity benefits for Victorian industry and workers will require access to all WorkHealth program elements by workers across all industry sectors, especially those shown to have the poorest indicators of chronic disease risk. The scenario analyses indicate that continuing to optimise the uptake and reach of the most effective elements of the WorkHealth program will enable the productivity targets to be surpassed. A full economic analysis would be useful in order to more fully understand the productivity impact of the WorkHealth program. It will also be important to collect empirical data on absenteeism and worker's compensation claims from participating workplaces to monitor the actual impact of the program.

Methods

Estimation of these impacts of the WorkHealth program was done using a forecasting model, in which data collected during the WorkHealth program is combined with information from the scientific health literature. Estimates of the uptake of each WorkHealth program element come from the current program evaluation data. An estimate of the percentage change in absenteeism, presenteeism and compensable workplace injury/ illness associated with participation in each WorkHealth program element is derived from a review of the literature evaluating the impact of programs similar to each of the WorkHealth program elements. An average effect was derived from the highest quality studies. The most robust estimates were derived for absenteeism, followed by compensable workplace injury/ illness and presenteeism. Based on the flow of individuals through the model, an overall population estimate of the percentage change in absenteeism, presenteeism and compensable workplace injury / illness was made.

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Where can I get further information?

For a copy of the full report, contact:
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Accompanying documents to this report

Title: *Research Project 3 – Modelling the
Impact of the Workhealth Program
Full Report*

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