

Guidelines on Early Support

1. Occupational Health –a framework

Occupational health implies that the work is safe, healthy and motivating. Good and motivating leadership, the work environment, employee wellbeing and professional competence contribute to a better occupational health.¹

Wellbeing at work is a framework, as shown in Figure 1.² These guidelines focus on early support with the purpose of helping managers and employees to identify problems that affect the ability to work at an early stage.

The objectives of the early support model at Hanken are:

- to sustain employee motivation,
- to improve the readiness to deal with problem situations in the workplace,
- to reduce sick leave, and
- to reduce cases of early retirement.

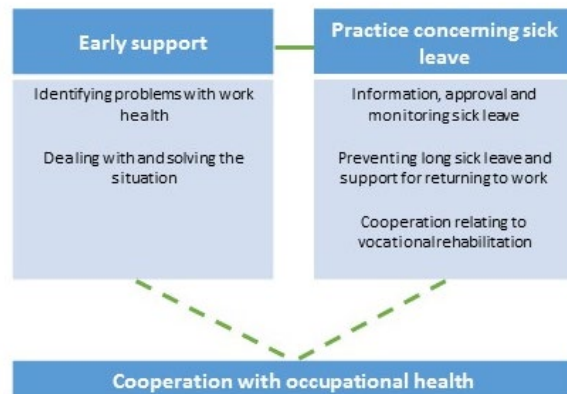


Figure 1 Template for good workplace health

2. Active promotion of occupational health and early support at Hanken

Early support is an integral part of Hanken’s daily operations and include preventive, reactive and rehabilitating activities. Preventive activities can be, for example, to encourage employees to take care of their health. Purposeful and ergonomic work tools, the ability to develop skills, and exercise and other ‘Feel good’ activities also promote good working health.

Hanken will support the staff’s skills development and provide the best possible conditions for employees to perform their duties. Central goals include developing the internal communication and sense of involvement within the organisation, as well as to take measures that improve occupational health and safety, and general safety.

3. Who will intervene?

Heads of Department, Head of Subject and managers within the administration are responsible for implementing the early support model. The immediate supervisor is responsible for remedying the employee's problems. The HR unit, occupational safety, union representatives and occupational health services provide managers with support.

It may be the employee, the manager, colleagues, the occupational safety officer, the HR unit staff or occupational health services staff who is the first to notice that there are problems that present a risk of impaired work ability.

4. When should you intervene?

Regular discussions, development talks, workplace climate studies and workplace investigations conducted by the occupational health services act as indicators of occupational health.

¹ Social- och hälsovårdsministeriet, *Arbetshälsa*, <http://stm.fi/sv/arbetslivet/arbetshalsa> (visited on 9.9.2022)

² Varma, *Hyvä työnkyky – Työkyvyn tukemisen malli*, <http://docplayer.fi/3687426-Hyva-tyokyky-tyokyvyn-tukemisen-malli-varma-fi-tyohyvinvointi.html> (visited on 9.9.2022)

Not all problems have to do with illness. A deterioration of work ability may be temporary, progress in phases or be permanent. Sometimes there are many factors that affect each other and together lead to reduced occupational health. Underlying causes can include:

- Disease or symptoms
- Discontent with the nature of the tasks or career development
- Problems at work community level, harassment or bullying
- Unclear tasks and lack of leadership
- The requirements of the tasks and the employee's own ability to perform not corresponding with each other
- One's own life situation
- Substance abuse

The solution depends on the nature of the problem. However, it is always important to intervene as early as possible. There is reason to react if it is noted in the working community that:

- There are changes in the pattern of sick leave
- The work processes are slow
- The number of employees working overtime increases
- Those who have the opportunity avoid work tasks
- The number of people participating in the workplace's joint meetings is reduced
- Collaboration and confidence decrease
- The results of the workplace climate survey are poor
- A lot of work time is spent on resolving internal conflicts
- There is bullying in the workplace

Examples of warning signals regarding problems at the individual level are presented in Figure 2.

Observations of Occupational Health Services	Manager's Observations	Sickness leave	Drug Abuse
Health reviews	Development talks	Long sick leave	Repeated absence after the weekend
Sick leave	Reduced work performance	Repeated short sick leaves	Neglect of duties
Symptoms	Changes in behaviour	Sick leave due to some diagnoses	Health related signs of excessive use of alcohol or drugs
Repeated visits	The work is often not done or is semi-finished		Problems of a social and / or health nature
	Lack of motivation		Intoxicated at work
	Repeated overtime work		
	Complaints from "Customers"		

Figure 2 Warning signals for problems at the individual level

5. What should you do?

Problems related to the performance of work duties due to structural reasons or lack of competence should be addressed in the workplace. Similarly, problems in the work community should primarily be investigated and addressed in the workplace. Difficulties related to the employee's life situation should be addressed after discussion with the manager, for example

through flexible work time solutions or guidance relating to the correct type of support and assistance measures.

Intervention usually begins through a conversation between the closest manager and the employee. The purpose of the conversation is to gather information and to investigate the opportunities for finding a solution. Another important aspect is the experience of having been heard.

Both parties can prepare for the discussion based on chapter 8 (managers) and the check list in Appendix 1 (employee). Conversations of this kind should be documented. The manager will write a memo that is available only for the manager and employee in Mepco.

A conversation between a manager and an employee can mean that the employee will receive the help he or she needs. The HR Unit, occupational safety, occupational health services and union representatives can offer support to both the manager and the employee or the working community.

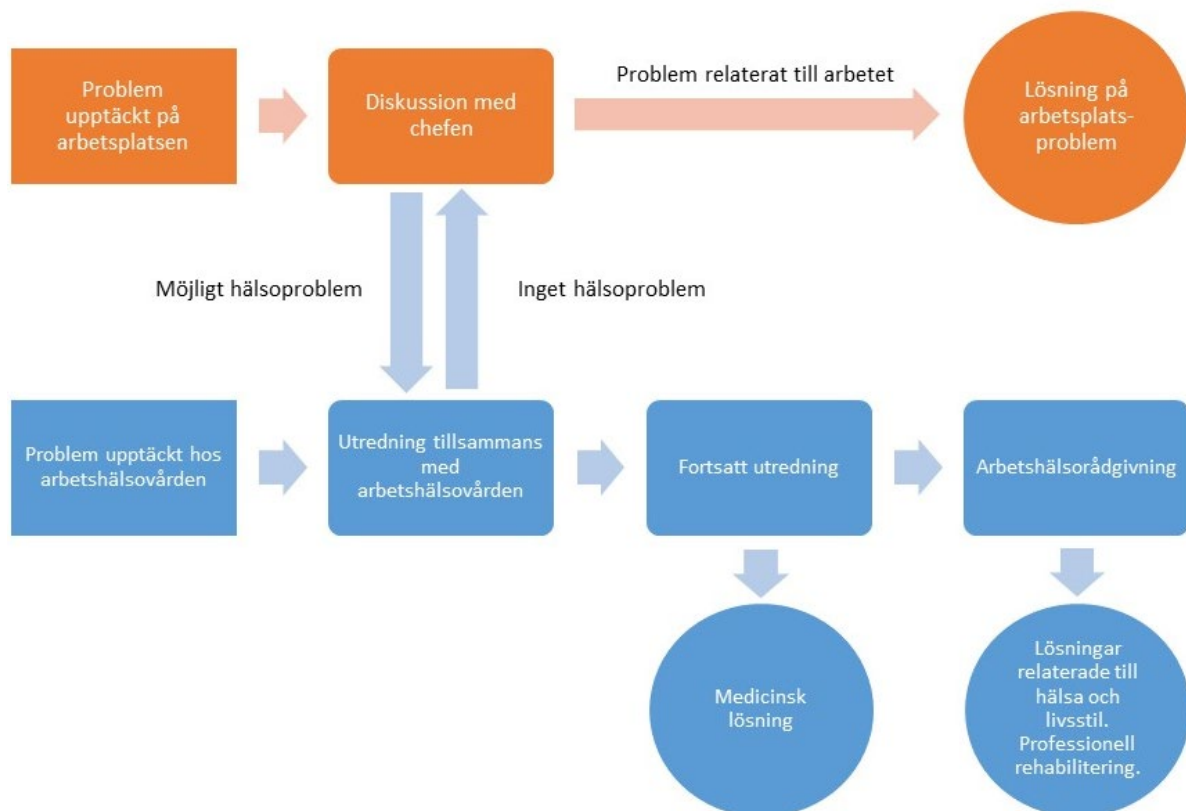


Figure 2 Intervention model

If the problems are complicated or related to health, a **tripartite conversation** can be held. Tripartite conversations can be initiated by the occupational health services, the employee or the manager. The closest manager, the employee and possibly his or her support person (psychologist, therapist, colleague) and representatives needed from the occupational health services (physician, psychologist, healthcare provider) will be invited to the conversation. If the employee or the manager wishes, the HR manager may also attend.

The purpose of the discussion is to map out the problem and to investigate the necessary measures and to determine the steps that should follow. Tripartite talks will be documented in Mepco. All three parties will receive a copy of the minutes containing a brief account of what has been discussed during

the interview and what agreements have been made. You should also decide on a time for a follow-up. The subsequent steps may be:

- Testing of work ability
- Further education, retraining
- Work testing
- Work time arrangements
- Change of job duties, new tasks
- Investigation of various pension opportunities

Support for dealing with problems in the work community can be obtained from the HR unit and occupational health services. It may be about developing communication within the unit or establishing common rules in the workplace, on leadership support, on assisting with analysis of results of the workplace climate survey, conflict resolution, etc.

6. Follow-up of sick leave and return to work

When the manager or HR unit detects patterns repeated sick leave, recurrent short absences (> 14 days during a six-month period) or long (> 30 days) sick leave, the nearest manager should be contacted, and he / she should address the matter with his / her co-worker. There must be enough time for both parties to prepare for the conversation. Signed documentation facilitates the follow-up. The purpose of the conversation is to agree on actions and follow-up. The recommendation is that discussions of this type should be followed up at a maximum of six-monthly intervals or until a solution to the problem is found.

The HR unit monitors reports of sick leave, GP appointments and health check-ups. Employees who have been on sick leave for at least 30 days over a period of 12 months may be called for a health check up by the occupational health services. Occupational health services contact the workplace if it is established that the cause of the sick visit is related to the workplace and should be solved there.

If the sick leave is prolonged, it is important that the manager follows up the situation and contacts the employee regularly. Preparations for a return to work begin through the occupational health care, but it is important that the employer also participates in the planning. The manager who is familiar with the workplace conditions can assist representatives from the occupational health and safety team and the HR unit with the planning. A successful return to work can involve different work arrangements, workplace planning, reorganisation of work, supervision, education and other similar measures.

7. Links to contact details

- [Occupational health and safety at Hanken](#)
- [HR unit](#)
- [Occupational health services](#); Terveystalo Kamppi (Helsinki) or Terveystalo Vaasa.

8. Discussion on work ability (the manager)

The purpose of the conversation is to gather information and to investigate the opportunities for finding a solution. As discussion leader, it is important to:

- Listen to the speaker
- Let the speaker speak to a point - do not interrupt
- Provide constructive feedback and show respect for different approaches

The initiative for this discussion may come from the employee or the manager. According to Hanzen's early support model, the manager will discuss with the employee if the manager is experiencing problems with the work ability or if there is recurring sick leave.

The cause of the problems can be either illness or work-related factors, such as excessive workload, poorly organised work, insufficient skills or inadequate instructions or tools. The division of responsibilities within the unit, personal relations or bullying and harassment, as well as the person's own life situation can also lead to occupational health problems.

The purpose of the discussion is not to pry into the background of the problems, the employee can divulge as much as he or she wants. Instead, you should **focus on whether there is something in the workplace or work environment that can be improved** to increase their work ability.

8.1. Process for discussion and documentation during the discussion

The manager and employee decide on a time and place for the discussion well in advance so that both parties have time to prepare. If needed a third party is invited to the discussion according to the instructions above. Before the discussion HR can also be consulted.

The manager must share the information in **Appendix 1** with the employee as support for the upcoming discussion. The appendix can be shared as such or in some other format for example in an e-mail or calendar invite.

According to the instructions the discussion should be documented and shared with the employee. **The documentation is done in Mepco through the form called Early intervention discussion.** The manager starts the form and fills it in in Mepco. When the manager saves the form in Mepco it becomes visible to the employee in Mepco. No one else has access to the form or its content. If a third party is to participate in the discussion and the form is allowed to be shared it can be printed out from Mepco.

At least the following topics should be discussed and documented during the discussion:

- *What is the topic of the early intervention discussion?*
- *What is the purpose of the discussion?*
- *The employee's description of the situation*
- *The supervisor's description of the situation*
- *Description of the situation after the discussion*
- *Agreed measures and their monitoring*

You may find instructions for the form in Mepco [here](#).



Preparing for discussion about your occupational health (employee)

The purpose of the discussion is to support your work health and work ability. According to Hanzen's early support model, the manager should discuss with the employee if the manager is experiencing problems with the work ability or if there is often recurring sick leave. The aim is to find solutions that can help you to cope and cope better with your work. The initiative for this discussion may come from the employee or the manager.

Before the discussion on the dd.mm.åååå at what time? can you prepare yourself by considering the questions below. During the discussion, you can highlight things as much as you want. The discussion is confidential.

1. Have you noticed any change in your work ability?
2. Are there any factors in your work that affect your ability to cope or your absence from work?
3. Is there anything in your private life that you want the supervisor to be aware of and take into account?
4. Is your work too easy or too difficult according to your skills?
5. Is your work physically or mentally too stressful?
6. Is it possible to influence your work ability by reorganising duties, work hours or workload?
7. Is there room for improvement in working conditions, ergonomics (work position, work tools) or in the work procedure (routines and working methods)?
8. Are there any factors in your work environment that affect your work ability (e.g. allocation of responsibilities within the unit, personal conflicts, bullying or harassment)?
9. What actions do you think are necessary? Is there a need to get in touch with the occupational health services?

The manager documents what was discussed during the conversation and fills in the information in a form in Mepco. The form is only accessible for the manager who filled it out and the employee. A copy is given with the employee's permission, if necessary, to the occupational health services or HR unit.