

A photograph of a busy garment factory. In the foreground, a woman with her hair tied back is smiling as she works at a sewing machine. She is wearing a blue and white plaid jacket over a yellow top with black polka dots. To her right, another woman in a bright pink jacket is also smiling and working. The background is filled with other workers at sewing machines, creating a sense of a large-scale industrial environment. The lighting is bright, and the overall atmosphere is one of productivity and positive work conditions.

# MANAGING HEALTH AT THE WORKPLACE

A GUIDEBOOK

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## Managing Health at the Workplace: A GUIDEBOOK

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# INTRODUCTION

**A healthy worker is a happier and more productive worker.  
And factories do better with healthy, happy workers.**

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The big question is: How can you improve the health of the women and men who work for you? The short answer is: You need to **actively manage** your health staff, services, and activities at the factory.

This Guidebook is designed to give a complete answer to that question with a set of **explanations, practical suggestions, and specific actions** with business realities in mind. It also comes with a companion toolkit of **“How-to” management tools**, in modules that can be used as needed.

Most factories do not **actively** manage their health operations. Even those that do a good job of health management can often improve significantly.

The Guidebook does not tell you what must be done in your factory. That’s for you to decide.

You will need to determine:

- Which suggested *indicators* apply to your factory,
- Which *action steps* will work for you, and
- What *resources* you can devote to making and maintaining health improvements.

Each company will start at a different place depending on its size and resources and the capabilities of its health staff and management.

This Guidebook supports the goals of the Levi Strauss & Co.’s Worker Well-being Initiative, particularly regarding *Good Health & Family Wellbeing*. It recognizes women’s health as an important part of ensuring the

health of all workers and promoting gender equality. It asks you to take ownership of the change process.

The Guidebook does ask you to **think differently** about management’s role in health, including to:

1. See your health staff as a *strategic resource* that contributes to factory productivity, rather than a drain on resources,
2. Use a *“continuous improvement”* approach to your health operations, rather than a “compliance” approach, and
3. Manage *health like other business operations* in your factory, with goals and key performance indicators.

The goal is to help you achieve important business benefits by improving the health of your women and men workers. These benefits do not appear magically. They occur in workplaces where workers’ general health – in addition to safety – is taken seriously as a management interest and function.

Occupational safety and health (OSH) is critically important. OSH rules ensure use of safety equipment, promote fire and building safety, and reinforce other essential protections. But the focus on safety too often fails to include ways to improve overall worker health and well-being. Good health and safety go hand in hand.

The Guidebook is organized into eight sections. The first four provide background explanation,

and the last four provide the framework for action around **Health Services, Management Systems, and Corporate Leadership**:

**Section 1: The Business Case** – summarizes the evidence that improving worker health is good for business in many ways and is worth your investment of time and resources.

**Section 2: Tools & Approach** – outlines the tools at your disposal and the overall approach to managing your health operations, which the “How-to” tools support.

**Section 3: Common Concerns and Misunderstandings** – explains the kinds of misunderstandings that stand in the way of good health management at the workplace.

**Section 4: The Capabilities of Your Nurses** – offers different ways to view your nurses and make full use of their skills.

**Section 5: Indicators for Management Systems for Health** – explains the central role of business managers in the oversight and improvement of your health staff and clinic.

**Section 6: Indicators for Corporate Leadership in Health** – explains the need for ongoing engagement of the senior factory leaders in communicating that workplace health is a business priority.

**Section 7: Indicators for Health Staff, Services & Activities** – explains nuts-and-bolts issues for improving the quality and performance of your health staff and clinic.

**Section 8: Action Steps** – outlines the initial steps for quick wins and emphasizes a process of self-assessment and action planning to determine the key performance indicators for your factory.

The Guidebook is part of a package of materials that support improving health services at the workplace. The other materials include:

- A **Scorecard** for self-assessment that provides suggested indicators that can be integrated into your factory’s key performance indicators for health.
- A **“How-to” Toolkit** that gives detailed guidance for staff implementing health activities.

You will notice that the Guidebook puts as much emphasis on the role of *management systems* and *corporate leadership* as on improvements to *health services and staff*. That’s because health improvements do not typically last without oversight by factory management and active support by its leadership.

Also, if you want a return on your investment in health, **you need to manage the investment as much as you seek the return.**

You can access the Scorecard and “How-To” Toolkit online at:

<http://evidenceproject.popcouncil.org/resource/managing-health-at-the-workplace/>

# SECTION 1: The Business Case for Health

The business case for factory health services and programs is very strong. The proposed improvements and performance indicators in this Guidebook are designed to help you:

- Make **smart investments** of time and money into health services,
- Make **effective use** of the people you already employ in health and safety, and
- Achieve direct and indirect business and health **benefits**.

Most factory managers want to see the evidence of the value of investing in health—for the factory and for the workers. Table 1 summarizes all the benefits of workplace health.

## BUSINESS CASE EVIDENCE

In high-, middle- and low-income countries, companies that create a “culture of health” earn a return on investment.



## FACTORY VOICES

*“The turnover rate last year was around 15 percent, but it decreased to 3–4 percent this year [when the health project was implemented]...”*

*The young workers now have the awareness to take proper precautions [on reproductive health]. So this was very beneficial for our factory.”*

**Production Manager, Factory in China**

Global research estimates about a \$3 return for every \$1 invested. According to the 2011 World Economic Report on Workplace Health:

*“Workplace wellness can yield significant benefits. A recent Harvard meta-analysis (of US companies) found a **\$3.27 return on investment (ROI)** for every dollar spent on wellness programs....Increase in productivity can be achieved across countries.”*



## INDUSTRY RESEARCH

“Worker Well-being can have a significant impact on productivity. Ongoing research in Better Work factories indicates that better working conditions drive greater productivity, leading to higher profits and improving the chances of a factory’s survival in an economic downturn...”

“If factory managers underestimate how a particular factory improvement can boost the well-being of workers, they are not likely to invest resources smartly. This can limit the intended benefits for both workers and the factory’s bottom line...”

“...having a safe work environment, being satisfied with wage levels, and having access to health facilities are the workplace conditions that have the most impact on Worker Well-being.”

**Research Brief: Improving Business Outcomes by Understanding What Matters to Workers, Better Work Program (International Labor Organization/International Finance Corporation)**



## FACTORY VOICES

*“The program has not only helped to raise the awareness of health related issues, but to also mitigate the risk related to turnover of skillful workers.”*

**General Manager, Viet Nam factory**

unaware of the importance of addressing women’s health needs. For instance, at a factory in Bangladesh:

- Absenteeism related to menstruation dropped to 3%, from 75%, after health education dramatically increased the use of sanitary napkins by women workers instead of unclean cloth, including fabric from the factory floor.

**An active health staff can help you achieve both direct and indirect benefits.** Table 1 describes all the benefits that managers at factories and other workplaces have seen from investments in the health of their workers.

### Direct Benefits

Studies in **factories in Egypt and Bangladesh** found returns of **\$3-\$4** for each dollar invested in health education and services, and from the resulting:

- Lower turnover
- Lower absenteeism

The business benefit comes in part from a focus on women’s health at the workplace. Managers are often

**TABLE 1**

FINANCIAL OUTCOMES		HEALTH OUTCOMES	QUALITY OF LIFE & PRODUCTIVITY OUTCOMES
Direct	Indirect		
Cost savings and return on investment	Better use of existing spending on health, including clinic, nurses, and products and services	Employee adherence to quality medical treatment	Improved “functioning” and productivity
Lower absenteeism and presenteeism (at work but not working)	Improved relationships between management and workers	Positive behavior changes and risk reduction	Better attraction and retention of employees – “employer of choice”
Lower medical costs	Increased retention of buyers/improved buyer relationship	Improved health of women workers through improved menstrual hygiene, nutrition, hydration, and family planning	More engaged workers
Less short term disability and safety/workers’ compensation	Increased worker morale and well-being	Improved services for factory workers	Greater compliance with OSH and labor law
	Increased company resilience in economic downturns	Improved Worker Well-being (healthier, happier, more energetic)	Better community relationships and Corporate Social Responsibility performance

Based on studies of global workplace health programs from the Workplace Health Research Network, Business for Social Responsibility/HERproject, Evidence Project/Meridian Group International, Inc.

- Information on sanitary napkins and disposal also led to lower monthly plumber costs to unclog factory pipes filled with cloth.

## Indirect Benefits

The indirect benefits are as important as the direct ones. You employ nurses and other health staff that in many factories are not working to their full potential.

In some factories, nurses may spend time during the day doing nothing.

The clinic and health staff are the only areas of a factory where workers can be unproductive – and management does not care! This is a waste of factory money and health staff talents.

Globally, workplace health activities often show multiple benefits at the same time. For instance, the BSR HERproject report on its health program in a Mexican electronics factory noted:

“Hewlett Packard found that their suppliers that participated ... reduced compliance violations significantly, especially in respect to health and safety



## FACTORY VOICES

*“The costs [of health improvements] are low in the overall scheme of things.”*

*“We spend millions of rupees on security, workplace ergonomics, effective ventilation, etc. None of these are easily calculable on a pure ROI basis, but all these areas improve worker happiness. A happy worker is a productive worker. So the business reason [for health] is very strong and compelling.”*

**Managing Director, Pakistan Garment Factory**

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indicators and worker communication. Suppliers believe the biggest benefit was an increase in the women workers’ level of engagement with the factory and their morale, which was important when the company was trying to change some persistent issues...”

“[The company’s] human resources director recognized the business benefit from the lack of new employee disability claims for preventable diseases during the project period.”

## SECTION 2: Tools & Approach

The Guidebook provides **an overview of suggested management actions**. It is designed to help you place the supervision of health services fully within your existing management systems.

The Guidebook comes with **two companion products** that go into much greater detail about how to implement improvements in health management and workplace health services:

**1. A [Scorecard](#)**, with indicators, which can be the basis for a self-assessment of your health services and health management and for the development of *key performance indicators* applicable to your factory; and

**2. A [“How-To” Toolkit](#)**, which offers you specific tools to implement improvements.

All these products reflect more than 10 years of practical experience and research in workplace health, including experience in vendor factories for Levi Strauss & Co.

They also take public health good practices and adapt them to the factory setting. The idea is not to turn your clinics into public health centers. It is about improving what you do.

The range of health resources and activities will differ in each factory. Factories may have:

- A big health staff of doctors and nurses and a large clinic with many services.
- One or two nurses and a small health room or station with very limited services.
- Contracts with external health organizations that provide on-site mobile health services for general and specialized services.
- Extensive health education programs, including training workers to be peer health educators, and organizing health days.

BENCHMARK	LEVEL (B,M,H)	INDICATORS (IN RED THE INDICATORS BEYOND BASIC REQUIREMENTS)	RED/YELLOW/GREEN	NOTES
<b>1.1 Cleanliness</b> Health facility is kept clean	B	1.1.1 Soap and running water OR hand sanitizer are available for hand washing at the health facility		
	B	1.1.2 Dedicated cleaning materials and disinfectants are available for cleaning furniture and instruments		
	B	1.1.3 Waste receptacles are on site		
	B	1.1.4 Workspace is not dirty or messy		
	M	1.1.5 Hot water is available and easily accessible in facility		
<b>1.2 Client/Provider Safety</b> The facility does not expose clients or providers to health hazards	B	1.2.1 A dedicated disposal receptacle for hazardous materials, separate from general waste, is in facility		
	B	1.2.2 Separate container for disposing of needles is available		
	B	1.2.3 No expired medicines are on site		
	H	1.2.4 Hazardous waste is disposed of to a hazardous waste service (private or public) provider.		

Whatever your situation, in these materials, you will find practical ideas and tools for improving what you do. This approach focuses on three areas for action and improvement:

**1. Management Systems for Health.** This addresses the processes and oversight practices that you need to ensure health standards are met, health staff are supported, and quality improves each year.

**2. Corporate Leadership.** This is about engaging senior leadership and aligning your health goals and KPIs with overall company policies, mission and values, so that worker health is integrated into your factory's strategies.

**3. Health Services.** This addresses the fundamental practices for operating a factory clinic or health station and ensuring quality health services and activities.

Use the Guidebook and these companion products as **a roadmap for continuous health improvement**. Throughout these materials, you will find reference to specific Scorecard Indicators relating to these three areas.



## SECTION 3: Common Concerns and Misunderstandings

You may have some concerns about the need for improving your factory health services. Here are some of the concerns frequently expressed by factory managers:

**1. The health staff knows what to do.** Very often, factory leadership assumes that, once they have hired doctors or nurses, their job is done. These health staff do not require supervision.

That view is *mistaken*. Your doctors and nurses and other health staff are your employees (even if you have contracted them through an agency). They need oversight just like any other employee – and just as doctors and nurses are managed in public health clinics.

In fact, the workplace is a unique setting different from a public or private health facility. The health staff may need *more* oversight and support to work effectively in a factory.

Research and experience show that nurses often lack the needed training to do their jobs well in the factory. It also shows they need active support by factory management.

**2. We already manage our health staff.** You may already have someone whose job is to oversee the health staff. But in most cases, this person plays a very limited role and meets with the health staff mainly when there are problems.

They are NOT expected to be actively engaged with the doctors, nurses and other health staff to ensure good practices, set goals, provide support and hold people accountable. On a regular basis, your health staff – doctors, nurses, etc. – need active guidance, support, and supervision about what they are supposed to do *in the factory context*. In other words: management.



### FACTORY VOICES

*“What is hard to capture through data is the difference in the supervisors and their view of the importance of health. Just last week I had the plant manager and head of Quality Control (QC) come to me to ask if we could bring in the eye doctor this week to check the QC team’s eyes. Before it used to be a fight to have the doctor come because they said it disrupted production.”*

**Vice President for Compliance, Haiti Factory, on its health management project**



### INDUSTRY RESEARCH

*“Despite being widely respected by workers, most nurses had an inadequate standard of patient care and did not fully execute their responsibilities of clinic management.*

*Nurses that only possess a paramedic qualification (40 percent) did not mention that they had any formal training in diagnosing, treating, counseling, and referring skills, services they have to provide regularly. This indicates that nurses will be unable to respond effectively to factory workers’ health needs.”*

***Healthcare Delivery in RMG Factories in Bangladesh: What are the Missing Opportunities? Report by Business for Social Responsibility.***

Use this Guidebook to see whether the manager you have assigned to your health staff is playing an active management role.



## INDUSTRY RESEARCH

Focus group participants said they felt embarrassed buying sanitary napkins from most stores, where men are always the shopkeepers. One said, “We didn’t have sanitary pads or napkins in the factory [before]. If any girl started her menstruation suddenly, nothing was available here. Now we can get sanitary napkins from the clinic. This is very good for us.”

Return on Investment Study, Pakistan Factory

**3. We can’t manage our health staff because we are not health experts.** You may think that because business managers are not health experts, they are not equipped to supervise their health staff. This is understandable, but mistaken.

If you do not know anything about health, how can you manage it? Let’s be clear about the areas you cannot manage and those areas you can:

- **You CANNOT supervise or assess medical care and clinical skills.** That is, you are not able to determine whether a doctor, nurse or other staff are giving shots correctly, diagnosing illness accurately, providing patients the right information, or applying the right clinical methods. This requires the technical assistance of an external health professional.
- **You CAN manage a wide range of activities, practices, and goals related to medical care and health education** that improve health services.

The Scorecard Indicators for Health Services will give you list of items you should oversee. Like other business functions, health management requires not so much technical expertise as supervisory skills. You can play a critical role in improving the health services over time.

You can and should, from time to time, also bring in external health experts to assess and improve the clinical skills and procedures of your health staff for you.

**4. Women workers can go to health facilities outside of the factory.** There may be many outside health clinics and pharmacies, but it doesn’t mean women are able to use them. Managers need to understand that the health needs of women are very different from those of men.

There are also many *barriers to women* being able to use health services:

- Domestic duties after the work day
- Distance from clinics and costs
- Cultural beliefs and myths
- Lack of knowledge about quality services
- Concerns about sensitive personal information

Factories that take care of the specific and personal health needs of women workers do so for good business reasons.

**5. The doctor should be in charge of health operations.**

Doctors are a very important resource. The doctors you have on site provide essential patient care. However, in many cases, the doctors are part-time and in the factory only part of the day. In almost all cases, their time is very limited and focused on patients.

Doctors rarely have the time – or the training – needed to manage a clinic or health staff. They may do some clinical oversight of nurses related to specific patient care.

The doctors can give valuable guidance and support to your supervision of the health services.

*But you should not expect doctors to assume full responsibility, if at all, for managing your clinic and health functions.*

## SECTION 4: The Full Capabilities of Nurses

The nurses at your factory are one of your most important assets for improving the health and well-being of your workers.

They are a strategic resource. Treat them that way.

Unfortunately, most factories waste this resource, and do not recognize their nurses' full capabilities. Nurses can do much more in your factory – if you give them the management support they need.

At a minimum, they can:

- **Offer preventive care** to workers, educate them and promote good health behaviors.
- **Discuss sensitive topics** one-on-one with workers in the clinic on such topics as menstrual hygiene, reproductive health, and family planning. Female nurses can talk to women workers about personal health issues that male health staff sometimes cannot.
- **Walk around the factory** when they are not busy with patients, and talk with workers and supervisors about simple health behaviors.



### FACTORY VOICES

*“The nurses have changed attitudes and roles. They would just arrive at the factory and sit in the clinic waiting for a female worker to come. Now they go to the halls and speak to the women. If she sees anything wrong – before she didn’t say anything – now she talks to the worker.”*

**Compliance Manager, Egyptian Garment Factory**



### DEFINING NURSE & HEALTH STAFF

“**Nurse**” refers to many types of health care staff working in a factory. Sometimes a factory’s “nurse” lacks a diploma or only has limited training as a paramedic or health assistant, but is still called a nurse.

“**Health Staff**” refers to those employees that have a role in factory health and safety. This group is mainly doctors, nurses, paramedics, health workers or assistants, but can also include other employees involved in health and safety, such as welfare officers, occupational health and safety trainers, and compliance staff.

Nurses are often in a unique position at the factory, being neither management nor workers.

Their activities can **build trust** and signal that management cares about the well-being of workers. This is particularly true if you have many women in the workforce, as nurses tend to be women.

In factories where nurses have clear responsibilities and support, they can **play important management roles**.

Nurses in factories around the world can:

- Supervise the health staff and ensure use of good practices and clinical protocols.
- Organize patient appointments and an intake system for the clinic.
- Develop and implement workplace health promotion and education programs.



## FACTORY STORIES

Nurses in a Haiti factory organized regular “walk-about” on specific health topics, for example on sexually transmitted infections. During walk-about, each nurse went to a separate end of the line and gathered three to four workers, passed handouts, and gave a brief talk. The nurses asked questions and gave workers candy for the correct answers. The workers were very engaged and asked a lot of questions. After 5 minutes with each group, the nurses moved on to a different part of the section. The supervisors also appeared engaged, reading the flyers and talking to the nurses. The nurses performed well, were energetic, and asked good questions.

- Manage peer education and training programs for worker health educators.
- Create a patient referral and follow-up system in the factory.
- Collect and analyze clinic data to identify worker health needs and provide services.
- Solve problems.

These things also improve worker health and productivity.

### **If you want active, effective nurses, support their professional development.**

A simple quick win – which almost all nurses enjoy – is to let them get out of their seats when not seeing patients and walk around and talk with workers and managers.



## INDUSTRY RESEARCH

“Nurses have the potential to make significant contributions to improve the health of a largely underserved group [workers], as well as benefit factories’ bottom line by driving down absenteeism and turnover and improving workplace environment and compliance standards.

“Properly trained nurses can also complement other health initiatives undertaken by the factory, such as health promotion campaigns.”

***Healthcare Delivery in RMG Factories in Bangladesh: What are the Missing Opportunities? Report, Business for Social Responsibility***

## SECTION 5: Indicators for Health Management Systems

Managing your health staff and clinic is similar to how you manage production units.

You manage what your health team does based on performance. To do so, you must:

- Set goals, priorities and operating procedures,
- Assign roles and responsibilities,
- Track progress against plans, targets and data,
- Budget for health functions,
- Ensure accountability and reward performance, and
- Provide professional development.



### INDUSTRY RESEARCH

“Most nurse contracts do not stipulate responsibility for the workforce’s personal health issues:

40 percent of the nurses interviewed do not have a job description. Instead nurses often only provide first-aid services and basic symptomatic care.”

**Healthcare Delivery in RMG Factories in Bangladesh: What are the Missing Opportunities? Report, Business for Social Responsibility**

You need to have a clear **management structure for health** to perform these functions – just as you have for production and other business functions.

The Scorecard addresses three primary areas for management oversight with suggested indicators:

1. Management Processes
2. Supervision of Health Services
3. Integration of Health into Workplace Operations

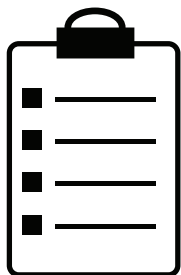
These three areas of oversight are the management foundation for ensuring good health practices that are described in indicators for Health Services, found in **Section 7**.

### 1. MANAGEMENT PROCESSES – Key Indicators

There are **six Scorecard indicators** for putting in place good management structures and processes for your health services.

The first indicator is to **assign a Senior Manager from the business side** to be in charge of health – and *actively involved*. This person will be responsible for implementing good practices and standards and driving continuous improvement.

This manager should involve a deputy or an assistant who can help with supervision, ensure continuity of



### SCORECARD LINK - SAMPLE INDICATORS

**6.1.2** A reporting structure exists for health facility that defines roles, responsibilities and decision-making authorities.

**6.1.3** Each health provider receives a job description defining responsibilities.

**6.1.5** A formal process is in place for hiring new health providers, based on the documentation and review of qualifications.



## INDUSTRY RESEARCH

“The on-site health clinic encouraged positive feelings about the factory management...

They perceived that the management staff treated them cordially, cared about workers’ health, and encouraged workers to receive health services from the clinic.”

**Return on Investment Report, Bangladesh Factory**

activities, and make decisions if the manager is absent or on extended leave.

After that, the Scorecard suggests these indicators:

- **Establish a reporting structure with assigned roles and responsibilities for nurses.** This means determining the roles and tasks that nurses or other health providers will be responsible for carrying out.

This structure defines not only their roles, but also their work relationships to each other and management.

If you have more than two people on your health staff, you should consider a management hierarchy for the factory clinic. In that case, you might designate a Senior or Head Nurse to oversee the work of the health staff.

Give nurses clear authority to manage specific functions or activities. Even if you have a doctor managing the clinic, nurses should still have their own defined roles and responsibilities.

- **Create formal job descriptions.** Nurses should have a job description which defines the responsibilities assigned to them. The job descriptions should also reflect the factory’s goals for health and good practices.

Each nurse’s job description should include personal goals for professional development and be reviewed and updated each year.

*Job descriptions are a key tool for building the capacity and skills of your health staff.*

- **Create a formal hiring process.** The hiring process is the most effective way to improve the quality of your health staff and services. You should hire (and fire) your health staff based on qualifications and performance.

It takes no medical expertise to check and document qualifications, call references, and interview job candidates.

Too often, factories find nurses and other health staff through existing personal or family connections to employees.

A more formal process enables you to select new nurses based on a fair review of qualifications, rather than on personal connections.

- **Create a detailed budget for health services.** You should ensure that health services and related activities have a formal line item in the overall factory budget.

You should also create a more detailed health services budget to ensure resources for key health needs and goals: medicines, educational materials, nurse training, compensation and bonuses, and other items for continuous improvement.

A budget enables management to compare potential business benefits (lower absenteeism, productivity, etc.) with the overall costs. It can also incentivize nurses to use available resources wisely.

- **Establish regular communication on health with senior management and leadership.** You need to keep factory supervisors and senior management informed of health activities, plans and progress.

The senior manager should have a standing place on the agenda of senior and middle management meetings to report on health activities and performance – beyond the required reporting on safety and injuries.

All these actions signal to the health staff and the factory that nurses have important jobs that are valued.

## 2. SUPERVISION OF HEALTH SERVICES AND STAFF – Key Indicators

The **five Scorecard indicators** for Supervision are intended to help you hold the health staff accountable for factory health goals and activities. But just as important, they are to help you provide “**supportive supervision.**”

Supportive supervision means that you give staff the support needed to succeed in their jobs. It emphasizes open communication, team building to jointly monitor performance based on defined goals and data, and regular follow-up to ensure tasks are done correctly.

The Scorecard suggests these performance indicators:

- **Institute regular and structured meetings.** Most factory management meets with health staff once a quarter, or when there are problems. That is not enough for *supportive supervision* and *continuous improvement*.

Two types of staff meetings are encouraged:

- **Internal meetings of just the health staff**, led by the nurses each week. It builds teamwork. It is also a basic good practice for nurses and health staff together to review planned activities, assess progress on goals, solve problems, and prepare for the week.
- **Management-health staff meetings.** The senior manager should meet with the health staff regularly – in the beginning once a week



## FACTORY VOICES

*“The two new nurses have been great because they were hired based on qualifications and not because they were somebody’s brother, sister, cousin or whatever.*”

*“The hiring committee included several members of the [Health & Safety] Committee, members from the production and quality teams, and a representative from the clinic. We included the chair of the H&S Committee in the applicant interviews. This is interesting because someone who hasn’t really taken part in HR now sees the benefit of this interviewing process for his own internal hiring.”*

**VP Compliance, Haiti Factory**

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(to develop effective meeting skills, build relationships, and establish the process) but not less than once a month.

Both meetings should be *participatory working* meetings that focus on taking action, addressing problems, and ensuring progress on goals.

- **Develop an annual health action plan.** The annual health plan is an essential tool for managing your health staff and activities. It defines your health goals, sets measurable targets for health indicators, assigns responsibilities, and provides a timetable by which to track progress.

The health staff, separately and with the Senior Manager, should monitor plan activities.

- **Evaluate the performance of the health staff each year.** The senior manager should do an annual performance review with each nurse and member of the health staff.

The review is the time to revisit job descriptions and performance, reward accomplishments,

discuss challenges or shortfalls, and determine areas for improvement or development for the next year.

If you have an annual health plan, you should also review the nurses' performance related to their specific tasks in achieving goals.

*If you give bonuses to workers for performance, you should do the same for the health staff.*

Ideally, you will base compensation and bonuses for the health staff on the performance review. You can also recognize performance by promoting nurses to new managerial roles or responsibilities.

The health staff as a group should also do its own review of their collective performance in meeting the annual plan and applying good practices.

### 3. INTEGRATION OF HEALTH INTO FACTORY OPERATIONS – Key Indicators

The **seven Scorecard indicators** for “Integration” are about ensuring that the health function is fully connected to other factory functions.

For instance, the indicators for health improvements should be seen as linked to factory efforts to comply with occupational safety and health regulations, rather than as unrelated activities.



## FACTORY VOICES

*“The health education enhanced my relations with workers as they saw me in another role.”*

**Factory Nurse, Egypt**

The same is true for aligning health with policies addressing (a) workplace violence, harassment and threats and (b) the factory grievance process.

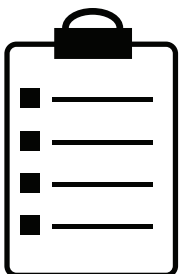
The Scorecard suggests these additional indicators:

- **Create an active role for your nurses in recurring worker-management committees and activities in the factory**, starting with the health and safety committee.

Very often, factory nurses attend health and safety committee meetings, but they tend to say little.

They are passive observers. Furthermore, these committees focus more on safety and less on health. Nurses can elevate health in the discussion.

More importantly, nurses have unique insights into worker needs that they can share with workers and management.



### SCORECARD LINK - SAMPLE INDICATORS

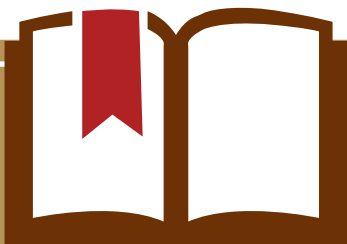
**6.3.2** The health staff participates in all worker committees.

**6.3.4** New worker orientation and training programs include introductions to the health providers.

**6.3.5** Management seeks the formal input of workers and their representatives in developing the annual health plan.

**6.3.7** Health data, disaggregated by sex and age, is reviewed at least twice a year.





## FACTORY STORIES

A factory in Haiti put its HR Director in charge of managing and improving health services. With senior leadership support, he integrated health into business operations and meetings – and used data to support his efforts.

At the weekly managers meeting, the HR Director shared absenteeism data in the form of graphs handed out to each supervisor. He and the Production Director emphasized the importance of talking to workers to understand the reasons they had called in sick.

Later in the meeting, a line supervisor complained that some workers miss out on work because of the health talks the nurses had started giving. Another supervisor complained that a woman asked to go to the clinic because her breast was hurting, which he felt did not warrant a visit to the clinic. The VP for Compliance then scolded the line supervisor and pointed out that his section had one of the highest levels of absenteeism.

- **Identify other opportunities for nurse participation, such as new worker orientations and training programs.** Such activities may not be specifically about health, but they are a good time to talk to workers about health services and activities.

The involvement of the nurses does not need to take much time – basic introductions and explanation of services can be done quickly. But this signals to new and old workers alike that health services are connected to all parts of the factory.

- **Collect workplace health data and put it into the factory data and analysis system.** Your health data can give you important information (on health trends, patient visits, medicine usage, etc.) about what to do to improve worker health.

But it needs to be collected accurately and then used – for planning, monitoring and self-assessment, business productivity, and problem-solving.

It is important for the health staff to collect information that **includes the workers' sex (female/male) and age.**

You can use this information to identify trends not just generally for all workers, but specific trends for women and men and for younger and older workers.

With experience, you can compare health information with the absenteeism, productivity and other data the factory already collects.

## SECTION 6: Indicators for Corporate Leadership

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**Senior leadership** is essential to turning your health staff and services into a strategic resource, and making sure the entire factory is engaged and supportive.

Long-term success depends on factory leadership— the chief executive officer, managing director and others.

The Scorecard focuses on two areas for Corporate Leadership:

1. Integration of Health in Enterprise Policies, Goals and Values
2. A Strong Accountability Framework for Health

The CEO or Managing Director should make clear to managers and workers alike that workplace health is an ongoing leadership concern and a strategic interest that supports factory productivity and key business goals.

The Scorecard suggests **14 indicators** for these areas for leadership:

### 1. INTEGRATION OF HEALTH IN ENTERPRISE POLICIES, GOALS AND VALUES

Health improvements and goals need to be part of the company vision and planning. These cannot be delegated a lower level manager.

The Scorecard indicators for this area cover important issues, such as promoting occupational safety and health standards, and addressing migrant health issues.

The Scorecard indicators also suggest that you:

- **Ensure gender equity is explicitly written into policies.** This is important for health, as women’s unique health needs are too often overlooked when managers think about workplace health.
- **Communicate regularly to workers on factory health services and policies.** You can lose the

business benefits of your health investments if workers do not know about them. Workers often do not know factory policies and the services available to them.

When senior leaders do not communicate the importance of health throughout the factory and to workers and line supervisors, the results are predictable:

- Supervisors, who do not view health as a business priority, are less supportive of the new health focus and of the Senior Manager in charge of health.
- Nurses have trouble implementing health promotion and better services.
- Workers do not perceive the changes. This leads to fewer benefits for worker health or productivity than if factory leadership had remained engaged.

Senior leadership should meet with workers a few times during the year – including during an annual planning process – to listen to them about their health concerns and priorities.

- **Engage senior and middle managers in reviewing, evaluating and updating workplace health and safety policies and practices.** You should talk to managers about plans, activities and progress and include them in the development and evaluation of health plans and progress.

Senior leaders are the best able to communicate that workplace health is a business concern for everyone in the factory, and that it is not simply about OSH compliance.

## 2. STRONG ACCOUNTABILITY FRAMEWORK FOR HEALTH

The indicators put an emphasis on the role of Corporate Leadership in ensuring accountability top-to-bottom in the factory:

- **Have the Senior Manager in charge of health report directly to the Managing Director or CEO.** Without a direct reporting relationship, the manager will have less authority to act and have less influence with other managers.
- **Institute formal management meetings during the year with dedicated time for reporting on health services.** The Senior Manager for health should be held accountable for reporting on progress on the annual health plan, if you have one, or on defined improvement steps as well as health activities, completed or planned.
- **Create the expectation that the health staff is to provide data on their performance.** You should hold the senior manager and health staff accountable for developing health metrics that provide business-type data on improvement plans and progress. This information should also be used for leadership's own planning processes.
- **Ensure funds are allocated as part of a health budget and factories planning process.** Nothing signals value as much as a commitment to allocate funds. Having a budget line item for health also creates more accountability for spending based on goals and plans.



### INDUSTRY RESEARCH

“In most cases, Worker Well-being will not improve if managers alone perceive improvements in working conditions.... workers must also perceive improvements in working conditions for their well-being to increase.”

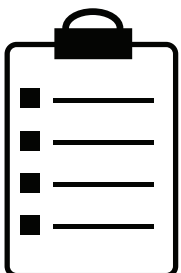
**Research Brief: Improving Business Outcomes by Understanding What Matters to Workers, Better Work Program (ILO/IFC)**

You cannot hold the Senior Manager for health or the health staff completely accountable for their performance if they do not have the resources to achieve their goals.

- **Hold the factory managers accountable for supporting health policies and planning.** You reward them for meeting production targets. The indicators propose you include some consideration of health indicators – based on data and observation – in the performance of senior managers.

**Having access to health facilities** is one of a few areas that has the most impact on working conditions and worker well-being, according to research in 85 factories in Vietnam by the International Labor Organization's Better Work Program.

Better working conditions can increase productivity and the bottom line. BUT, the research emphasizes that gaining these business benefits depends on the workers *themselves* perceiving the improvements in working conditions. That requires interest and communication from senior leadership.



## SCORECARD LINK - SAMPLE INDICATORS

**7.1.3** Chief Executive Officer communicates annually to managers and workers information on workplace policies.

**7.1.4** Corporate values or codes statements include commitments to worker health and well-being beyond the legal minimum.

**7.2.1** The manager for health services reports quarterly to the Chief Executive Officer on performance on health.

**7.2.2** Chief Executive Officer commits to improve at least one health area each year.

## SECTION 7: Indicators for Health Services

Your clinic and health staff can do more than just the very important role of treating job-related injuries.

In many factories, the health staff – often nurses – have small or sometimes very large parts of the day when they are not caring for or meeting with patients.

**Whatever the nurses' workload or the size of your clinic, they need to apply widely accepted good practices and use their time for both preventive and curative care.**

The Scorecard lists five essential areas for improvement of Health Services – the Physical Facility; Products, Equipment and Materials; Facility Policies and Procedures; Referral and Provision of Care; and Health Education and Counseling.

But these can be boiled down to **two management goals** for the factory:

1. Establish good health and clinical practices and policies;
2. Build an active and proactive health staff capable of management roles.

These two areas are the nuts-and-bolts of effective health functions at the factory and are the focus of your Health Services **key indicators**:

### 1. ESTABLISH GOOD POLICIES AND PRACTICES

The Scorecard gives you 89 indicators that should be the basis of the policies and practices you establish for your health services.

You can supervise and support these practices without clinical expertise, including:

- **A clean facility and hygienic practices.** You need to be sure your clinic has the necessary cleaning supplies and that the health staff follows hygienic practices.



### HEALTH WARNING

The first rule of health is “do no harm.” Anything that puts staff or workers at risk of harm must be fixed immediately.

The Scorecard indicators provide suggestions for practices and standards that you may decide to adopt in your factory. But your clinic and health staff must meet basic health standards.

If you have expired medicines, for instance, you must remove them immediately. If health staff or workers are exposed to bodily fluids or hazardous waste, you must take protective measures.

Good hygiene does not happen by itself. The Senior Manager should make this a focus of supportive supervision and observation.

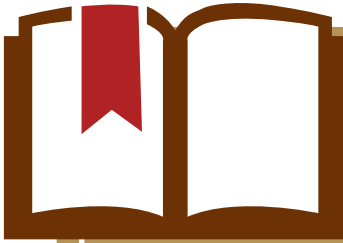
➤ [Scorecard links to Indicators 1.2 on Patient/ Provider Safety Confidentiality and 3.1 on Hygiene Protocols](#)

- **Confidentiality and privacy protections for patients in the clinic.** Confidentiality and privacy are essential to building workers' trust in your health staff. They are also basic rights of all patients.

In a workplace, the need for confidentiality and privacy is even greater, as a worker's peers and bosses are all around them. You need to be sure patient information and health status are kept private.

Confidentiality means that:

- Patients can meet with health staff without being overheard.
- Patient health records are stored in locked areas.
- The health staff does not share private patient



## FACTORY STORIES

Through a self-assessment, an Egyptian factory realized that patients lacked privacy because the waiting area

was next to the clinic door, which was kept open. The health staff moved the waiting area and made it policy to close the door when seeing patients.

Similarly in Haiti, a factory built new walls and reorganized the clinic space to separate it from the production manager's office and create more privacy.

Neither change cost much money. But they dramatically improved patient privacy and the nurses' ability to counsel on sensitive topics.

information with management or other workers, even by accident, without a medical reason.

➤ [Scorecard links to Indicators 1.3 on Privacy & Confidentiality and 3.1 Confidentiality Protocols](#)

- **Women's health and reproductive health services.**

Women workers have different needs from men workers.

The health needs specific to women workers are often overlooked, and factory health staff are often poorly trained to address these issues.

Yet women's health concerns, including menstrual hygiene and gynecological and urinary tract infections, have direct impact on their well-being, absenteeism, and productivity.

If your line supervisors pressure women not to leave their work stations for water or restroom breaks, for instance, this can lead to infections and increased absenteeism.

The health staff can teach managers and workers alike about how to avoid and treat infections.

➤ [Scorecard links to Indicators 2.3 on Reproductive Health and 2.4 on Health Education Products, and 4.1 Referrals](#)

- **Supply management.** You need to be sure that medical and other supplies do not run out.

This is especially important for products that are time-sensitive, such as antiseptics or family planning products. Factories are required to have first aid kits on-site. For the first aid kits and all other important or required medical supplies, you should have a supply management system.

Does your health staff wait to get more supplies only when they discover the supplies are out of stock or out of date? This means your health staff are practicing poor supply management and putting workers at risk.

➤ [Scorecard links to Indicators 3.6 on Inventory Management](#)

- **Medical records and data collection.** You need to make sure that the health staff fill out the patient registry and other forms thoroughly and consistently, and keep patient files in well-organized folders.

Health data can be a gold mine of important information. Yet the health staff needs to handle worker medical records and collect health information appropriately.

Studies have shown that health staff will keep good records if they are able to put the information to good use themselves. *They need to see the value of this work to them.*



## FACTORY VOICES

*"Before [the project] I wasn't always well - I was sick often and weak. I wasn't eating good food on a regular basis. I've learnt that you must eat regularly and well to stay healthy... If I knew what I know now at my daughter's age, my life would have been much better"*

**Worker/Peer Educator, Bangladesh Factory**



## FACTORY STORIES

“On her own, the nurse recognized the menstrual hygiene needs at the factory and stocked the

clinic with sanitary napkins for sale to workers. The percentage of women workers who reported having trouble achieving their production targets during their menstruation periods dropped 12 points.”

Training Program Report, Pakistan Garment Factory

And be sure that health data are put together in such a way that individual patient information is not shared.

➤ [Scorecard links to Indicators 1.6 on Record-Keeping and 3.8 on Patient Records](#)

### • Referrals/Provision of Care and Health

**Education/Counseling.** The Scorecard indicators emphasize referrals and health education and counseling as health services and activities almost any factory health staff can do well and with existing resources. Yet, there are some important considerations for each:

- **Referrals.** You need to have a good referral system. This means your health staff ensures workers get the treatment they need, not just give them the name of an outside clinic. The staff also need to send workers to qualified and affordable health providers, if public services are not available.

You may need to review your leave policies to ensure workers can access services. Many affordable clinics are not available after work hours or on weekends.

- **Health Education.** Nurses should be active in educating workers on illness prevention and healthy habits. They can also ensure workers learn about sensitive topics important to them, like family planning, reproductive health, and menstrual hygiene.

Many workers may have gotten bad information and learned myths that contribute to poor health.

Your nurses can help improve knowledge of sensitive subjects that workers cannot get elsewhere.

- **Counseling.** Nurses need additional training to provide counseling. Counseling is more than just providing health information. It involves guidance and emotional support in helping patients understand and make decisions about their health needs.

You should also consider what health services you can provide on-site most effectively—whether by your health staff, or part-time doctors and staff. You are encouraged to expand the scope of on-site services and education for unmet health needs each year.

➤ [Scorecard links to Indicators 4.1-3 on Referrals/Care and 5.1 on Health Education](#)

## 2. BUILD AN ACTIVE AND PROACTIVE HEALTH STAFF CAPABLE OF MANAGEMENT ROLES

Your job is to help individuals make changes, but also to change the work culture of the health staff. The most important behavior change for your nurses is to *shift from a passive to an active role*.

Ultimately, nurses should manage their own activities and take responsibility for planning, implementing, monitoring and owning the improvements and good practices in clinic operations.

This may take time, depending on the work culture and the health staff’s capabilities.

Yet, you will need to help nurses to become more proactive, through clear expectations, guidance, annual job goals and performance reviews. Some nurses may not want to be more active.

You should give nurses authority to manage specific functions or activities based on their capabilities.



## FACTORY VOICES

*“I have learned about health and hygiene. I have learned the importance of health and hygiene in my personal life. I now wash my hands on a regular basis and always after visiting the washroom. I now know about sanitary napkins... I used to use fabric scraps during my menstruation, and I was getting rashes and feeling unwell. Now I know to use sanitary napkins I do not get sick anymore.”*

**Female Quality Inspector, Bangladesh Factory**

Here are just few examples of what you can enable nurses to do:

- Gather and update referral information,
- Manage patient records, including reviewing and filing,
- Prepare health education activities,
- Identify patients that need follow up,
- Analyze health data for trends to inform health education and other prevention activities, and
- Suggest ways to improve services and activities.

You may be surprised to find that your nurses or other health staff have talents and interests that had previously been hidden to you – until you enabled them to be proactive.

In Egypt, when a nurse was selected to manage peer educators and handle data, she became excited about working with numbers and started analyzing the information. Such stories are common.

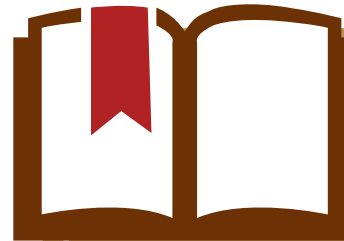
One sign of proactive nurses is their interest in learning new skills. Another sign is that they identify problems or better ways of doing things, figure out the causes, and find solutions. And then take action.

**Problem-solving** is a habit you should encourage and a skill you should develop in your health staff.

Each factory faces common and unique challenges:

- Overload on the doctor
- Too many patients in the waiting room
- Limited time to do patient or worker education
- Infectious diseases, such as viruses, spreading quickly in the workforce
- Lack of knowledge of maternal and reproductive health and other sensitive issues

Nurses, when given authority and support, have proven able to find solutions to improve health services and activities.

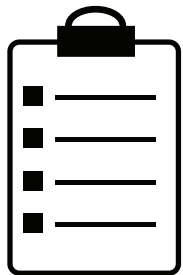


### FACTORY STORIES

A factory in Ethiopia had never analyzed its health data on workers.

Its health staff started to aggregate the data on worker illnesses and create simple bar charts that showed the number of people with various ailments each month. Very quickly they could see that stomach ailments were the leading cause of sickness and absenteeism.

This enabled the factory to educate workers on hygiene, food preparation, and clean water to reduce the number of stomach problems.



## SCORECARD LINK - SAMPLE INDICATORS

**3.2.1** The provider provides the patients medicines, products, counseling and information in a fashion that ensures their confidentiality.

**3.8.5** Health records and data are regularly reviewed by providers to ensure follow-up with individual patients.

**4.1.2** Health provider follows up with patients to ensure the referral took place and services were received.

**4.3.1** Health provider has taken at least one action during the year to improve knowledge or skills to improve or expand services offered.

## SECTION 8: Action Steps

You will start on health improvements where it makes most sense for your factory. This section suggests action steps that are proven good practices. These actions and related activities are explained in greater detail in the “**How-to**” Toolkit.

**STEP 1: Assign Responsibility** to a senior-level manager and department for active oversight of health functions. If this person already supervises health in your factory, then take steps to ensure that the person is playing a more active management role.

**STEP 2: Implement a Self-Assessment** of factory health services using the Scorecard and input from worker, managers and health staff. Suggested practices include:

- Form a health improvement working group with representatives from all parts of the factory
- Use the Scorecard to identify short-term and long-term priorities
- Ask for ideas and input from everyone in the factory (as factory issues may not be captured by all the Scorecard indicators)

**STEP 3: Develop a Short-Term Action Plan.** You should complete the work in three months and:

- Prioritize quick and visible wins
- Include indicators for Health Service, Management Systems, and Leadership
- Set a clear timetable and assign responsibilities for actions with measurable indicators

**STEP 4: Implement the Action Plan.** Suggested practices include:

- Communicate progress during implementation
- Recognize success and address challenges
- Engage a range of people in activities, not just the health staff

**STEP 5: Develop a Long-Term Annual Plan.** This will build on the lessons learned and performance indicators from the Action Plan. Like the Action Plan, it needs to have clear goals or actions with measurable indicators and clear assignment of responsibility. Suggested practices include:

- Hold progress reviews every three months – to identify challenges, find solutions and revise actions as needed
- Communicate regularly with workers and managers on the plan – and seek feedback.



### INDUSTRY RESEARCH

Workplaces with effective health programs and good returns follow three best practices:

- 1. Create a Culture of Health**, ingrained in every part of the organization:
  - Business Mission
  - Performance Metrics
  - Programs, Policies, Health Benefits
- 2. Have a Leadership Commitment** driven by the CEO
- 3. Set Specific Goals and Expectations:**
  - Think big, start small, act fast – one step at a time
  - Set short- and long-term objectives
  - Be realistic about what can be achieved in 1, 3, 5, 10+ years
  - Accountability – leaders and employees are accountable for doing their part to support a culture of health

*Promoting and protecting worker health safety and well-being, Workplace Health Research Network*



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The Evidence Project uses implementation science—the strategic generation, translation, and use of evidence—to strengthen and scale up family planning and reproductive health programs to reduce unintended pregnancies worldwide. The Evidence Project is led by the Population Council in partnership with INDEPTH Network, International Planned Parenthood Federation, PATH, Population Reference Bureau, and a University Research Network.



Meridian Group International, Inc. is a woman-owned, small business that works with the private and public sectors to create innovative programs and partnerships that benefit both business and society. As an Evidence Project partner, Meridian combines implementation science with its extensive experience implementing workplace health programs and promoting better policies and practices.

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**Photo Credit:** Ashish Bajracharya/Population Council

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