

Managing psychosocial risks in European micro and small enterprises:

Qualitative evidence from the Third European Survey of Enterprises on New and Emerging Risks (ESENER 2019)

Country Report (Germany)

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1 Introduction

This report presents the country case study for Germany in the framework of the study: Management of psychosocial risks in European workplaces - qualitative evidence from the Third European Survey of Enterprises on New and Emerging Risks (ESENER 2019).

2 Legal and policy context

This chapter provides an overview of the national policy context concerning the:

- main laws and policies;
- existence of any objectives, targets, monitoring and evaluation approaches;
- inspection regime concerning micro and small establishments (MSEs) and psychosocial risks;
- specific policy initiatives targeting MSEs on the issue of psychosocial risks;
- training and courses on psychosocial risk management;
- public awareness campaigns; and
- sector or collective bargaining initiatives that have a focus on psychosocial risks management.

2.1 Overview of the legal and policy context

The German occupational safety and health (OSH) system has a dual structure. It includes administrative (federal and state level) functions and provisions that are complemented by the activities of autonomous accident insurance institutions that are legally mandated to support employers to minimise OSH risks.

The tasks and responsibilities regarding the legislation and enforcement of OSH are split between the federal government and the states as well as the accident insurance institutions in the following way:

▪ Legal framework

The federal government creates the legal framework for OSH, undertakes research on working conditions, and represents Germany in European and international OSH institutions. German OSH law is predominantly administrative based, with case law having limited significance. The Federal Ministry of Labour and Social Affairs (BMAS) consults regularly with the responsible committees at state level to formulate legislation.

▪ Promotion of regulation

Both the federal and state governments enact legislation and implement regulations and rules. Furthermore, the accident insurance institutions engage with state institutions at both levels. With their approval, they can formulate their own OSH management rules, supervise the implementation of legal requirements, and provide advice to employers and employees.¹

▪ Enforcement and advisory

It is both the accident insurance institutions and the 16 state-level supervisory authorities that provide oversight of industry and give advice on how to meet OSH requirements. They also have the powers to impose sanctions on non-compliant companies.

All parties that have the duty to formulate OSH public policies – namely the German government, the states and the accident insurance institutions – collectively draw up the Joint German Occupational Safety and Health Strategy (GDA), which sets out the overarching strategic OSH goals for each period of five years.² Its aims are to maintain, improve and develop the safety and health of people at work through an agreed and systematically applied safety and health policy. Moreover, the jointly agreed goals aim to facilitate an even closer coordination of OSH risk prevention activities among the parties of the GDA in the future. The National Occupational Safety and Health Conference (NAK, Nationale Arbeitsschutzkonferenz) is the main decision-making body behind the GDA and is responsible for the planning and coordination as well as evaluation of regulatory measures of the GDA. The NAK consists of representatives of the federal and national governments as well as the accident insurance institutions

¹ See: <https://osha.europa.eu/en/about-eu-osha/national-focal-points/germany>

² See: https://www.gda-portal.de/EN/GDA/GDA_node.html

and therefore also serves as a coordinating platform that bundles resources, points out forward-looking paths and strengthens the effectiveness of implemented measures of the GDA.³

Concerning psychosocial risks, the GDA for 2019-2024 contains several core psychosocial risks management objectives, including the continuous work programme 'Psyche', which focuses on the following:

1. better enforcing employers' obligations to conduct a psychosocial risk assessment and increase its quality, specifically in MSEs;
2. psychosocial risk factors should, if possible, be eliminated systematically, or mitigated as far as possible; and
3. provide further training to inspectorates and other OSH professionals on psychosocial risk assessment.

To realise these objectives, four lines of action are planned:

1. More practical information, technical knowledge and research is planned to be made available online.
2. Implementation of quality standards for psychosocial risk assessments. Specifically, it is planned to develop tools tailored for MSEs in line with quality standards.
3. More support for the mitigation of psychosocial risks will be made available, including good practice examples.
4. Provision of tailored education to OSH specialists, including key managers, company doctors and inspectorates.

It is the responsibility of specific committees to formulate state regulations and outline possible solutions for implementing legislation. Concerning psychosocial risks, the Committee for Workplaces (ASTA), develops technical requirements within the Ordinance on Workplaces (ArbStättV), as explained further in the following section.⁴

There are two acts that provide the legal basis for new legislation concerning psychosocial risks. Firstly, the 1974 Occupational Safety Act (ASiG, Arbeitssicherheitsgesetz) provides professional support to employers through trained OSH specialists.

Secondly, the 1996 Occupational Health and Safety Act (ArbSchG, Arbeitsschutzgesetz) enables the transposition of the European Council Directive 89/391/EEC (Framework Directive) and its daughter directives on the introduction of measures to encourage improvements concerning OSH. While much of the law is directly transposed from EU directives, in several areas, the German legislation exceeds the minimum requirements.⁵

While the ArbSchG defines the legal standards to ensure workers' health and safety at work, the ASiG ensures that the necessary resources and knowledge are made available to reduce OSH-related risks. This means that the latter focuses on the provision of adequate services and the appointment of OSH personnel, such as company doctors or OSH experts.

2.2 Key legal requirements, and recent legislative proposals and revisions

The key legal requirements described in the ArbSchG encompass the duties and rights of employees and employers regarding OSH and outline preventive approaches.⁶

The key legal requirements extend to all employers who are obliged to conduct risk assessments and, based on the assessment, take the necessary measures in line with the prevention regulations.⁷ Risk assessments should be completed regularly and especially when procedural or organisational changes are introduced. Furthermore, the measures introduced must be tested regularly to gauge their

³ See: https://www.gda-portal.de/DE/GDA/NAK/NAK_node.html

⁴ See: <https://www.baua.de/DE/Aufgaben/Geschaeftsfuehrung-von-Ausschuessen/ASTA/ASTA.html>

⁵ See: <https://www.gesetze-im-internet.de/arbschg/BJNR124610996.html#BJNR124610996BJNG000200000>

⁶ See: <https://www.gesetze-im-internet.de/arbschg/>

⁷ See: https://www.baua.de/DE/Themen/Arbeitsgestaltung-im-trieb/Gefaehrdungsbeurteilung/Grundlagenwissen/Grundlagenwissen_node.html

effectiveness. Employers should record the risks identified and measures taken so that they can provide accident insurance institutions with such information when requested.

However, only companies with at least 10 employees are legally required to keep written documentation of the results of risk assessments. Employees have the right to request these documents. Moreover, all companies regardless of size are required to mandate a safety representative (Sifa, Sicherheitsfachkraft) and a company doctor. Together they consult and support the employer in all tasks related to the implementation of Framework Directive 89/391/EEC, such as the identification and mitigation of work-related risks.

To meet the requirements, MSEs do not normally employ their own in-house doctor but contract external ones. Company doctors are trained on all OSH matters, including psychosocial risks, and receive official materials and guidelines concerning psychosocial risks.⁸ Employers normally appoint an employee to fulfil the Sifa role and undergo OSH training provided by the accident insurance companies. In the case of MSEs, employers of companies in certain industries, which employ 50 employees or fewer, have the option to complete OSH training and carry out some Sifa tasks themselves.⁹ Importantly, there is a clear distinction between the Sifa's mandate and that of an employee representative, who is elected by the employees. While it is the Sifa's task to ensure and check OSH compliance, they do not advocate for employee rights more generally. In turn, employee representatives do not specifically focus on OSH but represent employees' perspectives broadly around working conditions and so on.

Further duties apply to companies with at least 20 employees. In these companies, employers are required to request a safety professional to support the implementation of new measures.¹⁰ Large companies sometimes do not consult external safety professionals because they often have qualified staff in-house. These professionals, even when employed or contracted, are deemed to be providers of independent expertise. Furthermore, these companies are also required to establish an Occupational Safety and Health Committee (ASA, Arbeitsschutzausschuss) consisting of employer representative(s), the safety professional, a company doctor, the Sifas, two representatives of the work council and, optionally, external experts.¹¹ Among other OSH issues, the committee discusses psychosocial risks and their prevention.

In 2012, IG Metall, one of the strongest unions in Germany representing industrial workers, reacted to the increasing psychosocial risks among their constituents and initiated an 'anti-stress initiative' that demanded psychosocial risks to be included in risk assessments. Even though employer associations resisted the proposal, the government supported the initiative.¹² As a result, in 2013, the ArbSchG was amended to incorporate psychosocial risks specifically. Subsequently, all parties, including the BMAS, the Confederation of German Employers' Associations and the German Trade Union Confederation (DGB), adopted the Joint Declaration on Mental Health in the Workplace, in which the parties declare their common understanding on aspects regarding successful job design, prevention of mental health risks and (professional) reintegration.¹³ The declaration is a non-binding document representing the tripartite consensus.

The amendment to the ArbSchG obliges all employers to include psychosocial risks in risk assessments and implement needed prevention measures. The obligation is embedded in existing OSH provisions, such as the ArbStättV or the Ordinance on Operational Safety (BetrSichV), as well as in the provisions of accident insurance institutions. More specifically:

ArbStättV

- Section 3 states that employers are obliged to not only consider physical risks when designing workplaces but also psychosocial risks. Further, it mandates employers to conduct a

⁸ See:

https://www.dguv.de/medien/inhalt/praevention/praev_gremien/arbeitsmedizin/produkte/leitfaeden/leitfaden_psyche_netz_100_310.pdf

⁹ See: http://www.gesetze-im-internet.de/englisch_asig/index.html

¹⁰ See: <https://www.dguv.de/fb-org/sachgebiete/sicherheitsbeauftragte/index.jsp>

¹¹ Other key legislation includes: Working Time Act (ArbZG), Youth Employment Act (JArbSchG), Maternity Protection Act (MuSchG)

¹² See: https://www.igmetall.de/download/docs_antistress-Broschuere-druck4_ansicht_kayadeniz_4aba81aa843af9cd8160556959d480b171e0b64.pdf

¹³ See: <https://www.bmas.de/EN/Services/Publications/a449e-joint-declaration.html>

professional risk assessment and to consult external consultants if internal competencies are lacking. Furthermore, all risk assessments must be documented, including the potential risks detected and the measures taken.

BetrSichV:

- Section 3 mandates employers to consider all potential risks associated with the use of work-related tools, for example, machinery, hand tools and other equipment needed to perform tasks, and specifically include psychosocial risks. Employers are obliged to conduct risk assessments regularly, prior to introducing new tools, and must record the results.

While these ordinances set the legal framework for psychosocial risk assessments, they do not specify how such assessments should be conducted (for example, what the potential risks could be). Employers may find support via relevant training programmes or advice provided by the different bodies of the GDA, which are the accident insurance institutions as well as national or local governments. As part of the work programme 'Psyche', for instance, online trainings and recommendations for implementing psychosocial risk assessments are offered. See section 1.6.

2.3 Psychosocial risk management policy objectives, targets, monitoring and evaluation approaches

The overarching goal of the GDA is to maintain, improve and promote the safety and health of workers by means of the efficient and systematic implementation of OSH measures. More specifically, the GDA's goals are to:

- raise awareness of safety and health among employers and workers;
- maintain and strengthen employability, including promoting lifelong learning;
- support general health objectives;
- decrease costs of social insurance systems; and
- increase the competitiveness of companies.

In 2007, the bodies of the GDA agreed that the Joint German OSH strategy would be quality-assured and evaluated. The items subject to evaluation and monitoring included events, campaigns, projects, objectives, implementation procedures and institutional OSH cooperation. In addition to the evaluation of targeted work programmes across states and responsible bodies, the OSH strategy is also being evaluated in terms of its impact on the OSH administrative system in workplaces.¹⁴

From 2013 to 2018, the strategy focused on three main objectives that were subject to evaluation. The objectives were to improve the organisation of OSH in companies, decrease the occurrence of work-related health hazards and musculoskeletal disorders, and improve the protection of work-related mental health.

To implement these objectives, the GDA introduced three work programmes – one programme for each objective. The programmes support employers, the management and employees as well as OSH experts¹⁵ (the third programme pertains to psychosocial risks, see section 1.6). The work programmes covering 2013 to 2018 include:

- 'Organisation: Occupational safety and health with a method pays off';
- 'Musculoskeletal Disorders (MSDs): Prevention makes us strong – and our backs'; and
- 'Psyche: Reducing stress – developing potentials'.

Overall, the work programmes for the period 2013-2018 were considered as well implemented, which seemed promising for the improvement of the psychosocial work environment. As part of the core process, some 13,000 establishments were inspected and counselled. While companies were found to be largely aware of psychosocial risks, the evaluation also found that small and medium-sized companies in particular do not conduct risk assessments appropriately.¹⁶

¹⁴ See: https://www.gda-portal.de/DE/GDA/Evaluation/2013-2018/2013-2018_node.html

¹⁵ See: https://www.gda-portal.de/DE/GDA/Arbeitsprogramme/Arbeitsprogramme_node.html

¹⁶ See: https://www.gda-portal.de/DE/Downloads/pdf/Abschlussbericht-AP-Psyche.pdf?__blob=publicationFile&v=2

The objectives of the current period 2019-2024 indicate that the understanding on psychosocial risks has grown, possibly as a result of 'Psyche'. In the previous period, the focus was on work-related mental load, while in the current period all psychosocial risk factors are considered. In the current period, the following objectives are considered:

1. work design preventing MSDs;
2. work design preventing psychosocial risk factors; and
3. safe handling of carcinogenic hazardous substances.

To address the second objective, the GDA has further developed the work programme 'Psyche' through several actions. Firstly, further materials, measures and instruments will be offered to MSEs to improve the quality of the instruments that are used to measure mental stress. Secondly, recommendations will be developed on how to ensure appropriate workplace designs to counter mental stress, such as requirements for design processes, actions and practical examples. Knowledge will be shared via an online-based information platform as well as by publishing expert articles. Thirdly, actions are also planned to ensure corporate stakeholders are better qualified to manage psychosocial risks. Measures include advancement of trainings, development of guidelines, workshops, and sample curricula for OSH expert staff and works councils as well as managers.¹⁷

2.4 Inspection regime for MSEs with a focus on psychosocial risks management

There are no differences between the 16 states regarding the legal/formal requirements of management of psychosocial risks in the workplace (OSH-Act, ArbStättV, BetrSichV). However, even though all inspections follow the guidelines issued by the GDA, the organisation of OSH monitoring is the responsibility of states and the respective accident insurance companies. While there are no specific inspection regimes for MSEs, the accident insurance companies have become aware of the lack of proper risk assessments among MSEs and thus offer advice and support that is geared towards the needs and circumstances of MSEs.

Since 2015, the inspection staff of the OSH authorities and accident insurers conduct coordinated inspections. The inspections are based on 'the guideline on counselling and inspection' issued by the GDA.¹⁸ The document outlines the standards for the labour inspectorate that has the mandate to monitor all workplaces for psychosocial risk factors and to control whether employers have carried out risk assessments for these factors thoroughly. A list of four basic job characteristics were defined for assessment, which includes psychosocial risk factors:¹⁹

1. work content and work tasks (for example, scope for decision-making, emotional demands);
2. work organisation (for example, working time, demands for communication and cooperation);
3. relationships (for example, in relation to colleagues and superiors); and
4. working environment (for example, noise, lighting, hazardous materials).

For each of these job characteristics and the related items, 'critical manifestations' were highlighted for action. For example, in relation to the psychosocial characteristics 'Work content & Work tasks', a basic item is scope for decision-making, and according to the GDA guideline, the corresponding critical manifestation is as follows: Employee has no control over: a) work content, b) amount of work, c) work methods, and d) sequence of work tasks.

Moreover, under the 'Psyche' work programme, inspection staff of the relevant authorities have received training to identify psychosocial risks in the workplace and advise employers of their duties, especially concerning risk assessments.

However, there may be some gaps in compliance. A recent quantitative study by Beck and Lenhardt (2019) provided empirical evidence on the extent to which employers comply with these obligations.²⁰

¹⁷ See: https://www.gda-portal.de/EN/GDA/Objectives/2019-2024/2019-2024_node.html

¹⁸ See: https://www.gda-portal.de/DE/Home/Home_node.html

¹⁹ See: https://www.gda-portal.de/DE/Downloads/pdf/Leitlinie-Psych-Belastung.pdf?__blob=publicationFile&v=5

²⁰ See: <https://link.springer.com/article/10.1007/s00420-019-01416-5> – Methods used: Survey data from 6,500 German companies were used to calculate the prevalence of workplace risk assessments that include psychosocial factors.

The study found large deficiencies in the implementation of psychosocial risk assessments, especially for MSEs.²¹

In recent years, the number of inspections has decreased. In an interview with Oxford Research, the German focal point pointed out that this may be attributed to the increased complexity of inspections including the need to cover psychosocial risks. To ensure that a certain minimum of companies are inspected each year, a legal lower threshold of 5% per state has been set for 2026.²²

If, during an inspection, non-compliance is found, the inspectorate will set a deadline by which the employer needs to make the necessary adjustments. If the employer fails to do so, the respective authority can temporarily close the company and issue a fine of up to €25,000. If, as a result of these violations, employees are psychologically or physically harmed, or the violations continue despite reminders, the employer may face a prison sentence.

2.5 Specific policy initiatives targeting MSEs and psychosocial risks

As noted under section 1.3, the GDA has a specific focus on supporting psychosocial risk assessments in MSEs within the work programmes of the current strategy period. While this focus on MSEs is new and informed by the evaluation of the last working period, an emphasis on psychosocial risks was established during the 2013-2018 period.²³ In this context, the GDA developed the previously mentioned work programme 'Psyche', which continues under the current period.²⁴ The programme offers:

1. Practical support for companies:

- practical support for employers and employees regarding work design;
- guidance for psychosocial risk assessments; and
- good practice examples.

2. Information, motivation and qualification:

- provision of technical information as well as trainings and seminars for employers, employees and OSH-specialists;
- qualifications of OSH specialists; and
- public relations and awareness campaigns on all issues related to psychosocial risks (for example, informative events and flyers with a specific focus, such as prevention of burnout or leadership).

3. Supervision and advisory support:

- tailored advice regarding the identification of psychosocial risk factors in risk assessments;
- advice regarding work hours and schedules; and
- supervision and advice on preventive measures for companies exposed to significant psychosocial risks.

2.6 Training and courses focusing on psychosocial risks

At federal level, the Federal Institute for Occupational Safety and Health (BAuA) offers workshops and trainings.²⁵ Furthermore, as part of 'Psyche', the GDA has made efforts to set standards for further

Furthermore, multinomial logistic regressions were performed to explore which company characteristics influence the chance of psychosocial risk assessment occurrence.

²¹ The findings suggest that enhancing companies' utilisation of professional OSH experts and strengthening the advisory and control capacities of the OSH inspection authorities in the area of psychosocial risks would be beneficial for improving the current situation. These suggestions have been taken up by the working group of the current work programme of the GDA (in more detail under section 1.3).

²² See: https://www.gesetze-im-internet.de/arbschg/_21.html

²³ See Objective 3: The protection and strengthening of health in the case of work-related mental load.

²⁴ See: <https://www.gda-psyche.de/DE/Ueber-uns/inhalt.html>

²⁵ See: https://www.baua.de/DE/Home/Home_node.html

education of OSH professionals on psychosocial risk management (for example, through definition of training outcomes for different groups and suggesting course contents).²⁶

The New Quality of Work Initiative (INQA) is a joint undertaking of the federal government, state governments, social insurance partners, social partners, foundations and enterprises, and was launched in 2002 by the BMAS. The initiative's tasks include strategy consulting focusing on a healthy work environment.²⁷

The Modellprogramm zur Bekämpfung arbeitsbedingter Erkrankungen (Model programme on combating work-related diseases) was founded by the BMAS and launched in 2000. The aim of the activities is to assist companies in implementing preventive measures, develop an infrastructure and networks, and encourage information flow and the exchange of know-how, especially among small and medium-sized enterprises.

When the ASiG was introduced, competition among OSH specialised training institutions increased, and in response, the BMAS defined specific quality standards for OSH services. In 2000, the BMAS created 'Gesellschaft zur Qualitätssicherung in der betrieblichen Betreuung' (literally: Society for Quality Assurance in Occupational Health and Safety Provision, GQB) and "Gesellschaft für Qualität im Arbeitsschutz" (literally: Society for Quality in Occupational Health and Safety, GQA).²⁸ These bodies work independently and offer consulting and training to employers, who obtain a certificate upon meeting the standards.

Independent from federal and state authorities, the accident insurance institutions offer special OSH training for enterprises of all sizes, including MSEs, as part of the 'Unternehmensmodell'.²⁹ Because of the close relationship between accident insurance institutions and the federal and state governments (through the GDA), they can streamline their services, such as supervision of implementation of legal requirements or consultancy for both employers and employees.

In addition, there are several private training institutions and trade unions offering practical guidelines, trainings and seminars on psychosocial risk management, such as the Vereinte Dienstleistungsgewerkschaft³⁰ (literally: union of service providers), the DGB,³¹ and the German Association for Psychiatry, Psychotherapy and Psychosomatics (DGPPN). The DGPPN is involved in research on mental health, develops scientific guidelines, and promotes training and education.³²

2.7 Public awareness campaigns

In 2012, the INQA launched an initiative aimed at improving psychological wellbeing (Offensive Psychische Gesundheit (PsyGA)). It provides practice-based information on the issue of mental health in the workplace through its platform offerings, which include information sharing, eLearning tools, concepts for seminars, guidelines and working aids designed to allow companies to organise work in an employee-oriented way, and thus prevent burnout.³³

The DGB frequently holds events to raise awareness about psychosocial risks in the workplace, such as press conferences on 28 April, which is the World Day for Safety and Health at Work.³⁴

As part of 'Psyche', good practice examples, interviews with mental health experts and other public awareness campaigns were published between 2014 and 2018.³⁵ These included:

- A brochure calling for the implementation of psychosocial risks assessments, along with recommendations on how they can be implemented. The brochure was aimed at both employers and OSH professionals.

²⁶ See: <https://www.gda-psyche.de/SharedDocs/Publikationen/DE/Qualifizierungs-Empfehlungen.html>

²⁷ See: <https://inqa.de/DE/startseite/startseite.html;jsessionid=C6C7EA061B145C7E25791A91E4D4F17F.delivery1-replication>

²⁸ See: <https://gqa.de/>

²⁹ See: https://www.dguv.de/medien/inhalt/praevention/vorschriften_regeln/regulation_2_en.pdf

³⁰ See: <https://www.verdi.de/service/beratung-unterstuetzung>

³¹ See: <https://www.dgb.de/themen/++co++b56b0570-70c6-11e0-4b6a-00188b4dc422>

³² See: https://www.dgppn.de/_Resources/Persistent/e26c32136d13c2ac6bc4339a1fad48e7c3910439/2014-07-10-DGPPN-Studie_KURZ_Gef%C3%A4hrdungsbeurteilung-WEB.pdf

³³ See: <https://www.psyga.info/>

³⁴ See: <https://www.dgb.de/presse/++co++b56b0570-70c6-11e0-4b6a-00188b4dc422>

³⁵ See: <https://www.gda-psyche.de/DE/Presse/Pressemitteilungen-2018/inhalt.html>

- An initiative, 'practical tools in the workplace', provided good practice examples, including with respect to psychosocial risks, on improving the working environment.
- An internet portal (https://www.gda-psyche.de/DE/Home/home_node.html) to provide guidance on reducing mental stress at work and provide information on risk assessments.

2.8 Sector or collective bargaining initiatives that have a focus on psychosocial risk management

The collective agreement for social and education services that is part of the collective agreement for public services (Tarifvertrag für den Öffentlichen Dienst (TVöD), Besonderer Teil Verwaltung (BT-V), §2 der Anlage zu §56 (VKA)) specifies employees' rights around risk assessments (according to the ArbSchG).³⁶ Specifically, it describes employees' legal rights for:

- a risk assessment;
- the risk assessment being conducted in line with relevant legislation;
- employees' involvement in the risk assessment;
- information about the outcome of risk assessments;
- involvement and decision-making regarding the implementation of new measures; and
- further risk assessments whenever their work tasks or environment change, when previous measures have been ineffective or when new risks have emerged.

Further, the collective agreement regulates the establishment of works councils (in addition to the OSH committee), which advise on measures required to avoid hazards.³⁷

Furthermore, currently, trade unions are renewing their demand for an 'anti-stress regulation'.³⁸ Other activities focus on knowledge transfer of psychosocial risk management, the role of the employee representatives in this context and their qualification schemes.³⁹ Since 2007, the DGB has carried out the annual representative employee survey 'good work'. The results have allowed the DGB to create a 'good work index' for different employers. Recently, the survey results indicated the link between digitalisation and stress in the workplace.

3 ESENER 2019 country-level results

This chapter provides an analysis of the ESENER 2019 country-level results to provide a picture of key national trends concerning the:

- inspection regime and reasons for compliance;
- employee representation methods; and
- establishment-level responses to psychosocial risk management.

3.1 Inspection regime and reasons for compliance

Frequency of inspections

ESENER 2019 shows that the reported frequency of inspections in Germany increases with company size, with micro firms visited less proportionally. Overall, nearly half of the MSE population declared to have been visited by a labour inspectorate in the previous three years. It is important to keep in mind that MSEs make up a large share of the business population, and, in 2018, 63.7% of overall employment was accounted for by MSEs.⁴⁰

³⁶ See: https://www.bmi.bund.de/SharedDocs/downloads/DE/veroeffentlichungen/themen/oeffentlicher-dienst/tarifvertraege/tvoed-bt-v.pdf?__blob=publicationFile&v=8

³⁷ See: [https://www.bmi.bund.de/SharedDocs/downloads/DE/veroeffentlichungen/themen/oeffentlicher-dienst/tarifvertraege/tvoed-bt-v.pdf?__blob=publicationFile&v=8%20\(p.%2068/69](https://www.bmi.bund.de/SharedDocs/downloads/DE/veroeffentlichungen/themen/oeffentlicher-dienst/tarifvertraege/tvoed-bt-v.pdf?__blob=publicationFile&v=8%20(p.%2068/69)

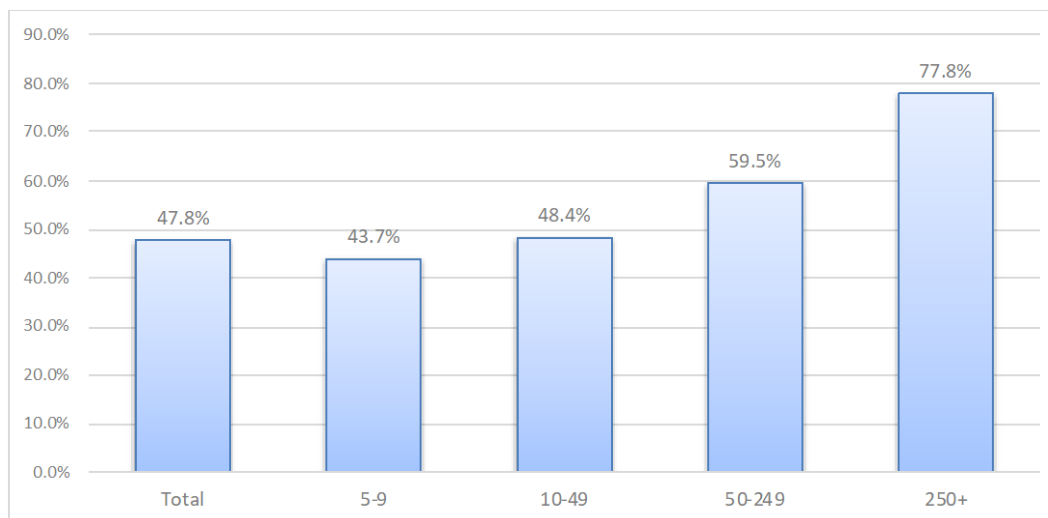
³⁸ See: <https://www.dgb.de/themen/++co++0ed6199a-041c-11eb-86ba-001a4a160123>

³⁹ See: <https://innovation-gute-arbeit.verdi.de/gute-arbeit/handlungshilfe-gefaehrungsbeurteilung>

⁴⁰ See: <https://ec.europa.eu/docsroom/documents/38662/attachments/12/translations/en/renditions/native>

When comparing the results of ESENER 2014 and 2019, establishment visits decreased over time for all company size categories, with 47.8% of establishments reporting visits in 2019 compared to 59.6% in 2014.⁴¹

Figure 1: Establishments visited by the labour inspectorate in the last 3 years – by company size (% establishments)



Source: Ecorys analysis of ESENER 2019 results

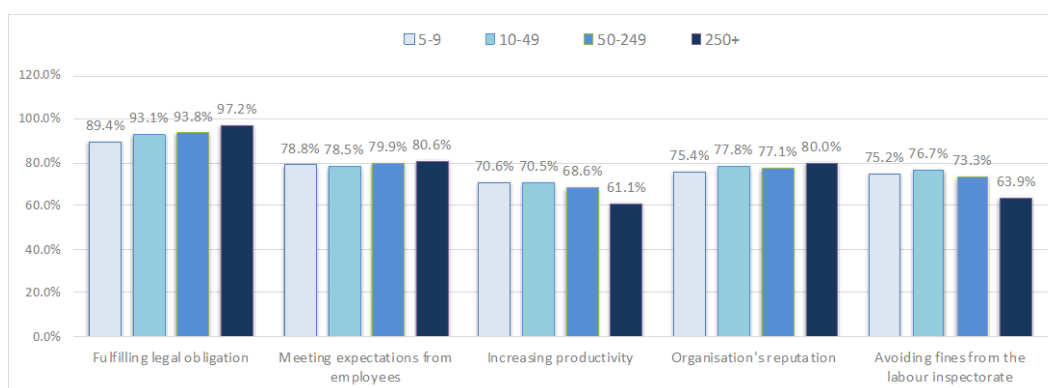
Reasons for compliance

The data show that across company sizes, the main motivation for addressing health and safety is to comply with legal obligations.

Another major reason is to meet employees' expectations, which is independent of company size. Large companies scored lowest on 'avoiding fines from the labour inspectorate'.

The view that increasing productivity is the main reason for addressing health and safety at a company was less frequently expressed by different company sizes. It seems, therefore, that there is a lack of awareness of the connection between employees' health and safety and overall productivity. These results are consistent with findings from ESENER 2014.

Figure 2: Reasons for addressing health and safety in establishments – by company size (% establishments)



Source: Ecorys analysis of ESENER 2019 results

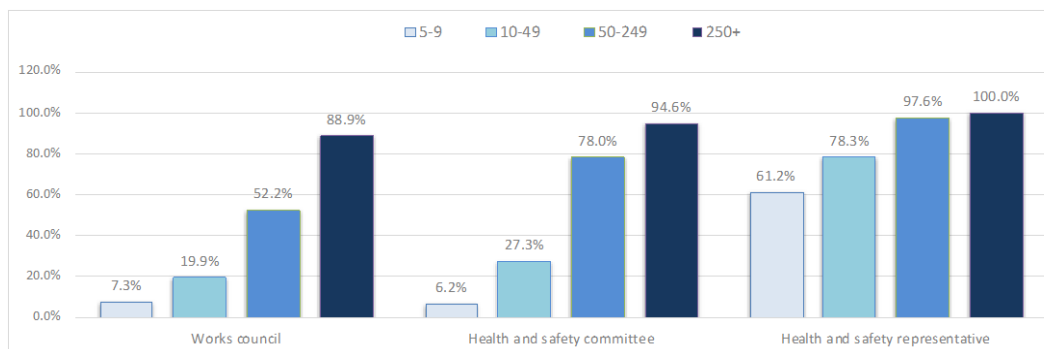
⁴¹ See: <https://osha.europa.eu/en/publications/second-european-survey-enterprises-new-and-emerging-risks-esener-2-overview-report/view>

3.2 Employee representation methods

Forms of representation

Regarding reported forms of employee representation, OSH representatives were the most frequently reported and a works council the least. All forms of employee representation are driven by company size. This might be because formal or institutional representation through a works council or health and safety committee, for instance, requires formal bodies to be set up in line with legal frameworks and social traditions, which is related to enterprise size. An OSH committee, for instance, is only required for companies employing at least 20 employees. Because these requirements have not changed between 2014 and 2019, the results are consistent over time.

Figure 3: Forms of employee representation in the establishments – by company size (% establishments)

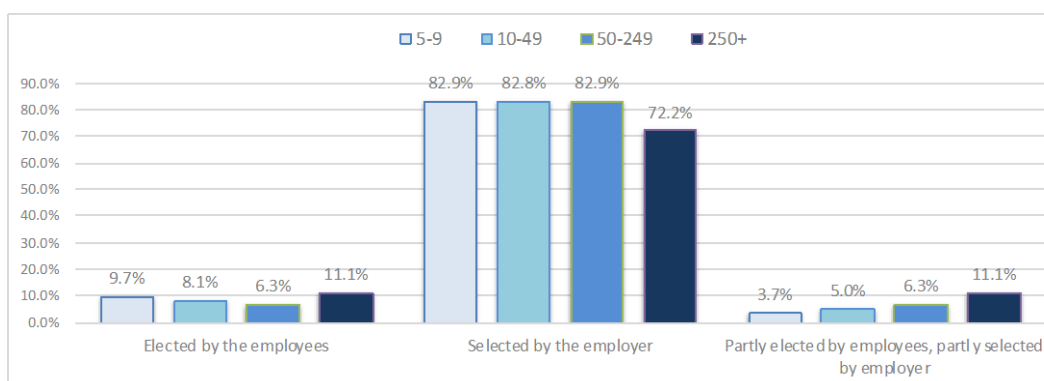


Source: Ecorys analysis of ESENER 2019 results

Representative election methods

As expected, OSH representatives (Sifas) are typically selected by the employer for all company sizes; see section 1.2 on the relevant legal requirements that provides further information on this.

Figure 4: The ways that health and safety representatives are elected in the establishments – by company size (% establishments)



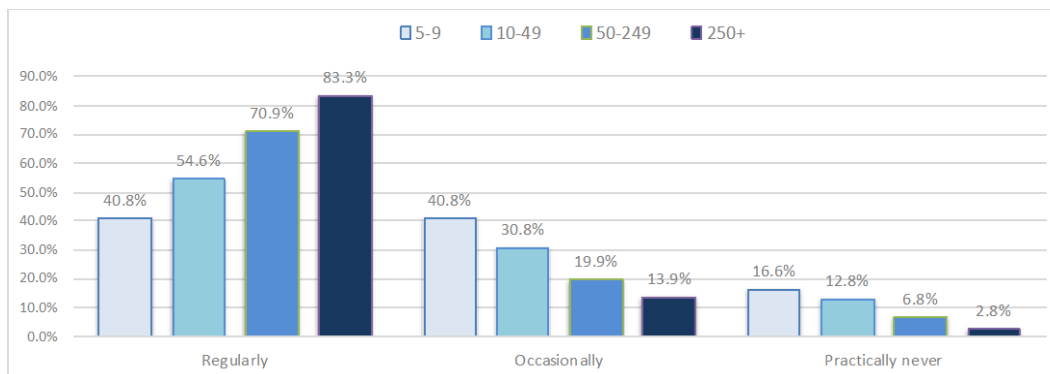
Source: Ecorys analysis of ESENER 2019 results

Frequency of discussions

The frequency of regular discussions on OSH between employee representatives and the management is related to company size, with a score of 83.3% for companies with 250+ employees and only 40.8% for microenterprises. This is not surprising considering the institutionalised works councils and OSH committees mandated for larger companies.

In the case of large companies, there has been little change since ESENER 2014. For companies with fewer than 50 employees, the percentage of respondents reporting no discussions between employee representatives and management has increased and also fewer reported occasional discussions.

Figure 5: Frequency of discussion of health and safety matters between employee representatives and the management – by company size (% establishments)



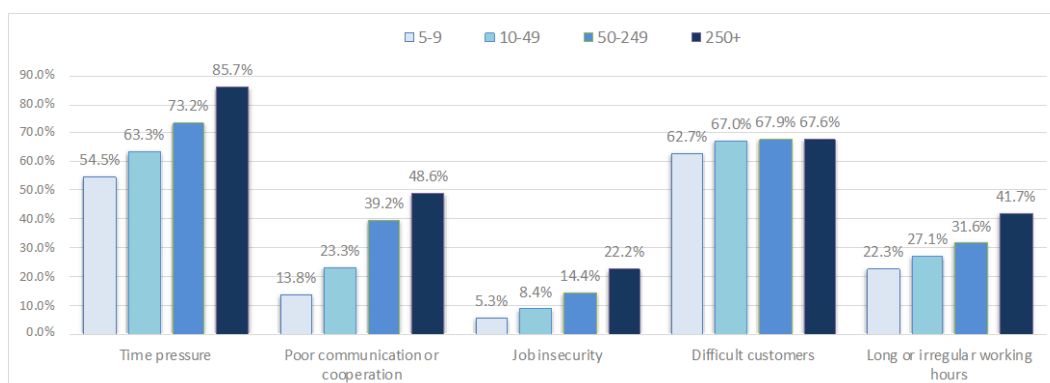
Source: Ecorys analysis of ESENER 2019 results

3.3 Establishment-level responses to psychosocial risk management

Identification of psychosocial risks

The two most frequently reported psychosocial risk factors present in an establishment are 'having to deal with difficult customers, patients, pupils, etc.' and 'time pressure', where the first is unrelated to company size while the latter increases with the number of employees. This is also true for 'long or irregular working hours', 'poor communication or cooperation within the organisation' and 'job insecurity'. Overall, only 7.8% of respondents identified job insecurity as a psychosocial risk, which may be due to Germany's economic strength. The psychosocial risks identified in ESENER 2014 have mostly remained the same for ESENER 2019. However, a slight increase in 'time pressure' and 'poor communication or cooperation within the organisation' across company size categories is notable. In addition, the risks reported are dependent on the sector.⁴²

Figure 6: Psychosocial risks identified in the establishments – by company size (% establishments)



Source: Ecorys analysis of ESENER 2019 results

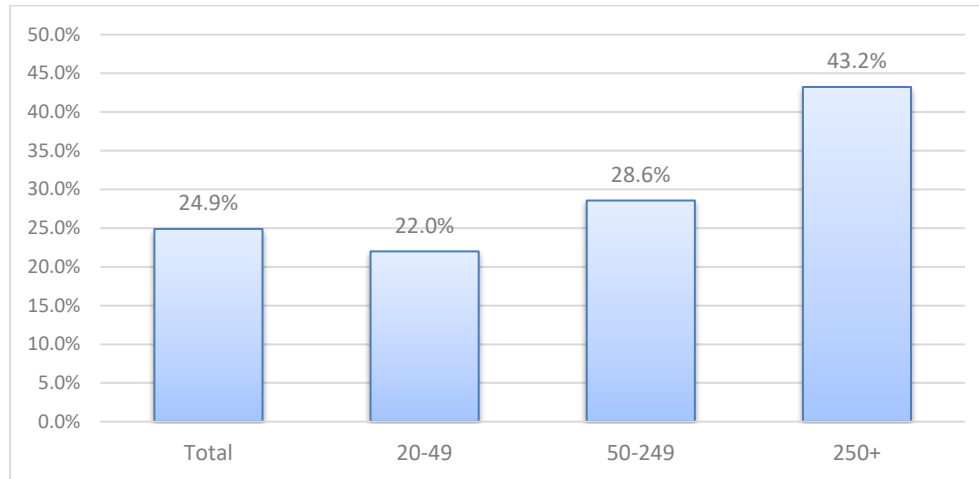
⁴² See: <https://osha.europa.eu/en/publications/third-european-survey-enterprises-new-and-emerging-risks-esener-3/view>

Introduction of action plans to reduce work-related stress

The introduction of action plans to reduce work-related stress is most common among larger companies. Logically, this makes sense because companies of that size also score highest on psychosocial risk factors identified. In addition, this may reflect the higher frequency of visits from inspectorates, higher levels of institutionalised employee representation and more regular discussions on OSH.

Compared to ESENER 2014, the percentage of establishments that introduced actions plans increased across size categories, with the largest increase among large companies where previously only 31.3% had action plans.

Figure 7: Introduction of action plans to reduce work-related stress in the establishments – by company size (% establishments)

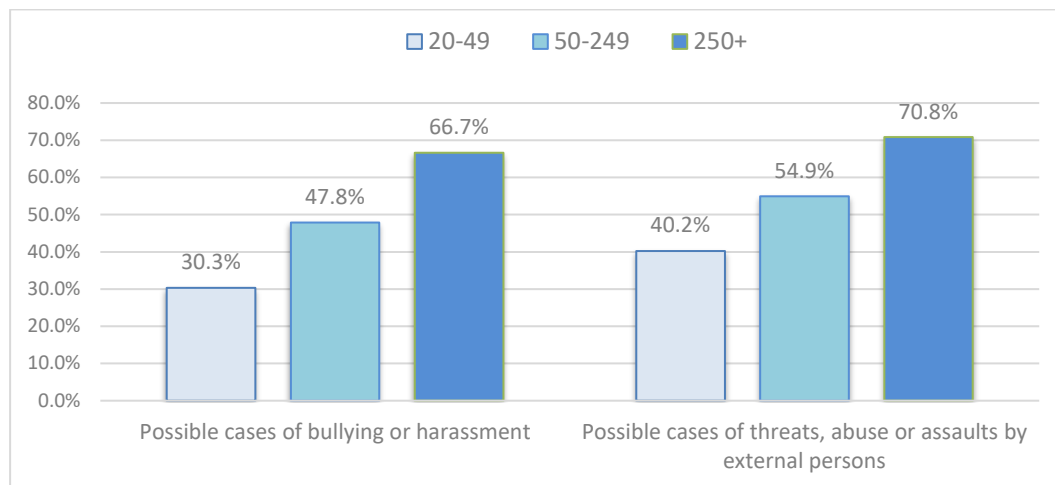


Source: Ecorys analysis of ESENER 2019 results – establishments employing at least 20 people.

Introduction of procedures

The data show that a total of 45.8% of companies have procedures to deal with cases of threats, abuse or assault by external persons and 37% have procedures addressing cases of bullying or harassment. Large establishments are most likely to have such procedures given their resourcing, concerns around reputation, and focus on staff retention and recruitment.

Figure 8: Establishments with procedures for dealing with possible risks – by company size (% establishments)



Source: Ecorys analysis of ESENER 2019 results – establishments employing at least 20 people.

Introduction of measures

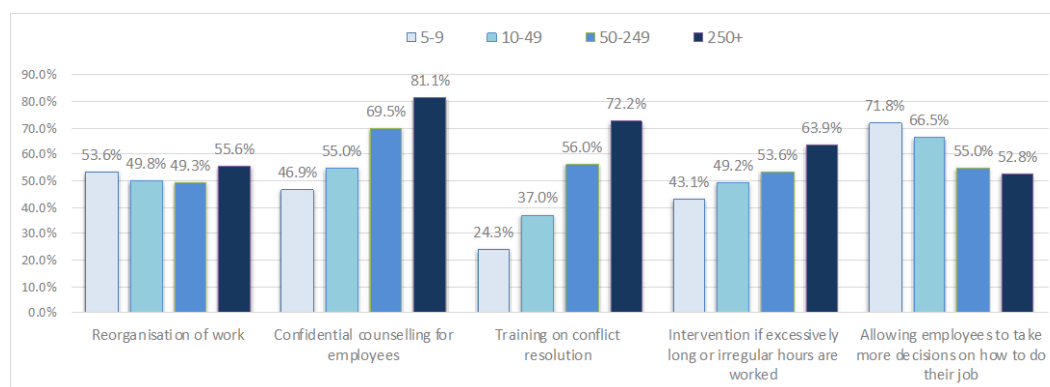
The following results concern measures introduced to mitigate psychosocial risks. Overall, ‘allowing employees to take more decisions on how to do their job’ was associated with the highest score of 67.6%.

The adoption of this measure is negatively related to company size, which seems logical given that microenterprises are likely to have more informal working practices.

4. All other measures are most strongly associated with larger companies, which again might be related to their higher levels of resources, expertise, employee representation and introduction of action plans to reduce work-related stress. To a similar extent, companies have implemented measures to enable the reorganisation of work to reduce job demands, suggesting that the need to respond to workload pressures is a common concern.

When compared to ESENER 2014, all measures were reported more frequently in 2019.⁴³ Smaller companies have especially caught up with the trend of ‘reorganisation of work’, while larger companies have introduced training on conflict resolution more frequently. More than likely, the onset of the COVID-19 pandemic in 2020 will have resulted in the further ‘reorganisation of work’.

Figure 9: Measures for psychosocial risks used in establishments – by company size (% establishments)



Source: Ecorys analysis of ESENER 2019 results

4 Main findings from the qualitative study

This chapter provides an analysis of feedback from establishments, considering qualitative feedback from both managers and employees. The chapter is structured as follows:

1. Sample of in-depth interviews
2. COVID-19 policy response and its impact on psychosocial risks in the workplace
3. The links between workplace culture, productivity, absenteeism and presenteeism and approaches to psychosocial risk management
4. Awareness level of psychosocial risk factors and obligation to manage them
5. The links between psychosocial risk management and overall management commitment to OSH
6. Extent of psychosocial risk management and procedures in place
7. Dedicated resources and degree of worker participation
8. Barriers and drivers to psychosocial risk management and support needed

4.1 Sample of in-depth interviews

Overall, a total of 253 companies were contacted (by email and follow-up phone calls). The interview requests were made between November 2020 and September 2021, which coincided with a number of severe restrictions and lockdowns in Germany due to the COVID-19 pandemic. Thus, a significant number of contacted companies were not available to participate in the study, as they were either closed

⁴³ This excludes ‘Allowing employees to take more decisions on how to do their job’ as this was not included in ESENER 2014.

due to the lockdown, had arranged short-term work for their employees ('Kurzarbeit'), or were under too much pressure due to their financial situation. In addition, since December 2020, employers were urged by the German government to allow their employees to work from home, which made it difficult to obtain interest from both managers and employees.

To address the shortfall, companies outside of the original ESENER 2019 target group were contacted. Thus, out of the 253 companies contacted, 223 companies had responded to the ESENER 2019 survey and 30 companies were contacted via intermediary bodies such as trade unions.

In total, 40 interviews were carried out with MSEs.⁴⁴ These included 15 double interviews (separate interviews with a manager and an employee of the same company) and 10 single interviews (with either a manager or employee). Three out of the 40 interviews (one double interview and one single interview) were carried out with companies that had not responded to the ESENER 2019. Please see Figure 10. Interviews were carried out either by phone or online through 'Teams'. Face-to-face interviews were not possible due to the need to limit personal contact due to the COVID-19 pandemic. The interviews consisted of six parts exploring:

1. key characteristics of the company (for example, size and number of employees);
2. links between workplace culture, productivity, absenteeism and presenteeism and approaches to psychosocial risk management;
3. the level of awareness of psychosocial risk factors and obligation to manage them;
4. the links between psychosocial risk management and the overall management commitment to OSH;
5. dedicated resources and the degree of worker participation; and
6. barriers and drivers to psychosocial risk management and support needed.

The report therefore describes the findings found in these areas.⁴⁵

Table 1: Sample of interviews

No	Firm size	Sector	Double/single	Mode
1	Small	Residential care activities	Double	Phone
2	Small	Public administration	Double	Phone
3	Micro	Retail sale of furniture	Double	Phone
4	Small	Transporting and storage	Double	Phone
5	Small	Information services activities	Double	Teams (online)
6	Small	Child day-care activities	Double	Phone
7	Small	Other specialised wholesale: wholesale of construction materials	Double	Phone
8	Small	Higher education	Double	Phone
9	Micro	Washing and (dry-)cleaning of textile and fur products	Double	Phone
10	Small	Water supply; sewerage; waste management and remediation activities	Double	Phone
11 (non-ESENER)	Micro	Manufacture of optical instruments	Double	Phone
12	Small	Operation of sports facilities	Double	Phone
13	Small	Support activities for transportation	Double	Phone
14	Micro	Hairdressing and other beauty treatments	Double	Phone
15	Micro	Real estate activities	Double	Phone
16	Micro	Information service activities	Single (manager)	Phone

⁴⁴ Small enterprises are defined as companies with 10-49 employees, micro-sized enterprises are defined as companies with fewer than 10 employees.

⁴⁵ The results will be further analysed and presented in a separate analytical report based on the findings found in the six countries participating in the project (Denmark, Germany, Spain, Croatia, the Netherlands and Poland).

No	Firm size	Sector	Double/single	Mode
17	Micro	Child day-care activities	Single (employee)	Phone
18	Micro	Specialised design activities	Single (manager)	Teams (online)
19	Micro	Specialised design activities	Single (manager)	Phone
20	Small	Manufacture of tubes, pipes, hollow profiles and related fittings, of steel	Single (manager)	Phone
21	Small	Manufacture of lifting and handling equipment	Single (manager)	Phone
22	Micro	Public administration	Single (employee)	Phone
23 (non-ESENER)	Micro	Information and communication	Single (manager)	Phone
24	Small	Electrical installation	Single (manager)	Phone
25	Micro	Management consultancy activities	Single (employee)	Phone

4.2 COVID-19 policy response and its impact on psychosocial risks in the workplace

At the onset of the pandemic in 2020, the German government introduced the so-called 'Kurzarbeitergeld', which is a short-time work allowance, that partially covers the cost of employees unable to work. Because the allowance paid out increases with fewer hours worked per employee, the policy incentivised companies, especially MSEs confronted with financial uncertainty, to encourage workers to remain off work, partially or fully.

This meant that many MSEs were experiencing stress due to the uncertainty and were overworked due to the reduction in staff. As a result, it was difficult to recruit managers to participate in interviews and to speak to their employees because they were legally not allowed to engage in any work-related tasks while receiving the maximum amount of short-time work allowance.

A manager in a small company noted that:

'The company is experiencing an added workload, that is overburdening employees. It is unfortunate but we can't really respond to it since it has to do with COVID-19, so we have no control.'

The BAuA and the BMAS introduced legally binding measures described in the SARS-CoV-2 Arbeitsschutzregel and SARS-CoV-2-Arbeitsschutzverordnung to protect workers from OSH risks related to COVID-19. However, their focus is on minimising the risk of infection without considering psychosocial risks.⁴⁶ These restrictions had several consequences that directly affected managers' and employees' work environments and thus interview responses.

Psychosocial awareness and COVID-19 as a driver for change

Often, respondents mentioned that the COVID-19 restrictions raised their company's overall awareness of psychosocial risks. At the time, the media highlighted issues around mental health, which seems to have raised the awareness of employers on these matters.

COVID-19 was the most frequently mentioned driver for change in the management of psychosocial risks. Psychosocial risks were discussed during virtual meetings that were initiated as a result of compulsory home working. However, even though conversations about stress, fears of job loss or health issues were common, it was pointed out that the discussions were not typically followed by concrete measures.

⁴⁶ See: https://www.baua.de/DE/Themen/Arbeitsgestaltung-im-Betrieb/Coronavirus/FAQ/FAQ_node.html

Employee involvement

Employee and manager perceptions differed on how the restrictions impacted employee involvement in the identification of psychosocial risks. On the one hand, financial pressures had meant that management of psychosocial risks had to take a 'backseat'. Alternatively, other answers showed that employees noticed that some managers had rethought the design of working methods, which had naturally facilitated employee involvement and talks about mental wellbeing and stress load.

Absenteeism

Absenteeism was often reported in connection with COVID-19, such as in the case of employees with pre-existing health conditions. Furthermore, Germany kept its schools completely closed longer than was the case in many other European countries. This meant that parents had to home-school while working from home. One employee indicated that in his company, it was only women with children who worked from home but that working from home, home-schooling and watching the children all at the same time only increased the psychosocial pressure for them.

4.3 The links between workplace culture, productivity, absenteeism and presenteeism and approaches to psychosocial risk management

Company culture

Common view

In nearly all companies, managers and employees agreed that the German company culture is open and hierarchically flat, allowing informal, frequent conversations about potential psychosocial risks. Some even described their manager-employee relationship as similar to a friendship. In some cases, respondents found that home working during lockdown had a positive impact on their culture because it encouraged planned communication between colleagues.

However, unrelated to COVID, it was mentioned that communication between different departments is lacking due to the company organisation.

Absenteeism / Presenteeism⁴⁷

Common view

Some level of absenteeism and presenteeism was identified in most firms. However, many people, including managers and employees, did not think psychosocial risks are connected with overtime or work intensity.

Since interviews took place during the lockdown, absenteeism was mostly mentioned in connection to COVID-19, which is explained in more detail in section 1.9.

Manager in a small firm working in the social field:

'Presenteeism and absenteeism are present in our company. This is due to our area of work and related pressures. Working with children with difficult backgrounds is tough.'

Employee of the same company:

'We do not experience absenteeism or presenteeism. Everyone is very committed, so everyone works extra hours because we all have a high workload.'

Differences between managers and employees

Regarding cases where managers' and employees' answers diverged, employees did not often recognise the presence of absenteeism or presenteeism whereas managers said the opposite. As an

⁴⁷ Presenteeism refers to when an employee works despite being ill, injured or otherwise impaired, preventing them from fully functioning in the workplace. Even though the employee may be physically at work, they may not be able to fully perform their duties and are more likely to make mistakes on the job.

observation, this may be because supervisors are better informed about employee performance through company monitoring of staff. It seems, therefore, that while the company culture is regarded as 'open', conversations between staff about their mental and physical health are not common.

Productivity

Common view

Generally, companies acknowledged the importance of a company culture that addresses psychosocial risks to boost productivity. Yet, this factor is rarely prioritised in company strategies.

In one company, respondents agreed that productivity and psychosocial risk management has become even more important during lockdown but had not resulted in any real change.

Differences between managers and employees

Managers did recognise that psychosocial risks may influence productivity levels. However, many of the interviewed managers explained that they are not aware of any psychosocial risks or that no risks are seemingly possible at their company and thus no action is needed. Many employees were oblivious towards the connection between productivity and the management of psychosocial risks, indicating the lack of discussions on the matter.

4.4 Awareness level of psychosocial risk factors and obligation to manage them

Risk identification

Common view

Apart from risks arising due to COVID-19, lack of communication, dealing with difficult customers and time pressure were the most frequently identified risk factors. As mentioned, some managers and employees were not aware of any risk factors.

Differences between managers and employees

Views diverged in terms of what can be considered as a risk factor. For instance, some managers considered having to deal with difficult customers as a psychosocial risk, while employees of some of these companies did not. Moreover, some managers indicated it is the employee's responsibility to identify psychosocial risks, while the employee representatives interviewed did not agree with this, showing that training or receipt of advice had built some awareness on the legal responsibilities of employers.

Some disagreement between managers and employees exists regarding whether workload should be considered as a psychosocial risk. Employees were also more likely to emphasise lack of communication as a major psychosocial risk, which also had connections with the planning of the workload.

Awareness of legal obligations

Common view

When asked about the extent to which managers and employees are aware of their legal obligations when it comes to the management of psychosocial risks, there were two common views. In some cases, managers and employees reported understanding of their legal obligations in connection with psychosocial risk management.

In other cases, both parties agreed that they were not 'up to speed'. This lack of legal awareness was clearly reflected in the lack of action or understanding of the presence of risk factors. As an observation, considering that all companies need to appoint a company doctor whether externally or internally, it seems that external advice on dealing with psychosocial issues is not provided through this avenue.

Differences between managers and employees

In the cases where managers' and employees' views differed, usually managers reported good awareness of their legal obligations, while employees said they were not aware. As an observation, there seems to be a disconnect because if the managers are aware of the legal context, then this should

be reflected through discussions on psychosocial risks or the introduction of measures. Yet, this does not seem to have happened extensively. Many respondents stated that discussions on psychosocial risks may be difficult to undertake.

However, some managers pointed to their membership of their professional organisations (Berufsgenossenschaft) as a way of educating themselves about their legal obligations in general and regarding psychosocial risks specifically.

Psychosocial awareness and responses, and awareness campaigns

Notwithstanding the issues raised since the pandemic, the level of psychosocial risk awareness was generally quite poor. Without major crises, there did not appear to be recognition or a need for initiatives.

However, some of the companies that had undergone change noted the role of external services. In one instance, one company went through the process of obtaining ISO certification, which entailed conducting a thorough OSH risk assessment that included psychosocial risks. The risks identified had to be managed as required to receive the certification.⁴⁸ Furthermore, one manager noted wider societal trends on social media leading to changes in how companies manage such risks.

Manager from a small company:

'Five to six years ago the top management started to put more focus on psychosocial risks. It used to be a taboo for us, because it is also a taboo in society. But things are changing, and we talk about it more now.'

Awareness campaigns on psychosocial risks were not recalled typically, despite the level of engagement between companies and their sectoral and professional organisations and so on. However, one manager noted a campaign run by a sectoral professional body, yet the employee interviewed did not recognise any change in approach at the firm.

Role of inspectorate

Inspections provide the opportunity to assess compliance with the management of psychosocial risks. Moreover, such inspections or visits can also be a source of motivation to deal with psychosocial risks. In Germany, both professional associations and public authorities can carry these out. However, in practice, the associations mostly consult companies so it is mostly public authorities conducting inspections.

Common view

Because inspections by the labour inspectorate should include psychosocial risk management, we asked managers and employees whether such visits have motivated them to review their current approach.

We found that about half of respondents had been subject to an inspection in recent years. However, in companies where recent visits from labour inspectorates were reported, managers and employees agreed that the visits did not focus on psychosocial risks.

Employee from a small company:

'We had a labour inspectorate visit our company last year (2020). Nothing was really mentioned about stress. Psychosocial issues were not discussed at all.'

Enterprises are unlikely to bring up psychosocial risks during the inspection themselves and if those issues are not brought up by inspectors either, they are not being discussed at all.

Differences between managers and employees

One difference between managers' and employees' interview responses is that some managers were aware of the visits, while the employees were not. As an observation, this may be because managers will naturally be more affected by the consequences of such visits and are more likely to stand in close contact with labour inspectorates than employees. Yet, this is not helpful for employees, considering also their lack of legal awareness on the matter. In addition, as stated in section 1.8, some sectors have

⁴⁸ See: <https://www.iso.org/iso-45001-occupational-health-and-safety.html>

collective bargaining agreements that obligate employers to involve or sufficiently inform employees about risk assessments, risks identified and measures planned.

4.5 The links between psychosocial risk management and overall management commitment to OSH

External OSH services

Common view

We asked to what extent and how companies make use of external OSH services to review or strengthen their approach to psychosocial risk management. The answers strongly underlined that the main motivation for OSH management is compliance with legal obligations.

Accordingly, follow-on explanations referred to the minimum legal requirements that pertain to all company sizes, namely the appointment of company doctors, safety representatives and training opportunities offered by accident insurance companies. Only in a few cases did respondents indicate that they used external OSH services to go beyond minimum requirements.

Differences between managers and employees

The main difference in employees' and managers' views concerned the competency levels of the OSH professionals responsible for advising on psychosocial risks, such as the safety representatives and company doctors. Especially in the case of the latter, some of the employees were unsatisfied when talking to doctors about psychosocial risks, and some managers were unaware doctors had such responsibilities.

Risk assessments

Common view

We asked companies whether they conduct risk assessments regularly, and to what extent these address psychosocial risks. Even though employers are legally obliged to evaluate their workplaces regularly, many reported that no risk assessments are conducted at their workplace, and a large majority did not know about the need to include psychosocial risks.

Some managers explained that risk assessments are only necessary when a new branch or location is opened, or that they did send out a survey once but then did not investigate the answers further because employees seemed uninterested.

Differences between managers and employees

Other managers reported the use of services provided by accident insurance companies that support them in regular risk appraisals that include psychosocial risks. However, even in the companies that did conduct regular risk assessments, employees were often unaware of them.

Overall, it seems odd that many respondents were committed to OSH for the reason of legal compliance while at the same time not aware of the practical steps that need to be undertaken to meet the rules, especially with respect to psychosocial risks.

OSH management organisation

Common view

Due to the lack of awareness, limited organisational measures had been taken to manage psychosocial risks. In some instances, both the manager and employee referred to a handbook or other OSH material that the company provides to employees but these materials do not include information on psychosocial risks.

Yet, one engineering company provided a rather distinct answer to this question.

Manager of a small company:

'We have an engineer and a company doctor that support us on OSH issues and we have a meeting with the OSH committee twice a year. Psychosocial risks are talked about and are typically brought up by the safety representative.'

Furthermore, this same company regularly conducted workplace risk assessments that include psychosocial risks. The most recent one was motivated by COVID-19 and the related change in circumstances. In this case, it seems that a combination of formalised OSH processes, ongoing exposure to physical risks, management commitment and a proactive safety representative was instrumental in putting psychosocial risks on the agenda.

In MSEs, managers often explained that the reason why they have no systematic approach to the management of psychosocial risks is that the company was too small and that informal conversations are sufficient. This view was also shared by some employees.

One employee in a micro company:

'The company does pay attention to health and safety but not psychosocial issues. This is because psychosocial issues are a personal problem, and every employee needs to decide for themselves how they want to handle it. Also, our company is very small. If someone has a problem, others will notice sooner or later.'

4.6 Extent of psychosocial risk management and procedures in place

Actions to prevent psychosocial risks

Although COVID-19 had motivated some employers to focus on issues such as stress and pressure, generally the actions undertaken were quite limited.

Nevertheless, in a few instances, respondents reported that their company is active in the prevention of psychosocial risks, namely through discussions on such matters. One manager also stated that their employees are surveyed by an external service provider about the quality of the workplace to explore issues around work pressure and other psychosocial risks.

Training

Common view

In the majority of companies interviewed, managers and employees mentioned that some form of OSH training was offered, either to managers only or to everyone either via physical or online training sessions.

However, only in one company did both the manager and employee recall a training session offered by a professional association that dealt with the management of psychosocial risks. The professional association tailored their training to the relevant sector to focus on the key OSH risks.

Differences between managers and employees

In some cases, even though the regular trainings offered by the respective professional associations were mentioned by managers, employees were not aware of any trainings taking place. Some employees also explained that because their budget for training is limited, they only receive it when considered necessary and financially feasible.

Employee from a micro firm:

'I once took part in a training session but then had to stop because the company experienced some financial difficulties and could no longer afford it'

Action plans

Despite the legal obligations, only one of the companies we interviewed had introduced an action plan to manage psychosocial risks.

Manager at a small company:

'The company has an internal quality management system that covers the different areas of the business where there may be health and safety problems. We have also included some steps to foresee psychosocial risks.'

Seemingly, this reflects the lack of awareness and prioritisation in companies and raises questions about whether key institutional and advisory bodies are focusing strongly on psychosocial risk management.

4.7 Dedicated resources and degree of worker participation

Employee involvement in risk identification

Common view

When we asked respondents whether employees are involved in the identification of psychosocial risks, the answers revealed that about half of the companies do involve employees informally. For instance, it is assumed that employees will bring up issues over lunch. Yet, clearly the risk is that sensitive subjects are not going to get discussed in informal settings especially when it is down to the employee to raise such matters.

Differences between managers and employees

The most significant disagreement concerned how 'involvement' should be defined. Some managers considered good communication as sufficient. Employees' answers reveal that a more structured and formal approach is desired.

In one case, employees were able to share their opinions through a survey, where they requested the set-up of a worker's council in light of instances of bullying but were subsequently denied by management. As suggested by the employees, this reflects the top management's perception of psychosocial risk management as a cost without benefits.

Through an ISO accreditation process, one company interviewed was required to discuss psychosocial risks internally and involve employees, which led to the implementation of new measures and improvements. This shows that external support and processes may be needed to drive change.

4.8 Barriers and drivers to psychosocial risk management and support needed

Main drivers

Common view

The main drivers have been mentioned already and significant detail is not provided here, that is, COVID-19, commitment to fulfilling legal obligations and avoiding fines. As an observation, it seems OSH compliance was considered as more of a box ticking exercise rather than improving employees' psychosocial environment. This might reflect the lack of general understanding of these issues, stigmatisation, and infrequent and open discussions.

Main barriers

Common view

Many mentioned stigmatisation and shame of having mental health issues as the main barriers to managing psychosocial risk. Moreover, some mentioned a lack of trust within the company preventing people from speaking up about problems.

Differences between managers and employees

Paradoxically, while initially most respondents described their company culture as open and having a flat hierarchy, some respondents also mentioned hierarchies and divisions between employees and management as a key barrier to the management of psychosocial risks. Ironically, some managers also felt the intensity of their own workload is the main reason they cannot manage psychosocial risks.

Manager at a small company:

'The work routine, the workload and time pressure are the main barriers to managing psychosocial risks.'

Employees specifically pointed out that stigma prevents them from using OSH services even when offered to them, out of fear, or being belittled, humiliated or not believed.

Furthermore, they sometimes worried that when they speak up about their workload, the work will just be handed on to someone else, who is equally busy. In some cases, the salary structures encourage competitive behaviour, which further feeds into the stigmatisation of psychosocial risks.

Respondents disagreed on whether it is easier in larger or smaller companies to manage psychosocial risks. On the one side, larger companies are more likely to have in-house OSH services and procedures in place but are also more anonymous environments and people are more likely to fall through the system. On the other hand, in smaller companies there may be a more supportive environment but not enough distance between employees.

Mitigating solutions

Common view

Overall, managers and employees saw open communication and soft skills as essential to mitigating psychosocial risks. Many would also welcome more visible government-led initiatives, such as counselling and external help in encouraging company reform.

Especially more efforts in educating people on psychosocial risk factors are needed. Considering that some of these were already established, it shows again that they need to be better communicated to companies or tailored to sectoral needs.

Differences between managers and employees

Some employees mentioned that they would appreciate access to either external counselling or a person of trust inside the company that they could turn to in times of acute stress or similar issues. This is something that managers did not consider. In one case, an employee stated that their management would only implement an initiative to mitigate workload pressure if they would see it benefiting the company as a whole.

5 Reflections on the internal and external dynamics of psychosocial risk management

This chapter provides further reflections on the internal and external dynamics and the establishments' answers provided concerning psychosocial risks management, including:

- influence of the national policy context on establishments; and
- reflections on the ESENER 2019 establishments' responses.

5.1 Influence of the national policy context on establishments

Key legal measures

Two of the key legal measures in Germany are the employer's legal duty to first conduct a risk assessment, and second, to appoint a Sifa and a company doctor. The in-depth interviews with MSEs in Germany have revealed the main problems with these measures:

Despite the significant policy focus on psychosocial risk management, the interviews showed that many MSEs interviewed were not aware of their legal obligations to conduct risk assessments, and the majority were not aware of the need to cover psychosocial risks.

While larger companies often have in-house OSH staff, MSEs most likely contract or consult external OSH experts, and management can carry out some of the tasks of the safety representative themselves. Given these specific legal conditions for MSEs, the need to manage psychosocial risks is seemingly less prioritised or understood.

Key policy drivers

The first key policy driver is the GDA. The management of OSH in Germany follows a rather decentralised structure involving both governmental and non-governmental actors on both regional and national level that have legislative, executive or advisory mandates. The GDA therefore plays a key role in bringing these actors together to collaboratively set out strategic objectives and how these should be

achieved. Because the management of psychosocial risks became a key objective in the second strategic period of the GDA from 2013 to 2018, the issue started to receive more attention from all members of the GDA but also affiliated organisations, unions and other interest groups. As a result, a number of different campaigns and initiatives followed, as described in more detail in Chapter 2.

Nevertheless, among the companies interviewed, our in-depth interviews have shown little visible effectiveness of these efforts concerning psychosocial risk management, including with respect to the public awareness raising efforts.

Effects due to enforcement approach

Overall, for the companies interviewed, it seems that inspections are not strengthening psychosocial risk management given their seeming lack of focus on such matters. Furthermore, employers of companies in certain industries, which employ ⁵⁰ employees or fewer, have the option to complete OSH training and carry out some Sifa tasks themselves.⁴⁹

In addition, MSEs with fewer than 10 employees are not legally required to keep any written documentation of psychosocial risks identified or measures implemented. Together, with the perception that the management of psychosocial risks is something voluntary, for most of the interviewed MSEs, the enforcement and compliance environment was notably weak around encouraging the adoption of relevant practices.

5.2 Reflections on the ESENER 2019 establishments' responses

This section provides an investigation of the ESENER 2019 responses provided by establishments interviewed and their in-depth qualitative feedback. The idea is to provide a layer of interpretation to the ESENER 2019 responses provided to clarify their relevance to psychosocial risk management.

The links between workplace culture, the frequency of discussions and management of psychosocial risk to increase productivity

In the case of our interviewee sample, we found that while general OSH matters were discussed regularly according to the ESENER 2019 results, the qualitative responses indicate that psychosocial risks are very rarely part of these discussions. This suggests that these companies have a narrow interpretation of what is meant by discussions on OSH.

Frequency of inspections

While half of the companies interviewed had undergone an inspection as confirmed by their ESENER 2019 responses, this should not be interpreted as meaning that inspections include coverage of psychosocial risks for this group.

Risks identified

The ESENER 2019 responses provided by the interviewed companies were again echoed in the qualitative interviews around the main risks identified, namely with respect to difficult customers and time pressures. However, the pandemic has resulted in a major change to the psychosocial work environment and therefore the results may now not be relevant for this group considering the risk of job loss is now more prominent. Other problems such as blurred boundaries between work and home life and poor communication may also be considered as more prominent.

Why psychosocial risks are addressed, what measures are used and what the main difficulties are

▪ Reasons for addressing OSH

The interviewee sample responses to ESENER 2019 were also clearly reflected in the interviews concerning the main reason for addressing OSH, namely fulfilling legal obligations, securing the organisation's reputation and avoiding fines. However, ESENER 2019 results also often indicate that the interviewee sample fulfils OSH to meet the employees' expectations.

⁴⁹ See: http://www.gesetze-im-internet.de/englisch_asig/index.html

With respect to psychosocial risk management, considering the qualitative answers given, perhaps management in the MSEs interviewed considered that employees did not have strong expectations of such issues. At the same, the employees interviewed also lacked awareness of the legislation and may not have been able to express their expectations given the different rules for MSEs concerning safety representatives. Therefore, for the interviewee sample, the ESENER 2019 results are not convincing on this aspect.

Use of action plans and other measures

The ESENER 2019 results for the interviewee sample suggest that the most common measure to manage psychosocial risks is allowing employees to take more decisions on how to do their job. While the interviewed companies did not refer to the use of measures during the interviews, we could conclude from the conversations that our sample of employees generally had a lot of freedom in how they do their job, which they appreciated and described as a positive influence on their psychosocial environment.

ESENER 2019 results were also accurate for our interview sample with respect to the limited introduction of action plans to manage stress.

Main difficulties in addressing psychosocial risks

The ESENER 2019 results for our interviewee sample show that especially the reluctance to talk openly about issues is the main barrier when addressing psychosocial risks. The same is true for the qualitative interviews, where the managers and employees especially pointed to the fact that social stigma is one of the primary barriers. Furthermore, the interviewees stated that lack of awareness on the part of both managers and employees is one of the main barriers when addressing psychosocial risks.

6 Conclusions

This chapter provides the main conclusions for each of the main topic areas explored via the interviews.

This report presented an in-depth country case study for Germany in the framework of the study: Management of psychosocial risks in European workplaces - qualitative evidence from ESENER 2019.

For the sample interviewed:

- **Policy environment**
 - While the German legal framework is particularly strong in setting OSH and psychosocial risk management duties, it appears not to have a major influence in establishing a strong psychosocial risk management approach in establishments.
 - The less stringent requirements for MSEs that allow managers to undertake some safety representative functions seems to limit the level of formal engagement between managers and employees.
 - Employee involvement in the identification of psychosocial risks is low due to lack of formalised approaches.
 - The focus on psychosocial risks could be strengthened even further in the on-site labour inspection to increase awareness and knowledge among MSEs.
- **COVID**
 - COVID-19 had a strong influence on people's overall awareness of psychosocial risks and in some cases facilitated change by increasing employee involvement, but it also increased absenteeism.
- **General awareness**
 - Generally, psychosocial risk management is not considered as a core area of OSH management and is not typically covered in risk assessments.
 - While managers are aware of the links between productivity and the psychosocial work environment, they have not integrated measures in their company strategies or in other meaningful ways.
 - There is a clear lack of legal awareness on responsibilities around psychosocial risks.

- **Key barriers**

- Social stigmas around raising psychosocial risks as a problem represent a major barrier.
- Employees are typically expected to raise psychosocial risks through informal discussions or to deal with the issues themselves.
- There seems to be a perception that fulfilling OSH requirements is a compliance or 'tick box exercise'.
- Introduction of action plans and other measures that aim at mitigating psychosocial risks are not common.

- **Solutions**

- Companies that had made the most progress had received external support, for example, through ISO certification initiatives.
- While weaker impacts were identified, training and awareness raising through professional bodies and work environment surveys to identify risks also demonstrated some potential in supporting organisational change.

The European Agency for Safety and Health at Work (EU-OSHA) contributes to making Europe a safer, healthier and more productive place to work. The Agency researches, develops, and distributes reliable, balanced, and impartial safety and health information and organises pan-European awareness raising campaigns. Set up by the European Union in 1994 and based in Bilbao, Spain, the Agency brings together representatives from the European Commission, Member State governments, employers' and workers' organisations, as well as leading experts in each of the EU Member States and beyond.

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