

ASSISTING COMPANIES IN TAKING BETTER ACCOUNT OF CHRONIC DISEASES IN THE WORKPLACE: FRANCE

1. Organisations involved

- Regional Agency for the Improvement of Working Conditions (ARACT) Aquitaine
- Fund for the Integration of Disabled People in Civil Service (FIPHFP)
- Association for the Management of the Fund for the Integration of Disabled People (Agefiph)
- Pension and occupational health compensation fund (CARSAT) Aquitaine
- Consortium: FIPHFP, Agefiph, CARSAT, Médecin inspecteur du travail (medical labour inspector), Société de médecine du travail (Society of Occupational Medicine) Aquitaine, Laboratoire d'ergonomie des systèmes complexes (Laboratory of Ergonomics of Complex Systems) of the National Cognitive Institute of Bordeaux, AIDS Prevention Association (AIDES), La Ligue contre le cancer (Cancer League), Association des paralysés de France (Association for Paralysed Individuals) and social partners

2. Description of the case

2.1. Introduction

One French person in five suffers from a chronic disease, and 80 % of the sufferers are in employment, meaning that approximately 15 % of the French workforce suffers from chronic diseases (ANACT, 2012). An ageing workforce increases the likelihood of this number increasing, with larger numbers of workers suffering from health problems of long duration, and often slow progression, that necessitate long-term treatments. Statistics show that most workers suffering from chronic diseases continue to work but their illnesses are one of the major causes of absence. Such absence may often be due to work organisation rather than to the disease itself; ARACT Aquitaine states (interview with Dominique Baradat) that, in about one-third of cases, inappropriate working time arrangements or unsuitable workplaces are the main cause of the worker's inability to perform his/her job.

2.2. Aims

The project aimed to encourage companies to adapt work organisation to promote the employment of workers suffering from chronic diseases, and to build operational tools that contribute to retain workers with chronic diseases in employment.

2.3. What was done, and how?

ARACT Aquitaine is a regional unit of the National Agency for the Improvement of Working Conditions (ANACT). For this specific project, ARACT partnered with three patients' associations, AIDES (AIDS Prevention Association), La Ligue contre le cancer (Cancer League) and the Association des paralysés de France (French Association for Paralysed Individuals).

2.3.1. Preliminary research

In 2006, ARACT and patients' associations noted that, while sick employees constituted a non-negligible part of the workforce, this issue was largely not considered in companies. A steering committee led by ARACT was set up with patients' associations, the society of occupational medicine in the region and the medical labour inspector, the Laboratory of Ergonomics of Complex Systems (Laboratoire d'ergonomie des systèmes complexes) in Bordeaux and the regional pension and occupational health compensation fund (CARSAT), to study the impacts of chronic diseases on work and propose ways to reduce them. The project was initially funded by the Initiative Programme EQUAL

and later formed part of the project *Promoting Healthy Work for People with Chronic Illness* (PHWORK) of the European Network for Workplace Health promotion (ENWHP).

ARACT set out to perform an initial assessment of the impacts of chronic diseases on work ability (for instance tiredness or secondary effects of the medical treatment) through a series of workplace diagnoses. This led to the second step, identifying factors of working conditions that discriminate against employees with chronic diseases, such as inappropriate working time schedules (for example insufficient breaks). A third and final element of the study was examining the sphere of stakeholders surrounding the employee outside the workplace that could have an impact on his/her professional life. This included general practitioners (GPs), whose prescriptions can have a major impact on work ability if some of the medicine taken has strong secondary effects during working hours, such as drowsiness, extreme tiredness or pain.

2.3.2. Current work

The project focuses more on collective measures than on individual assessment and adaptation, in order to integrate the issue of chronic diseases into company strategies. The project began by focusing on a limited number of chronic diseases (cancer, AIDS, multiple sclerosis and hepatitis), and later integrated diabetes, rheumatism, mental illnesses and inflammatory bowel diseases.

ARACT ensured that the gender dimension of women's work situation and chronic ill health was taken into account, by paying particular attention to discrimination, work–life balance issues and health issues such as breast cancer.

Beyond the assessment of the impact of chronic diseases on work, the project wanted to assist enterprises in designing company projects and strategies for workers with chronic diseases. ARACT worked with a range of different companies including Delpeyrat (food-processing industry), the municipal administration in Bordeaux, Crédit Agricole (bank) and the French railway company SNCF. The assistance provided by ARACT consisted of:

- defining and planning a company project (nomination of project team and defining objectives);
- training project managers on the issue of chronic diseases and working conditions;
- identifying work situations that cause problems for sick employees;
- identifying the communication and monitoring processes within the company: responsibility for managing sick leave, reclassification processes, whom the employee can talk to, etc.;
- establishing an action plan for the company.

During this process, ARACT sought to involve all relevant stakeholders in the company.

To facilitate communication of the company strategy to employees, ARACT proposed that the company set up a website or intranet, similar to the website managed by ARACT on chronic diseases, to display all relevant information to employees.

Intervention of ARACT in Delpeyrat to maintain workers with chronic diseases in employment

Delpeyrat is an agro-food industry specialising in the preparation and packaging of convenience food for large food retailers. The company employs 1,400 people on 17 premises. The project was first implemented on two premises, at Agen and Saint Sever, employing 850 people.

Delpeyrat first contacted ARACT to support its internal work on occupational diseases. A presentation from ARACT on chronic diseases brought to light the company's inadequate knowledge about the impact of chronic diseases and medical treatments on working capacity, and the lack of internal policies on the issue.

ARACT set up a project team and performed a company assessment to identify the number of employees with chronic diseases or restriction of capacities. It found that 4 % of employees were in these categories. The company first focused on three individual cases, which resulted in workplace adaptations to maintain the person in employment, or moving the person to another job within the company (*reclassification*).

Delpeyrat then took the project over as part of a group strategy for retaining workers with permanent restrictions of capacity in all their premises. The strategy covered all types of restrictions of work capacity, including occupational accidents and diseases, with a focus on chronic diseases. In all sites, chronic diseases were identified as an important, yet consistently overlooked, issue.

The project team was trained by ARACT, and a company strategy for monitoring individual cases and the support to sick employees was established. The strategy addressed occupational accidents and diseases, as well as chronic diseases. Relevant internal and external stakeholders were identified, including management and human resources (HR) staff, occupational nurses and doctors, production and maintenance managers, and the health and safety committee (CHSCT). Staff members were assigned responsibility for maintaining workers in employment. Finally, gaps in communication and difficulties with procedures for occupational accidents, occupational diseases and chronic diseases were identified, with improvements targeted (for example training of relevant staff and external stakeholders).

A company website was set up both to communicate the company strategy and to provide employees with the necessary information on chronic diseases. The website provides contact details for all relevant contact persons, as well as key information on the procedures to follow if they have health issues affecting their work ability, or if they are returning to work after a period of sick leave. Info-points giving access to the website were installed in staff rest areas.

The info-points and the website were well received by employees. This enabled the company to anticipate issues related to chronic diseases and more generally to all types of non-occupational restriction of capacities. Employees became more confident about informing managers and HR about their health problems, as the company demonstrated its commitment to workplace adaptations or flexible working time arrangements for employees who needed such interventions. It has become the norm in Delpeyrat to inform managers in advance of medical interventions, so that return to work can be planned and prepared. The work of Delpeyrat on chronic diseases also led to improved internal occupational safety and health policies, with a better focus on worker capacity and health.

The knowledge platform, 'Maladies chroniques évolutives: le parcours du maintien dans le travail' (Evolving chronic diseases: the return-to-work process), brought together all of the experiences from the process, with the website providing methods and tools for employers to address chronic diseases in their company. The website contains three modules: identifying chronic diseases; understanding their impact on work ability and consequences on work organisation and productivity; and ways to address these issues through HR and health and safety policies.

Other tools have also been published, such as a best practice guide to 'Promote the wellbeing at work of workers with chronic diseases', published in 2012.

2.4. What was achieved?

ARACT supported 15 small and medium-sized regional companies in setting up a project on chronic diseases. Two larger organisations were later integrated into the ARACT programme: a large company, Delpeyrat, and a public institution, the municipal administration of Bordeaux. The latest project, with the French railway company SNCF, is to be implemented at national level.

ARACT has not yet conducted a formal evaluation. However, companies that have received the assistance of ARACT on chronic diseases state that the project provides an opportunity to work on health at work in general and to improve social dialogue within the company.

ARACT also achieved its objective of disseminating knowledge on chronic diseases to the usual intermediaries for employees and companies. In particular, staff of SAMETH (support services for the employment of disabled workers) were trained on issues related to chronic diseases.

2.5. Success factors

The following success factors have been identified:

- *Focus on the link between health and work organisation:* When it started 8 years ago, the project was particularly relevant, as the issue of chronic diseases at work was generally unknown, and also innovative, as it focused on the relationship between health and work organisation. While work in this area is becoming more common, the ARACT approach nonetheless retains significant value in understanding and facilitating successful accommodation of chronic illness in the workplace.
- *Involvement of all relevant stakeholders:* The project management methodology promoted in companies enables the involvement of all relevant stakeholders inside the company (HR, managers, health and safety prevention committees) and outside (occupational medicine services).
- *Practical solutions based on work situations:* ARACT focuses on work situations, such as work organisation and workplace adaptations, which enables the implementation of practical solutions for sick workers.

2.6. Transferability

The general approach, and the tools proposed on the website, are relevant to different types of companies and sectors. ARACT successfully used the same approach for both small and medium-sized enterprises and bigger companies and across very different sectors. The project approach itself would be transferable to other countries, given relevant adaptations to national context and the existence of a relevant intermediary organisation to implement it.

2.7. Further information

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3. References and resources

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