Enhancing vitality and work ability of workers towards a sustainable healthy working life.

No registrations found.

Ethical review Positive opinion **Status** Recruiting

Health condition type -

Study type Interventional

Summary

ID

NL-OMON22956

Source

Nationaal Trial Register

Brief title

(Staying) Healthy at work!

Health condition

Problems due to ageing, chronic health conditions

Sponsors and support

Primary sponsor: University Medical Center Groningen, Department of health sciences **Source(s) of monetary or material Support:** Medical Center Groningen, University of Groningen

Intervention

Outcome measures

Primary outcome

Work ability, vitality, productivity.

Secondary outcome

- 1. Productivity;
- 2. Self-efficacy;
- 3. Work engagement;
- 4. Fatigue.

Study description

Background summary

Background:

The growing proportion of older people in the labour force stresses the need to promote a good healthy working life cycle. The process of ageing burdens on physical and mental health status and is significantly associated with a decreased work ability and early discontinuation of working life. Furthermore, in older workers the duration of sickness absence increases compared to younger workers. A perceived poor health or the presence of a chronic health condition typically begin in middle age and have an adverse impact on the employability of the older workers. The current situation puts an emphasis on the need of a strategy to cope with problems due to ageing and chronic health condition.

Objective:

To enhance vitality and work ability among workers aged 45 years and older by implementing a strategy to increase problem solving capacity and the awareness of the workers with regard to their role and responsibility towards a sustainable healthy working life with supervisor support compared to daily practice (care as usual).

Study population:

In this study 160 workers aged 45 years and older and approximately 15 supervisors will participate in this study.

Study design and content:

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The intervention will be evaluated using a RCT design with 2 arms: a control group (n=80) and an experimental group (n=80) of workers. The main focus of the intervention for the workers is to create an inventory of problems, barriers, facilitators and support needs in the work situation, a meeting with the supervisor and to create an action plan which consists of a description of planned actions in the next year with support of the supervisor. The intervention will be completed within 3 months after sending the information leaflets and booklet to the workers. One year later, during the next meeting between worker and supervisor, the action plan will be evaluated and both results and process will be discussed. Workers in the control group will receive care as usual.

Outcome measures:

Primary outcome measures are: Vitality, work ability, productivity. Changes on these main outcome measures will be influenced by changes in workers' awareness and behavior towards a sustainable working life. Measurements take place at baseline, and 3, 6 and 12 months after baseline.

The process of the intervention will be measured at supervisor level (before and after training) and workers level.

Study objective

The intervention '(Staying) Healthy at work!' with support of supervisor support will increase the problem solving capacity of the diad employee-supervisor and the awareness of the workers with regard to their own role and responsibility towards a sustainable healthy working life to improve vitality and work ability and thereby productivity, compared to workers who receive care as usual.

Study design

Baseline questionnaire and follow-up questionnaires 3, 6 and 12 months after baseline measurement.

Intervention

At the level of the supervisor:

The supervisor will receive a training which consist of two components. The first session is based on the knowledge regarding sustainable healthy working life and problem-solving techniques. The second session is an active training module in which problem-solving techniques will be trained, assisted by an actor.

Supervisors in the control group receive no training and deliver care as usual.

At the level of the worker:

In the experimental group information leaflets and a booklet are introduced by the workers. The booklet is based on problem-solving techniques and designed to help claryfying and exploring work-related problems, support needs, personal development, and thinking about possible solutions. Workers make an inventory of experienced problems and solutions, which is considered as the input for the dialogue with the supervisor. After the dialogue with the supervisor the worker will finish an action plan, which consist of a description of planned actions for the next one-year follow-up.

Workers in the control group will receive care as usual.

Contacts

Public

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The Netherlands

Eligibility criteria

Inclusion criteria

- 1. Workers of the University and University Medical Center in the Northern part of the Netherlands;
- 2. Aged 45 years and older;
- 3. Informed consent.

Exclusion criteria

- 1. Period of sickness absence with no prospect of recovery;
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2. Upcoming retirement, resignation or sabbatical.

Study design

Design

Study type: Interventional

Intervention model: Parallel

Allocation: Randomized controlled trial

Masking: Single blinded (masking used)

Control: Active

Recruitment

NL

Recruitment status: Recruiting
Start date (anticipated): 01-03-2010

Enrollment: 160

Type: Anticipated

Ethics review

Positive opinion

Date: 01-04-2010

Application type: First submission

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register ID

NTR-new NL2146 NTR-old NTR2270

Other METc UMCG: METc2009/195

ISRCTN wordt niet meer aangevraagd.

Study results

Summary results

Koolhaas W, Brouwer S, Groothoff JW, Sorgdrager B, Klink JJL van der. Bevorderen van de duurzame inzetbaarheid van de oudere werknemer. Tijdschrift voor Bedrijfs en Verzekeringsgeneeskunde (TBV): 17;7: 286-291.