STUDY ON
OCCUPATIONAL HEALTH NURSING SERVICE
IN WORKPLACE

Japanese Nursing Association
Suvey & Reserch Section
Developement & Promotion
Department

OUTLINE OF STUDY

Purpose
To obtain data on the current status of occupational health nursing service in workplace.
The data thus obtained would be used to increase recognition and awareness by the parties concerned of the nursing contribution to occupational health promotion programmes.

Subjects
All the industries in which nursing personnel are employed and occupational health nursing service for employees is known to be provided by them.

Method
Questionnaires were sent to the nursing person nel employed by the industries and offices of study subjects in July 1988, and those in responsible positions were asked to complete the questionnaires and return them to the investigator by mail.

Recovery
Questionnaires were sent to 1879 industries and offices and 925 valid replies (49.3%) were returned.
STUDY FINDINGS

1. Occupational Health Nurses’ Assignment

<table>
<thead>
<tr>
<th>Employers (Workplace)</th>
<th>No. of Workplace</th>
<th>Ave. No. of Nurses per Workplace</th>
<th>Ave. No. of Workers per Nurse</th>
</tr>
</thead>
<tbody>
<tr>
<td>Industries</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Health Center</td>
<td>88 (9.5%)</td>
<td>10.8</td>
<td>913.3</td>
</tr>
<tr>
<td>Health Administration Office</td>
<td>285 (30.8%)</td>
<td>2.2</td>
<td>702.2</td>
</tr>
<tr>
<td>Industrial Health Clinic</td>
<td>152 (16.4%)</td>
<td>1.9</td>
<td>781.0</td>
</tr>
<tr>
<td>Health Clinic</td>
<td>105 (11.4%)</td>
<td>2.2</td>
<td>623.5</td>
</tr>
<tr>
<td>Personnel Management</td>
<td>71 (7.7%)</td>
<td>1.5</td>
<td>828.1</td>
</tr>
<tr>
<td>Health Insurance Organization</td>
<td>62 (6.7%)</td>
<td>3.0</td>
<td>4277.2</td>
</tr>
<tr>
<td>Government</td>
<td>84 (9.1%)</td>
<td>5.0</td>
<td>1024.2</td>
</tr>
<tr>
<td>Others</td>
<td>78 (8.4%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>925 (100.0%)</td>
<td>3.3</td>
<td>1101.9</td>
</tr>
</tbody>
</table>

2. Employees’ Health Problems

Priority set by employers: hypertension, obesity & cholesterolemia, psychosomatic diseases, hepatopathy, backpains

Priority set by nurses: hypertension, obesity & cholesterolemia, diabetics, hepatopathy, psychosomatic diseases

Health problems that are considered to be caused directly or indirectly by work-related factors: backpains, eye troubles, neck, shoulder and arm troubles, stomach & intestinal troubles, hepatopathy

3. Number of Nursing Personnel Employed by One Workplace

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<table>
<thead>
<tr>
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<tbody>
<tr>
<td>1</td>
<td>48.9% of total workplaces</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>&quot;</td>
</tr>
<tr>
<td>3 — 9</td>
<td>24.8%</td>
<td>&quot;</td>
</tr>
<tr>
<td>10 and over</td>
<td>4.3%</td>
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</tr>
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</table>

The total number of qualified nursing personnel employed by 914 (exclusive of 11 no-answers)
respondents was 3,058. Of this, public health nurses were 33.9%, nurses 53.7% and assistant nurses 12.4%. 34.1% (1,042) of them were qualified as health and hygiene supervisor.

4. Status of Nursing Personnel in Industries and Offices

71.6% of 3,058 nursing personnel employed by 914 industries and offices responded were regular staff. Temporary full-timers were 23.6%, and temporary part-timers were 4.8%. 225 industries and offices did not employ nursing personnel as regular staff.

Nursing personnel in these settings reported to: physicians 23.9%, health and hygiene supervisors (non-nurse) 11.7%, safety supervisors 7.0%, and other administrative staff 55.9%.

5. Characteristics of Nursing Personnel Who Completed Questionnaires

Average age: 44.7 years old
Average years of experience in occupational health: 12.2 years
Average length of service with current employer: 12.3 years

6. Function of Nursing Personnel

The following functions were performed by nursing personnel at the following industries and offices of the following percentages of the respondents.

Health education—Adult disease prevention 89.6%
  —Mental health service 57.8%
  —Health promotion programme 70.7%
Safety and health promotion programme in workplace 30.5%

Care of employees with health troubles
Provide consultation when requested 84.4%
Invite them to visit clinic 52.6%
Visit them at their workplace for observation 36.8%
Consulted by their superiors about their conditions 63.7%
Recommend transfer to other positions 41.4%
Recommend improvement of work environment 44.3%
Recommend improvement of work styles 35.3%
Nursing personnel were consulted with by the employees on the following topics at the industries and offices of the following percentages of the respondents.

- Information about the disease, regimen and diets: 97.5%
- Results of health checkups: 96.2%
- Foods and nutrition: 94.2%
- Information on and referrals to medical institutions: 91.7%
- Symptoms perceived but not being treated: 91.3%
- Health of family members, friends, coworkers: 86.6%
- Worries about the disease not improving: 86.0%
- Healthy life styles: 85.4%

It was noted from the study findings that the nursing personnel in these settings tended to spend more time on providing consultation to employees' individual health troubles rather than on improving work environment and conditions that would contribute to over all health of the employees. Increasing number of employees have such health troubles as adult diseases and mental disorders that may be attributed to individual unhealthy life styles, and of which cause-and-effect relationship with work is difficult to be identified. It should be also mentioned here that if the nursing personnel in industries and offices are placed in more responsible positions and given more authority, they would be able to function better for the improvement of work environment and work styles.

The expected role of nursing personnel varies according to the industries. In the organizations where nursing personnel report to medical personnel, they are expected to assist physicians, and their scope of practice tends to be restricted. On the other hand, they seem to be able to perform extensive role when the nursing personnel in supervisory position is a qualified health and hygiene supervisor. It should be noted, however, that employees seek health consultation from nursing personnel because they are experienced, capable, knowledgeable and mature, and without regard to their position in the industry.

7. Participation in Decision-making and Scope of Responsibility and Authority

- Participation in Safety, Health and Hygiene Committee:
  - Sit as a committee member: 23.9%
  - Participate regularly as an observer: 15.1%
  - Participate irregularly: 10.4%
  - Do not participate: 46.6%
Involvement in Occupational Health Programme Planning

- Involved in decision-making: 24.8%
- Involved in programme planning: 18.5%
- Be responsible for planning a part of programme: 16.2%
- Being consulted and submit health data, etc.: 22.5%
- Not involved at all: 15.2%

Involvement in Health Budget Preparation

- Prepares the whole budget: 10.9%
- Prepares the budget for certain items: 16.3%
- Opinions requested: 24.6%
- Not involved: 44.5%
- Others: 1.3%

Responsibility and Authority

- Responsibility and authority should be expanded: 10.1%
- Authority proportionate to responsibility should be given: 21.9%
- Responsibility too heavy: 6.2%
- No problems: 51.7%

The majority of nursing personnel in industries and offices are not given opportunity to participate in decision-making on health related matter. Thus they are not well-informed of about health matters and are not able to reflect their views in them. They are dissatisfied with the current situation where they are not fully utilized for promotion and improvement of the health of workers.