

# Mapping on current practices on stress prevention and management (2016)

- Even if well-being at work is much wider, a first step was to reassess the **current practices on stress prevention and management within the Group**, by means of a survey by questionnaire conducted end 2016.

135 sites took part, representing around 27000 employees.

Actions in sites (2016)	% of sites
Individual local medical care: access to physician or nurse	57
Visible commitment of the top management of the site	56
Access to a psychological expert (internal or external)	54
Access to an individual emergency response by phone (e.g. Employee assistance program)	52
Other action for well-being promotion apart from stress prevention and management	45
Communication on stress is/has been organised	41
Training on stress is organised	41
Stress assessment performed/ongoing	36
An action plan on stress exists	33
Indicators on stress	33
Solvay agreement with workers representatives (site or national)	31
Local dedicated committee on stress	31
Post-traumatic stress prevention exists	20
Perimeter: 135 sites surveyed	

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- **Good practices are widespread**, with 4 key practices in place in more than 50% of the sites, in particular:
  - individual local medical care : access to a physician or nurse
  - visible commitment of the top management
  - access for employees to a psychosocial expert (internal or external)
  - access for employees to an individual emergency response by phone (e.g. Employee Assistance Program)
- Other good practices are more applied on a case by case basis. The following are used in less than half of the sites, and present **opportunities for further deployment**
  - multidisciplinary dedicated committee involving workers representatives
  - awareness campaigns for employees and training sessions for managers
  - assessment the level and sources of stress
  - implementing practical actions accordingly
  - monitoring with indicators