# Specifications - Open Invitation to tender No VT/2012/028

Study service contract to establish the situation in EU and EEA/EFTA countries on Mental Health in the Workplace, evaluate the scope and requirements of possible modifications of relevant EU Safety & Health at Work legislation and elaborate a guidance document to accommodate corresponding risks/concerns, with a view to ultimately ensure adequate protection of workers mental health from workplace related risks

# 1. TITLE OF THE CONTRACT

Study service contract to establish the situation in EU and EEA/EFTA countries on Mental Health in the Workplace, evaluate the scope and requirements of possible modifications of relevant EU Safety & Health at Work legislation and elaborate a guidance document to accommodate corresponding risks/concerns, with a view to ultimately ensure adequate protection of workers mental health from workplace related risks

# 2. BACKGROUND

# 2.1. PROGRESS Introduction

PROGRESS<sup>1</sup> is the EU employment and social solidarity programme, set up to provide financial support for the attainment of the European Union's objectives in employment, social affairs and equal opportunities as set out in the Social Agenda<sup>2,</sup> as well as to the objectives of the Europe 2020 Strategy. This new strategy, which has a strong social dimension, aims at turning the EU into a smart, sustainable and inclusive economy delivering high levels of employment, productivity and social cohesion. The European Union needs coherent and complementary contributions from different policy strands, methods and instruments, including the PROGRESS programme, to support the Member States in delivering on the Europe 2020's goals.

The PROGRESS mission is to strengthen the EU's contribution in support of Member States' commitments and efforts to create more and better jobs and to build a more cohesive society. To this effect, PROGRESS is instrumental in:

- Providing analysis and policy advice on PROGRESS policy areas;
- Monitoring and reporting on the implementation of EU legislation and policies in PROGRESS policy areas;
- Promoting policy transfer, learning and support among Member States on EU objectives and priorities; and
- Relaying the views of the stakeholders and society at large.

More specifically, PROGRESS supports:

- The implementation of the European Employment Strategy (section 1);
- The implementation of the open method of coordination in the field of social protection and inclusion (section 2);
- The improvement of the working environment and conditions including health and safety at work and reconciling work and family life (section 3);

<sup>1</sup> Decision No 1672/2006/EC of the European Parliament and of the Council of 24 October 2006 establishing a Community Programme for Employment and Social Solidarity — Progress, JO L 315 of 15.11.2006

<sup>2</sup> Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions - Renewed social agenda: Opportunities, access and solidarity in 21st century Europe COM/2008/0412 final of 02.07.2008.

- The effective implementation of the principle of non-discrimination and promotion of its mainstreaming in all EU policies (section 4);
- The effective implementation of the principle of gender equality and promotion of its mainstreaming in all EU policies (section 5).

The present call for tenders is issued in the context of the implementation of the 2011 annual work plan which can be consulted at <u>http://ec.europa.eu/social/main.jsp?catId=658&langId=fr</u>

# **2.2.** Background information specific to this contract<sup>3</sup>

# 2.2.1 Definition of 'Mental Health'

The World Health Organisation (WHO) defines mental health as follows:

A state of well-being in which the individual realises his or her abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community.

All considerations below in the background information section are subordinated to the view that this is the state we should strive to achieve.

# 2.2.2 Relevant EU legislation

The key principles relating to the prevention and protection of the health and safety of workers are defined in the 1989 Framework Directive (<u>89/391/EEC</u>). It constitutes the basis for all subsequent individual Directives.

The basic objective of the Framework Directive is to encourage improvements in occupational health and safety and it covers all sectors of activity, both public and private.

It establishes the principle that the employer has a duty to ensure the safety and health of workers in every aspect related to their work. The employer is obliged to develop an overall health and safety policy, namely by:

- Assessing the safety and health risks which cannot be avoided, updating these assessments in the light of changing circumstances, and taking the appropriate preventive and protective measures
- Making a record of the risk assessment and of the list of accidents at work
- Informing workers and/or their representatives about potential risks and preventative measures taken
- Consulting workers and/or their representatives on all health and safety matters and ensuring their participation
- Providing job-specific health and safety training
- Designating workers to carry out activities related to the prevention of occupational risks
- Implementing measures on first-aid, fire fighting and the evacuation of workers.

The worker, on the other hand, also has several obligations to, inter alia, follow employers' health and safety instructions or to report potential dangers.

<sup>&</sup>lt;sup>3</sup> More background information can be found in Annex III.

The Framework Directive also promotes the workers' right to make proposals relating to health and safety, to appeal to the competent authority and to halt work in the event of serious danger, as part of the participative approach laid down by the Directive.

The underlying goal is to adequately protect the health and safety of workers and ensure that at the end of his/her working day, the worker will return to his/her family in good health. This includes, quite obviously, the mental health part as well

Related individual Directives concerned by the topic are described under section 3.2 on the Scope of the study.

# 2.2.3 Main areas for action

Current knowledge and facts tell us that there are challenges at several levels:

Data and studies; legislation and policies to be developed at national and EU level; social dialogue frameworks to be set up and implemented; approaches to change to be revised in both private and public sectors; the role of occupational and employment services; and the availability of training and operational tools.

On the basis of such issues, the following areas for action seem in order:

- Health and restructuring: A key issue for structural change?
- Groups at risk: Trust and justice as a critical issue?
- Data and studies: How to improve data, awareness and monitoring?
- Companies and managers: What responsibilities?
- Social dialogue: Next steps?
- Legislation: To be reconsidered?
- Restructuring in the public sector: Can approaches from the private sector be transferred?
- The role of occupational safety and health services and partnering with the health sector: What improvements could be made?
- Employment, health approaches and flexicurity: New bridges?
- Operational tools, networks and education: Which priorities?
- Are OSH-policies well prepared to deal with psychosocial risks (or are they still essentially geared to tackling risks for physical health)?

# 2.2.4 Mental and behavioural disorders as occupational diseases

Of all EU Member States, currently only five (Italy, Lithuania, Latvia, Romania and Hungary) have included mental and behavioural disorders as occupational diseases in their national systems of officially recognised ones. From a Commission perspective this is due to the fact that the legal instrument on occupational diseases currently in force is a recommendation (Commission Recommendation 670/2003/EC on the EU schedule of occupational diseases<sup>4</sup>). In fact and while the provisions of the Recommendation invite Member States to include in their national lists those conditions listed in Annex I of the Recommendation and extend compensation rights to those listed in Annex II, such 'invitation' is of course not legally binding and even if it was, to the extent that no mental or behavioural disorders are listed in any of the two annexes mentioned, it would have no consequence as far as those conditions would be concerned.

<sup>&</sup>lt;sup>4</sup> Commission Recommendation 670/2003/EC, of 19 September 2003 concerning the European schedule of occupational diseases (Text with EEA relevance) (notified under document number C(2003) 3297) OJ L 238, 25/09/2003 P. 0028 – 0034

On the basis of information provided by EU Member States, pursuant to their obligation to report on the implementation of the provisions of the Recommendation - and such information is rather limited - plus information just obtained from a study submitted by an external contractor, the Commission will, in consultation with the interested parties, analyse the possibility of changing the current situation in line with a series of possibilities. One of the issues that the analysis under the study mentioned above will cover is that of extending the number and scope of occupational diseases in the Recommendation's lists to address also new health risks not hitherto covered, including possibly also those that may be mental or behavioural in nature and that, as logic would dictate, may have occupational factors behind.

# 2.2.5 Relevant initiatives/activities at EU-level

# 2.2.5.1 Senior Labour Inspectors Committee (SLIC)

DG EMPL provides the secretariat for the Tripartite Advisory Committee on Safety and Health at Work and the Senior Labour Inspectors Committee (SLIC). Following a decision at its plenary session in Lyon (2 December 2008), the Committee organised on 23 November 2009 a thematic day on *Supervision of psychosocial risk assessments*. The Committee had discussed *the role of competent authorities in the area of negative stress and psychosocial problems at work* during the previous Swedish Presidency in 2001. This event provided the opportunity to review what programmes and measures Member States had developed in the intervening years. The topic was of particular interest to the EU-10 accession countries from 2004. The Committee learned about the practical toolkits developed for employers and employees in 9 Member States: Austria, Denmark, Finland, France, Germany, Netherlands, Portugal, Sweden, UK.

Presentations and abstracts on the toolkits can be found on the website of the Swedish Presidency: http://www.av.se/inenglish/aboutus/eu/abstracts.aspx

The Senior Labour Inspectors Committee will lead an information campaign on workplace stress at European level during 2012.

# 2.2.5.2 Conference "Investing into wellbeing at work: Managing psychosocial risks in times of change", Brussels, 22-24 November 2010

Within the context of EU-social policy, the Belgian Presidency of the EU attached high priority to mental health at workplaces by organising, together with the Commission, the conference "Investing into wellbeing at work: Managing psychosocial risks in times of change", Brussels, 22-24 November 2010.

Another important EU-level initiative is the European Pact for Mental Health and Well-being<sup>5</sup>. Launched by a high-level conference hosted by the Commission in June 2008, the purpose of the Pact is to establish an EU-level framework for exchange and cooperation on mental health challenges and opportunities. The Pact has five priorities, with "Mental Health in Workplace Settings" being one of them. A series of thematic conferences between 2009 and 2011 on each of the five priorities is the key element in the implementation of the Pact, the last one having been precisely about Workplace Mental Health, and took place in Berlin – Germany, in 3-4 March 2011 (see below).

The conferences promote cross-sectoral ownership of mental health and well-being and they enable exchanges between experts from different sectors on mental health issues. They also

<sup>&</sup>lt;sup>5</sup> More information is available under: <u>http://ec.europa.eu/health/mental\_health/policy/index\_en.htm</u>

issue recommendations and identify examples of good practices. These good practices and the other outcomes of the conferences are fed into the website and online-database European Compass for Action on Mental Health and Well-being.

#### 2.2.5.3 Conference "Promoting mental health and well-being at workplaces", Berlin, 3-4 March 2011

The conference under the European Pact for Mental Health and Well-being addressing the promotion of mental well-being and the prevention of mental disorders at workplaces took place in Berlin on 3-4 March 2011, as the final of the five Pact events. The conference was organised by the Commission together with the German Federal Ministry of Health and the Federal Ministry of Labour and Social Affairs.

The conference allowed for the presentation of good practice examples from workplaces and policy initiatives supporting such actions. A specific focus of the conference was on how health services and social security providers can support the promotion of mental well-being and the prevention of mental disorders at workplaces, in particular by putting in place an infrastructure for the dissemination of good practices.

# 2.2.5.4 Involvement of the Advisory Committee on Safety and Health at Work (ACSHW)

The organisers sought to involve all relevant stakeholders into the conference in Berlin on "Promoting mental health and well-being at workplaces", with a view to awareness-raising, networking, and with the intention of building partnerships and inter-sectoral co-operation.

While a formal participation could not be ensured it was still understood that the ACSHW can still play a very relevant role following up a very robust study to be submitted by a contractor yet to be chosen (actual call for tender about to be finalised and its publication foreseen for the summer of 2012). As is usual practice a specialised Working Party should be formed from within the Advisory Committee and adopt an opinion on the report that the Committee should subsequently endorse.

# 2.3 Purpose of the study contract

This study contract has three objectives. The first is to provide the European Commission with information on the situation in the EU and EFTA countries of Mental Health in the workplace. This will require an in depth checking of the current EU legal framework on workers health and safety protection (hereafter denominated as OSH, for Occupational Safety and Health) relative to those specificities of EU working environments likely to be favourable to the development of mental health problems that workers may encounter in their daily professional activities.

To do this due consideration shall be given to the efficiency of implementation of current relevant EU -OSH legaly binding instruments and to the coverage and scope of non-binding ones as well. Relevant legal instruments/measures in force in specific EU Member States and/or EFTA countries should be considered also. This should serve as a springboard for possible future amendments that may bring them 'up to speed' relative to the concerns to do with the mental health of the EU workforce. An indicative list of relevant EU OSH legal instruments is included under section 3.2 below – the final list will be agreed between Commission and contractor.

The second objective is to develop a range of scenarios, and identify the pros and cons of each with the ultimate objective of providing a sufficiently robust information base on which

the Commission may rely in order to consider policy options aiming to ensure that workers are effectively protected from risks to their mental health arising from workplace related conditions and/or factors.

The contractor will have to take account of all health and socio-economic consequences of all scenarios deserving consideration, related either to possible amendments of existing EU-OSH legal instruments (that the contractor will take great care identifying and justifying), drafting of new ones or of alternative solutions, *e.g.* voluntary agreements, framework agreements, guidance documents, information campaigns, best practice examples or any combinations thereof.

Concurrently, and on the understanding that one of the preferred approaches by some stakeholders consists in the provision of guidance, **a guidance document shall also be drafted** to help employers and workers alike fulfil their obligations, namely those explicitly provided for by Framework Directive 89/391/EEC, with the overarching objective of making sure that mental health is considered an inescapable element of any OSH policy and practical measures; **this is the third objective**.

# 3. SUBJECT AND SCOPE OF THE STUDY

# 3.1 Subject of the study

The subject of the study is:

- To analyse the suitability of the EU-OSH legal framework in its current form and relevant national measures/instruments relative to mental health specific workplace risks,
- To elaborate possible scenarios as referred to in point 2.3, individually or, possibly for a number of selected ones, combined.
- In parallel, to prepare a Guidance document that addresses actual shortcomings in a realistic manner.

Any available evidence supporting the possible inclusion of specific mental health in the workplace approaches under the scope of any identifiable EU-OSH legal instrument should be considered.

The contractor should provide information as up to date as possible, <u>duly supported by</u> <u>references to published data</u> and <u>relevant ongoing activities</u> to enable the European Commission to initiate policy discussions on any options deemed justified. Such policy discussions will be informed, inter alia, by the result of the analysis of the EU-OSH legal framework and other information deemed relevant and/or necessary, including stakeholders' consultation.

To provide a comprehensive view of the situation that could result from the amendment of the EU-OSH legal framework as described above, the contractor will have to accomplish the different tasks specifically mentioned under point 5.

The full study will address the situation in EU Member States together with the countries which are not EU member States but which form part of the European Economic Area.

#### 3.2. Scope of the study

In line with the objectives described under 2.3 the scope of the study is <u>threefold:</u> <u>A</u>, <u>B</u> and <u>C</u>:

#### A. Review of the situation

Obtaining information on the situation in the EU and EFTA/EEA countries of Mental Health in the workplace. This will require an in depth checking of the current EU legal framework on OSH protection relative to those specificities of EU working environments likely to be favourable to the development of mental health problems that workers may encounter in their daily professional activities. This includes a EU-OSH legal framework review in order to adequately ensure that the EU OSH legal framework does not avoid the tackling of the 'mental health at the workplace' dimension, and to ascertain, whether existing legislative provisions, national measures and instruments of implementation address such concerns, to which workers may be exposed.

In the 1<sup>st</sup> instance the acts listed below should be considered and assessed (the final list of legal instruments to be included in the review will be agreed between Commission and contractor).

Council Directive 89/391/EEC of 12 June 1989 on the introduction of measures to encourage improvements in the safety and health of workers at work
 Official Journal J. 182, 20/06/1080 P. 0001 ...0009

Official Journal L 183, 29/06/1989 P. 0001 – 0008

- **Council Directive 89/654/EEC** of 30 November 1989 concerning the minimum safety and health requirements for the workplace (first individual directive within the meaning of Article 16 (1) of Directive 89/391/EEC) *Official Journal L 393, 30/12/1989 P. 0001 0012*
- **Council directive 90/270/EEC**: on the minimum safety and health requirements for work with display screen equipment, points out that "*employers* shall be obliged to perform an analysis of workstations in order to evaluate the safety and health conditions to which they give rise for their workers, particularly as regards possible risks to... problems of <u>mental stress</u>".
- **Council directive 92/85/EEC**: on the introduction of measures to encourage improvements in the safety and health at work of pregnant workers and workers who have recently given birth or are breastfeeding, provides that the guidelines on risk assessment shall cover mental fatigue and other types of <u>mental stress</u>.
- Commission Recommendation 670/2003/EC, of 19 September 2003 concerning the European schedule of occupational diseases (Text with EEA relevance) (notified under document number C(2003) 3297) Official Journal L 238, 25/09/2003 P. 0028 0034
- Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of Regions on the practical implementation of the provisions of the Health and Safety at Work Directives 89/391 (Framework Directive), 89/654 (Workplaces), 89/655 (Work Equipment), 89/656 (Personal Protective Equipment), 90/269 (Manual Handling of Loads) and 90/270 (Display Screen Equipment)

#### /\* COM/2004/0062 final \*/

<u>Note:</u> Some of the acts listed above are not, either of a legally binding nature in a strict sense or, apparently, of a sufficiently typical subject specific nature, making their inclusion in the list seemingly misplaced, but, for example, Commission Recommendation 670/2003/EC could provide for the inclusion of mental health problems with an origin in the workplace in one of its annexes. Some EU national lists provide for such an inclusion and the ILO list of occupational diseases does indeed provide for such inclusion as well. Hence the contractor may wish to give due consideration as to why, or why not, should forms of mental ill-health be or not included in the national lists of occupational diseases/work related diseases, or indeed in a future EU one.

Other activities for which Commission services are responsible may be relevant for the effective implementation of OSH legislation and/or measures and while they may seemingly be outside of the scope of the review, they may be invoked when relevant for the purposes of this study, particularly when such measures may be deemed to impact on OSH from a mental health in the workplace perspective. This may be the case of activities being carried out or having been accomplished already as is the case of some led by DG Health and Consumer Protection of the Commission, who have namely carried out and continue doing so, extensive work in the field of Mental Health. They have namely organised a conference on Mental Health in the Workplace in March 2011 in Berlin, Germany. The conclusions of the event are definitely relevant in this regard and should be given appropriate consideration in the report to be elaborated pursuant to this call for tender.

For this part of the contract the results will be inputted in a background report containing a review and an assessment of the suitability of the current EU-OSH legal framework, or where identified, the revision needs that can be considered by the Commission for the purposes of ascertaining, whether or not an adaptation of the current EU-OSH legal framework, or indeed the drafting of new legal instruments, is in order.

Apart from the analytical aspect of this part of the contract (any act agreed to be included in the list should be the object of an individual assessment as to its suitability and potential candidacy for being amended in the light of the concluded need to take account of a mental health in the workplace perspective) the contractor is also expected to summarise the conclusions globally, maybe in tabulated form / scoreboard, in a way that clearly provides almost an 'instant snapshot' of the outcome of the analytical exercise in its globality.

# B. Elaboration of scenarios

Based on the conclusions arrived at under part A, the contractor will elaborate future scenarios aimed at highlighting and correcting any shortcomings that the review may make clear relative to the theoretical non-suitability of the current EU-OSH legal framework and national measures/provisions to take account of a mental health in the workplace perspective.

The scenarios so indentified shall be duly justified and draw, not only on the conclusions of the EU-OSH legal framework review, but also, very importantly, on the consultation of relevant stakeholders *e.g.* social partners, national, regional and local authorities in the Member States, scientific community, particularly mental health professionals (e.g. psychiatrists, psychologists), health and social security providers, enterprises or non-

governmental organisations and concrete business examples (case-studies). Obtaining data from concrete examples is an integral part of the data gathering needed to duly inform this analytical step.

Given that EU OSH policy, as managed by the European Commission, has in the tripartite composition and representation of the Advisory Committee on Safety and Health at Work, one of its overarching principles, when checking the national Member States' positions the contractor will mirror this principle, i.e. it will have to seek the views of governments, workers and employers in each Member State.

Position papers, mission statements, policy documents from organisations active in relevant and/or connected fields, e.g. the World Association for Psychosocial Rehabilitation (WAPR), WHO, ILO<sup>6</sup>, as well as their activities, results and conclusions, past or ongoing, should also inform this step of the process.

# C. Draft a guidance document

The guidance document will help all stakeholders concerned better address potential risks to workers likely to come about from their exposure to workplace specific aspects that may or should be relevant from a mental health in the workplace perspective. The guidance document will be complemented by **associated materials** for the purposes of **an information campaign** for the benefit of workers.

In gathering the necessary information a workplace mental health specific assessment will have to be carried out including, *inter alia*:

**a)** The types, situations and likely exposure conditions and which workers are more likely to be impacted as well as future likely trends based on current knowledge.

**b)** The specific information requirements for a mental health at the workplace specific risk assessment methodology and what are the more significant gaps relative to workplace risk assessment needs (conclusions arrived at under this point may not be immediately 'transferable' to every work setting but may provide an insight as to which immediately available risk management approaches can compensate for such gaps).

**c)** Identification of types and effectiveness of mental health in the workplace specific risk management measures relevant in this context.

**d)** Based on current knowledge, and to the extent possible, identification of whether the tackling of workplace related mental health problems and risks are similar or different from other, more traditional, work related health and safety problems and risks.

e) State of the art regarding prevention, monitoring and control approaches and techniques, *e.g.* have national or other OSH bodies any practices or standards in place and what are the already sufficiently validated methodologies that the EU as a whole might benefit from.

<sup>&</sup>lt;sup>6</sup> For instance, in 1996 the WAPR and the WHO jointly issued a "consensus statement" which defined psychosocial rehabilitation as a strategy that facilitates the opportunity for individuals impaired or disabled by mental disorder to reach their optimal level of functioning in the community, by improving individuals' competencies and introducing environmental changes.

# 4. PARTICIPATION

# Please note that:

The competition is open to any physical person or legal entity coming within the scope of the Treaties and any other physical person or legal entity from a third country which has concluded with the Communities a specific agreement in the area of public contracts, under the conditions provided for in that agreement.

Where the Multilateral Agreement on Public Contracts concluded within the framework of the WTO applies, the contracts are also open to nationals of States that have ratified this Agreement, under the conditions provided for therein. It should be noted that research and development services, which come under category 8 of Annex II A of Directive 2004/18/CE, are not covered by this Agreement.

# 5. STRUCTURE OF THE REPORT AND TASKS TO BE CARRIED OUT BY THE CONTRACTOR

# 5.1 Structure of the study report

The study report should cover all relevant areas and present the information in a clear and structured way, including the following five parts:

- 5.1.1 Evaluation of the situation in the EU/EFTA countries, including a EU-OSH and national legal framework review
- **5.1.2 Establishement of a baseline scenario** based on the conclusions of the step above
- 5.1.3 Identification of the problem(s) highlighted under the previous step
- **5.1.4 Description of alternative scenarios** and analysis of the respective implications
- 5.1.5 **Guidance document** and associated materials

It has to be noted that the tasks to be carried out by the contractor are fit into all the parts of the structure of the study report, as follows: (Tasks are described below in detail for sections **5.1.1**, **5.1.4** and **5.1.5**. For sections **5.1.2** and **5.1.3** a more generic description of the nature of the tasks is indicated).

# 5.2 Tasks to be carried out by the contractor

The tasks described below are listed on the understanding that they conform to the possible structure of the study report, as indicated above, under section 5.1.

# 5.2.1. EU-OSH and national legal framework review

# Task 1 - Elaborate a methodological framework for delivering on part A of the contract

This task shall provide the foundation for the elements described in section 3.2. as part A of this study, but will obviously also impact on the drafting of parts B (scenarios) and C (guidance). The justification for this task is that there is limited data, particularly validated data that could be considered consensual among all stakeholders, enabling a full review of the adequacy of the EU-OSH legal framework as to its effectiveness relative to potential mental health in the workplace specific risks. Therefore it is required that a methodological framework and assumptions are established allowing a coherent assessment across relevant pieces of EU-OSH specific legislation. This should go beyond a simple textual analysis and pay particular attention to existing implementation set-ups as well as anticipated implementation and enforcement possibilities.

During Task 1 a final list of the legislation to be included in the review will be agreed between the Commission and the contractor (the one depicted under 3.2 "Scope of the contract" is indicative at the call for tender publication stage). Bidders may want to argue the inclusion or otherwise of specific pieces of legislation when submitting their offer, including concrete examples of national legislation already in place or under development that may be or have been conceived with the idea in mind of tackling mental health in the workplace problems, be it from a primary, secondary, tertiary prevention perspective or any relevant combinations.

Consequently, if relevant, the contractor may identify which specific methodological approach is to be applied for specific individual legislative instruments. As some pieces of legislation may be in different phases of the policy cycle, the contractor shall seek from the Commission the information on any potential development to be taken into consideration alongside consideration of the features of the legal acts in force as such.

The tenderer will indicate the methodology he intends to use, the approach envisaged and how suitable it is for carrying out the tasks. The quality and consistency of the proposed approach and its suitability for correctly reflecting the actual situation form part of the elements governing the award of the contract.

The tenderer will also indicate which persons and entities (social partners, scientific community, clinicians, national, regional and local authorities in the Member States, enterprises or non-governmental organisations) he intends to contact in the process of the study and how the information to be provided by them will be used in this analysis.

# Task 2 – Review of acts from agreed list

Applying the methodological framework and building on the assumptions established in Task 1, Task 2 shall review all the acts from the agreed list.

While the scope of the review is the general aspect of mental health in the workplace coverage, differences in coverage/risk between different forms of mental ill-health/suffering shall be outlined where appropriate. Explicit examples of forms of mental ill-health/suffering coverage are expected to be included.

#### Task 3 - Identification and description of legislative and implementation gaps

Having fulfilled Task 2, the contractor should indicate if there are gaps in reviewed parts of the EU-OSH legislation as regards their coverage of forms of mental ill-health/suffering and the relevant exposure factors/conditions. It should be identified whether the gap is due to, *inter alia* forms of mental ill-health/suffering and the relevant exposure factors/conditions:

- Not being covered by the general objective of the legislation
- Being covered by the general objectives but implicitly or explicitly excluded from the scope
- Being covered in principle but not effectively addressed (*e.g.* issues of definition, scope, diagnostic methods, monitoring criteria, related measures that may or may not effectively address the problem like framework agreements, etc.)
- Being ineffectively covered due to implementation gaps or critical dependence on other legislation

Attention should in particular be paid to legislative and implementation areas/instruments where forms of mental ill-health/suffering and the relevant exposure factors/conditions are covered in principle due to assumptions about their characteristics and the respective problem-solving and prevention approaches being similar to other OSH problems.

Description of the gaps should be specific, identifying relevant articles, implementing rules, etc. as appropriate, enabling the determination of whether actual legal revision or only additional implementation efforts are required to bridge them.

# 5.2.2. 'Baseline' scenario

The baseline scenario will include:

**a)** An overview of the problem in both legal and practical terms at EU level, and, where relevant, in individual Member States and EFTA/EEA countries, together with an estimation of likely future trends.

**b)** A thorough description of the current context and challenges, and demonstrate clearly the necessity and added value of EU action on this issue from an OSH perspective.

# 5.2.3. Definition of problem

The definition of the problem will focus on:

**a)** Identification/characterisation of the need to address risks posed by forms of mental ill-health/suffering and the relevant exposure factors/conditions

**b)** Extent to which alternative scenarios are likely to impact on the protection of the mental health of workers by employment sector together with an appraisal of likely future trends. This step should allow for the identification of relevant business sectors and/or behavioural patterns more prone to bring about the types of problems that OSH measures should focus on from a mental ill-health/suffering perspective.

**c)** Identifying the extent to which the requirement on inclusion of forms of mental ill-health/suffering and the relevant exposure factors/conditions in the scope of relevant EU-OSH legal instruments or the non inclusion of them, are relevant for the protection of the mental health of workers, together with an appraisal of likely future trends.

**5.2.4. Elaboration of scenarios** and analysis of the respective implications

# Task 4 – Analysis of scenarios

The elements of information obtained and/or used during the previous tasks shall be fed into the analysis of any scenarios that the contractor will identify. Consultation of relevant

stakeholders (social partners, national, regional and local authorities in the Member States, mental health professionals, clinicians, enterprises or non-governmental organisations) and obtaining of data from concrete examples is of extreme importance for the analysis. Such data gathering will also help understand better the implications of each individual scenario, themselves to be 'articulated' with the findings under tasks 1 to 3.

As pointed out above, when checking the situation in each Member State (national reports), a tripartite view should be sought i.e. the contractor will have to seek the views of governments, workers and employers in each individual Member State.

#### Necessary steps to the analysis of scenarios and respective features

- 1) Identify and assess the foreseeable benefits and disadvantages from a protection of workers mental health perspective, of a Community binding or combination of binding and non-binding initiatives.
- Assess the possible benefits of any proposed amendments of which legal instruments/acts in terms of preventing or reducing identified or likely adverse mental health effects.
- 3) Identify particular groups of workers affected by exposure to mental health specific factors/conditions, determined by age, gender and highlight benefits and drawbacks for each of the groups following a possible amendment of any relevant legal instrument/act in relation to such exposures.
- 4) Identify and assess the costs and benefits for employers, workers, Member States and civil society for each of the scenarios.
- 5) Identify and assess the administrative burden and costs for the present situation and alternative scenarios.

The contractor should provide a **socio-economic analysis** corresponding to the questions listed below in relation to extending the scope of relevant legal instruments/acts to covering forms of mental ill-health/suffering and the relevant exposure factors/conditions, as well as for keeping the status quo.

Attention is drawn to the fact that, when the report to be commissioned under this call for tender will be ongoing, another report titled 'Economic analysis of workplace mental health promotion and mental disorder prevention programmes and of their potential contribution to EU health, social and economic policy objectives' and carried out under the auspices of the Executive Agency for Health and Consumers should have been finalised. If already available then, its conclusions should be borne in mind when elaborating this part of the study report.

The alternative scenarios should be quantified to the extent possible and if this is not possible qualitative examples should be provided.

The contractor should aim to characterise alternative scenarios bearing the following in mind:

#### • Operating costs and conduct of business

- a) What kind of compliance costs will amendments impose on business?
- b) Will they entail stricter regulation of the conduct of a particular business?
- c) Will they lead to the closing down of businesses?

d) Would some businesses (for example SMEs) cope better or worse than others in a comparable situation?

#### Innovation and research

- a) Would any amendments stimulate or hinder research and development?
- b) Would they facilitate the introduction and dissemination of new production methods, technologies and products?

#### • Specific sectors

- a) Would the amendments have significant effects on certain sectors?
- b) Would they have specific consequences for SMEs?

#### • The macroeconomic environment

What are the overall consequences of any amendments for economic growth and employment?

#### • Employment and labour markets

- a) Would the amendments have specific negative/positive consequences for particular professions, specific groups of workers (*e.g.* workers with disabilities, men/women) or self-employed persons?
- b) Would they affect access to the labour market?

The contractor shall provide answers to the questions above separately for each scenario. The answers shall be provided at EU-level, if appropriate. Significant disparities at national level shall be identified.

#### Specific aspects to be considered in respect to the analysis of implications

In considering different scenarios, the contractor should take the following into account:

**1.** The advantages and disadvantages for each scenario should be examined to support the European Commission in making the most appropriate evidence-based decisions on how best to ensure that workers mental health is effectively protected from potential risks inherent to characteristics in workplaces with relevant exposure factors/conditions.

**2.** The information should be presented in a way that facilitates the ease of comparison between and within the various scenarios, for example by means of a 'scoreboard' in tabulated form.

**3.** Where possible the study should be supported by examples of actual situations identified in EU Member States or elsewhere.

4. Identify whether there are specific challenges for particular Member States, business sectors and/or groups, professional ones or otherwise. The 'grouping' aspect will take due account of aspects that may help sectorialise workers as per different characteristics. Three very important 'dimensions' should be addressed beyond the typical 'business sector' typification and they are (i) age, (ii) gender and (iii) workers with disabilities, all of which should be extensively considered in the analysis of implications.

**5.** Assess the transposition and compliance aspects of the described scenarios to determine the feasibility of implementation, management and, if relevant, enforcement. Identify specifically where legislation that is not part of the review plays an important

role and may require specific action to ensure the objectives for protecting the mental health of workers are achieved.

**6.** Take account of the content of any available documents used by the Commission when discussing and/or consulting the Social Partners at EU level on the protection the mental health of workers from relevant exposure factors/conditions.

# 5.2.5. Guidance document(s)

#### Task 5 - Preparation of a guidance document and associated material

The guidance document will mainly, but most likely not exclusively, draw on the findings and conclusions obtained during the previous steps. The organisation of an event (workshop type, the coverage of which may be wider than just checking acceptance of the draft guidance document) during which the draft guidance document will be discussed and its acceptance tested would be welcome.

It is assumed that the guidance document will of course not only present case studies, but will also communicate key recommendations. These could also highlight the close links between physical and mental health.

The stakeholders' consultation part, in particular, will be of the utmost importance in that it will be expected that a representative sample will be resorted to; this will go some way towards providing a 'validation' (which the event alluded to before may help fulfil) of the guidance document. The real measure of the guidance document usefulness will probably be its practical acceptance and dissemination on the part of interested parties, ultimately employers and workers themselves, and as such the 'crude' validation mentioned here has necessarily limitations, but it has to be understood that no formal endorsement can be given *a priori* to an untested approach / model and that such validation steps are a prerequisite.

Note: The proposed scope of the guidance document with its strong focus on risk assessment may be perceived as being narrower than the scope of the situation analysis and the scenarios. This means that it may be difficult to build the guidance document on the outcomes of those parts of the contract. And the proposed focus of the guidance document may also be narrower than the scope of the Framework Directive. For instance, this also obliges employers to set up OSH-policies which should not only include risk assessment measures, but also for instance measures to inform workers about risks and preventive measures taken or to provide job-specific health and safety training. This is relevant because one of the key outcomes of the Move Europe - project was that traning of managers is of high importance, and also accepted by employers, whereas risk assessment is sometimes perceived as being very controversial among social partners.

The contractor should try and identify a range of Good and, if possible, Best practice examples of concrete approaches that specific workplace settings (that can be found in specific industries / enterprises) may have put in place with the aim of protecting workers from forms of mental ill-health/suffering alongside the identification of any relevant exposure factors/conditions, that may be or are typical of such workplaces. In doing so the contractor will argue the case for such an inclusion.

Sources where good examples can be found are the EU Compass for Action on Mental health and Well-being <u>http://ec.europa.eu/health/mental\_health/eu\_compass/index\_en.htm</u> and in

particular the website of the European Network for Workplace (ENWHP), where the results of the Move Europe Campaign Work in tune with life on prmoting mental health at work can be found: <u>http://www.enwhp.org/</u> Also, the ESENER survey of the Bilbao Agency is certainly a good souce for data <u>http://osha.europa.eu/en/riskobservatory/enterprise-survey/enterprise-survey-esener</u>

In looking for such cases the contractor should try and identify representative examples of different industry settings / workplace exposure scenarios / gender and age diversity. In turn, the contractor is expected to elaborate on its findings and try, to the extent possible, extrapolate such practices / risk management approaches to other workplaces / industry settings / gender and age groups, the reason being that the usefulness of the Guidance document is expected to be the more significant the more it is 'user friendly' *i.e.* easily applied across different workplace realities (transferability of main principles).

It is difficult to predict the length of such a guidance document. However, an indicative length could be of 100 pages (annexes like results of stakeholders consultations and Member States national reports not included), including any description of Good/Best practice examples and supporting information material for information campaign purposes. The potential use of this, and other guidance, is partly linked to the consideration to be given to any scenarios identified by the contractor. It shall, however, be carried out independently of any conclusions arrived at by the contractor when it will check the pros and cons of each scenario, as per the principles it is expected to abide by.

The guidance should be presented in a style that will help those employers who may not have an in-depth technical understanding of the issues involved and associated risks. This has to be understood within their obligations to ensure that forms of mental ill-health/suffering and the relevant exposure factors/conditions can be adequately prevented and/or controlled at the workplace.

# The final report

The final report at the end of the project will collate findings from **5.1.1 to 5.1.4** and include the Guidance document (**5.1.5**), taking into consideration the outcome of any consultations. It shall support the Commission in its analysis of the issues at stake and any relevant stakeholders fulfil their obligations as per the, at the very least, current provisions of Framework Directive 89/391/EEC and eventually future ones that may 'be inspired' by the information base provided by the report.

The contractor shall, to the extent appropriate, apply common and consistent terminology and phrasing across the evaluation of different legislative areas.

Throughout the execution of the tasks, the contractor should be prepared to consider new information as it becomes available from related Commission activities. Modalities of inclusion of this information in the execution of individual tasks will be discussed on a case-by-case basis.

#### Details of how the tasks are to be carried out

The tasks described above will be implemented and completed by the contractor **within 16 months** from the signature of the contract, and following the scheduled and approved timeline. The contractor will be working outside (extra muros) the Commission premises.

For Tasks 5.1.1 - 5.1.4 the contractor should also provide supporting evidence contributing to the setting of priorities for policies directed towards the regulation of forms of mental ill-health/suffering and the relevant exposure factors/conditions.

# 5.3. Requirements on how the tasks shall be carried out

The PROGRESS Programme aims to promote gender mainstreaming in all its five policy sections and commissioned activities. Consequently, the Contractor shall take the necessary steps to ensure that:

- Gender equality issues are taken into account when relevant for the drafting of the technical offer by paying attention to the situation and needs of women and men;
- Implementation of proposed activities includes a perspective informed by a systematic consideration of the gender dimension;
- Performance monitoring includes the collection and gathering of data disaggregated by sex when needed;
- Its proposed team and/or staff respect the gender balance at all levels.

Equally, needs of disabled people shall be duly acknowledged and met while executing the requested service. This will ensure in particular that where the Contractor organises training sessions and conferences, issues publications or develops dedicated websites, people with disabilities will have equal access to the facilities or the services provided.

Finally, the Contracting Authority encourages the Contractor to promote equal employment opportunities for all its staff and team. This entails that the Contractor is encouraged to foster an appropriate mix of people, whatever their ethnic origin, religion, age and ability.

The Contractor will be required to detail in its final activity report the steps and achievements made towards meeting these contractual requirements.

# 6. SKILLS AND PROFESSIONAL QUALIFICATIONS REQUIRED

See also Annex IV of the draft contract, experts' CVs.

# Additional requirements:

The contractor should have a proven capability to carry out the tasks related to the evaluation of employment legislation in the field of occupational safety and health at EU level. This should be based on a multi-disciplinary staff and/or access to external experts on a wide range of relevant disciplines and experience, for example, occupational health and safety, occupational hygiene, occupational medicine, OSH legislation, epidemiology, workplace risk assessment and management, economics and drafting of technical guidance, information and awareness raising material. Specific experience in the domains of psychology and psychiatry will be particularly valued.

# 7. TIME SCHEDULE AND REPORTING

See also Article I.2. of the draft contract.

Note: Due to the nature of the study, the contractor must be prepared for extensive interaction with the relevant policy unit of DG EMPL, organised via contacts with the responsible desk officer for the contract and who will follow the project. Given the 'dynamic' nature of policy developments in the area, DG EMPL will try and support the contractor by provision of

additional information on ongoing policy developments at the wider European Commission services level whenever possible; DG EMPL will also ensure a close scrutiny of the contractual work even between formal deliverables to ensure that deadlines are met effectively. For this purpose, the contractor should consider developing working materials that facilitate effective exchange (*e.g.* documents and tables in a form that allows for inclusion of track change options etc.).

# 7.1. Specific deadlines for the performance of the tasks

The duration of the contract will be <u>sixteen (16) months</u> from the date on which the contract is signed. It will include the following stages:

- 7.1.1 Not later than <u>one (1) month</u> after signature of the contract, the contractor must submit to the European Commission (Unit Health, Safety and Hygiene at Work, named Unit EMPL B/3 hereafter in the document) a detailed document relating to the methodology and approach presented in the bid, together with the work schedule. Subsequently the Commission will organise a **first** (kick off) meeting with the contractor in Luxembourg to further explain what is expected from the study and discuss any practicalities, namely linked to the approach and methodology proposed by the contractor.
- **7.1.2** No more than <u>seven (7)</u> months after signature of the contract, the contractor must submit an interim report in English to the European Commission (Unit EMPL B/3), describing the progress of the work in relation to the envisaged timetable. This report must contain a summary of the results that far and a copy of the draft guidance document as it will stand then.

Following the reception of the interim report the Commission will organise a **second** meeting with the consultant in Luxembourg to discuss the content of the interim report and to provide guidance on the preparation of the final report and the guidelines.

- **7.1.3** <u>Thirteen (13) months</u> after signature of the contract, the contractor must submit a draft final report in English to the European Commission (Unit EMPL B/3). This draft final report will also include the final draft of the guidance document and a brief draft summary in English of the main results obtained. Following the reception of the draft final report and draft summary, the Commission will organise a **third** meeting with the contractor in Luxembourg to discuss their content within one month.
- 7.1.4 A final report including the final guidance document will be submitted to the European Commission (Unit EMPL B/3) before the end of the contract. The European Commission (Unit EMPL B/3) may transmit objections and comments to the contractor within <u>sixty (60) days of receipt</u> of the draft final report. The contractor will then have 30 days to present a revised final report, in English, taking these objections and comments into account or presenting another point of view. When submitting the final report, the contractor may obtain written confirmation of acceptance.

#### The final report must include a brief summary in English, French and German of the main results obtained. A one-page presentation of the key points of the results must accompany the summary. These key points should be concise, clear and easy to understand. They must also be drafted in English, French and German.

The detailed methodology and work plan, together with the various reports, including model guidance document, and draft reports referred to in this section, must be submitted to the European Commission (Unit EMPL B/3) both on paper (in triplicate)

and in a widely-used electronic format enabling word processing. The contractor must also supply a copy of the information collected and used in preparing the guidance document and the final report. The pictograms, pictures, graphics and other illustrations must also be presented in a widely-used electronic format.

# 7.2. Publicity and information requirements

In accordance with the General conditions, all contractors are under the obligation to acknowledge that the present service has received funding from the Union in all documents and media produced, in particular final delivered outputs, related reports, brochures, press releases, videos, software, etc, including at conferences or seminars. In the context of the European Union's Programme for Employment and Social Solidarity – PROGRESS, the following formulation shall be used:

This (publication, conference, training session etc) is commissioned by the European Union Programme for Employment and Social Solidarity - PROGRESS (2007-2013). This programme is implemented by the European Commission. It was established to financially support the implementation of the objectives of the European Union in the employment, social affairs and equal opportunities area, and thereby contribute to the achievement of the Europe 2020 Strategy goals in these fields. The seven-year Programme targets all stakeholders who can help shape the development of appropriate and effective employment and social legislation and policies, across the EU-27, EFTA-EEA and EU candidate and pre-candidate countries. For more information see: http://ec.europa.eu/progress

For publications it is also necessary to include the following reference: "The information contained in this publication does not necessarily reflect the position or opinion of the European Commission".

With regard to publication and any communication plan linked to the present activity, the Contractor will insert the European Union logo and mention the European Commission as the Contracting Authority in every publication or related material developed under the present contract.

# 7.3 Reporting requirements

PROGRESS is implemented through a results-based management (RBM). The Strategic Framework, developed in collaboration with the Member States, social partners and civil society organisations, sets out the intervention logic for PROGRESS-related expenditure and defines PROGRESS' mandate and its long-term and immediate outcomes. It is supplemented by performance measures which serve to determine the extent to which PROGRESS has delivered the expected results. See in Annex the overview of PROGRESS performance measurement framework. For more information on the strategic framework, please visit PROGRESS website <a href="http://ec.europa.eu/social/main.jsp?catId=659&langId=en">http://ec.europa.eu/social/main.jsp?catId=659&langId=en</a> .

The Commission regularly monitors the effect of PROGRESS-supported or commissioned initiatives and considers how they contribute to PROGRESS outcomes as defined in the Strategic Framework. In this context, the Contractor will be asked to dedicatedly work in close cooperation with the Commission and/or persons authorised by it to define the expected contribution and the set of performance measures which this contribution will be assessed against.

The Contractor will be asked to collect and report on its own performance to the Commission and/or persons authorised by it against a template which will be annexed to the contract.In

addition, the Contractor will make available to the Commission and/or persons authorised by it all documents or information that will allow PROGRESS performance measurement to be successfully completed and to give them the necessary rights of access.

# 8. PAYMENTS AND STANDARD CONTRACT

In drawing up the bid, the tenderer should take into account the provisions of the standard contract comprising the "General terms and conditions applicable to service contracts".

# 8.1 Interim payment

The contractor can request an interim payment. To be acceptable, such request must be accompanied by:

- An interim technical report in accordance with the instructions laid down in section 7,
- The relevant invoices
- Statements of reimbursable expenditure in accordance with Article II.7 of the draft contract.

The report must have been approved by the Commission.

The Commission has 60 days from receipt of the report to approve or reject it, and the contractor has 30 days in which to submit additional information or a new report. Within 30 days of the date on which the report is approved by the Commission, an interim payment corresponding to the relevant invoices, up to a maximum of 50% of the total amount referred to in Article I.3.1 of the draft contract shall be made.

# 8.2 Payment of the balance

To be acceptable, the contractor's request for payment of the balance must be accompanied by:

- a final technical report in accordance with the instructions laid down in section 7,
- the relevant invoices,
- statements of reimbursable expenditure in accordance with Article II.7 of the draft contract.

The said report must have been approved by the Commission.

After receiving the report, the Commission has 60 days in which to accept or reject it, and the contractor has 30 days in which to submit new documents.

The balance corresponding to the relevant invoices will be paid within 30 days following the date of approval of the report by the Commission.

# 9. PRICES

Under the terms of Articles 3 and 4 of the Protocol on the Privileges and Immunities of the European Union, the latter are exempt from all charges, taxes and duties, including value added tax; such charges may not therefore be included in the calculation of the price quoted. The amount of VAT is to be indicated separately.

The price must be stated in  $EUR(\in)$ , net of VAT (using, where appropriate, the conversion rates published in the C series of the Official Journal of the European Union on the day when

the invitation to tender was issued), and broken down according to the model in Annex III included in the attached standard contract.

Fees and direct costs:

- □ Fees, expressed in number of person/days and unit price per working day for each expert proposed. The unit price covers the experts' fees and administrative expenditure.
- □ Other direct costs (please specify).

Total price **maximum of € 360,000** 

# 10. GROUPINGS OF ECONOMIC OPERATORS OR CONSORTIA

Tenders can be submitted by groupings of service providers/suppliers who will not be required to adopt a particular legal form prior to the contract being awarded, but the consortium selected may be required to assume a given legal form when it has been awarded the contract if this change is necessary for proper performance of the contract<sup>7</sup>. However, a grouping of economic operators must nominate one party to be responsible for the receipt and processing of payments for members of the grouping, for managing the service administration, and for coordination. The documents required and listed in the following points 11 and 12 must be supplied by every member of the grouping.

# 11. EXCLUSION CRITERIA AND SUPPORTING DOCUMENTS

1) <u>Bidders must provide a declaration on their honour, duly signed and dated, that they are</u> not in one of the situation referred to in Articles 93 and 94 a) of the Financial Regulation.

Those articles are as follows:

# "<u>Article 93</u> :

Applicants or tenderers shall be excluded if:

- a) they are bankrupt or being wound up, are having their affairs administered by the courts, have entered into an arrangement with creditors, have suspended business activities, are the subject of proceedings concerning those matters, or are in any analogous situation arising from a similar procedure provided for in national legislation or regulations;
- b) they have been convicted of an offence concerning their professional conduct by a judgement which has the force of res judicata;
- c) they have been guilty of grave professional misconduct proven by any means which the contracting authority can justify;
- d) they have not fulfilled their obligations relating to the payment of social security contributions or the payment of taxes in accordance with the legal provisions of the country in which they are established or with those of the country of the contracting authority or those of the country where the contract is to be performed;

These entities can take the form of an entity with or without legal personality but offering sufficient protection of the Commission's contractual interests
 (depending on the Member State concerned, this may be, for example, a consortium or a temporary association).

The contract has to be signed by all members of the group, or by one of the members, which has been duly authorised by the other members of the grouping (a power of attorney or sufficient authorisation is to be attached to the contract), when the tenderers have not formed a legal entity.

- e) they have been the subject of a judgement which has the force of res judicata for fraud, corruption, involvement in a criminal organisation or any other illegal activity detrimental to the Communities' financial interests;
- *t)* they are currently subject to an administrative penalty referred to in Article  $96(1)^8$ .

# <u> Article 94 :</u>

Contracts may not be awarded to candidates or tenderers who, during the procurement procedure:

- a) are subject to a conflict of interest;
- b) are guilty of misrepresentation in supplying the information required by the contracting authority as a condition of participation in the procurement procedure or fail to supply this information (...)"

2) The tenderer to whom the contract is to be awarded shall provide, within a time limit defined by the contracting authority and preceding the signature of the contract, the evidence referred to in Article 134 of the implementing Rules, confirming the declaration referred to in point 1 above.

# Article 134 of the Implementing Rules – Evidence

§3. The contracting authority shall accept as satisfactory evidence that the candidate or tenderer to whom the contract is to be awarded is not in one of the situations described in point (a), (b) or (e) of Article 93(1) of the Financial Regulation, a recent extract from the judicial record or, failing that, an equivalent document recently issued by a judicial or administrative authority in the country of origin or provenance showing that those requirements are satisfied. The contracting authority shall accept, as satisfactory evidence that the candidate or tenderer is not in the situation described in point (d) of Article 93(1) of the Financial Regulation, a recent certificate issued by the competent authority of the State concerned.

Where the document or certificate is not issued in the country concerned, it may be replaced by a sworn or, failing that, a solemn statement made by the interested party before a judicial or administrative authority, a notary or a qualified professional body in his country of origin or provenance.

§4. Depending on the national legislation of the country in which the candidate or tenderer is established, the documents referred to in paragraph 3 shall relate to legal persons and/or natural persons including, where considered necessary by the contracting authority, company directors or any person with powers of representation, decision-making or control in relation to the candidate or tenderer.

# See Annex I (which may be used as a checklist) for the supporting documents accepted by the European Commission to be provided by applicants, tenderers or tenderers to who the contract will be awarded.

3) The contracting authority may waive the obligation of a candidate or tenderer to submit the documentary evidence referred to in Article 134 of the Implementing Rules, if such evidence has already been submitted to it for the purposes of another procurement procedure

 <sup>8</sup> Cf .Article 96(1): "The contracting authority may impose administrative or financial penalties on the following:
 (a) candidates or tenderers in the cases referred to in point (b) of Article 94;

<sup>(</sup>b) contractors who have been declared to be in serious breach of their obligations under contracts covered by the budget.

launched by DG EMPL and provided that the issuing date of the documents does not exceed one year and that they are still valid.

In such a case, the candidate or tenderer shall declare on his honour that the documentary evidence has already been provided in a previous procurement procedure and confirm that no changes in his situation have occurred.

# 12. Selection criteria

All bids must also contain the documents listed below, testifying to the tenderer's financial and economic capacity, technical capability and professional qualifications. In particular, the European Commission will verify the following:

# 12.1 Financial and economic capacity (on the basis of the following documents

- Turnover during the previous financial year (statement of overall turnover at least twice the value of the contract, i.e. € 720,000)
- Balance sheets and profit and loss accounts for the last three financial years, if the legislation of the country in which the tenderer is established requires them to be published;
- Regular accounts for the quarter preceding that in which the tender notice was published, if the full accounts for the previous financial year are not yet available.

If, for some exceptional reason which the contracting authority considers justified, the tenderer or candidate is unable to provide the references requested by the contracting authority, he may prove his economic and financial capacity by any other means which the contracting authority considers appropriate.

# **12.2 Tenderer's technical capability**

- a description of the tenderer's technical capability and practical experience in the field referred to in section 6 of these specifications. For consortia of companies or groups of service providers, this description must relate specifically to the tasks to be performed by each of their members;
- a list of work and/or publications of last 3 years demonstrating the tenderer's practical experience in the fields referred to in section 6 of these specifications
- the tenderer must provide the names and CVs (maximum of three pages each) of the persons responsible for the specific tasks described in section 5 of these specifications, with a view to demonstrating their practical experience and their capability to prepare practical guidelines.
- a description of the parts of the services to be provided by each consortium of companies or groups of service providers (where applicable).

# 13. Award criteria

The contract will be awarded to the bid offering the best price/quality ratio, taking into account the following criteria:

-	Understanding of the objectives and tasks:	20%
-	Quality and consistency of the methodological approach	45%
-	Quality of the work plan proposed:	15%
-	Organisation of the work and management of the project:	20%

The contract will *not* be awarded to a tenderer whose bid receives less than (70%) for the award criteria.

The points total will then be divided by the price, with the highest-scoring bid being chosen.

# 14. Content and presentation of bids

# 14.1 Content of bids

Bids must include:

- a presentation letter duly signed by the legal representative;
- all the information and documents necessary to enable the Commission to appraise the bid on the basis of the selection and award criteria (see sections 12 and 13 above);
- a bank ID form duly completed and signed by the bank;
- a "legal entity" form duly completed;
- the price;
- the detailed CVs of the proposed experts;
- the name and function of the contractor's legal representative (i.e. the person authorised to act on behalf of the contractor in any legal dealings with third parties);
- proof of eligibility: tenderers must indicate the State in which they have their registered office or are established, providing the necessary supporting documents in accordance with their national law.

# 14.2 Presentation of bids

- Bids must be submitted in triplicate (i.e. one original and two copies).
- They must include all the information required by the Commission (see points 9, 10, 11 and 12 above).
- They must be clear and concise.
- They must be signed by the legal representative.
- They must be submitted in accordance with the specific requirements of the invitation to tender, within the deadlines laid down.

#### Annex I

	Supporting documents to be provided by applicants,	
Exclusion criteria	tenderers or tenderers to who the contract will be awarded	
(Article 93(1) FR)	Procurement (Article 93(2) FR; Article 134 IR)	
1. Exclusion from a procurement procedure, Article 93(1) FR :		
« Candidates or tenderers shall be excluded from		
participation in a procurement procedure if: 1.1. (subparagraph a)	Becant extract from the judicial record	
they are bankrupt or being wound up,	<ul> <li>Recent extract from the judicial record or</li> </ul>	
are having their affairs administered by the courts,	recent equivalent document issued by a judicial or administrative authority in the country of origin or provenance <b>or</b>	
have entered into an arrangement with creditors have suspended business activities, are the subject of proceedings concerning those matters, or are in any analogous situation arising from a	<ul> <li>Where no such certificate is issued in the country concerned : sworn or, failing that, a solemn statement made by the interested party before a judicial or administrative authority, a notary or a qualified</li> </ul>	
similar procedure provided for in national legislation or regulations <sup>9</sup> ;	professional body in his country of origin or provenance	
<b>1.2. (subparagraph b)</b> they have been convicted of an offence concerning their professional conduct by a judgment which has the force of res judicata <sup>10</sup> ;	Cf. supporting documents for Article 93(1)(a) FR above	
<b>1.3. (subparagraph c)</b> they have been guilty of grave professional misconduct proven by any means which the contracting authority can justify;	Declaration by the candidate or tenderer that he is not in the situation described	
<b>1.4. (subparagraph d)</b> they have not fulfilled obligations relating to the payment of social security contributions or the payment of taxes in accordance with the legal provisions of the country in which they are	Recent certificate issued by the competent authority of the State concerned confirming that the candidate is not in the situation described <b>or</b>	
established or with those of the country of the contracting authority or those of the country where the contract is to be performed <sup>11</sup> ;	Where no such certificate is issued in the country concerned : sworn or, failing that, a solemn statement made by the interested party before a judicial or administrative authority, a notary or a qualified professional body in his country of origin or provenance	
<b>1.5. (subparagraph e)</b> they have been the subject of a judgment which has the force of res judicata for fraud, corruption, involvement in a criminal organisation or any other illegal activity detrimental to the Communities' financial interests <sup>12</sup> ;	Cf. supporting documents for Article 93(1)(a) FR above	
<b>1.6. (subparagraph f)</b> they are currently subject to an administrative penalty referred to in Article $96(1)^{13}$ .	Declaration by the candidate or tenderer that he is not in the situation described	

<sup>9</sup> See also Article 134(3) IR : Depending on the national legislation of the country in which the tenderer or candidate is established, the documents referred to in paragraphs 1 and 2 shall relate to legal persons and/or natural persons including, where considered necessary by the contracting authority, company directors or any person with powers of representation, decision-making or control in relation to the candidate or tenderer.

<sup>10</sup> Cf. footnote n°9.

<sup>11</sup> Cf. footnote n 🔊

<sup>12</sup> Cf. footnote n°9

<sup>13</sup> Article 96(1) FR: The contracting authority may impose administrative or financial penalties on the following:

<sup>(</sup>a) candidates or tenderers in the cases referred to in point (b) of Article 94;

<sup>(</sup>b) contractors who have been declared to be in serious breach of their obligations under contracts covered by the budget.

Exclusion criteria (Article 94 FR)	Supporting documents to be provided by applicants, tenderers or tenderers to who the contract will be awarded		
	Procurement	Grants	
2. Exclusion from a procurement or grant award procedure Article 94 FR : « Contracts may not be awarded to candidates or tenderers who, during the procurement procedure:			
<b>2.1. (subparagraph a)</b> are subject to a conflict of interest;	statement by the applicant, tenderer or bidder confirming the absence of conflict of interests, to be submitted with the application, bid or proposal		
<b>2.2. (subparagraph b)</b> are guilty of misrepresentation in supplying the information required by the contracting authority as a condition of participation in the contract procedure or fail to supply this information» <sup>14</sup> .	applicant, tenderer or bio It is the responsibility represented by the eva	of the authorising officer, Iluation committee, to check omitted is complete <sup>15</sup> and to	

<sup>14</sup> Cf. Article 146(3) of the FR Implementing Rules: « ...the evaluation committee may ask candidates or tenderers to supply additional material or to clarify the supporting documents submitted in connection with the exclusion and selection criteria, within the time limit it specifies. » and Article 178(2) of the FR Implementing Rules: « The evaluation committee may ask an applicant to provide additional information or to clarify the supporting documents submitted in connection with the application, in particular in the case of obvious clerical errors. »

<sup>15</sup> Cf. footnote n°14

#### Declaration of honour with respect to the Exclusion Criteria and absence of conflict of interest

The undersigned [name of the signatory of this form, to be completed]:

- in his/her own name (if the economic operator is a natural person or in case of own declaration of a director or person with powers of representation, decision making or control over the economic operator<sup>16</sup>) or
- representing *(if the economic operator is a legal person)*

official name in full (only for legal person):

official legal form (only for legal person):

official address in full:

VAT registration number:

declares that the company or organisation that he/she represents / he/she:

- a) is not bankrupt or being wound up, is not having its affairs administered by the courts, has not entered into an arrangement with creditors, has not suspended business activities, is not the subject of proceedings concerning those matters, and is not in any analogous situation arising from a similar procedure provided for in national legislation or regulations;
- b) has not been convicted of an offence concerning professional conduct by a judgment which has the force of *res judicata*;
- c) has not been guilty of grave professional misconduct proven by any means which the contracting authorities can justify;
- d) has fulfilled all its obligations relating to the payment of social security contributions and the payment of taxes in accordance with the legal provisions of the country in which it is established, with those of the country of the contracting authority and those of the country where the contract is to be carried out;
- e) has not been the subject of a judgement which has the force of *res judicata* for fraud, corruption, involvement in a criminal organisation or any other illegal activity detrimental to the Communities' financial interests;
- f) is not a subject of the administrative penalty for being guilty of misrepresentation in supplying the information required by the contracting authority as a condition of participation in the procurement procedure or failing to supply information, or being declared to be in serious breach of his obligation under contract covered by the budget.

In addition, the undersigned declares on their honour:

- g) they have no conflict of interest in connection with the contract; a conflict of interest could arise in particular as a result of economic interests, political or national affinities, family or emotional ties or any other relevant connection or shared interest;
- h) they will inform the contracting authority, without delay, of any situation considered a conflict of interest or which could give rise to a conflict of interest;
- i) they have not made and will not make any offer of any type whatsoever from which an advantage can be derived under the contract;
- j) they have not granted and will not grant, have not sought and will not seek, have not attempted and will not attempt to obtain, and have not accepted and will not accept any advantage, financial or in kind, to or from any party whatsoever, constituting an illegal practice or involving corruption, either directly or indirectly, as an incentive or reward relating to award of the contract;
- k) that the information provided to the Commission within the context of this invitation to tender is accurate, sincere and complete;
- I) that in case of award of contract, they shall provide upon request the evidence that they are not in any of the situations described in points a, b, d, e above.

<sup>16</sup> To be used depending on the national legislation of the country in which the candidate or tenderer is established and where considered necessary by the contracting authority (see art. 134(4) of the Implementing Rules).

For situations described in (a), (b) and (e), production of a recent extract from the judicial record is required or, failing that, a recent equivalent document issued by a judicial or administrative authority in the country of origin or provenance showing that those requirements are satisfied. Where the Tenderer is a legal person and the national legislation of the country in which the Tenderer is established does not allow the provision of such documents for legal persons, the documents should be provided for natural persons, such as the company directors or any person with powers of representation, decision making or control in relation to the Tenderer.

For the situation described in point (d) above, recent certificates or letters issued by the competent authorities of the State concerned are required. These documents must provide evidence covering all taxes and social security contributions for which the Tenderer is liable, including for example, VAT, income tax (natural persons only), company tax (legal persons only) and social security contributions.

For any of the situations (a), (b), (d) or (e), where any document described in two paragraphs above is not issued in the country concerned, it may be replaced by a sworn or, failing that, a solemn statement made by the interested party before a judicial or administrative authority, a notary or a qualified professional body in his country of origin or provenance.]

By signing this form, the undersigned acknowledges that they have been acquainted with the administrative and financial penalties described under art 133 and 134 b of the Implementing Rules (Commission Regulation 2342/2002 of 23/12/02), which may be applied if any of the declarations or information provided prove to be false.

Full name

Date

Signature

# **Overview of PROGRESS Performance Measurement Framework**

PROGRESS Ultimate Outcome Member States implement laws, policies and practices in a manner that contributes to the desired outcomes of the Social Agenda

PROGRESS works towards its ultimate outcome by helping strengthen the EU's support for Member States' efforts to create more and better jobs and to build a more cohesive society. PROGRESS seeks to contribute to (i) an **effective legal regime** in the EU in relation to the Social Agenda; (ii) **shared understanding** across the EU with regard to Social Agenda objectives; and (iii) **strong partnerships** working towards Social Agenda objectives.

In operational terms, support provided by PROGRESS facilitates (i) provision of analysis and policy advice; (ii) monitoring and reporting on the implementation of EU legislation and policies; (iii) policy transfer, learning and support among Member States; and (iv) relaying to decision-makers the views of the stakeholders and society at large.

Legal Regime Outcome:         Compliance in Member States with EU law related to PROGRESS areas.         Performance Indicators         1. Transposition rate of EU law on matters related to PROGRESS policy areas         2. Effectiveness of application in Member States of EU law on matters related to PROGRESS policy areas.         3. EU policies and legislation are grounded in thorough analysis of situation and responsive to conditions, needs and expectations in Member States in PROGRESS areas         4. Extent to which PROGRESS-supported policy advice feeds into the development and implementation of EU legislation and policies         5. Cross-cutting issues are addressed in PROGRESS policy sections         6. EU policies and legislation display a common underlying logic of intervention in relation to PROGRESS issues         7. Gender mainstreaming is systematically promoted in PROGRESS	Shared Understanding Outcome:Shared understanding and ownership among policy/decision-makers and stakeholders in Member States, and the Commission, of objectives related to PROGRESS policy areas. Performance Indicators1. Attitudes of decision-makers, key stakeholders and general public regarding EU objectives in PROGRESS policy areas2. Extent to which national policy discourses or priorities reflect EU objectives 3. Extent to which principles of good governance (including minimum standards on consultation) are respected in policy debate4. Extent to which the outcomes of policy debates feed into the development of EU law and policy.5. Greater awareness of policy-and decision- makers, social partners, NGOs, networks regarding their rights/obligations in relation to PROGRESS policy areas6. Greater awareness of policy-and decision- makers, social partners, NGOs, networks regarding EU objectives and policies in relation to PROGRESS policy areas	Strong Partnerships Outcome: Effective partnerships with national and pan- European stakeholders in support of outcomes related to PROGRESS policy areas. Performance Indicators 1. Existence of common ground/consensus among policy and decision-makers and stakeholders on EU objectives and policies 2. Identification and involvement by the EU of key actors in a position to exert influence or change at EU and national levels 3. Effectiveness of partnerships in relation to outcomes related to PROGRESS policy areas. 4. Number of individuals served or reached by networks supported by PROGRESS. 5. Extent to which advocacy skills of PROGRESS-supported networks have improved 6. Satisfaction of EU and national authorities with the contribution of networks 7. Extent to which PROGRESS-supported networks take a cross-cutting approach
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# Annex III

# Further background information

# Some facts / data

- In the EU the nature of jobs has changed with much less heavy industrial jobs and effective occupational health legislation focusing essentially on physical health, and measures to promote health in the workplace not covering enough mental health aspects.
- In Germany, for instance, while retirement due to physical health problems had steadily declined for both men and women from 1992 to 2004, retirement due to mental health problems had risen substantially over the same time period, from approximately 11% of all early retirements to 32%.
- The burden of disease due to depression is to increase rising from its current position of being the third most important disease burden contributor in 2004 to be the number one cause of disease burden globally by 2030.
- Income and taxes are needed to fund health and social care services, but poor mental health affects the income earning ability with fewer taxes paid; this has, in turn, an adverse effect on the sustainability of health care systems.
- The need to pay long term sickness benefits will also have a negative impact.
- Poor mental health will increase the demands on the health system due to the increased risk of co-morbid physical health problems, and increase demands on primary, hospitals and long term treatment.
- Poor mental health is a threat to Europe's ability to meet its 2020 target of 75% employment.

# Stress at work and workplace related forms of mental ill-health

Stress at work is often mentioned as 'the problem'. This is a reductionist view. In fact stress at work is but a health determinant of possible workplace related forms of mental ill-health. Obviously, tackling work related stress factors contributes to the overall aim of preventing work related forms of mental ill-health. One fundamental difficulty, however, with reducing the tackling of such issues to trying to address only the 'stress at work' factors is to do with the fact that the concept of 'work-related stress' is a very wide one in terms of the exact factors that cause it (*e.g.* bullying, accelerated work rhythms, restructurations, uncertainty over the duration of the contractual link with the employer or firm, redundancy prospects, shift work, breaking up of the classical working pattern, etc.) making this a 'one size does not fit all' type of problem, as solutions are problem specific if not individual specific.

The Framework Agreement on Work Related Stress has been followed by a Report on its implementation published in Brussels on 24.2.2011 (SEC (2011) 241 final). The Report mentions a lack of reporting by the social partners from a number of Member States, This is why the Commission believes that it is important to step up efforts in this field. Furthermore the Senior Labour Inspectors Committee has taken the decision to organise an information campaign on workplace stress at European level during 2012.

In replies to EP questions where the issue of stress at work has been raised, the Commission has reiterated the view that the current legal framework, i.e. Framework Directive 89/391/EEC, foresees an explicit obligation on the part of employers to evaluate the risks to the safety and health of workers at work even if maybe all the problems will not be so solved.

Empirical evidence regarding the health impact on the victims, including the survivors of restructuring processes, and the managers implementing and executing organizational change

Restructuring can be considered to be a serious threat to individual health for those who lose their job (the "direct victims") as well as to the immediate environment – even if only temporarily. Restructuring is one of the most complex changes to take place in the workplace and work reorganization must be taken seriously as a risk that should be handled extremely carefully in order to limit the negative health impacts associated with it.

The recent evidence that has developed only during the past two decades on the health effects on those remaining in the organization after the restructuring (the so-called "survivors" of restructuring or layoffs) shows the ways in which employees' productivity, commitment to the company, and psychosocial well-being, are affected by the way the restructuring is managed. There is now broad evidence linking employees' health with the way organizational change is planned, implemented and executed.

The impact of restructuring on workers' working conditions and health and well-being is reviewed according to three dominant models in occupational health research: The job demands-job control (support) model; the effort-reward (im)balance model; and the job demands-resources model.

There is evidence that restructuring leads to increased job demands which in turn imply higher levels of burnout and poor self-rated mental health. Increased time pressure as a result of restructuring leads to increased sick leave and workplace accidents. Furthermore, an increase in physical demands is related to a higher incidence of musculoskeletal problems which can be worsened by work related pressures.

Lack of job control during restructuring is related to increased morbidity, sickness absence and poor mental health. The combination of high job demands and low job control leads to poor mental and physical health. Social support, on the other hand, seems to have a protective effect. Social support minimizes the negative effects of a higher workload after restructuring. Superior support during restructuring predicts lower levels of exhaustion and social support leads to less alcohol abuse and less isolation.

A prominent factor in the effort-reward imbalance model is job insecurity. Increased job insecurity as a consequence of restructuring has been associated with increased levels of burnout, poor psychological health and emotions such as anger. Regardless of whether job insecurity is perceived or objective (e. g. due to company closure), it is related to more psychosomatic health complaints and anxiety. Employees putting in extra efforts in order to keep their jobs experienced higher levels of depressive symptoms due to a perceived imbalance between effort expended and a successful outcome and a lack of control of events. Experiencing job insecurity when in a job characterized by low job control and high job demands leads to more depressive symptoms, anxiety, physical health complaints and poor self-rated health. Being rewarded with training and promotion protects against poor mental health during restructuring.

Stress symptoms, poor sleep quality and emotional exhaustion during restructuring were all related to poorer work-life balance. Restructuring is also associated with higher levels of negative spill-over from work to family life than vice versa. Social support has been found to be associated with perceptions of justice and acceptance of change and supervisor support leads to a perception of a smooth implementation process characterized by feelings of control, high self-efficacy, active coping and flexible adjustments.

Coping is an important individual resource but different types of coping have different effects. Escape coping is associated with disengagement, whereas problem-solving coping is related to job satisfaction and identification with the organization. During restructuring employees high in optimism and self-efficacy report higher job security, psychological well-being, job satisfaction and engagement. Conflicts during restructuring are related to lower levels of job satisfaction and poor mental health.

Workers at the lowest levels are not the only ones to be affected by restructuring. Supervisors and middle managers are often 'caught in the middle' and have responsibility for implementing decisions they may not have been involved in and at times have to make long-time colleagues redundant. Managers' perceptions of the change process have been found to influence workers' perceptions of their working conditions. Where middle managers perceived procedures to be unjust, they exerted less effective change management behaviours and as a result workers felt less supported.

The effects on middle managers' own health and well-being include sleep disturbances, physical health problems and depressive symptoms. Bullying during restructuring has been found to be related to job dissatisfaction, increased symptoms of stress, anxiety, and depressive symptoms compared to those not exposed to bullying. Most often, the supervisor was reported to be the bullying party, but also bullying between colleagues was also reported to be a problem. One must, however, also take into account the fact that the line managers who are responsible for the communication and execution of restructuring at company level often do not have the tools and knowledge to guide such a complex process, they often show a contamination effect of the effects upon their subordinates (dismissed or remaining) and therefore are also a relevant group for future concerns.

An enlightened management should therefore include these health considerations into the concept of socially responsible restructuring, which will not only lead to higher competitiveness but also, through the protection of the health of workers, to a smoothing of the process of organizational change. A healthy workforce is in the interest of all stakeholders and social institutions if a competitive European workforce is to be maintained.

# The economic argument

From an economic perspective robust data, scientifically validated, are already available indicating a very interesting return on investment at the level of mental health promotion in the workplace (e.g. David McDaid - London School of Economics).

Workplace initiatives have high rates of return, while most mental health promoting interventions have a high impact on employment. For every €1 invested in the early detection and treatment of depression at work, there would be a return of more than €5; €0.50 for the health sector and €4.5 in improved productivity at work and reduced absenteeism from the workplace. The economic case for workplace health promotion programmes can be even stronger – in a 500 employee company for every €1 invested there are employment related benefits of more than €9.

Such evidence needs to be disseminated and even taken account of by the 'powers that be' including the European Commission.

A study is being undertaken by a contractor chosen by DG Health and Consumer Protection (SANCO) of the Commission, titled 'Economic analysis of workplace mental health promotion and mental disorder prevention programmes and of their potential contribution to EU health, social and economic policy objectives'. This piece of work will focus on providing a business case for investing in workplace mental health. It is aimed at collecting and synthesizing the existing evidence in a systematic and accessible format. Its objectives become even more meaningful in the current economic climate. The winner of this call for tender is expected to take the results of the DG SANCO project into consideration, as it is expected that it will be finalized before this one.

#### Prospects for the future

According to findings from a recent Eurobarometer survey on mental health, on average 15% of respondents across the EU had consulted health professionals because of psychological or emotional problems during the previous twelve months. There are obvious and proven links between depression and absenteeism from work, as well as the high cost of disability benefits and the fact that in some countries more than 30% of all cases of premature retirement take place on the grounds of poor mental health.

Many factors, both within and external to workplaces, influence mental wellbeing at work, including increased pressures and expectations, as well as a transition to from a manual to more knowledge orientated economy, greater levels of individualisation in society and growing socio-economic inequalities.

For Europe to maintain a high level of economic development it is important to maintain high levels of mental health and wellbeing. Actions should go well beyond treatment and care, but also focus on promotion and prevention. We need to protect our human and emotional resources, just as we have learned to protect our environmental resources, or how we have succeeded in tackling many physical disorders.

Examples of partnership actions at an EU level could be emulated including the Social partners Framework Agreements on the prevention of work-related stress and on the prevention of violence and harassment at work, as well as promoting mental health being an explicit priority of any future strategy on safety and health at work, national or otherwise.

Implementation is however critical. There are opportunities to learn from the private sector, as with, for instance the recent non-binding and very concrete guidelines on "Good Work. Good Health" for the European Telecommunication sector. The EU-Health programme has also co-funded the campaign "Move Europe – Work in tune with life". Led by the German Health Insurance BKK, on behalf of the European Network for Workplace Health Promotion; the campaign addressed mental health at work and gave thousands of companies from across the EU opportunities to share their experiences.

There are other implications: efforts to prevent mental illness or promote mental wellbeing need public action (government or other) and workplaces are important venues for action. There is a need to appeal to interests, and leverage those by using behaviour change models, so as to look for incentives to encourage or nudge such work; including government funding and support for actions in workplaces, especially in small and medium sized enterprises. Actions in the workplace could be summed up as being about "using evidence and interests to encourage behaviour change".

When going about reflecting on such issues, there are some key questions that need reflecting upon, ideally with answers found along the way, if solutions to workplace mental health problems are to be developed.

#### • How to remove the causes for mental suffering in routine operations?

It is inevitable that business will strive to improve productivity and performance. The problem is that performance management tools are too often perverted and do not take account of the impact on employees of changed working conditions. Performance tools do not have a human dimension, how can this be reinserted into tools? How can managers be taught to interact with their team members? How can the psychological impacts of changed working conditions be addressed? <u>Managers receive very little training in change management and emotional skills; most of their training is focused on issues such as finance.</u>

- How to avoid the negative impacts at the level of the psyche due to the working environment like in the case of major changes? The psychological impacts of major reorganisations are not really known. Managers are not trained to manage psychological aspects. But how can psychology be put at the top of the Managers Agenda? Middle managers need to be targeted, they are critical. There are also the new phenomena that employees change jobs and methods more frequently: but very little is being done to give people the skills needed for these transition periods.
- How to detect and handle situations of individual mental suffering? Occupational medicine is probably not adapted to very early detection. How to fight indifference? Colleagues' vigilance and back to team spirit - how to fight taboos around psychological diseases? How to organise the process of detection and early reaction?

# The World Association for Psychosocial Rehabilitation

The World Association for Psychosocial Rehabilitation (WAPR), established in 1986 in France, has seen a steady growth in the last two decades. This bears testimony to the recognition of the importance of prevention and reduction of social disability as a framework for the care of people with severe mental disorders, as well as those who have suffered from psychosocial problems as a result of extreme life experiences. In 1996 WAPR and the World Health Organization (WHO) jointly issued a "consensus statement" which defined psychosocial rehabilitation as a strategy that facilitates the opportunity for individuals impaired or disabled by mental disorder to reach their optimal level of functioning in the community, by improving individuals' competencies and introducing environmental changes. Today this concept of psychosocial rehabilitation has come of age and WAPR continues to bring to its programs and activities the rigor of scientific inquiry and field experiences that is marked by a humanistic view, the empowerment of persons struggling for a better quality of care and meaning in their lives, with equal attention to the social and political context within which these programs are conducted. Membership to WAPR is open not only to mental health professionals, but administrators, policymakers, consumers and their relatives, advocates for mental health, researchers from various disciplines, including those involved in the evolving field of neuroscience. Hence, WAPR is a multidisciplinary scientific association as well as an advocacy group calling for the reduction of stigma against anything "mental" and more importantly the empowerment of those who have suffered from such negative discrimination.

WAPR provides a forum for all stakeholders to discuss updated and relevant issues concerning sustained mental health care and psychosocial rehabilitation and to share experiences in the implementation of clinical and community programs of psychosocial care, in the formulation of policies and in research. Today WAPR is recognized as a non-governmental organization with consultative status with the World Health Organization, the United Nations Economic and Social Council and the International Labour Office. It also maintains close relations with the European Commission, the African Rehabilitation Institute and many other agencies worldwide. It has many branches representing the six regions of the world consistent with the classification of the WHO. It therefore speaks to a worldwide audience able therefore, to reach those from low income as well as high income countries.