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Managing sick leaves

How to manage sick leaves in oral health care?

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<p>For the last two years the mental health issues have become the biggest reason for sick leaves in oral health care. Prior to this the biggest reason was the muscular and or skeletal systems. The number of sick days is approximately 17 days per year per employee.</p> <p>It has been calculated that an average sick day costs to employer approximately 150 euros per day. This calculation does not include the temporarily employees and the lack of the production. With good sick leave managing skills health care companies can save a huge amount of money yearly.</p> <p>There are several laws and regulations that control the dental field since the substances that are used are irritating, can cause asthma and allergies. Also, the noise level, sharp instruments as well as radiation are harmful. It is employer's obligation to make sure that the work environment is a safe place for the employees.</p> <p>It is possible to reduce the number of sick leaves by focusing on the preventative care and the co-operation with the occupational health care. The company needs to define the normal sick leave level and what are the practicalities concerning the sick leaves. Such things are that do should they use an own reporting system where the employee can contact the manager directly and the manager can give the permission for sick leave. Also, the early-stage discussions are defined by the company. When the manager and the employee should keep a meeting concerning the number of sick leaves and when is it necessary the keep the meeting together with occupational health care.</p> <p>The atmosphere at the workplace affects the wellbeing of the employees. It is something that can be changed and can be influenced. The key is to maintain open, supportive conversation at the workplace and to deal with the conflict situations at early on.</p>	
Keywords	sick leave, oral health care, management

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1 Introduction

Managing sick leaves is in the end managing people. It is often considered to be the most challenging tasks that the manager has. Mostly managing is communicating, but the manager must have know-how and the will to in the best interest of the workplace. Oral health care like many other specific fields is lacking competent personnel. Therefore, it is easier to keep the current personnel motivated and satisfied than to recruit new ones. The recent KEVA estimate shows that there is a 9 % of gap of dental assistants. In work force this means that municipalities are lacking 285 dental assistants. Therefore, the focus must be on personnel, their work ability, well-being at work, health issues and also their personal issues such as attitude and motivation. (Finnish Dental Association, 2022, Luthans, Doh: International Management 2012).

If we look at the cost structure of oral health care the personnel costs are by far the biggest costs. The salary and the other salary fees can be 20 – 25 % of the monthly revenue. The second biggest cost is the material costs that can be 10 – 15 % of the monthly revenue. Dental field is problematic when it comes to sick leaves since we need substitute workers. The dentist can't perform all the procedures with out the dental assistant. In many fields the employer doesn't need to hire substitute workers but other workers take part of the workload. In long-term this can be straining to the permanent staff. From the employer side the costs are significantly higher since they must pay the sick leave salary and the salary for the substitute worker.

Oral health care can be considered the riskiest areas to work with. There are lot of static postures that strain the neck, shoulders, arms, wrists. There are lot of machinery that cause noise and can be harmful for the hearing, irritating and allergy causing materials as well as the instruments are sharp and can cause occupational accidents.

In oral health care like in health care the short-term sick leaves are common and the in Helsinki city the sic leave percentage was 17 %. This means that from the work force 17 % was on sick leave. In this thesis we focus on managerial side of sick leaves, what are the obligations to managers and employers as well as the employer side how the maintain the work ability and what is the role of occupational health care.

2 Theoretical background

This thesis focuses on the sick leaves in health care and especially in the oral health care. This has been a literature review of the sick leaves, what causes them and what way does the manager have to confront them.

To theoretical background have influenced the rules and regulations that guide the employer as well as the employee. There are many laws that control work, such as The Occupational Safety and Health care Act, Employment Contracts Act, Act on Occupational Safety and Health Enforcement and Cooperation on Occupational Safety and Health Workplaces, Health Insurance Act and Working Hours Act. As well as Non-discrimination Act and Act on the Protection of Privacy in Working Life.

The European Union also has set directives to control the work environment. These directives are not directly valid in Finland but are transferred as a part of Finnish legislation. Mainly the directives control the issues related to Occupational safety and health care and are related to employee's health, security and safe work environment or work time, employment relationship related issues or the security measurements related to manufactures and protective wear regulations. In Finland the preparations of the laws are issued to the advisory board which works under the Ministry of Social Affairs and Health.

There are also several institutes that control and guide the work community and the well-being such as Finnish institute for health and welfare, Finnish Institute of Occupational Health, Ministry of Social Affairs and Health, National Supervisory Authority for Welfare and Health, KELA and Finnish pension insurance company.

The monitoring of the laws related to work life are issued mainly to Regional State Administrative Agency (AVI) and to the department of Occupational safety and Health authorities who are working under the Ministry of Social Affairs and Health.

Finland is a part the International Labour Organization (ILO) which main duties are to set labour standards, to develop policies and devise programmes to promote decent work for women and men.

3 The purpose of the study

The purpose of this thesis is to provide information package concerning sick leaves in oral health care and secondly the purpose is to create tools for the managers to find ways to manage the sick leaves and to find ways to improve the employees' ability to work.

There are many laws and regulations that concern health care and for the new manager there are many things to take into consideration. There are also the European Union or labour union regulations that can be better for the employee than the actual act.

Third party that plays an important role in the sick leaves is the occupational health care. The role is increasing as the reasons for sick leave are coming more complex and related more to mental issues. It is crucial that the preventive role will be seen as important as the part of occupational health care when the employee gets sick.

4 Materials and methods

In this Thesis used materials are laws and regulations that control the health care and specially the oral health care. Most of the regulations can be found online publications. In addition, the specific guidelines to oral health care that needs to be in order that the employee safety and wellbeing are looked after. Such guidelines are published by the Finnish Institute of Occupational Health and The Centre for Occupational Safety.

Also, the supervising authority Regional State Administrative Agency has stated the norms that needs to be for the dental clinic to operate. These publications can be found online.

5 Ethical considerations

This thesis consists of managing sick leaves in oral health care and the topic is familiar to the author since she has been working in a managerial position in oral health care for several years. This can be looked like a conflict of interest, but this thesis consists of legislation and the rules that control the oral health care and personal opinions are left beside. One must take into consideration that to be able write about this topic, one must be acquainted in the field of oral health care. Since there are many specific areas that can affect the employee's ability to work such as noise or harmful substances.

The principles of acquiring knowledge and getting acquainted with the topic are done ethically and based on the guidelines of ethical recommendations to Universities of Applied Sciences, ARENE. (Arene, 2021.)

6 Laws and regulations related on employee wellbeing

This chapter contains the main laws and the main principles related to employee wellbeing. It is important the employer part knows the main laws and what is the idea behind it. What obligations does the employer have when dealing with agreements, sick leaves, workplace, and work environment.

6.1 Act on Occupational Safety and Health Enforcement and Cooperation on Occupational Safety and Health at Workplaces

This Act provides procedures to be followed by occupational safety and health authorities in monitoring compliance with provisions on occupational safety and health and for co-

operation on occupational safety and health between employers and employees at workplaces. The provisions concerning employers and workplaces in Chapters 2 and 3 also apply, where appropriate, to other persons under the supervision of occupational safety and health authorities. The objective of this Act is to secure compliance with occupational safety and health provisions and to improve the work environment and working conditions by means of enforcement carried out by occupational safety and health authorities and cooperation between employers and employees. (Act 44/2006, 1§).

Occupational safety and health authority means the office of an occupational safety and health inspectorate acting as a district authority under the Ministry of Social Affairs and Health (ministry); as regards the control of product safety and the related procedure dealt with in Chapter 4, the term occupational safety and health authority also covers the ministry; 2) inspector means a person who is in a public-service employment relationship with an occupational safety and health authority with powers to carry out enforcement and inspection activities referred to in this Act; 2 3) product means machinery, work equipment, personal protective equipment or other technical devices or objects as well as chemicals or installations or objects containing a chemical. (Act 44/2006, 2 §).

6.2 The Occupational Safety and Health care Act

This Act provides for a procedure to be followed by occupational safety and health authorities in monitoring compliance with provisions on occupational safety and health and for cooperation on occupational safety and health between employers and employees at workplaces. This act is opened more in the following chapters. (Act 1383/2001, 1§).

6.3 Employment Contracts Act

This Act applies to contracts (employment contracts) entered by an employee, or jointly by several employees as a team, agreeing personally to perform work for an employer under the employer's direction and supervision in return for pay or some other remuneration. This Act applies regardless of the absence of any agreement on remuneration, if the facts indicate that the work was not intended to be performed without remuneration.

Application of the Act is not prevented merely by the fact that the work is performed at the employee's home or in a place chosen by the employee, or by the fact that the work is performed using the employee's implements or machinery. (Act 597/2018, 1§).

6.4 Working Hours Act

This Act shall apply to all work performed under an employment contract as referred to in section 1, subsection 1 of the Employment Contracts Act (55/2001) or within a public-service relationship, unless otherwise provided elsewhere in law. Additional provisions on work performed by persons under the age of 18 are laid down in the Young Workers Act (998/1993). The provisions laid down in this Act concerning employees shall also apply to public servants and officeholders, unless otherwise provided elsewhere in law. The provisions laid down in this Act concerning collective agreements shall also apply to collective agreements for public servants. (Act 1405/2019, 1§).

6.5 Non-discrimination Act

The purpose of this Act is to promote equality and prevent discrimination as well as to enhance the protection provided by law to those who have been discriminated against. Provisions on prohibition of discrimination based on gender and the promotion of gender equality are laid down in the Act on Equality between Women and Men (609/1986). (2) Sanctions on discrimination, work discrimination and extortionate work discrimination, ethnic agitation as well as aggravated ethnic agitation are laid down in the Criminal Code (39/1889). (3) Provisions on the prohibition against inappropriate marketing are laid down in the Consumer Protection Act (38/1978). (Act 1325/2014, 1§, 2§).

6.6 Act on the Protection of Privacy in Working Life

The purpose of this Act is to promote the protection of privacy and other fundamental rights safeguarding the protection of privacy in working life. This Act lays down provisions

on the processing of personal data concerning employees, the performance of tests and examinations on employees and the related requirements, technical surveillance in the workplace, and retrieving and opening employees' electronic mail messages. (Act 347/2019, 1§, 2§).

6.7 Health Insurance Act

The right of the insured to reimbursement of necessary expenses incurred in treating an illness, and loss of income due to short-term incapacity for work, pregnancy, and child-care, is secured as provided in this Act. Secondly this Act also provides for the reimbursement of expenses incurred in arranging occupational health care services in line with the best practices regarding occupational health care, and the reimbursement of annual holiday expenses accrued during parental leave, in order to balance the burden of annual holiday expenses to employers. (1224/2004, 1§).

6.8 Union regulations

There are several unions that control the employee benefits, the most important are:

- Sosiaali- ja terveydenhuollon työ- ja virkaehtosopimus, for the municipalities
- Kunnallinen yleinen virka- ja työehtosopimus, for the public positions or for the government
- Terveyspalvelualan työehtosopimus, for the private sector
- Hammaslääkärin työntekijäyhdistys ry:n ja TEHY ry:n välinen työehtosopimus, for the private sector
- PlusTerveys Oy:n ja Tehy ry:n välinen työehtosopimus, for the private sector
- Ylioppilaiden terveydenhoitosäätiön työehtosopimus, for the private sector

- Seure Henkilöstöpalvelut Oy:n vuokrattavia työntekijöitä koskeva työehtosopimus, for the agency workers

In all the agreement the basic principles are the same, but there are different benefits concerning the vacations, working hours, protective wear as well as free oral health care. That is why it is crucial that both the employee and the employer are familiar with the used agreement and how it is interpreted at the workplace so that the benefit are the same for all employees.

7 Requirements for managers

Health care area as well as oral health care are a bit problematic to manage since the manager should have an understanding of the area as well as understanding of the economical side. Often managers are either doctors or an education of Master of Business Administration. In dental field there might be a dental hygienist who is the manager for the personnel and the dentist or special dentist who is manager for dentists. Martti Kiuru who is also a radiologist, and an engineer has pointed out that in health care organizations work more specialist than in any other field. This is true and in also points out why the communication skills are in much bigger role than in organizations where there are employees with similar background. The education for medical doctor as well as for dentist is focusing more on theoretical background and hands-on experiments than to management studies. Thus, management skills are in important role when working as a managerial position. It has been pointed out in a study that managers that don't have a medical background have better skills in managing health care issues than managing personnel issues. (Parvinen, Lillrank, Ilvonen 2005.)

It is crucial to remember that even dentist and specialist are treated like other members of the staff. Even specialists have illnesses and misuse of alcohol or drugs. It requires a lot of bravery from the manager to intervene on time in help with the occupational health

care. Looking from the work community side the line of what is allowed and what is not allowed should be like all members of the work community.

Bruce Hyland and Merle Yost have written that “Leading people creates results”. It is common that employees don’t mind how much knowledge the manager has before they know how much the manager cares about them. The manager should remember that we all have feelings, we all want to feel appreciated, liked and valued. We all want to work knowing that our job matters, that we matter. The work community consists of different kind of people. To be able to influence the behaviour, the manager should keep in mind that one must use different managerial skills. For example, in introducing a new way of doing things, one understands when doing it, other by hearing from it and third by repeating the information several times. Leading people is like a dynamic process which is a combination of communication, relationships, and unique differences. (Grönfors, 2000).

Especially the newly pointed managers can get education and support from the employer. It is normal that the manager doesn’t have all the answers but knows where to find them. The feeling of insecure is normal for the managers but when the years go by, and the confidence builds up the decision-making process becomes easier. In oral health care there is often the situation that the newly assigned manager is younger than most of the workers. It takes a lot of courage to manage employees that have higher education or more experience than the manager. Nevertheless, the manager should be able to see the competence what is in the work community and provide the tools that can make the most of it.

The leadership has been divided into four different styles based on the needs of the work life and the personal qualities of the manager. The styles are the instruct and train, the coach, the supporting and the delegate. The Instruct and train is one leadership style where the manager is constantly supervising the work and there are clear rules and directions. Employees often needs managers time and help to reflect the processes or the work. This style is often used when the employees don’t have a lot of experience or the know-how and the expertise to do their work. The Coach where the manager provides some information and guidelines, but the employees have the know-how and the liberty to do the decision. The manager is like a hockey coach, all can skate, all know the game rules and what is the goal, but the manager gives the tactics. Employer role is that they

have motivation, partially skills and how-how to do their work. Often there are some work tasks that are new or unclear to the employees and the manager's job is to help there. The supporting managerial role is used when the employees need help or guidelines sometimes. The manager is still the supervisor, but the employees are experts in their field and the know-how to do their work efficiently. These employees have education, the know-how and can be established in their field. The delegate managerial role is used when the employees are the experts, they have the know-how and skills. The role of the manager is to step away and give space. These employees have long experience, have further educations, strong know-how and strong value base. In work life the employees represent all the ages and skills, nationalities, and different backgrounds. This should be looked like an advantage, not a disadvantage. From the managerial side, the manager should be able to adapt into different roles and how to guide the employees. The recently graduated can need more guidance than the senior practitioner. Often in health care the common roles are the Delegate and the Instruct and train. (Gray, Field, Brown 2010).

A good way to understand and to improve as a manager is to use SWOT analysis. This is often used in analysing businesses but can be used to analysing your personal development as a manager. In the analysis the manager can describe the strengths, weaknesses, opportunities, and threats. This tool can be used to find out what are your strength as a manager what are the areas the needs more attention. Often SWOT analysis is a base for the managerial vision. What kind of manager do you want to be? Where are you now and what needs to happen that you cab become the leader you want to be. After you have created the vision, you need to create objectives how you can reach the vision. Objectives needs to be Specific, Measurable, Attainable, Relevant and Timebound, they must be SMART. (Jones, Bennet 2012). If you want your vision to be "Become a leader that others wish to follow". The objectives can be the following:

"To be able to communicate assertively when Required. To be perceived as a leader. To develop negotiating skills. To develop a range of leadership styles."
(Jones, Bennet: p. 120. 2012).

The vision can come also from the work community, and it can be for example improve atmosphere, reduce the number of sick leaves, or to improve communication skills. In the case the vision is to reduce the number of sick leaves, the objective should be something that is tangible such as calculating the sick leave percentage and to go explain it to

the work community and to go through it in a monthly meeting with your team. Another objective could be that the work community goes through the sick leave practicalities, when the manager can issue the sick leave, for how long and when the employee should contact the occupational health care. The last objective can be related to the role of the occupational health care, are the yearly check-ups done, how can the occupational health care prevent and maintain the work ability and how can they give more guidance to ergonomic.

8 Key concepts

In this chapter we focus on the key concepts of sick leaves and what are the differences between the sick leaves. Also, we focus on the economical costs of sick leaves. It is good to keep in mind that the right for paid sick leave is familiar in the Nordic countries, but for example in Asia or in North America. It is possible, that the employee is paid reduced salary or no legal grounds to pay anything. Often the employee can use the annual leaves in case of illness. (U.S Department of Labour, 2021, Boquen 2021.)

8.1 Definition of sick leave

The right for sick leave is written in collective labour agreement or in the law. According to the Employment Contracts Act the employee who is prevented from doing his or hers work, due to sickness or injury has the right for paid sick leave. (Employment Contracts Act, 11 §)

There are cases when the employer is not obligated to pay the salary of the sick leave. These cases are when the employee has not presented a reliable report of the illness, or the employer has the profound grounds to consider that employer is misusing the sick

leave. Also, the employer could decline the paid if the sickness marked in the sick leave certificate is not an actual illness. (Vainio, A. 2012, 2021)

The grounds for paid sick leave are that the sick leave is based on an accident or an illness. Secondly, the non-ability to work was not caused by intentionally or with gross negligence. Thirdly the grounds for sick leave have been presented in a reliable statement. Fourthly the employee has informed the employer in a relevant way. Fifthly, the illness or accident has caused an ability not to work in the work tasks named in the work agreement. (The Occupational Safety and Health Administration in Finland, 2021)

8.2 Costs of sick leaves

When we look at the cost of the sick leave, one day of a short-term sick leave costs on average 150,39 euros. The costs early per one employee of the short-term sick leaves are on average 1509 euros. To this sum are included the part time workers as well as fixed-term workers. It has been stated that part time workers as well as fixed-term workers have fewer sick leaves than permanent workers. (Rissanen, Kaseva 2014).

The another estimate of the cost has been calculated by the newspaper Talouselämä. They calculated that one sick leave day costs to the company approximately 350 euros. This sum is more than double of the previous calculation but to this sum has been added the salary costs of the sick leave, the salary costs to the substitute personnel and also the lack of productivity, hence it has been assumed that the substitute worker is not able to perform all the tasks or not as fast as the permanent employee.

In Finland to the municipalities is conducted a survey yearly. In 2017 the Kunta10 study showed that in the public sector the average sick leave amount was 16,7 days per year. Meaning that an average municipality employee is sick almost 17 days per every year. Municipalities are a huge employer in the health care as well as in the oral health care sector and the costs of sick leave are also huge. For example, the Helsinki city is the biggest municipality and employer for more than over 15 000 health care employees. If we calculate the number of sick leaves based on the numbers from 2017 and use the number of Helsinki city employees, the total sick leave amount would have been 250 500 sick leaves. The annual costs of sick leaves would be astronomical 37 672 695 euros.

This sum does not include the substitute workers or the loss of productivity. (Finnish Institute for Health and Welfare: Kunta10 study 2021.)

The companies have strategies and methods to achieve the economical numbers such as annual revenue, annual balance but also the qualitative standards such as quality, safety, or the personnel satisfaction. I argue that every company should know the number of sick leaves that the personnel has and what is the normal standard for that company. Smaller units have fewer sick leaves, when the unit grows the number of sick leaves of the sick leave percentage also grows. The bigger the unit is, the more the manager can influence the number of sick leaves and to the costs. By influencing to the atmosphere, work conditions, communication and to the preventative care. It is common that in oral health care the normal sick leave percentage is from 4 to 7 %. This often changes from one month to another.

8.3 The amount of sick leave

The terms of the agreement vary based on the labour agreement, for example in the collective labour agreement between TEHY and Finnish Dental Association the length of the paid sick leave is comparable to the length of the employment relationship. Employee has the right for full salary on the following cases:

- maximum of 7 calendar days when the employment relationship has lasted less than 30 calendar days
- maximum of 14 days when the employment relationship has lasted minimum of 30 calendar days, but less than 90 calendar days
- maximum of 28 calendar days when the employment relationship has lasted minimum of 90 calendar days but less than three years
- maximum of 35 calendar days when the employment relationship has lasted minimum of three years.

(TEHY, The Collective labour agreement between TEHY and Finnish Dental Association, 17 § When the employee gets sick)

If the work agreement is based on the Employment Contracts Act, the employee has the right for + paid sick leave when the employment relationship has lasted at minimum of one month. The employee has the right for full salary for 1 + 9 weekdays or at the maximum time until the employee has the right for daily allowance which is based on the Sickness Insurance Payment Act (364/1963). The first day is the day when the employee gets sick, and the 9 days are the following weekdays. If the employment relationship has lasted less than one month, the employee has the right to get 50 % of his or her salary. (Employment Contracts Act, 11 §).

The employer can apply for sick leave allowance from KELA after the 1 + 9 weekdays in the cases where the employer has paid the sick leave salary to the employee. For the weekdays KELA takes into consideration also the Saturdays and eve days. Normally the first day is the day when the doctor has noticed the illness or the from the day that the employee has reported of the illness. (KELA, 2021.)

In the cases that the sick leave starts right after the disablement or continues immediately after partial sickness allowance period or Rehabilitation period, there is no waiting period. If the sick leave is caused by an occupational accident or traffic accident, the compensation is applied from the employer's insurance company. In the cases where the employee gets sick right within 30 days of the previous sick leave period due to the same illness, there is a waiting period of 1 day before the employer can apply for the sick leave allowance. (KELA, 2021.)

The amount of sick leave allowance is based on the yearly income. If the incomes are 1504 – 32 011 euros, the allowance is for one sick day:

$0,7 \times \text{yearly income} : 300$ or the minimum amount of sick leave allowance

If the yearly income is more than 32 012 the allowance is for one sick day:

$74,69 + 0,20 \times (\text{yearly income} - 32\ 011) : 300$.

In the case the employee earns 31 000 euros yearly the employer will receive

$0,7 \times 31\,000 : 300 = 72,33$ euros per day.

In the case the employee earns 41 000 euros yearly the employer will receive

$74,69 + 0,20 \times (41\,000 - 32\,011) : 300 = 80,68$ euros per day.

This sum does cover a part of the employer expenses, but one must remember that the employer can apply for this allowance after 10 days. The average salary for dental hygienists is 2700 euros per month. If the dental hygienist is sick two weeks, the employer will have all the expenses and presumably the loss of revenue. The hour divider in the Labor agreement of TEHY and Finnish Dental Association is 152 and the average working hours per day is 7 hours 40 minutes. Therefore, the average daily salary for dental hygienists is 136,17 euros. The salary from 2 weeks is 1361,70 euros. If the dental hygienist is on a sick leave for 3 weeks, the salary is 2042,55 euros and the sick leave allowance is 76,75 euros per day and 460,5 euros per week. In this example the yearly salary has been calculated multiplying the monthly salary by 13, including 12 months of working and the holiday pay. From this sick leave allowance there has not been made deduction of 8 % insurance fee which is normally deducted. (KELA, 2021, Oikotie Salary comparison, 2021.)

In many companies the sick leave policies are not clear. The managers may not be aware of International Classification for Diseases more commonly known the ICD-codes, is the sick leave paid or unpaid. Also, there might be lack of division of labour, who oversees applying the sick leave allowance from KELA? is it the payroll or the manager? The bigger the company the bigger the risk that the sick leave allowance is not applied. Therefore, the clear vision of labor in managing long-term sick leaves is important for the companies. Company can save a lot of money in the salary fees, if there's no need to pay for the sick leave salary as well as to substitute employee. Also, someone needs to be responsible to control the sick leaves and apply the sick leave allowance from KELA.

8.4 Short-term sick leaves

Sick leave is considered to be short-termed if the duration is from one to three days. Often the short-term sick leaves are related to sudden illnesses such as flue, vomiting or

fewer or when a long-term illness has progressed. One must remember that sick leave is in place if staying at work slows the recovery or in other way jeopardizes health or work safety of other employee's. On average the normal adult has approximately six to eight flus per year. It is common that the flues increase when the people are getting older due to decreasing human contacts as well as due to better immune system. (Finnish institute for health and welfare 2019, Tunturi, 2020).

Sick leave practicalities should be a part of the introduction to work. All the practicalities should be open and clear to all employees. All the employees should have the similar treatment regarding the sick leave practicalities, they should be a part of the information package provided for the new employees as well as in the intranet. The manager should have tools also for substance or alcohol abuse. How to act in the cases the employee is coming to work late, is under the influence of alcohol or drugs. (The Centre for Occupational Safety, 2021.)

Concerning the short-term sudden illnesses when the employee should contact the manager? Can the employee contact the manager in the evening? What are the practicalities if the employee gets sick during the workday? Does the company have an own reporting system in use? What are the cases when the manager can permit the sick leave? What are the cases when the manager should refer the employee to occupational health care?

Every company should create a model for the early-stage discussion. The rules should be clear that when the discussion should be held, who are present and what are the subjects that needs to be addressed. These should be clear to all members of the work community and available to all. The manager as well as the company are responsible for the employee well-being so if a short-term sick leave occurs regularly this could be a sign that the capacity to work has reduced or that there are other problems for example in the private life that are affecting the work ability. It has been shown that when the company uses managerial permit to short-term sick leaves, it reduces the unnecessary visits to occupational health care, saves money, time, and effort. This reporting system means that employee contacts the manager who gives permission to sick leave one day at a time or can give two or three days at once. The employee can return work as soon as he/she has recovered. In the cases where an occupational examination is in order, the manager guides the employee contact the occupational health care at once. It is up

to company to decide how many days an employee can be on a sick leave with manager's consent. Often it is 1 – 3 days. It has been pointed out that general Doctor of Occupational Health Care describes directly longer sick leave than would be needed. Often in the cases that manager can give the consent to sick leave are the cases that are short and are contagious such as migraine or headache, fever and diarrheal or vomiting. When the employee's condition may require a diagnosis or medical treatment, the manager should refer the employee to the occupational health care. (Finnish institute for health and welfare 2019).

8.5 Long-term sick leaves

Sick leaves are considered to be long-term when the sick leave has lasts continuously for more than three days. In the long-term sick leaves, it is important that occupational health care is contacted and that they and manager can support the recovery and employee's ability to work. It has been stated that long-term sick leaves are more common in secondary education level than in higher education level. In oral health care this can be seen that dental assistants have longer sick leaves than for example special dentists. (Finnish institute for health and welfare 2019, Kunta10 survey).

Sick leaves can be considered to be difficult to manage, but once the manager gets the grip of them, it is a lot easier. The idea is not to permit sick leaves or to reduce them to zero days. By focusing on the functional work environment, improving openness and communication as well as co-working with occupational health care, the number of sick leaves is able to prevent or at least to reduce.

Sick leave management can be crystallized to one sentence "Include the viewpoint of work ability promotion at all levels of health care". This means that all parties are needed the collaboration should be functional from examination to care. (Publications of the Ministry of Social Affairs and Health 2007).

It is employer's obligation to contact the occupational health care at latest when the employee's sick leave has lasted for one month. This is made to evaluate the employee's capacity to work and to assess the employee's ability to continue to work. (The Occupational Health Care Act 10§.)

The role of the occupational health care services is to identify and to treat early on any work ability related problems. One should remember that when occupational health care provides sick leave, they have data related to that particular case. But when the manager accepts the sick leave, the information doesn't automatically reach the occupational health care and the occupational health care doesn't notice the number of sick leaves. This is why the company should have a monitoring system for sick leaves, where the manager could see all the short-term and long-term sick leaves. This could be attached to the HRM-system and available to employee as well as the manager. If the HRM-system is automated, it could send an alarm to the employee and the manager when the number of sick leaves has reached the limit and when it's time to have a discussion.

The company should also sit down and write down all the practicalities related to sick leaves. Such as what are the symptoms that the manager can give permission to sick leave. How and when the employee should contact the manager concerning the sick leave? Can the employee send a text message, or should she/he call? When the employee needs a medical certificate? How many days can employee stay at home with manager's permission? Does the employee need to call every day or is it adequate to inform the manager only once? If the child is sick, does the employee need a doctor's certificate / registered nurse? When or what reasons the employee is referred to occupational health care? When is it necessary to have a conversation between the employee and the manager? When is it necessary to inform the occupational health care and have a negotiation between occupational health care, employee, and manager?

Every company is different, and they can create rules that are suitable just for them. The key idea is to create the boundaries. Often early-stage discussion should be held when the employee has more than one sick leave in two months period. The occupational health care negotiation between occupational health care, manager and the employee are needed when the employee has 30 or more sick leave days in a year. Also, the negotiation is needed if the employee's work ability reduces. (Publications of the Ministry of Social Affairs and Health 2007.)

8.6 The right to take care of a sick child

According to the Employment Contracts Act The employee has a right to stay at home and take care of a sick child or to arrange the care for four days when the child is under 10 years old. There are union regulations that can cover better benefits, such as taking care of a sick child until the child is 12 years old.

The employee has the right to take care of a family member or other intimate member. The employee can stay absence from the workplace from compelling family reasons such as accident or illness or other unpredictable reasons. The employee and the employer must agree the length of the absence period and other arrangements. If the period can't be decided beforehand, the employee must inform the employer one month prior to return. The employer is not obligated to pay the salary in these cases. The employer can return to work when the child gets well to the same work assignments and to the same position. (The Employment Contracts Act, 6 § and 7§).

It is possible to stay at home and to get compensation from KELA if the child is under 16 years old and needs more attention than an average child or is disabled. It is possible to stay at home and take care of a sick child or to take part in the rehabilitation and apply a Special care allowance. (KELA, 2020.)

8.7 ICD-codes

There is an International Classification of Diseases also known as ICD-codes. All the codes start with different letter and manage a certain disease, for example H00-H59 codes handle the Diseases of the ear and mastoid process. The codes I00-I99 handle Diseases of the circulatory system. The codes define what disease the patient has. However, there are couple of codes that may cause difficulties when considering is the sickness leave paid or unpaid. (International classification of Diseases, 2021.)

ICD-codes with start with letter F are related to different Mental, Behavioural and Neuro developmental disorders. The Labour Court of Finland has stated that diagnoses related to depression such as Major depressive disorder, single episode (F32), Major depressive disorder, recurrent (F33), Dysthymic disorder (F34.1), Major depressive disorder, single

episode, moderate (F32.1) and Major depressive disorder, single episode, severe without psychotic features (F32.2) are all deserved for paid sick leave. (Vainio A, 2021.)

Mainly the diagnoses that start with letter Z which handle the Factors influencing health status and contact with health services. Often these Z-codes are used in cases when the employee doesn't have an illness, which is normally required when the employee is on a paid sick leave. The employee has the right to be on a sick leave, but the employer is not obligated to pay the salary. Only the code Burn-out (Z73.0) has been recognized to be an illness related state and therefore employee is deserved to paid sick leave when the medical assessment has shown that the work exhausting or the Burn-out has caused the disablement to work. Other Z-codes that do not give the right for paid sick leave are laboratory and sieving examinations, routine check-ups, nutrition and other guidance, problems related to life management difficulty, sexually transmitted diseases, plastic surgery and the after care. Rehabilitation is recognized to be paid only when the employee is at the same time unable to work due to illness. (Vainio A, 2021, Halmesmäki, 2021.)

If the employee is unable to work due to medical procedure, the disabled time is paid if the procedure was necessary due to illness or necessary to avoid illness. The sick leave after the Infertility treatments or sterilization is paid when the procedure has been made due to healthcare or medical reasons. Infertility is not an illness and the insemination and disability to work after the insemination are not paid sick leave. (Vainio A, 2021)

Problems related to life management difficulty, unspecified (Z73.9) such as problems at the workplace, difficult or unpleasant work tasks, organizing personal issues or concerns related to personal live are not deserved to paid sick leave. These cases are sorted case by case after the medical assessment. (Vainio A, 2021.)

8.8 The sick leave certificates

When the employee provides the sick leave certificate, the manager should go through at least the following issues. Firstly, are the personnel information correct, secondly the reason for absence, is it paid or unpaid, thirdly the possible special reason which is used in cases of occupational accidents and requires contact to the insurance company. Fourthly the additional information, does the occupational health care require a contact

from the employer. The doctor and the employee have a confidential relationship and therefore the occupational health care can't give information directly to the employer. The sick leave certificate is given to the employee who provides it to the employer. The employee must provide an acceptable reason for the absence and therefore the employer will find out the reason for the sick leave. The employer has also right to ask for a second opinion of the sick leave from the occupational health care. Often this is used if the certificate is provided somewhere else than in the company's own occupational health care or the absence is significantly long. (Halmesmäki, 2021.)

The manager must remember that the sick leave information is confidential and the manager can't tell the reason to the other members of the work environment. By telling the reason for sick leave the manager is breaking the law. It is possible to say how long the employee is absence but otherwise the information is confidential. It is recommended that the manager will keep the sick leave certificate in a safe place for maximum of one year. After that time the certificate should be destroyed. If the employer wants to keep track of reasons and sick leaves, that is possible without the certificate. (Halmesmäki, 2021.)

The sick leave certificate is a recommendation and if the employee is feeling better and wants to return to work earlier than is mentioned in the certificate, that is possible. The manager should remember that the employee's capacity to work needs to be in order and the return to work can't jeopardise the wellbeing of the employee. (Halmesmäki, 2021.)

8.9 The Infectious disease allowances

The rapidly spreading Covid-19 virus has also influenced the payroll. Employees can be on a sick leave or in quarantine due to exposure. This situation caused immediately problems with payroll, is the sick leave paid or unpaid. The KELA started paying for the sickness allowance due to infection, quarantine, or isolation. Meaning that the loss of income is fully covered from the KELA. It is possible that the employer pays the employee the full salary and applies the sickness allowance from KELA. In this case the loss of income has been compensated completely, including the evening and weekend allow-

ance. It is also possible that the employer doesn't pay the salary and the employee applies it from KELA. In the cases where the employee can work remotely, the allowance is not paid. If the employee can work part time, the infectious disease allowance is paid from the part the employee can't work. (KELA, Sickness allowance on account of infectious disease, 2021)

The Infectious disease allowance is paid when the employee is insured by the Finnish National Health Insurance. Or if the employee must stay at home and provide care for the child under 16 years of age and the child has been ordered to quarantine or to isolation. Provider is the legal guardian of the child. (KELA, Sickness allowance on account of infectious disease, 2021)

9 Early-stage discussions

It is crucial for the manager to know your employees. To be able to see the warning signs one must know what the normal situation is, normal expectations towards employees and for the company and how the employee normally behaves. The manager must understand the circumstances that influence the work environment, work community and the work itself. What are the circumstances that influence the employee's work ability? If these things are clear for the employees as well as to the manager, it is a lot easier to intervene when the problems arise. (The Finnish Institute of Occupational Health, 2021.)

When there are problems concerning the employee's work ability or the productivity the manager should discover answers to the following issues:

- Does the employee have a clear work description? Does the employee understand what is his/her basic task?
- Does the employee have necessary know-how for the required task?

- Is the amount of work suitable for the employee?
- Does employee have enough motivation for his/her work?
- Does employee have enough health resources to do the work? (Finnish Institute of Occupational Health, 2021.)

If any of these questions is unclear or the manager discovers problems, then it is managers obligation to have a conversation with the employee and assess the situation. If the problems are related with the motivation, is there more challenging work tasks that could be designated to the employee, is there a career path that the employee can vision him/herself working in the same company in the future? If there are problems related with the amount of work, are there tasks that could be divided to other members in the team? Can you change the deadlines and destress the days? Manager should ask the questions objectively that can this problem be solved by training, dividing work tasks or do we need help and support from the occupational health care? (Finnish Institute of Occupational Health, 2021.)

The manager should remember that employee has the right to have support for the work ability and for the wellbeing. These support measurements are created together with the employer, employee, and the occupational health care. The means should be written out, in which situations the occupational health care is needed and what are the measurement units and how work ability should be measured. All of these create the base for the early stage caring. (Finnish Institute of Occupational Health, 2021.)

9.1 Early-stage discussion form

The early-stage discussion should be held when the long-term sick leave has lasted continuously for 30 days or that the amount of short-term sick leaves is more than 30 days in on year time. This notification from the 30 days sick leave from the employer to the Occupational health care is required by the law. (Finnish Institute for health and welfare, 2021.)

It is up to the company to decide how much short-term sick leave can be held before it is time to have an early-stage discussion. At the minimum level it can be when the employee has two short-term sick leaves in two months' time and all the sick leave periods are from 1-3 days. At the maximum level it can be when the employee has four short-term sick leaves within the four months' time, and the duration of the sick leave is 1-3 days per period.

In the early-stage discussion should go through at least the following themes: work conditions, professional capability, the functionality of the work community and the personal resources. Also, the action plan to which actions both are committed. Discussion can be held freely in an open atmosphere. Prior to the discussion the manager gives the employee the form that she/he has enough time to fill it. The manager should encourage the employee to fill in all the things that are bothering and write truthfully about the situation. Often it is easier for the employee to write the difficult things on paper than to discuss them in person. Also, prior to the discussion the manager fills the form from the employer's side what are problems, how they are infecting the work community and what are the issues that manager is concerned about. The early discussion form has been created from the basis of the Finnish pension insurance company Elo.

Employee fills in:

What are the key factors influencing your usable resources at work and work wellbeing?

What are the main reasons that influence the work fluency?

What needs to be changed to improve managing at work and work wellbeing?

--

This part the employer and the employee go through in the conversation:

1. Work conditions

	in order	needs to be improved
Work equipment's and work methods		
The arrangements for the working time/hours		
The health and security of work conditions		
The workload		
How the workload is distributed in the work community		

2. Professional capability

	in order	needs to be improved
The main purpose of the work and the goals (motivation, tasks)		
Know-how now (education)		
Know-how in the future		
Learning at the workplace		

3. Functionally of the work community

	in order	needs to be improved
Possibilities to influence to your own work		
Feedback		

The support from the manager		
The support from the co-workers		
Atmosphere (harrasment, bullying)		

4. Personal resources

	in order	needs to be improved
Physical resources (health, ability, exercise, pain or discomfort)		
Mental resources (anxiety, stress, tiredness)		
Social resources (life situation, family related issues)		
The use of substances (alcohol, drugs, medication)		
The sufficiency of resources in the future		

5. Summary: What is the main problem related to work ability and what is our common vision of it?

Describe the desired work ability

What is the sufficient work ability according to the employee?

What needs to be changed that the employee can cope the work tasks according to the employer?
How can the employee improve his/her work ability?

What are the things employee is committed to do to achieve the desired work ability?

What are the things that the employer is committed to do to improve the employee's work ability?

Agreed actions, deadline, responsible persons, and monitoring

With my signature _____ I'll give my consent to send these documents to occupational health care

_____ I don't give the permission to send these documents to occupational health care.

Signature employee

Signature employer

(Finnish pension insurance company Elo, early discussion form 2021.)

In the discussion the manager and the employer agree together to the action plan and to make improvements and modifications discussed. It is crucial that the manager finds time and interest to hold a follow-up or several follow-up meeting to evaluate has these changes improved the work capacity of the employee or are the bigger issues that might have progressed the situation that occupation health care is needed.

9.2 When to have an early-stage discussion

There can many personal and difficult subjects behind a changed behaviour. That is why it is crucial that the manager is reliable and can start a conversation in a discreet and a sensitive way. The conversation should be held in a private, calm setting in a respectful and non-blaming way. This requires from the manger people managing skills as well as ability to listen and to discuss even difficult things in a neutral way.

Here are listed occasions where the employee's behaviour has changed and is has reached the alarm point. The manager should react in the following situations and to have an early-stage discussion:

- The manager is worried about the employee's situation.
- The employee withdraws, seems irritated or is rude.
- The employee is having problems with focussing, is absent-minded or forgets things.
- The employee has continuously long working hours.

- The employee is continuously late from work or from meetings
- The employee shows lack of motivation, is indifferent, careless and neglects the work tasks.
- The work performance has decreased and or the quality of work performance is reduced.
- The employee comes to work in a hang over or intoxicated.
- The employee has continuous short-term sick leaves, or the sick leaves are lengthened to long-term. (Finnish Institute of Occupational Health, Finnish Institute for health and welfare 2021.)

These conversations are made in the best interest of the employee as well as the whole work community. Careless, indifferent action in the work environment can cause severe accidents for the employees and to patients. These questions are gathered based on employee wellbeing. When feeling stress and work exhaustion the employee starts to feel negative feelings towards the work and the company. When the physical or emotional resources are ending, it often starts to show at the workplace as a lack of interest, withdrawal or neglecting the work tasks. To alcohol, drug, or medical abuse issues the manager needs to be addressed right away and refer the employee directly to occupational health care according to the drug and alcohol abuse prevention plan. Working intoxicated causes, a severe risk to the employee him/herself, to the patients and to the work community.

Often when one employee is not feeling well, this situation is influencing the whole work. It could be described when you have a small, sharp stone in your shoe and you still continue to walk, but you have to lift your leg differently or to drag it in every step so that the stone won't hurt you. When easiest answer would be to stop, take the stone away from the shoe and to continue walking. This is the same situation in the workplace, often the difficult issues are not addressed right away, and the manager or other employees allow this behaviour to continue. In the worst cases they cover it up and explain the bad behaviour of one of the employees when the right answer would be to confront it.

10 Work requirements for oral health care

In this chapter we focus first on the work-related issues since they are extremely important in oral health care. Secondly for the health issues related to employers. To be able to open a dental clinic, one must apply for the first permission from the Regional State Administrative Agency (AVI). If the dental chain has multiple clinics all over Finland, then the application is directed to the local National Supervisory Authority for Welfare and Health (Valvira). In this application the applicant must attach the plan how to self-monitor the oral health care, the waste plan for hazardous, pungent, or penetrating waste, medicine, biological and contagious waste, how they are handled and recycled. The education plan, how often and how many hours of educations the staff has received. The medical care plan, who oversees ordering, unpacking, calculating the amounts, how to proceed if the medications are missing, how to proceed when medications get out of dated. A systematic monitoring and reporting system for the hazardous situations related to use of medical machinery or accessories. For the X-ray, where is the registration information available, are the test kit and quality control done and is the monitoring form at hand. The rooms and doors must have enough protection from the radiation. For the patient information, the preservation of the patient records, passwords and archives how are they handled, the registration form and the named person for data protection officer. Also, for the new premises there must be a one toilet for disabled people.

In the form there is a whole section for work safety: that there has been recognized the safety hazards related to work itself, work environment and work condition. Also, how to prevent through blood transmitted diseases, clear guidance on how to operate when taking care of patients with transmitted diseases. How to continuously monitor the work environment and the security of work methods. That all the employer obligations have been fulfilled. There is enough storage room. That there are sufficient exit ways in the office for the personnel in case of threat or dangerous situations. All the exit ways are free and clear of cluttered. The hygiene standards are filled based on the European Union norms, the laboratory jobs and X-rays are handled in the correct manner and hand hygiene is according to regulations and protective gloves and disinfection are in use. How the instruments are being cleaned and how the instruments are handled. How the monitoring of fridge temperature is being done. That in the clinic there are all the instructions

for use and the Safety Data Sheet regarding the used materials and equipment's. Also, that risk assessment has been made based on the guidance of Finnish Medicines Agency (Fimea).

In the check-up form the work environment is looked at closely that all the dental rooms are from 12 m² to 16 m² wide, they have adequate ventilation system and sufficient soundproofing. For the personnel they must have sufficient social premises for changing clothes, for washing up and eating. In dental rooms there must be a place to wash the hands, at the clinic there must be a cleaning closet where is a sewer and cleaning materials are inside a lock.

The occupational hygiene assessment and measurements are mandatory in the dental field. This is required since in the dental field there are for example chemical exposure, noise, and X-ray exposure. There are also the work-related issues such demanding treatments or patients, rush and rapidly changing directions and malfunctioning patient record systems. The chemicals that are used in dental clinics are corrosive, irritating, sharp, and penetrating. It is known that many of the used substances can cause allergies or asthma, such as used filling materials. It is also important to avoid X-ray radiation since consistent exposure to radiation is lethal. Many of the machinery that is uses can affect hearing. For example, the air pistole that is used in the equipment facilities to dry the instruments can cause more than 120 decibel sound. The limit is considered to be 120 decibels, it is highly recommended to use earmuffs even in the lower decibels. The occupational health care can measure the decibels from the different machines. It is employer's responsibility to provide the protective wear for the employees. These protective wears are the visor, protective eyewear, earmuffs, examination gloves, a face mask, work clothes as well as the work shoes. (Finnish Medicines Agency Fimea, 2021, Finnish Institute for Occupational Health, 2021).

In oral health care one must also take extra care of the good work ergonomic. When taking care of the patients the positions are challenging for shoulders, wrists, hands. One must hold a static position many times during the day for example when assistant is holding the suction tube or dentist is drilling. The dental field is famous of the Text Neck Syndrome which means pain or even a hump in the neck area and the head is facing forward. This can be prevented by using the right ergonomic and proper exercise

amount. In the clinical work the proper ergonomic means that your knees are in 90-degree angle towards your toes and your back is straight. Use the loops as magnification which will allow your head and neck to be further from the patient. The patient is positioned in the right height, not too low nor not too high, the right height is when the patient's mouth is around four centimetres above your elbow line. Your elbows should be attached to your body and wrist straight. Adjust the patient's head support that the vision to the mouth is clear. Between patients one should remember to stretch and to change position, to work occasionally standing and occasionally sitting down. The neck pain can be caused from emotional stress as well as from too much heat. (Dental Economic, 2008.)

The dental staff needs vaccinations such as hepatitis A and B, tetanus, and yearly influenza vaccinations. During the Covid-19 the dental staff was able to get the vaccinations after the Finnish Dental Association as well as the several dentists wrote in the newspapers how they take care patients that can have covid-19. (Mikkola, 2021.)

The occupational health care check-ups for the staff that do clinical work are mandatory. In these check-ups they test the hearing, ask if there are any symptoms coming from different substances such as allergy, asthma, trouble breathing or other work-related issues. To be able to reduce the risk of physical work one must focus on the education and quality standards. (Finnish Medicines Agency Fimea, 2021, Finnish Institute for Occupational Health 2021).

The work-related risks in oral health care are chemicals such as acrylates that employees are exposed to through skin or by inhaling. The commonly used filling material is composite, and it is made of acrylate. It can be found in gas form in the air as well as organic dust. When exposed to skin this may be seen as a sensitized or allergy. Long-term exposure can cause work-related asthma. (Finnish Institute for Occupational Health, 2021).

Oral health care requires a lot of specificity, hand-related work which demands a lot of pressing force. In a long period of time this has been linked to the osteoarthritis of the finger which often is occurring in the hand that one is using the most. Therefore, monotone work tasks should be avoided. (Finnish Institute for Occupational Health, 2021).

In the oral health care the drills, suction and ultrasound machines cause a lot of noise and irritate hearing. But also, long exposure to tremor from drills and ultrasound can cause nerve-related finger symptoms. (Finnish Institute for Occupational Health, 2021).

The radiation is used to diagnose and to discover jaw or root level problems or inflammation. Without radiation it is not possible to discover what is inside the gum. In oral health care there are intraoral X-ray such as Bite-wing X-rays or Periapical X-rays. From the whole jaw can be taken Panoramic X-ray or 3D X-ray which is a sliced 3D-dimension X-ray from the part of the jaw or from a certain tooth.

When using the radiation, the employer has a special obligation to look after the wellbeing and safety of the personnel. This can be done mainly by education and familiarization of the workplace, equipment's, and machinery. To all the radiation equipment's must be applied a permit from the Radiation and Nuclear Safety Authority. Since the technique has developed the radiation dose for the patients has decreased. The main when protecting the employers is that there is enough space between the radiation source and the staff member, the walls have adequate radiation blockers and that not only one staff member is not exposed to radiation. Also, yearly quality controls must be applied to the X-ray devices. (Finnish Institute for Occupational Health, 2021, Radiation and Nuclear Safety Authority, 2021).

11 The role of the Occupational health care

Behind every good company is a functional occupational health care. The right for occupational health care is based on the Occupational Health Care Act. The meaning of the Occupational Health Care Act is to prevent work-related illnesses and to prevent work-related injuries, to enhance the work and workplace health and security, to enhance the welfare of employee's ability to work and to function at different stages of the work career

and to enhance the function of the work community. (The Occupational Health Care Act, 2§.)

The employer must provide a written action plan of the occupational health care. This action plan must include the common goals of the occupational health care, the workplace related needs and the actions that are based on the needs. The action plan needs to be updated yearly. Since the occupational health care must be provided by the employer, if the employer neglects the obligations for occupational health care, the employer or it's representative is punishable by fine. The organization who controls the health care as well as the oral health care units is the National Supervisory Authority for Welfare and Health, VALVIRA. (The Occupational Health Care Act, 11§ and 23§.)

Workplace survey is a foundation for the occupational health care. The Workplace survey is mandatory at all dental clinics. In the survey occupational health care professionals assess the workplace, used substances, noise, hazardous factors and other work-related risks. The Workplace survey has a part for the physical as well as psychological risks and for assessment for first aid capacity. (Occupational Safety and Health Administration in Finland, 2021).

Health examinations are mandatory in the field of oral health care since the work has special risk of illness in work. The idea of the health examination is to decide whether the employee is capable of doing the work that she/he was hired to. The health examination define the level of work capacity, evaluate the need for a change in the workplace and consider the possibility of rehabilitation. The health examinations are to help prevent any substance abuse and are used to referring the employee to treatment or supportive services. If the employer is worried about the employee's capacity to work, the employer can order the employee for a health examination done by the occupational health care. In these cases, the employee can't refuse to take part in the health examination. It is also employees right to ask the occupational health care to assess their workload or work capacity. (Occupational Safety and Health Administration in Finland, 2021, The Occupational Health Care Act 13§.)

It is the employer's responsibility to arrange the regular health examinations before the employee starts working in the clinic or in one month time within beginning the work. The employee can refuse to take part in the health examination only from a justified cause. It

is employers' duty to inform the occupation health care and experts about the work, work arrangements, professional diseases, work accidents, personnel related issues, work conditions and the changes in the conditions. As well as any other factors that are necessary when evaluating and preventing any health hazards or risk factors related to work and to employees. It is also employee's duty to inform occupational health care if the employee notices any factors at the workplace that might cause harm to health. (The Occupational Safety and Health Act 2002, 15 § and 16§).

12 The Occupational Safety and Health Act

The Occupational Safety and Health Act was legislated to improve work environment and work conditions to secure and to maintain the work ability of an employee. Also, to prevent and intercept occupational accidents, occupational illnesses and other work and work environment related harms that can affect employees physical and mental health. (The Occupational Safety and Health Act 2002, 1 §.)

The employer has a general duty of care which means that employer is responsible of the employees' safety and health in work. This means that employer must take into consideration work, work conditions and other work environment related issues as well as the personal requirement related issues from every employee. The general obligation doesn't apply to unusual and unpredictable hazards which the employer can't effect. As well as the unusual occasions in which the consequences could not have been avoided even if one had used all the necessary precautions. In order to improve the work conditions, the employer must plan, choose, use the the right capacity and to execute the procedures. Hence, the following principals must be applied:

- 1) any hazard and harm will be prevented from occurring;

- 2) any hazard and harm factors will be eliminated and if this is not possible, then to replace them with less hazardous and less harmful factors;
- 3) general occupational safety actions are executed before the individuals and
- 4) technology and other developing necessary means will be taken into account.
(The Occupational Safety and Health Act 2002, 8 §).

Employer must continuously monitor the work environment, the state of work community and the safety of work methods. (The Occupational Safety and Health Act 2002, 8 §).

The employer must have a program to prevent safety and health and to maintain the employee's work ability. This program needs to also include the developing needs of the work conditions at the workplace and work environment related effects. (The Occupational Safety and Health Act 2002, 9 §).

The Occupational Safety and Health Act requires that the employer must provide adequate information and guidance for the employee regarding the work, work conditions, work methods, used instruments and tools and how to use them correctly and safety especially before the employee starts a new job or a new work task or when the work tasks are changing as well as prior to initialization of a new work method, machinery or production methods. (The Occupational Safety and Health Act 2002, 14 §).

The employer must provide and to give to use the proper, regulated, and standardized protective wear if the accident or health risk cannot be avoided. By the government regulations can be adjusted more precise regulations concerning the hazardous situations concerning the work circumstances, use of protective wear and the required qualities of the protective wear. (The Occupational Safety and Health Act 2002, 15 §).

9.1. The Occupational safety and health authority

The role of the occupational safety and health authority is the monitor and to prevent occupational accidents and hazards from occurring. In cases where there is a suspicion

of an occupational disease, the occupational health care is the right authority to investigate. The Occupational safety and health authority should be informed if there are serious occupational accidents or and occupational diseases. Most important role is still with the employer and the work community in assessing the risks at the workplace. (Occupational Safety and Health Administration in Finland, 2021).

9.2. The drug and alcohol abuse prevention plan

If the company decides to take drug tests to the job applicant or to employee, the company must have a drug and alcohol abuse prevention plan. This plan must include the general goals of the company, the procedures to prevent any substance abuse and how to guide the abuse users to treatment. This plan can be a part of the occupational health care plan. (The Occupational Safety and Health Act 2002, 11 §.)

The moderate use of alcohol and sobriety support the work ability, work safety, atmosphere, and image the company and the quality of the work. it has been stated that moderate use of alcohol decreases the risk of work injuries or hazards. This implies the employee itself as well as the co-workers. When the alcohol use is moderate, the co-workers don't have the need to cover up or to protect the work condition, to cover the work performances or neglected work shifts. Moderate use supports the positive influences to atmosphere, relationships and work wellbeing. (The Finnish Occupational Health Care, 2016.)

In Finland there are many cases when the alcohol use has influenced work. The study Alcohol and Tobacco (2010) shows that nearly half of the respondents had faced alcohol related problems at the workplace. These harms were for example working in a hangover or under the influence, the smell of alcohol and absence from work or coming to work late due to use of alcohol. There use of alcohol might cause in the longer period more symptoms that are not so visible such as depression, initiative problems or problems related to co-working or the quality related problems. (The Finnish Occupational Health Care, 2016.)

It should be clear to the employer and employee that when alcohol is used privately and past the working hours, it is then the employee's private matter. If the use of alcohol or

the consequences follow to the workplace, then it's the employer's right to intervene in the use. The drug and alcohol abuse prevention plan is a written guide where the company writes down the agreed actions how to prevent any substance use as well as how to deal with substance use. There are the named persons and their responsibilities. In general, it is important to inform and educate employees of the substance abuse openly and appropriately. Also educate how the employees can receive help. (The Finnish Occupational Health Care, 2016.)

The drug and alcohol abuse prevention plan should include and how and when the abuse use is being intervened and whose responsibility is it. How to work together with the occupational health care and how to support the recovery and return to work. (The Finnish Occupational Health Care, 2016.)

13 Managing sick leaves

Managing sick leaves requires understanding of the terms and legislation, the different roles of the employee, employer, and the occupational health care. Mainly managing sick leaves is communication and interaction between people. When the employer makes sure that the workplace, work environment and work-related issues are in order, employee is responsible of informing any fault or harm that can be seen at the workplace or by understanding his/her own effort to the workplace. The role of the occupational health care is to support, to provide health care to the employer and employee as well as the work community. Managing sick leaves is a combination of three factors (The Finnish Institute of Occupational Health, 2021.)

A good way to make sick leaves visible is to go through the sick leave level or the percentage of the previous month and in what level it should be. It is good show and explain it to the whole work community and together create steps on how to improve it. Often employee's attend to remember things in favour for them. For example, it is possible to

remember how many sick days there has been during the year. When the employee sees the sick leave periods and the explanations it might be easier to realize the correct amount.

To make the sick leaves open and visible, the employee should be able to access them. This is easy to arrange when the sick leaves are marked in the HRM-system and can be seen to the manager and the employee. These should include the holidays, sick leaves, unpaid leaves and when the employee is on sick leave to take care of a sick child. To this online reporting system could be programmed that it automatically sends an email or text message to the employee and to the employer when the number of sick leaves has gone over the alarm limit. Then they both are informed, and it is like to all employees.

It is important that the employee fills the early-stage discussion form first. By doing so the employee can reflect the number of sick leaves, what have caused them and is there something that is causing these sick leaves? Does the employer need education or support in work-related issues? Is the work environment lacking machinery or equipment's that could help in the work? How is private life, is the problems at home that reducing work ability? And what are the things that could support the employee that the number of sick leaves would reduce? (The Finnish Institute of Occupational Health, 2021.)

The old saying goes that the company represents its workers. This applies to the manager as well. When the atmosphere is open and the problems are address at early on, the whole work community does well. It is a talent and can be learned to discuss the difficult things in a developing way. When there are things that are not addressed, things that are not said it naturally affects the atmosphere. This phenomenon is called in the management books as an elephant in the room. These elephants can be as mental health issues, bad atmosphere, feeling of rush, or unclarified tasks. All notices those things but which are not addressed. The similar situation is related to sick leaves. Often there is one person, who has many sick leaves and other members of the work community are either taking more tasks or working longer. In a long run this can cause tension in the work community.

If the manager wants to keep the personnel motivated, the easiest way is to give support to the personnel. The same goes with sick leaves. The company can decide if they want to use the stick or the carrot. By using the carrot, the company can reward the employees

that don't have a lot of sick leaves. For example, if there are less than three days sick leave, employee gets one paid leave. This can be divided into six-month periods or to the whole year. And the amount of paid leave is also up to the company to decide. It can be up to five days per year.

Other ways to encourage to healthy lifestyle are the bonuses form doing sports of taking a part in weight loss challenge. The suitable forms should be created inside the work community and the employees should take in part of the planning process. The things should be supportive, fun and easy to organize. It can be a running school where there are different levels of expertise, and a goal is to take part in a jogging event. Or to create a rowing team and to take part in a rowing competition.

The stick can be that the atmosphere changes into something that is not productive and it's more frightening. When the employee comes to work sick and doesn't dare to be absent is the wrong way to do it. Dealing with sick leaves the manager needs repetition and practise. How to answer the phone, how to ask the employee to visit the occupational health care or how to intervene in a substance abuse. There is no one right way of doing things, the manager is also a human and does mistakes. In an open, learning organizations this is allowed and when mistakes are recognized they are a place to learn.

13.1 Managing work ability

Managing work ability can be divided into four different categories: the work, work environment, work community and individuals. The work and the work environment consist mainly of the actual work tasks, improving work methods, materials, machinery, and the safety issues. The work community and the individuals consist of work roles, clear work tasks and supportive actions and mentoring, progressive self-control, reducing the rush, improving the effectiveness of the employee. This category also includes improving professional ability by education and building an appreciative and recognisable working environment. The future managers will have their hands full of creating a functional work ability. Since the working life requirements are constantly changing, we all need to discover new ways to keep elderly and so-called vulnerable groups better in the working life as a part time worker or by offering substitute work. (Laaksonen, Niskanen, Ollila 2012).

A person's abilities to function can be divided into four different categories: physical ability, psychological ability, cognitive ability, and social ability. These are all based on the ICF-categories also known as International Classification of Functioning, Disability and Health. Physical ability means in short that your body has enough muscular force and endurance. It also includes movement of the joints, ability to move your body and to handle the nervous system. Psychological ability in short means that you can respond and to handle information, ability to feel, to experience and to create perspective of yourself and from the environment around you. Psychological ability means to plan life and to make decisions and choices regarding it. Cognitive ability is the processing of the knowledge such as memory, learning, focusing, attentiveness, understanding the phenomenon, orientation, solving problems and linguistic ability. Social ability includes relationships and the human as a part of active part of the work environment and in the society. (Finnish Institute for Health and Welfare, 2020).

When you are working as a manager, it is a lot to do with communication and interaction with people from different background. This can be seen in the work community as different ethnical, cultural, age, education background. When the manager understands what motivates employees and how the manager can influence their behavior, then the manager can truly lead them.

To understand the cultural background the manager should get acquainted with the culture. For example, in Islamic religion is a month-period when they are not allowed to eat during daytime. In many of the health care positions the work is very hectic and you need to eat to be able to perform the work tasks. In these cases, the manager and the employee must come up with new solution how the employee can work and still practice the religion. In some of the cases these Ramadan periods have been agreed to be as holiday.

The respectfulness is the key also when we are dealing with mourning. In the ICD-codes if the person is sad and mourning for the loss of a pet, it is not considered to be paid sick leave. If the work ability has reduced the manager, occupational health care and the employee need to find out ways to ease the mourning and to help the recovering.

13.2 Returning to work

The return to work is always challenging after a long sick leave period. To ease to start one good way is to name a support person at the workplace as well as in the occupational health care. The research shows this method has gotten good experiences. The support person is a person who employee can contact directly if he/sha has any concerns related to returning to work or that there are some problems related in the recovery. There are four different ways to improve the recovery after a long sick-leave period. In this section there are two ways to deal with the long-term sick leave. The first three are the ways when the sickness has lasted normally from one month time to six months. The third and fourth are the alternatives for longer periods where the ability to work has reduced and the employee needs to start working slowly and not the full work time.

Firstly, the employer can arrange the work temporarily differently that returning to work would be easier for the employee. These special arrangements can be very based on the work environment and the employee. For example, the employee can work only mornings or only evenings, only weekends or from home. Working remotely requires the employer to provide the necessary equipment and training. This is a suitable alternative to such cases where the allergy, asthma or mold have influenced the work environment and the employee is capable to work when being away from the cause. (Finnish Institute of Occupational Health, 2021).

Secondly, the alternative is to provide substitutive work at the workplace. Meaning that if there are work tasks that are suitable for the employee with his/her education, the employer can transfer the employee to less stressful or painful work tasks. In the line of health care these cases might be a wound or a physical injury which affects the employee's capacity to work. Such cases could be when employee does office tasks instead of clinical work. Or assistance work for the equipment maintenance, placing orders or other non-clinical tasks. Substitute work tasks should be written into the Occupational health plan, and they should be clear to occupational health care as well as to the employees. (Finnish Institute of Occupational Health, 2021).

Thirdly, the partial sickness allowance, which allows the employee a chance to work part time and to be on a sick leave part time. The employer pays the salary partially and KELA pays the employee partial sickness allowance. This is a voluntary arrangement

and needs the agreement from the employer as well as from the employee. This arrangement can't jeopardise the employee's health or the recovery from the illness. The decision is made on based of the occupational health care physician and the based on the employee's work capacity. The occupational health care physician writes a medical statement where he/she recommends part-time job to be suitable for the employee. This can be applied if the employee has worked full-timely or at least part-timely for 35 hours per week prior to the illness. Financially this means that there is a lower income for the employee, but also the working hours are shorter. The partial sickness allowance can be from 40 % to 60 % of the normal working hours. In health care the amount can mean working from 15 to 24 hours a week. The minimum amount for the partial sickness allowance is 12 working days and the maximum level the amount is 120 working days. (Kela, 2021.)

Fourthly the alternatives when returning to work after a long sick leave are often planned together with the occupational health care as well as the pension fund administration company. The vocational alternatives after the sick leave are work trial, where the pension fund administration company pays a part of the salary, and the employee can test whether he/she can return to the old work tasks. This work trial can be used to able to transfer to new work tasks that are more suitable for the employees' health issues or to try out new work tasks suitability before applying to new education. This arrangement can be done together with the current employer or with the new employer. Normally the work trial is three months, but for justified reasons can be lengthened. The working hours are from 4 to 8 hours a day and often the working hours are lengthened gradually. Annual vacations should be held prior to work trial since this should be continuous period. Work trial can be paid or unpaid. If the employer decides to pay the salary for the employee, the employer is paid the rehabilitation benefit from the pension fund administration company. This sum is related to the salary. If the employer doesn't pay for the salary, the employee is entitled to the rehabilitation benefit or other benefits from the pension fund administration company. In this work trial the pension fund administration company can decide whether the employee is suitable for work or whether the employee is entitled to partial disability pension. (KEVA, 2021.)

Other methods related to vocational alternatives are work training where the new work tasks require a longer period of learning than the work trial. This can mean that employee can't return to the old work tasks and employer can offer new tasks that require new

training. Vocational education and training can take place at employee's current workplace or the basis of the current education. In some cases, the employee can't return to the same work tasks or task related to prior educations. Vocational education can mean a new part-time or full-time education. The new education must be suitable for the employee's health. The basic education or general education are not included in the vocational education benefits. It is possible to receive a business subsidy if the employee wishes to become self-employed entrepreneur. The ground for the business subsidiary is that one can get a living out of the entrepreneurship in a business mode that is suitable for one's health. (KEVA, 2021.)

In all the cases it is crucial that there are follow-up conversations between the employee and the occupational health care physician as well as the occurring conversations between the employee and the employer. To support the return to work the manager should keep the door open and to be ready for discussion. Monitoring the situation regularly the employer, the representative of the pension fund administration company or the occupational health care physician can interrupt the trial if the health of the employee is jeopardized, or the planned actions are not adequate.

13.3 Alternatives for sick leave

What are the alternatives for sick leave? This section deals with the issues related more to mental side of the employee or when the family related issues require other arrangements than sick leave. We must recognize the fact that when employee is sick and the recovery might be jeopardized by working, this is not the suitable alternative.

One option is that employee is partially on a sick leave and partially working. In this way we can reduce the working hours up to 60 % of the normal weekly hours. This option requires a statement from the occupational health care since the sick leave is paid by KELA. The amount of trial period and the amount of working hours is decided together with the occupational health care, employee, and the manager. This method is suitable for example after an operation, after long sick leave or when trying to reduce the workload at early on. (KELA, 2021.)

Second alternative to arrange the work temporarily differently. By doing so, the employee can work only mornings, evenings, weekends or remotely from home. This is suitable if the worker is for example a caregiver to his/her parents or child. This is also suitable for if the employee suffers from insomnia and it's hard to wake up in the mornings. By changing the shift to evenings temporarily can help the employee and ease the stress of waking up in the morning or going to work tired. (Finnish institute for health and welfare 2019).

Third alternative in returning to work is to provide substitutive work tasks. In health care substitute work could be that employee could work in the administrative tasks instead of clinical work, such as answering phone calls. It is important to recognize the challenges of this kind of work. Employee's may have language barriers, the computer skills are not adequate or there might be other issues to be considered. (Finnish institute for health and welfare 2019).

In some of the cases it is possible to use the remaining holidays to shorten the work week. For example, to do four days a week and keep the Friday and the weekend off that the employee has time to arrange things or to recover. By doing so the income level will stay the same. It might be possible to work temporarily shorter workweek or to shorten the workhours per day. This can be temporarily situation where the employee has time to arrange other issues. This way the income level will be lower but so are the working hours.

14 Case studies

In this chapter we focus on a couple of cases where the company has reduced the sick leaves. In the first case the city has educated the managers and provided them with multifunctional team. By this way the city has been able to reduce the sick leaves. In the second case the company uses the carrot instead of the stick and provide a variety of

bonuses for the employees when they take care of each other and from their own well-being.

14.1 Project Helsinki

Helsinki city is huge employer and there are more than 15 000 employees working in health care. The city realized that the sick leaves were extremely high. In some fields it is highly difficult to find competent substitute employees such as in child protection unit. Early on the city of Helsinki wanted to put more effort in the preventive care and that the problems were addressed before they became bigger problems. In this project the city started working together with health care managers and occupational health care. In just a one-year time the city was able to reduce the long-term sick leaves from 5,4 % in 2016 to 4,9 % in year 2017. And in the end to 4,8 % in the year 2019. These results are results of better sick leave managing skills. During this project they educated the health care managers more concerning the sick leave model. These results point out that when the manager does work systematically and repeatable the results are visible.

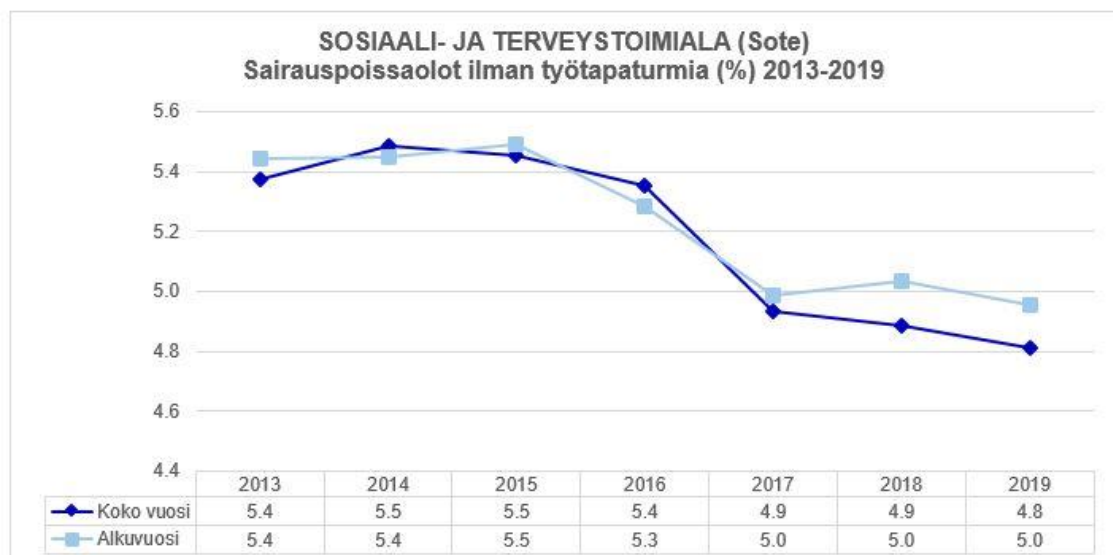


Chart: Sick leave percentage in social and health care in the years 2013 – 2019. (Hel.fi)

The city of Helsinki has reported that the short-term sick leaves have been increasing during the whole 21-century. The short-term sick leaves can occur more often, but short-

term sick leaves are not considered to be so crucial than the long-term sick leaves. Why it is so crucial to grab into the long-term sick leaves, is that they predict that employee's capacity to work as well as the employee's health will reduce in the future. That is why city of Helsinki also wanted to put more effort in the long-term sick leaves.

The city of Helsinki focused on two things: educating the managers but secondly increased the preventative care. The city started to co-work with physiotherapists that employees could visit them at low-threshold services when the employee had problems concerning the anatomical entity that occurs in the muscular and or skeletal systems. These problems in the muscular and or skeletal systems can cause long-term sick leaves if they are not addressed in the early stages. In addition, the city of Helsinki provided low-threshold services for mental issues where the employees were able to receive help when they had problems managing work due to depression or exhaustion related issues. (The Finnish Institute for Occupational Health, 2018).

It has been said that to what you focus on will improve. In this case Helsinki started a systematically educate and give support the managers. Also, they provided concrete tools to employees such as multifunctional team of occupational health care workers. By repeating the same model over and over again, they were able to reduce the sick leaves. (The Finnish Institute for Occupational Health, 2018).

In 2018 was the first time when the mental health issues were the number one reason for sick leaves, prior to this the muscular and or skeletal systems have caused the majority of the sick leaves. In 2019 Helsinki city social and health care introduced the substitute work model. The idea is to make it easier for employees to return from the sick leave and to prevent disability for work. Helsinki city has worked closely with work well-being, occupational safety, and occupational health care to prevent the sick leaves. (The city of Helsinki, 2020.)

One can only guess what the effects of Covid-19 and the sick leaves in health care are. There have been made significant changes in work tasks and workplaces, health care staff has been transferred to different work tasks such as taking samples or tracking the Covid-19 virus by phone call. There are numerous tasks that have been put on hold such as health check-ups for children, dental check ups and counselling services. The workload after the pandemic is enormous for the health care staff and what are the means to

solve this issue led to be seen. It is vital that the employer can support the employee concerning the workload and to offer ways to ease the amount of work as well as provide mental support. In the Helsinki city budgetary estimate for the year 2022 states that the biggest work ability risk is concerning the personnel is related to mental health issues. (The newspaper Helsingin Uutiset, 2021).

14.2 Pekka Niska

A Finnish company that is very known for its low sick leave percentages and by its method improving employee's wellbeing is the company Pekkaniska. The company provides lifting services such as Trailer lifts, Mobile cranes, and special platforms. In the year 2013 there were on average five sick days per employee per year, when the average sick days number in Finland was 13 sick days per employee per year. The company supports the employees by giving them bonuses from healthy lifestyle or from doing sport activity.

The bonuses are:

- for no smoking 170 euros / year
- for no alcohol 170 euros / year
- taking apart in an official sport event 170 euros (activities are orienteering 25 km, marathon 42 km, rowing 50 km, skiing 60 km, cycling 120 km or triathlon 1500 m/40 km/10km)
- by winning the CEO in a pull-up competition 170 euros. The sum is paid from the first victory.
- jogging (at minimum 5 km) 1 euro per km. The sum is paid when two or more employees go for a jog in the lunch break or after working hours.
- cycling the commute trips (at minimum 5 km per lane) 0,25 euros per km

- no absence days from work 510 euros per year
- quitting smoking 1000 euros (paid only once).

(Pekkaniska, 2021).

According to newspaper Iltalehti, the idea for these condition bonuses (Finnish Kuntobonus) came from an employee. After one workday the employee had said to the CEO Pekka Niska, that let's go for a jog. In the middle of the run the CEO had asked from the crane driver that has he had many sick leaves during his career. The crane driver responded that he had never been on a sick leave during his 20-year-old career. The CEO Niska wondered is it even possible to have such good employees and wondered how he could reward them. He decided to give bonuses for employees from healthy lifestyle and from training. The bonuses have been a part of the company for more than 30 years. On average the company pays the employees around 1000 euros bones a year. (Hulkko, 2010, Lehtonen, 2021.)

Even though Pekka Niska company has been several times in the headlines, there has been only few companies that have been willing to follow their lead. Even though the sick leaves are a huge burden to the companies they are not ready to put effort and money to preventing the sick leaves by focusing on employer's health. This could be caused from ignorance that the company is not aware how much the sick leaves are costing or that they don't feel that sick leaves are a problem. Or they can be caused from the fact that the company sees the bonuses only as a cost, not as a lower cost.

15 Wellbeing at the workplace

Work wellbeing is made of many things. It is a combination of work, the sensibleness of work, health, security, and welfare. It has been stated that things that promote the wellbeing are the good, motivating management, the atmosphere of the workplace as well as the personal abilities of the employees. It is up to both employer and the employee's to improve the work wellbeing. When the employees are doing well, they manage better at work and recover better from the workdays. It has been calculated that when the work wellbeing increases the also the productivity increases, the employees are more committed to work and there are fewer sick leaves. There are two sides to the coin, it is up to the employer's responsibility to look after the safety of the work environment, good management, and equal treatment of employees. The employee's responsibility is to maintain the work ability and the professional skills. (Ministry of Social Affairs and Health, 2021.)

There are many factors that influence the wellbeing of employees. The occupational psychology Pekka Järvinen has stated that often when there are problems at the workplace the foundation or the pillars of building are not in order. The three most important things for the manager are that to have courage to intervene on time. Meaning that if the service situation is not going according to plan, you must confront the employee. This same method applies to sick leaves: when the employee has several sick leaves, make sure to have the courage to confront the employee and to discuss why is behind it. The most important thing for the manager is to understand what the key purpose is. The purpose of the manager is to make sure that the employees have the best possibilities to succeed. Everything else is useless, if there are not adequate tools and the basic grounds for work are not in order. Second guideline for the managers is that remember to keep the professional role. Lead by example and remember to obey the same rules that obliges the employees. Järvinen has stated that managing people is difficult, it is ambivalent, and a lot of disagreements and management is actually transferring continuously between these two dimensions. (Luoma-aho, 2021).

15.1 Psychological and social factors in stress and work exhaustion

Stress is a situation where the employee feels inadequate to cope with the expectations and demands that are placed on the employee. The work itself and the qualities of the

employee effect the level of stress. Work exhaustion is a state that comes in an extended period time based on work related stress. Work exhaustion means that the personal resources are ending, and the employee is exhaustingly tired and the rest isn't helping. Often the cynical attitude towards the work rises and the work loses its meaning. The employee might feel that she/he isn't accomplishing a lot or that the level of accomplishment has decreased. The psychological factors are the things related to work and the content of work and social factors are the things related to social interaction within the workplace. (The Finnish Institute of Occupational Health, 2021.)

The psychological factors that can be harmful for the health when lasting extended periods of time:

- the work goal is unclear
- the workload is too much, or it needs to be done continuously in a rush
- the workload or the work stroke cannot be controlled by the employee
- the work has no opportunity to develop or to learn new things
- the work gets continuously interrupted or it has disturbing obstacles
- the responsibility of other people or from financial factors is not in the same line with the opportunities to function
- employee doesn't get enough feedback or appreciation from the work
- the changes are coming continuously and there is an extended period of uncertainty.

These social factors that are always harmful for the health:

- inequality treatment related to age, gender, nationality, religion, private life or other non-work-related factor
- inappropriate behavior or sexual harassment.

These social factors that can cause harm for the health are when lasting extended periods of time:

- work is done lonely, separately from others
- the collaboration between employees is not working
- there are problems related to communication
- management is inconsistent
- there are many negative emotions related to interaction between employee and the customers or the patient or the student. (The Finnish Institute of Occupational Health, 2021.)

All these factors are obvious that they can be seen at the workplace. But it is important for the manager to understand that there are many fixable things that can be harmful for the employee's health.

When the foundation is in order the work wellbeing is easier to achieve. It has been stated that when the emotional stress increases the symptoms can be physiological. When the atmosphere at the workplace is poor, the workload is too heavy, when the tasks are not divided equally or are not clear or when there is stress and continuous rush, these symptoms can turn into physical such as insomnia, stress, tiredness, and lack of interest. At this point the employee's wellbeing is already jeopardized. As a manager you are the one holding the key. In every workplace there should be an action plan on how to welcome and to do the familiarization of the new employees. The work tasks should be clear to all, what are the expectations, what are the working hours, benefits, requirements and what is the protocol if there are problems related to work and what to do when the employee gets sick.

It is good to remember that employees are also a member of the work community. These communities evolve constantly and often the best knowledge of the work requirements comes from the employees. It is employers' obligation to support the wellbeing, but the employees have a significant role in this too. Together the work community can build an open and learning organization. This means that employees feel better and have fewer

sick leaves. Open culture means that employees have more opportunities and courage to innovate. These innovations can benefit the whole work community such as joint exercise break, chin-up competition or ways to improve the lower back muscles. These innovations can be mental such as open conversations about difficult cases, difficult patients every three months. New innovations can be playful competition between employees: who has the most steps in a month? (Conner, Clawson 2004.)

15.2 Work wellbeing among dentists

The Finnish Dental Association conducted a survey in cooperation with Finnish Institute of Occupational Health to its members in 2019. The total amount of members was 4394 persons and they received 2318 response. Of the respondents 63 % worked in public sector and 37 % in private sector and 74 % of the respondents were women and 26 % men.

In the study related to dentist wellbeing in 2019 showed that the workload, continuous rush, time pressure and experience of that there are not enough resources to provide sufficient care for the patients especially in health care centres. Almost half of the dentist who responded in the query felt some degree of work exhaustion and approximately fourth of the respondent felt a load of stress. Also, the feelings of depression had increased from the previous study conducted in 2014. The study shows that the workload had increased from the year 2014. The dentist feels that the most significant factor causing the workload is the feeling that they can't provide the treatment that they would want to provide to the patients. Especially alarming was the experience of young dentist under 36 years old, they felt that the workload is unconscionable. (Finnish Dental Association, 2019.)

Even though the feelings of growing workload and the workload the dentist felt the positive drive to work. The most significant resources were the appreciation of work, independence, seeing the results of your own work, possibilities to influence and positive patient contacts and the meaningfulness of work. (Finnish Dental Association, 2019.)

16 Discussion

The purpose was to provide information concerning sick leaves and provide concrete tools to managers how to manage sick leaves. There are no accurate numbers from private sector how much sick leaves there has been in oral health care annually. The provided information applies only to the public sector. Since the work has been more hectic and the oral health ques have accumulated, the rush has been seen in private as well as in public sector. Since the restrictions of Covid-19 have been reduced, the financial burden is only on the employer side. Previously the KELA has paid sick leave allowance directly to the employee or to the employee and this sum has covered the pay costs of the isolation due to Covid-19. (KELA, 2021.)

When there are problems in the work environment it can be seen in the number of sick leaves as well as in the employee satisfaction. The sick leave management should a part of the HR-system and part of the manager tool kit. I argue that sick leaves are manageable and by focusing on them the company can save a huge amount of money yearly. Also, the personnel want to stay in the same company, when the atmosphere is open, and the problems are addressed early on.

The key is to calculate what is the sick leave percentage and how much sick leave days are there per year per employee. The second key is to create a sick leave practicality, when the employer can give permission to sick leave, what to do when a child gets sick and when to contact the occupational health care. The employer must remember that there are many regulations that control the employer and the mandatory things such as safety issues and work conditions must be in order.

16.1 Ethical questions

When it is related to sick leaves, we handle personal and health care related information and special attention is needed. It is crucial that only the manager has the access to this information and the information is kept in a safe storage and the documentation is deleted when there is no use for it. There are many cases that are not so clear whether the

employee is obligated to paid sickness leave or the sick leave unpaid. The questionable sick leave ICD-codes are the ones beginning with F-letter. In these cases, the manager should contact the HR-services or the occupational health care for further instructions. It is also important to understand that managers can give false information accidentally or do the wrong way if they don't have the necessary information and education.

16.2 Reliability and validity

This thesis is based on the regulations and instructions that guide oral health care. Often this information is spread around, and it is summarised to this thesis. There is a lot of information that is not a part of the studies of dental assistants or dental hygienists such as obligations as an employer or what rights the employee has regarding the absence. Often the dental assistants and dental hygienists work as managers to the oral health care staff.

The weaknesses are that the field is constantly changing, and the information will soon be old. The thesis can be looked at a tool kit for the managers, but it is not meant to downgrade the rights of the employee. It is still crucial that the employee will have the ability to be on a sick leave when the recovery can be jeopardised or that there is a risk that the sick person can cause harm to other members of the work community. The idea is not to have sick leaves at all but focus more on the things that are changeable.

17 Conclusion

Management skills should be required from the manager. How to communicate and interact with employees. Managing is communicating. Managers often feel that they don't have any tools to control the sick leaves. It is crucial that the company creates a sick

leave policy which is in use in all the different clinics in the same company. The manager also needs support and education from the HRM- and from the manager's manager.

One must remember that it is possible to reduce to sick leaves and it is possible to manage them. The idea is not get sick or not to have any sick leaves. It is possible to reduce them to a normal level, which is defined by the field and the company. The role of the manager is to have a clear understanding of the sick leave percentage, to have the discussions and to have tools to support the employee when they are sick or when they are returning to work. When the work can jeopardize the recovery or that the employee can contaminate other members of the work community, it is best to stay at home. One positive thing that Covid-19 has thought to oral health care and it is that the employees have stayed at home, when they have had flu symptoms.

It is important to educate managers how to deal with conflicts at the workplace, how to deal with employees from different backgrounds. Educate managers what means safe place to work physically and mentally. What are key elements to create a good workplace for all employees and how to involve to employees in the process.

Every company needs to create their own action plan, where they write down what is the current level for sick leaves and what is the target level. Company must educate the managers and educate the managers to realize when there are risks that employee's capacity to work has reduced. This should be done together with the occupational health care. The written plan should include how the manager confronts the employee and how they together come up with the right action plan for the employee, is it partial sick leave, substitute work, education, or different working hours. The company should remember that what you focus on, improves. By focusing on reducing the sick leaves, the sick leaves will increase.

The wellbeing is the triangle of employee, employer, and the occupational health care. The key role of wellbeing is in the manager side. Manager must have the courage and passion to lead people. The company must have an action plan for the sick leaves and the manager must have courage to intervene on time. It is the similar situation with cavities, a small cavity is easier to fill than a larger one. The sooner the manager addresses the problems the easier they are to handle. Also, the occupational health care is there to

give guidance and support. The changes in the work life are more related to mental issues than muscular and skeleton problems. This is the reason to create open, learning organization which is full of discussion.

Several of the biggest health care companies have stated that mental health issues are now the biggest reasons for sick leaves or for early retirement. This is a huge burden in the health care as well as in oral health care. The ques have risen significantly, the personnel are working in the limit, there are no available times to give to the patients and the work itself is like trying to control the fire, only the acute cases are being handled and there are no possibilities to take care of the patient comprehensively. All the dental staff are very aware of the fact that a small cavity is a lot easier to fix than to do a root canal treatment. There´s also polarization that the problems are accruing in the smaller number of patients whose dental and mental health care decreasing. Upcoming changes in the health care can even worsen the ques the cause more problems in the work tasks when the new areas are being divided.

As a future idea it would be beneficial to discover the differences of working in private sector and in the public sector. How does the personnel feel the work itself and the management? What are the main reasons to keep the personnel happy and satisfied in the work since dental field is lacking several dental professionals from dental assistants to dentists? And finally, a survey how the salary and appreciation of the work are defining where the personnel want to work.

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