

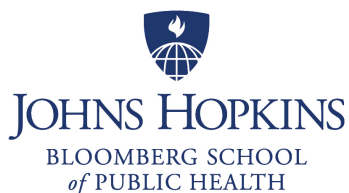
# From Evidence to Practice: Workplace Wellness that Works

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**Institute for Health and  
Productivity Studies**

The logo for the Transamerica Center for Health Studies. It consists of a green rectangular box containing the word "TRANSAMERICA" in white, followed by the word "CENTER" in white. Below this box, the words "FOR HEALTH STUDIES" are written in a black serif font.

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# Employer Guide – Technical Report

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# Executive Summary

Employers know that keeping employees healthy is good for both the employees themselves and for the productivity and profitability of the business. However, most employers do not know precisely how to create a healthy workplace or healthy workforce. This workplace health promotion guide for employers fills that need: using the latest scientific evidence combined with expert opinion from business leaders, this guide offers easy to use, real world recommendations on the design, implementation, and evaluation of workplace health promotion programs. Employers can use this guide to implement best and promising practices in their workplaces, thereby maximizing the impact of their program and the benefits to employees and business alike.

According to a recent national survey, many businesses are interested in implementing a workplace health promotion program, but fear that they are “too small” to support a comprehensive program, or that the program will “cost too much.”<sup>1</sup> Therefore, most of the recommendations in this guide are easy and free or very low cost to implement (e.g., creating a tobacco-free workplace policy, encouraging people to take the stairs rather than the elevator), and have been shown to have significant positive health impacts. Other recommendations, such as whether to provide monetary incentives, allow employers the flexibility to determine what is financially appropriate for their workplace.

To create a comprehensive program, employers must address both the individual risk factors affecting their employees and the organizational factors that help or hinder employees’ efforts to reduce their risks. The strongest programs create a culture of health, intertwining individual-level health promotion efforts with the overall company goals and objectives and ensuring that both leadership and the workplace environment provide support for healthy choices. Programs are also most effective when they are clearly tailored to the goals and needs of specific populations and provide sufficient opportunities for employee engagement and input. Thus, this guide includes steps to address a variety of factors affecting employee health at both the individual and organizational levels.

In the first section of this guide, we explain the steps to implementing programs that address common individual risk factors, including physical activity, healthy nutrition, tobacco cessation, stress management, and more. We explain the importance of and business case for targeting these risk factors before providing a step-by-step guide to planning, implementing, and assessing the program. The second section follows a similar format, focusing on organizational level factors such as leadership commitment and support, strategic communications, employee engagement, and more. Finally, we report on interviews with employers who have

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<sup>1</sup> Small Business Majority. *Small Business Attitudes on Wellness Programs*. (2014). Small Business Majority. Available at <<http://www.smallbusinessmajority.org/small-business-research/downloads/072114-Small-Business-and-Wellness.pdf>>

built successful wellness programs that have benefited both their employees and their businesses, sharing their insights and recommendations for future programs.

It is our hope that this guide will enable businesses of all sizes to create and sustain successful, comprehensive workplace health promotion programs.

# Introduction

## The Need for Workplace Health Promotion Programs

Adult Americans spend a substantial portion of their waking hours at their place of work. Unfortunately, modern workplaces frequently contribute to ill health: desk jobs lead to physical inactivity, workplace stress can lead to poor sleep and poor dietary choices, cigarette smoking rates remain dangerously high, and a number of other factors can combine to put workers' health at risk. The good news is that workplaces also present a valuable opportunity for health promotion: scientific studies show that when done right, workplace health promotion and disease prevention programs can improve the health of employees, reduce healthcare costs, increase productivity, and produce a positive return-on-investment (ROI), resulting in a win-win for employees and employers.

## What are Workplace Health Promotion Programs?

Workplace health promotion programs are efforts put forth by employers to improve the health of employees. These efforts generally fall into three categories: primary prevention to prevent illness or disease from occurring (e.g., physical activity challenges, stress management programs, anti-smoking campaigns), secondary prevention directed at high risk individuals (e.g., weight loss classes, smoking cessation telephone quit lines, improving access to medication), and tertiary prevention, also known as disease management, for those with an existing condition (e.g., therapy for people suffering from depression, medication compliance programs for people with diabetes). Interest in health promotion programs has risen in the past few years, in part because employers have been spending more and more on health care for their employees, with the bulk of that spending due to preventable chronic diseases (e.g., obesity, diabetes, and cardiovascular disease).

## Do Workplace Health Promotion Programs Really Work?

The 2010 review by the Community Preventive Services Task Force, housed at the Centers for Disease Control and Prevention (CDC), found that well-designed programs exert a positive influence on a number of health behaviors, such as smoking, diet, physical activity, and alcohol consumption. Workplace health promotion programs can also improve biometric measures like blood pressure and cholesterol levels. Further, well-designed programs also impact financial measures important to employers, including healthcare utilization and worker productivity. A meta-analysis by Chapman et al. in 2012 found that participants in workplace health promotion programs had about 25% lower medical and absenteeism expenditures than non-participants.

However, not all workplace health promotion programs are equally effective; many are ineffective due to underinvestment, poor design, or poor

implementation – i.e., they have not adopted best and promising practice principles.

### **The Workplace Health Promotion Programs Guide**

In this guide, we identify the scientifically-supported best and promising practices that can be adopted by businesses to improve the health of their employees. The manuscript is divided into two sections: individual factors and organizational factors. In the individual factors section, we look at the effects of workplace health promotion programs in different individual dimensions, such as physical activity, tobacco cessation, healthy diet/nutrition, and stress management/emotional health. In the organizational factors section, we look at different organizational variables, such as leadership commitment/support, creating a culture of health, and benefit plan design. Each of the recommendations contained herein is highly effective, easy to implement, and low or no cost to maintain. Following the steps in this guide will help employers promote a healthy workforce, and a healthy workforce often leads to a healthy bottom line.

# Workplace Wellness: Legal Guide and Considerations

## Workplace Wellness Guide for Employers

In creating a workplace wellness programs, employers need to consider the various legal requirements imposed by the Americans with Disabilities Act (ADA), Health Insurance Portability and Accountability Act (HIPAA), and the Affordable Care Act (ACA). Generally, workplace wellness programs must be voluntary, non-discriminatory, be reasonably likely to promote health or prevent disease, and protect the confidential health information of their employees.

It is important to note that workplace wellness programs that are linked a health plan are treated differently than general healthy workplace programs that are not linked to a health plan—these draft rules apply to those connected to an employer-based health plan.

Federal regulations have been proposed, and public comment is complete. The following is an overview of those proposed regulations (or draft rules) but final federal regulations governing workplace wellness programs are pending.

## Definition of Workplace Wellness

The Equal Employment Opportunity Commission (EEOC) defines workplace wellness as “programs and activities typically offered through employer-provided health plans as a means to help employees improve health and reduce health care costs”.

A wellness program is considered an employee health program when it is “reasonably designed to promote health or prevent disease”. The program must not be overly burdensome, a subterfuge for violating the ADA or other laws prohibiting employment discrimination, or highly suspect in the method chosen to promote health or prevent disease.

## Wellness Programs Must be Voluntary

Title I of the ADA generally restricts employers from obtaining medical information from employees but allows medical examinations of employees and inquiries about their health if they are part of a "voluntary" employee health program. Specifically, an employer:



- may not require employees to participate
- may not deny access to health coverage or generally limit coverage under its health plans for non-participation
- may not take any adverse action or retaliate against, interfere with, coerce, intimidate, or threaten employees (such as threatening to discipline an employee who does not participate or fails to achieve certain health outcomes)

### **Non-Discrimination Requirements**

HIPAA prohibits group health plans and group health insurance issuers from discriminating against individual participants and beneficiaries in eligibility, benefits, or premiums based on a health factor. The Affordable Care Act (ACA) amended the HIPAA nondiscrimination rules and created new incentives to build on existing wellness program policies to promote health. The Departments of Health and Human Services, Labor, and the Treasury created specific [rules on wellness programs](#) to reflect the changes made by the ACA. These initial rules set forth criteria that can be used by plans and issuers to avoid violations of nondiscrimination provisions.

Compliance with the proposed rule does not relieve an employer from its obligation to comply with all other nondiscrimination requirements. For example, wellness programs must not discriminate against employees with disabilities or on the basis of race, color, sex, national origin, religion, compensation, age, pregnancy, genetic information or any other grounds prohibited by law.

### **Reasonable Accommodations for Employees with Disabilities**

Employers must provide “reasonable accommodations” that allow employees with disabilities to participate in wellness programs and obtain any incentives offered. For example, if attending a nutrition class is part of a wellness program, an employer must provide a sign language interpreter, absent undue hardship, to enable an employee who is deaf to participate in the class. Plans and issuers must disclose the availability of an alternative standard to qualify for the reward (and, if applicable, the possibility of waiver of the otherwise applicable standard) for disabled employees in all plan materials describing the health-contingent wellness program.

### **Promotion of Health and/or Prevention of Disease**

Disability-related inquiries and medical examinations that are part of a wellness program must be reasonably designed to promote health or prevent disease. In

order to meet this standard, the wellness program must have a reasonable chance of improving the health of, or preventing disease in, participating employees, and must not be overly burdensome, a subterfuge for violating the ADA or other laws prohibiting employment discrimination, or highly suspect in the method chosen to promote health or prevent disease. The draft rules offer examples of programs that would and would not meet this standard.

### Incentive/Disincentive

An employer offering a wellness program in connection with a group health plan may use incentives, whether a reward or penalty, to encourage participation in the wellness program. The draft rules clarify that, for the wellness program to be considered voluntary, an employer may offer incentives up to a maximum of 30 percent of the total cost of employee-only coverage under the group health plan. The total cost of coverage is the amount the employer and employee pay, not just the employee's share of the cost.

For example, if a group health plan's total annual premium for employee-only coverage (including both employer and employee contributions for coverage) is \$5,000, the maximum allowable incentive an employer could offer to an employee in connection with a wellness program is \$1,500 (30 percent of \$5,000).

Incentives may include health plan premium discounts or rebates and health plan cost sharing adjustments, such as copayments, deductibles or coinsurance.

### Notice Requirements and Confidentiality

The proposed rule provides, as part of the voluntary requirement, that if an employer's wellness program in connection with, a group health plan, the employer must provide a notice that clearly explains what medical information will be obtained, who will receive the medical information, how the medical information will be used, the restrictions on disclosure of the medical information, and the methods that will be used to prevent improper disclosure of the medical information. Medical information obtained by wellness programs may be disclosed to employers only in aggregate form, except as needed to administer the health plan. This requirement is similar to those under the HIPAA privacy rules.

### Summary of Rulemaking Process

On April 20, 2015, the EEOC issued a [notice of proposed rulemaking](#) (NPRM or draft rules) on how Title I of the Americans with Disabilities Act (ADA) applies to employer wellness programs that are part of a group health plan. The EEOC then accepted public comment on the rules in June 2015. While the proposed rules are

not law, they can provide some insight to employers in creating compliant workplace wellness programs. The EEOC is currently evaluating all of the public comments and potentially make revisions in response to those comments. The EEOC will then vote on the rule, which is then reviewed by oversight agencies before it is published in the Federal Register to make it final and binding.

While employers are not required to comply with the proposed rule, they may do so. It is unlikely that a court or the EEOC would find that an employer violated the ADA if the employer complied with the draft until a final rule is issued. Moreover, many of the requirements set forth in the draft rule are already requirements under law.

### Disclaimer

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## Methods

To provide comprehensive insights for employers, this guide was developed in three steps: compiling and synthesizing information about individual risk factors, compiling and synthesizing information and opinions about organizational factors, and collecting and synthesizing information on exemplary health programs through interviews with program representatives. We relied on a combination of scientific and academic literature, other publications and opinions from subject matter experts, and the information uncovered through interviews to identify the best and promising practices in workplace health promotion. A detailed description of the methods used to create each section of the guide follows.

Our research on individual risk factors relied primarily on peer-reviewed scientific literature, as many of these factors are heavily studied, resulting in numerous publications. Rather than conducting an exhaustive review of such a large body of literature, we used previous reviews from public health authorities like the Centers for Disease Control and Prevention (CDC) and the American Heart Association (AHA) to inform a snowball review. Sources were primarily drawn from scientific databases.

Because there is less peer-reviewed literature on organizational factors, we relied on a combination of scientific literature, industry publications, and opinions from subject matter experts like Nico Pronk and Michael O'Donnell. This review, too, was informed by existing work from respected government and nonprofit organizations. Sources were acquired by searching academic databases and government websites, and entering keywords into online search engines.

After conducting literature reviews for both individual and organizational factors, the existing information about each factor was synthesized to provide employers with a brief overview of the importance of and business case for addressing that factor through their program. We then synthesized information and lessons learned from past programs into a series of action steps to guide employers through the process of designing, implementing, and evaluating their health program.

Finally, we conducted interviews with representatives of companies and organizations identified as having exceptional workplace health promotion programs. Interviews were semi-structured, drawing from a list of 14 key questions, but flexible enough to allow interviewees to discuss the particular aspects of their programs they found noteworthy. Generally, interviewees were asked to provide an overview of their organization and their program, their successes and failures, and the advice they would offer to other employers. This information was then compiled into a brief report on each program.

# Individual Health Risk Factors

The following section explains the importance of and business case for investing in programs that focus on a variety of individual factors, followed by a series of actions employers can take to create an effective program. Resources to assist in following these suggestions are included in the addendum at the end of this guide.

# Physical Activity

## The Importance of Physical Activity

The Centers for Disease Control and Prevention (CDC) describes regular physical activity as “one of the most important things you can do for your health.”<sup>1</sup> There is strong scientific evidence that regular physical activity reduces the risk for heart disease, diabetes, obesity, high blood pressure, stroke, depression, certain kinds of cancer, and premature death.<sup>2,3</sup> Physical activity has a tremendous effect on mental health, too: regular exercise leads to improved mood, sleep, thinking, learning, and judgement.<sup>1</sup> And, contrary to popular opinion, physical activity can actually increase energy levels, reduce risk of injury, and help with pain management.<sup>4-6</sup> Because of these numerous benefits and low rates of side effects, CDC Director Dr. Thomas Frieden has called physical activity “the closest thing we have to a wonder drug.”<sup>7</sup>

For best results, healthy adults aged 18 to 65 years need moderate-intensity physical activity for a minimum of 150 minutes per week, or vigorous-intensity physical activity for 75 minutes each week.<sup>8-10</sup> However, various national surveillance programs have shown that only 45% to 50% of U.S. adults get this recommended amount.<sup>10</sup> The low level of physical activity among Americans is a major contributor to the burden of chronic disease, resulting in reduced quality of life and higher spending on health care.

Recently, researchers reviewed the body of literature on physical activity and concluded “there is irrefutable evidence of the effectiveness of regular physical activity in the primary and secondary prevention of several chronic diseases (e.g., cardiovascular disease, diabetes, cancer, hypertension, obesity, depression, and osteoporosis) and premature death.”<sup>2</sup> This claim has been supported and echoed by the American College of Sports Medicine, the American Heart Association, the CDC, the World Health Organization, the U.S. Office of Disease Prevention and Health Promotion, and many others.<sup>1,8-10</sup>

Systematic reviews of the effectiveness of workplace wellness programs at increasing physical activity for employees reported substantial positive impacts in most cases.<sup>11,12</sup> Researchers reviewed thirteen studies where exercise was measured as an outcome found that eight (62%) studies reported significant improvements in physical activity.<sup>11,12</sup> These improvements included increased hours of weekend activity and total minutes walked per week, markedly improved aerobic fitness, and exercise habits that were sustained four years after program initiation.<sup>11</sup>

## The Business Case for Physical Activity

Getting employees more physically active can create a healthier workforce, increase employee productivity, and decrease absenteeism.<sup>13</sup> Studies show physically active employees are absent less frequently than their inactive counterparts,<sup>14</sup> and employees who get at least 75 minutes of vigorous physical activity per week miss on average 4.1 fewer days of work per year.<sup>15</sup>

Research also suggests that physically active employees can lower employer health care costs. For example, a recent U.S. study found that physically active adults have lower annual health care expenditures than insufficiently active adults, and inadequate levels of physical activity are associated with 11.1% of total health care expenditures.<sup>16</sup> Moreover, sick leave cost an average of 26 cents per hour worked in 2014.<sup>17</sup> Clearly, increasing physical activity, and thereby improving health, can lead to significant financial savings.

## Actions Employers Can Take

Numerous reports and guides, from both government and industry, are available to help employers implement physical activity programs.<sup>3,11,13,18</sup> Below, we synthesize that information to provide a series of practical, scientifically supported, low or no cost steps employers can take to start implementing a physical activity program right away:

- **STEP 1: Plan and Analyze**<sup>11,13,18</sup>
  - **Administer** an employee survey to assess employees' physical activity levels, general health status, and interest in physical activity options.<sup>18</sup> The CDC provides free, simple guides for conducting a needs assessment and planning activities.<sup>19,20</sup>
  - **Assess** existing opportunities for physical activity at the worksite (e.g., bike racks and cyclist showers; walking paths; stairwells that are attractive and readily accessible).<sup>21</sup>
  - **Develop** specific targets or benchmarks (e.g., 50% increase in the number of employees getting at least 150 minutes of moderate physical activity per week; 25% of employees join a lunchtime walking club).<sup>18,22</sup>
  - **Help** employees understand the importance of physical activity at workplaces via newsletters, health fairs, or signage (e.g., put signs at elevators encouraging people to use the stairs). The CDC offers free examples of effective messaging campaigns.<sup>20,23</sup>
- **STEP 2: Implement the Program(s)**<sup>24</sup>
  - **Encourage** active transportation (e.g., commuting by walking or biking).<sup>25,26</sup> For example, Seattle Children's Hospital set up an award-winning bike-to-work program that is described as a "triple win" because it helps employees get physically active, save on gas money, and set their own schedule.<sup>27</sup> Similarly, Honest Tea offers bicycles to employees at no cost to help encourage cycling.<sup>28</sup>

- **Create** open and accessible stairwells in new buildings to encourage use. In older buildings, put a rotating art display or healthy messaging posters on the walls to encourage stair use. Also, slow down the elevators and put messages near elevator doors encouraging people to switch to healthier stair use.<sup>29,30</sup>
  - **Integrate** short bouts of physical activity into the day by setting up walking meetings or pacing while on phone calls.<sup>31</sup> Physical activity accumulated in brief (i.e., less than ten minutes) spurts may be more feasible and appealing to employees who are not usually very active, and can still add up to the recommended 30 minutes per day.<sup>32</sup>
  - **Set up** active work stations, such as standing desks or treadmill desks to help reduce sedentary time.<sup>33,34</sup> These active desk arrangements lead to increased energy expenditure with no detrimental effect on work performance.<sup>33</sup>
  - **Provide** an exercise facility on-site, or subsidize the cost of off-site exercise facilities.<sup>3,35</sup> People become more physically active when access to places for physical activity is improved (i.e., conveniently located and low cost). Examples of popular exercise facilities include a gym, a trail or track for walking or jogging, or a basketball court.
  - **Allow** for flexible work schedules or breaks during the day for physical activity.<sup>36,37</sup> Google and DreamWorks Studios have set up ping pong tables to provide employees with an easy, fun, and inexpensive way to get physically active.<sup>28</sup>
  - **Lead by example.** Have management and persons in leadership positions actively encourage participation in physical activity programs, and participate in those programs themselves.<sup>11,22</sup>
  - **Provide or subsidize** physical fitness assessments, counseling, and physical activity recommendations either on-site or through a community exercise facility.
  - **Increase** employees' sense of teamwork and physical activity levels by setting up a social support group. Examples of effective support groups include walking clubs, team sports, and intradepartmental challenge teams. A review found that physical activity social support groups led to an average 44% increase in the time spent being physically active and a 20% increase in energy expenditure.<sup>3</sup>
  - **Increase** employee awareness of the importance of physical activity by providing physical activity education programs. Education programs can also help employees set personalized goals and monitor progress toward achieving them, reinforce behavior change, and provide employees with tools to overcome obstacles. Educational opportunities include individual counseling sessions, personalized programs for behavior change, and group support.<sup>18</sup> The CDC offers free employee education materials, and guest speakers (e.g., health educators, nurses, dietitians, personal trainers) can often be brought in at low cost.<sup>18</sup>
- **STEP 3: Evaluate Success**



- **Collect** data on participation rates and progress toward health targets (e.g., number of minutes of physical activity per week per employee).<sup>38</sup>
- **Assess** future needs, participant satisfaction, and make adaptations as necessary.<sup>38</sup>

Physical activity is a key component of worker health, and worker health is a key contributor to productivity and performance. Following these simple steps will allow employers to implement strong physical activity programs at their workplaces, leading to a healthy workforce, which, in turn, will result in a healthy bottom line.

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# Healthy Nutrition and Weight Management

## The Importance of Healthy Nutrition and Weight Management

Our diets play an important role in both the cause and prevention of a number of diseases, including heart disease, stroke, high blood pressure, diabetes, and some cancers.<sup>1,2</sup> There is strong evidence that eating plenty of low-calorie and nutrient dense foods, such as 4-5 servings of fruit and 4-5 cups of vegetables each day protects against these poor health outcomes.<sup>1-3</sup> However, according to a recent CDC report, only 32.5% of adult Americans consume two or more servings of fruits per day, and only 26.3% eat three or more servings of vegetables.<sup>2</sup>

Compounding the issue of eating too few fruits and vegetables, Americans consume too many calories from solid fats, added sugars, and refined grains.<sup>4</sup> This poor dietary regimen has led to over 60% of Americans being overweight or obese.<sup>4</sup> If current trends continue, experts predict 65 million more obese adults in the US by 2030, leading to an additional 7 million cases of diabetes, 6 million cases of heart disease and stroke, and 500,000 cases of cancer.<sup>5</sup>

## The Business Case for Healthy Nutrition and Weight Management

Unhealthy dietary patterns, and subsequent weight gain, take a toll on the workplace through both direct and indirect costs. Overweight and obese workers are absent more frequently, are less productive at work, more likely to require short-term disability benefits, and more likely to take disability pension.<sup>6</sup> Specifically, studies have estimated the costs of reduced productivity from obese workers to be between \$54 and \$506 per worker per year,<sup>6-8</sup> and the average annual disability costs (including short-term disability and disability pension insurance) to be \$55 higher for the average overweight employee and \$349 higher for the average obese worker, relative to normal weight employees.<sup>6</sup> A recent review of all available studies found that the cost-effectiveness of workplace weight loss programs ranged from \$1.44 to \$4.16 per pound of lost weight.

## Evidence-based Actions Employers Can Take

Workplaces are an especially good setting to positively influence dietary habits and reduce obesity for a number of reasons.<sup>9,10</sup> First, interventions at workplaces can be offered repeatedly, and most people need frequent support to maintain a healthy diet. Second, employers can modify the “food environment” at their worksites, making it easier for people to make healthy choices. Finally, workplaces often have social networks of people who can provide support to one another, allowing them to work together toward common healthy goals. Below, we present simple, evidence

based, low or no cost steps that can be followed to implement a healthy nutrition program in the workplace:

- **STEP 1: Plan and Analyze**
  - **Administer** an anonymous questionnaire to employees to identify weight management goals, dietary habits (e.g., number of fruits and vegetables eaten daily), employee interests (e.g., nutrition education programs, group weight loss programs) and perceived barriers (e.g., high stress leads to poor diet, only unhealthy foods are offered at or near the workplace).<sup>11</sup> The CDC assessment tool is free and available [here](#). Use this information to determine which programs to implement.
  - **Determine** the average number of sick days per employee in the past 12 months, the percent of employees with health conditions related to diet (e.g., type 2 diabetes, heart disease, obesity), and employee knowledge about nutrition (e.g., results from a brief quiz about nutrition topics).<sup>11</sup> This information will be used to measure program success later.
- **STEP 2: Implement the Program(s)**
  - **Provide** nutrition education to employees. Brochures, videos, posters, classes, or other written or online information can all be used to address the benefits of healthy eating. Educational programs are most effective when dietitians provide tailored nutrition education to participants.<sup>9</sup>
  - **Create** healthy vending machines. Increasing the number of healthy choices available and reducing the price of healthy choices relative to unhealthy choices can improve dietary behaviors.<sup>12-15</sup> The Philadelphia Department of Public Health has excellent guidelines for what constitutes healthy (e.g., water, 100% fruit juice, baked chips, unsalted trail mix) and unhealthy (e.g., candy, fried chips, soda) snacks, and for how to organize vending machine advertising and placement to make healthy options the most attractive.<sup>16</sup>
  - **Provide** healthy food at workplace events. Ensuring access to fresh fruits and vegetables at workplace meetings and events can increase fruit and vegetable consumption, and will be especially healthy if they replace donuts or other high calorie foods.<sup>2,17,18</sup>
  - **Make** water available, and promote its consumption. Regular placement of drinking fountains, water coolers, or bottled water in vending machines can make water more readily available. Increased water consumption is generally good for your health,<sup>19</sup> and replacing sugary beverages with water can make a significant difference in weight loss.<sup>20</sup>
  - **Label** nutrition information. Providing nutrition information on restaurant menus and cafeteria signboards increases awareness of the

amount of calories employees are eating, and leads people to purchase lower calorie options more frequently.<sup>21-24</sup> Women, individuals with higher education, and individuals with higher incomes are more influenced by nutrition labels than men or individuals with less education or lower incomes.<sup>21</sup> Promotional messages used in conjunction with calorie labels may increase their effectiveness, and calorie labels that include a symbol (e.g., a traffic light image, or a “heart” symbol next to healthy items) can further reduce calories ordered.<sup>25,26</sup>

- **Make** healthier food and beverage choices available in cafeterias or snack bars. At least 50% of items available should be healthy items, such as fresh vegetables and fruits, whole grains, and trans fat-free and low sodium snacks. Healthy beverage options include water, unsweetened flavored water, and skim milk.<sup>4</sup> Again, these options will be most attractive if they are priced lower than unhealthy options.<sup>12,18</sup>
- **Provide** free or low cost self-management programs for healthy eating. Programs can be in-person or online, in group or individual settings, or, ideally, provided by dietitians or other healthcare practitioners.<sup>9,27</sup> Dietitians can provide detailed, targeted, and tailored advice and support to most closely fit the needs of employees, improving the efficacy of your program.<sup>9</sup>
- **Establish** healthy eating policies. Creating policies that support the environmental changes (e.g., healthy vending machines, healthy foods in cafeterias, required nutrition labeling) will help ensure their continued use and success.<sup>27</sup>
- **Combine** healthy nutrition with physical activity. Physical activity is undoubtedly an important factor in weight loss, but most weight loss occurs because of healthier eating and a decrease in calories consumed.<sup>28</sup> Physical activity is a critical component of weight loss maintenance, though, so it should definitely be a part of any weight loss program.<sup>28</sup>
- **STEP 3: Evaluate Success**
  - **Collect** data on participation rates and progress toward health targets (e.g., number of educational classes attended by employees, number of healthy items available at cafeterias and snack bars, results from a quiz on employees’ nutrition knowledge).<sup>11</sup> To ensure individuals’ privacy, collect data anonymously and only report aggregate information.
  - **Calculate** improvements in the average number of sick days per employee per year, and the percent of employees with health conditions related to diet.<sup>11</sup>

The steps listed above are evidence-based practices that employers can adopt to improve nutritional habits at their workplaces. Adopting these practices will likely lead to employees being healthier and more productive, leading to a win-win for employers and employees alike.

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# Tobacco Cessation

## The Importance of Tobacco Cessation

According to the Surgeon General, quitting smoking is “the single most important step that smokers can take to enhance the length and quality of their lives.”<sup>1</sup> Tobacco use remains the leading cause of preventable death in the United States, killing more than 443,000 Americans each year.<sup>2-4</sup> Cigarette smoking is also responsible for over 80% of lung cancer deaths, and lung cancer is the leading cause of cancer death among both men and women.<sup>2</sup>

In addition to being the leading cause of preventable death, smoking is the leading cause of preventable illness in the United States.<sup>3</sup> Cigarette smoking causes numerous types of cancer, including cancers of the throat, mouth, nasal cavity, esophagus, stomach, pancreas, kidney, bladder, and cervix.<sup>5</sup> Moreover, smoking causes chronic lung diseases, such as emphysema and bronchitis, strokes, and heart disease.<sup>2,6</sup> Smokers are six times more likely to suffer a heart attack than non-smokers, and are likely to suffer a heart attack or other major heart problem 10 years earlier than nonsmokers.<sup>6</sup>

These health problems are not limited to smokers, though. Approximately 49,000 deaths each year in the United States are due to secondhand smoke, and nonsmokers who are regularly exposed to secondhand smoke face a 60-percent increased risk of heart disease.<sup>2,3,6</sup>

## The Business Case for Tobacco Cessation

The financial impact of tobacco use on productivity is profound: \$150.7 billion of lost productivity per year is attributed to smoking, with an additional \$5.7 billion per year lost due to premature deaths caused by smoking.<sup>7</sup> In the United States, smoking accounts for approximately 7-9% of total annual health care spending.<sup>7</sup> Secondhand smoke also causes massive losses, with research estimating \$5.6 billion per year in lost productivity due to secondhand smoke.<sup>7</sup>

For individual employers, smokers cost \$1,623 per smoker per year in excess medical expenditures (not including lost productivity), whereas comprehensive tobacco cessation benefit programs cost an average of merely \$1.20 to \$4.80 per person per year.<sup>8</sup> Employers may face a host of additional problems from employees who smoke. For example, smokers have higher health and life insurance premiums and claims, greater absenteeism, and lower productivity rates.<sup>8</sup> Smokers drive up maintenance costs (via litter and tobacco smoke pollution, which dirties ventilation systems and office furnishings), and increase the risk of accidents and fires (plus related insurance costs).<sup>8</sup> Smokers also put employers at risk of legal liability if nonsmokers are exposed to secondhand smoke.<sup>8</sup>

There are specific legal considerations employers must take into account when instituting a tobacco cessation program. The Affordable Care Act currently requires employer-provided insurance plans to cover tobacco cessation as a preventive service, and forbids cost-sharing.<sup>9</sup> Moreover, state laws dictate what employers can do with regard to supporting tobacco cessation efforts. It is best to consult with legal counsel to ensure all programs meet legal requirements.

## Evidence-based Actions Employers Can Take

Because of the numerous health and economic problems brought on by smoking, most smokers want to quit: according to CDC data, nearly 70% of adult smokers report wanting to quit, and 43% made a quit attempt in the past year.<sup>7</sup> Fortunately, reviews of the scientific literature have found a number of workplace interventions proven to lead to decreased tobacco use. In fact, smoking cessation advice and help to quit was ranked as the highest impact, highest value, and most cost effective service in a recent survey of health care practitioners.<sup>10</sup> Below, we synthesize that information to provide a series of practical, scientifically supported, low or no cost actions employers can take to start implementing a tobacco cessation program right away:

- **STEP 1: Plan and Analyze**
  - **Conduct** a survey of employees to determine how many workers are current tobacco users, knowledge of the consequences of tobacco use, knowledge of ways to quit, desire to quit, interest in particular methods of quitting, and perceptions of changes in the work environment that may aid quit attempts.<sup>11</sup>
  - **Organize** a leadership team to develop and analyze current tobacco policies in your workplace and research best practices from other organizations.<sup>11</sup> It may be helpful to include health insurance providers, human resources staff, and employees on this leadership team.<sup>11</sup>
- **STEP 2: Implement the Program(s)**
  - **Create** a written policy banning tobacco use at your worksite, and communicate the policy through various channels.<sup>11-13</sup>
  - **Eliminate** ashtrays.<sup>11-13</sup>
  - **Post signs** (e.g., “No Smoking”) with information about the tobacco use policy.<sup>11,12</sup>
  - **Do not** allow the sale of tobacco products on your worksite property.<sup>11,12</sup>
  - **Refer** tobacco users to cessation telephone lines such as 1-800-QUIT-NOW and 1-800-LUNG-USA, online programs such as SmokeFree.gov and Freedom From Smoking (ffsonline.org), or free apps such as MyQuit Coach on iTunes.<sup>14-17</sup>

- **Encourage** tobacco users to sign-up for tobacco cessation text messaging programs such as Text2Quit or SmokefreeTXT.<sup>18,19</sup>
- **Provide** health insurance coverage with low or no out-of-pocket costs for prescription tobacco cessation medications, such as bupropion SR (e.g., Zyban) and varenicline (e.g., Chantix).<sup>16,20</sup> If the insurance plan does not cover smoking cessation medications, the employer can pay for them directly so there is reduced or no out-of-pocket cost to the smoker.
- **Provide** health insurance coverage with low or no out-of-pocket costs for FDA-approved over-the-counter nicotine replacement products, such as gum, patches, inhalers, nasal sprays, or lozenges.<sup>16,20</sup>
- **Provide** free or reduced-cost tobacco cessation counseling, in either an individual or group setting, on-site or off-site, through health insurance plans or a variety of health practitioners.<sup>7,16,20</sup>
- **Do not** require prior authorization of treatments, stepped-care therapy, counseling to obtain medications, or limit the number of times a person can try to quit. Each of these can hamper quit attempts.<sup>11</sup>
- **STEP 3: Evaluate Success**
  - **Conduct** another survey of employees to determine how many workers are current tobacco users, how many have recently quit or tried to quit, how many have taken advantage of or are aware of workplace quit support programs, knowledge of the consequences of tobacco use, knowledge of ways to quit, desire to quit, interest in particular methods of quitting, perceptions of changes in the work environment that have aided quit attempts, and perceptions of changes in the workplace environment that still should be made.<sup>11</sup>
  - **Calculate** improvements in absenteeism and productivity, and reductions in workplace maintenance costs and healthcare expenditures.<sup>2,11</sup>

Tobacco use remains the leading preventable cause of death and illness in the United States, but employers can play a key role in decreasing that burden by implementing these proven tobacco control strategies and programs.

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# Stress Management

## The Importance of Stress Management

Job stress is a common and costly problem, and research indicates most employees feel they have more on-the-job stress than employees a generation ago.<sup>1</sup> Occupational stress is most likely to occur when workplace demands overwhelm a person's capacity to comfortably handle a situation, or when conditions do not meet a person's needs.<sup>2,3</sup> Chronic exposure to stressful workplace conditions has been shown to lead to a number of debilitating mental health conditions, including depression, anxiety, an inability to concentrate, and emotional exhaustion.<sup>4-6</sup> Stress can also lead to severe physical health problems, such as immune deficiency disorders, chronic headaches, cardiovascular disease, and a reduced ability to recover from illness.<sup>7,8</sup> Moreover, stressful work conditions can hamper an individual's ability to make other necessary lifestyle changes, such as quitting smoking, eating healthfully, or getting physically active.<sup>5</sup>

## The Business Case for Stress Management

A number of factors can contribute to work-related stress. For example, stress is likely to occur when employees feel they have little support from supervisors and colleagues, when they feel they have little control over work processes, when work demands become unmanageable, when there is little job security, or when there is little opportunity for advancement or professional development.<sup>9</sup> Stress can also be brought on by day-to-day operations, such as when there is understaffing, tight schedules, malfunctioning equipment, or impatient or demanding clients.<sup>10</sup>

While some stress is unavoidable, exposure to chronic stress at the workplace seriously impedes organizational functioning. The Occupational Safety & Health Administration has declared stress a workplace hazard due to the serious problems that can arise when stress is not well managed.<sup>10</sup> Employees who are stressed are more likely to miss work, quit, be involved in an accident, and perform worse than their less stressed peers.<sup>5,6</sup> Unfortunately, workplace stress is highly prevalent: in recent studies, 80% of workers reported feeling stress on the job, 40% reported feeling very or extremely stressed, and 25% viewed their jobs as the number one stressor in their lives.<sup>1,11</sup> These high stress levels lead to an estimated 1 million workers absent every day due to stress.<sup>11</sup> Moreover, past research has shown that health care expenditures are nearly 50% greater for employees reporting high levels of stress in comparison to their less stressed peers.<sup>12</sup>

## Evidence-based Actions Employers Can Take



Some level of stress at work is unavoidable, so the goal is to minimize and control stress levels.<sup>1</sup> Research shows that employers can reduce stress levels in the workplace, leading to healthier employees and better functioning companies. Below, we synthesize the available research to provide a series of practical, scientifically supported, low or no cost actions employers can take to start implementing a stress management program right away:

- **STEP 1: Plan and Analyze**
  - **Administer** a questionnaire to employees to identify on-the-job stressors (e.g., work schedules, workload, relationships with coworkers, job conditions, workplace satisfaction).<sup>1</sup>
  - **Collect** data on stress-related problems such as absenteeism, disability, illness, performance problems, and turnover rates, to serve as a baseline for comparison to determine the effectiveness of your stress management program.<sup>1</sup>
  - **Establish** support from top management, and provide training for managers on identifying and reducing workplace-related stress. Training topics should include assertiveness, time management, conflict resolution, and communication.<sup>1,13</sup>
- **STEP 2: Implement the Program(s)**
  - **Provide** a stress management program, such as individual or group support programs. These programs can be on-site or remote, led by on-site staff or other healthcare practitioners, and can be part of a larger workplace health promotion program.<sup>13</sup>
  - **Provide** a dedicated space for employees to relax, such as a quiet area for deep breathing exercises or a place employees can “walk away” when they are angry.<sup>8,13</sup>
  - **Help** employees build strong relationships by organizing social events such as company picnics or sports teams. Strong relationships help prevent stress from occurring, and can serve as buffers when stressful situations arise.<sup>8,13</sup>
  - **Help** employees develop a better work-life balance by providing elder care, childcare, health referrals, tuition reimbursement, flexible scheduling, or similar programs designed to offer workers greater flexibility, self-direction, and opportunity for advancement.<sup>13,14</sup>
  - **Allow** employees time for physical activity during the day. Even brief bouts of physical activity, such as 30 minutes of brisk walking a day, have excellent stress reduction benefits.<sup>15,16</sup>
  - **Provide** opportunities for employee input in organizational decisions that impact stress, such as work schedules, management of work demands, and participative problem-solving.<sup>13</sup>
- **STEP 3: Evaluate Success**
  - **Administer** a questionnaire to employees asking about their current stress levels, whether they have taken advantage of any of the stress

reduction programs, and what stress-related issues are still not being addressed at periodic intervals (e.g., annually).<sup>1</sup>

- **Calculate** any reductions in absenteeism, illness, performance problems, or turnover rates.<sup>1</sup>
- **Continually monitor** and update stress-reduction programs to ensure their continued use and effectiveness.<sup>1</sup>

Businesses that take these steps to prevent and manage stress will likely have healthier, more productive employees and reduced healthcare costs.

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# Clinical Preventive Screenings and Biometric Assessments for Blood Pressure, Cholesterol, and Blood Sugar

## The Importance of Clinical Preventive Screenings and Biometric Assessments for Blood Pressure, Cholesterol, and Blood Sugar

Clinical preventive screenings can help adults live longer, healthier lives by detecting health problems early on, which allows for early interventions that can reduce an illness' severity and duration.<sup>1</sup> In terms of number of deaths prevented, screenings provide the biggest impact when they address cardiovascular disease risk factors, particularly high blood pressure (hypertension) and serum cholesterol (specifically, triglycerides and low-density lipoprotein [LDL] cholesterol).<sup>2</sup> Approximately 30% of American adults have hypertension, and 50% will develop hypertension before age 65, yet only one third of hypertension cases are properly controlled.<sup>3</sup> One reason hypertension is so poorly controlled is that people are rarely aware they have it; hypertension is called the “silent killer” because there are often no signs or symptoms, and the only way to detect it is screening by a health professional.<sup>4</sup> Each year in the United States, 14,000 lives would be saved for each 10% increase in hypertension screening and preventive care.<sup>2</sup> Because of this, both the U.S. Preventive Services Task force and the Joint National Committee on Prevention, Detection, Evaluation, and Treatment of High Blood Pressure recommend blood pressure screening for all adults age 18 and older.<sup>3,5,6</sup>

Screenings for high cholesterol are also important, as 21% of American adults have high cholesterol, and 25% of them will have a heart attack related to their cholesterol levels.<sup>7</sup> High cholesterol puts people at risk of heart disease, the leading cause of death in the U.S.: people with high cholesterol have about twice the risk of heart disease as people with low cholesterol.<sup>8</sup> Similar to hypertension, there are no symptoms associated with high cholesterol levels, so screenings by a health professional are necessary for detection.<sup>8</sup> Approximately 8,000 lives could be saved each year in the U.S. for each 10% increase in cholesterol screening and preventive care.<sup>2</sup>

Screening for high blood sugar (diabetes and pre-diabetes) can also provide major public health benefits because high blood sugar is common and imposes a significant public health burden.<sup>9</sup> Screening is especially important in high risk populations, such as in adults with hypertension or high cholesterol, non-Hispanic blacks, and Mexican Americans.<sup>9,10</sup>

As a general rule of thumb, employers should follow guidelines set by the U.S. Preventive Services Task Force regarding clinical preventive screenings for adults (see: <http://www.uspreventiveservicestaskforce.org/>).

## [The Business Case for Clinical Preventive Screenings and Biometric Assessments for Blood Pressure, Cholesterol, and Blood Sugar](#)

The U.S. spends over \$45 billion in hypertension-related costs each year, and if current trends persist that figure will rise to \$200 billion annually by 2030.<sup>11,12,13</sup> Fortunately, managing high blood pressure is one of the most cost-effective methods of reducing premature cardiovascular morbidity and mortality.<sup>5,14</sup> The U.S. Preventive Services Task Force gives hypertension screening a score of 8 out of 10 in terms of cost effectiveness and disease prevention.<sup>15</sup>

Cholesterol is a major contributor to cardiovascular disease, the leading cause of death and a major cause of disability in the U.S. each year.<sup>16</sup> In 2011, the American Heart Association projected that the annual future costs of cardiovascular disease would reach \$444 billion when including direct medical expenses, nursing home costs, and losses of productivity.<sup>16</sup> The U.S. Preventive Services Task Force gave cholesterol screening for males age 35+ and females age 45+ a score of 7 out of 10 in terms of cost effectiveness and disease prevention, making it one of the top 12 highest recommended programs.<sup>15</sup>

Screenings for high blood sugar have also been shown to be cost effective, particularly when they target high-risk populations such as obese individuals or older persons.<sup>17-19</sup> Screening becomes even more cost effective as the cost and time required for testing drops, and as the number of persons with high blood sugar increases.<sup>18</sup>

## [Evidence-based Actions Employers Can Take](#)

Below, we synthesize the available research to provide a series of practical, scientifically supported, low or no cost actions employers can take to implement a screening and/or biometric assessment program:

- **STEP 1: Plan and Analyze**
  - **Survey** employees to identify the number and percent who have received blood pressure, cholesterol, and blood sugar screening,<sup>5,20,21</sup> and find out how recently they were tested. The American Heart Association recommends blood pressure be checked at least once every two years, and cholesterol be checked at least once every 4-6 years for persons 20 years or older.<sup>22</sup> More frequent screening is recommended for persons with other risk factors (e.g., older adults, obese individuals, and those with a family history of heart disease).<sup>22</sup> The American Diabetes Association recommends blood sugar

screening every three years for all persons age 45 and older, particularly among those with other risk factors (e.g., hypertension, obesity, family history of diabetes).<sup>23</sup> Also, as noted above, employers should follow guidelines set by the U.S. Preventive Services Task Force regarding the appropriate schedule for screenings of adults (see: <http://www.uspreventiveservicestaskforce.org/>.)

- **Quiz** employees to determine their knowledge of blood pressure, cholesterol, and blood sugar screenings. For example, find out whether they know normal blood pressure is lower than 120/80 and high blood pressure is above 140/90, or the difference between total cholesterol and low-density lipoprotein (LDL) cholesterol, or that a normal A1C level (a measure of blood sugar level) is below 5.7%.<sup>24,25</sup> Sample quizzes are available on the American Heart Association's website.<sup>26</sup> This information can be used to measure awareness and education program success later.
- **STEP 2: Implement the Program(s)**
  - **Educate** employees on what constitutes normal or unhealthy screening results.<sup>20</sup> Brochures, videos, posters, classes, or other written or online information can be used to help people understand what their biometric values mean. Free, pre-made educational materials on blood pressure have been prepared by The National Heart, Lung, and Blood Institute.<sup>27</sup> The American Heart Association also provides free educational materials on cholesterol screening results, and the American Diabetes Association has free information on understanding blood sugar screening results.<sup>28,29</sup>
  - **Include** coverage of hypertension, cholesterol, and blood glucose screening in your employee health benefits package.<sup>5,20,21</sup> Also include coverage for follow-up services, such as counseling, medication, and lifestyle management programs for those who are determined to have hypertension, high cholesterol, or high blood sugar.<sup>5</sup>
  - **Provide** screening by healthcare professionals at occupational health clinics, health fairs, or other workplace activities.<sup>5</sup>
  - **Encourage** employees to take part in the American Heart Association's free, online Heart360 program ([www.heart360.org](http://www.heart360.org)) for blood pressure and cholesterol risk factor screening, and the American Diabetes Association's free, online "Are You At Risk?" resource.<sup>26,30</sup> Employees can use these websites to assess how many risk factors they have for high blood pressure, high cholesterol, or high blood sugar, and how soon they should get screened.
- **STEP 3: Evaluate Success**
  - **Survey** employees to determine whether they have gotten screened, whether they have taken part in the quizzes, and whether they understand what their numbers mean. Also, for those who have not been screened, find out what barriers prevented them from getting screened.

- **Help** employees manage high biometric values, or reduce their risk of developing hypertension, high cholesterol, or high blood sugar by implementing physical activity, healthy nutrition, and weight management programs.<sup>5,20,21</sup>

The steps listed above are evidence-based practices that employers can adopt to increase the likelihood that employees will get the recommended screenings for blood pressure, cholesterol, and blood sugar levels. These screenings can help prevent and manage health problems in their early stages, when interventions are likely to be most effective, creating a healthier workforce.

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# High Blood Glucose (Diabetes) Management

## The Importance of High Blood Glucose Management

Diabetes occurs when sugar builds up in your blood, and can lead to serious health complications, such as heart disease, blindness, kidney failure, and lower limb (leg and foot) amputations.<sup>1</sup> In fact, diabetes is the leading cause of kidney failure, non-traumatic lower limb amputations, and new cases of blindness among American adults.<sup>2</sup> Moreover, diabetes is a major cause of heart disease and stroke, and is the seventh leading cause of death in the United States.<sup>2</sup>

From 1980 through 2011, the number of working-age adults with diagnosed diabetes more than tripled, rising from 5.5 million to 19.6 million persons.<sup>3</sup> More recent and detailed estimates suggest that 21 million people in the US have diagnosed diabetes, an additional 8.1 million people have undiagnosed diabetes, and a staggering 86 million have pre-diabetes (when blood sugar levels are higher than normal, but not high enough to be diagnosed with type 2 diabetes).<sup>4</sup> Pre-diabetes is a serious health condition because, without lifestyle changes, 15-30% of people with pre-diabetes will develop type 2 diabetes within 5 years.<sup>5</sup> The National Institutes of Health and the Centers for Disease Control and Prevention have described this rapid increase in the number of persons with diabetes and consequent health problems as “an alarming epidemic.”<sup>2</sup>

Certain risk factors for diabetes are outside an individual’s control: aging, having a family history of diabetes or a history of gestational diabetes, and being from certain racial/ethnic backgrounds (i.e., African Americans, Hispanic/Latino Americans, American Indians, and some Asian Americans and Pacific Islanders) – all of these factors place people at elevated risk.<sup>4,5</sup> Other risk factors, fortunately, are within individuals’ control: maintaining a healthy weight, eating a healthy diet, and getting plenty of physical activity can prevent diabetes from occurring, and help manage it if it does occur.<sup>4,5</sup>

## The Business Case for High Blood Glucose Management

The total cost of diabetes care and management comes to approximately \$245 billion each year.<sup>6</sup> Of that, over \$60 billion each year is attributed to factors which directly hurt businesses: increased absenteeism (\$5 billion), reduced productivity (\$20.8 billion), inability to work caused by diabetes-related disability (\$21.6 billion), and early mortality (\$18.5 billion).<sup>6</sup> People diagnosed with diabetes incur about \$7,900 in diabetes care costs each year, and patients with diabetes typically have medical expenditures 2.3 times higher than their non-diabetic counterparts.<sup>2</sup> The total cost is so high that over 1 in 5 health care dollars is spent on care for people with diagnosed diabetes.<sup>6</sup>

## Evidence-based Actions Employers Can Take

Employers have a vested interest in helping employees prevent and manage diabetes, both for the sake of the employees and for the sake of the business. Fortunately, simple changes can lead to important benefits for people with or at risk of diabetes.<sup>2</sup> Below, we present a series of evidence based, low or no cost, easy to implement steps that will help employers and employees prevent and manage diabetes at the workplace:

- **STEP 1: Plan and Analyze**
  - **Administer** a questionnaire to employees to identify current diabetes risk factors (e.g., physical inactivity levels, poor dietary habits, high stress levels, lack of knowledge and concern about diabetes).<sup>2</sup>
  - **Encourage** employees to take the American Diabetes Association's Type 2 Diabetes Risk test (either paper-based or online).<sup>7</sup> The test is only 7 questions long and can give people a sense of their risk of developing diabetes.<sup>7</sup>
  - **Collect** data on diabetes-related problems such as absenteeism, disability, illness and productivity. Also collect data on medications employees are purchasing (the company's pharmacy vendor can provide these data without identifying specific patients/employees), medical services, diagnoses, and treatments (similarly, the company's medical vendor can provide this information in aggregate without identifying individual patients/employees).<sup>2</sup> These data will serve as a baseline for comparison to determine the effectiveness of your diabetes management program.
  - **Assess** current diabetes support systems at the workplace, such as health plan provisions for diabetes care, and current company policies and programs.<sup>2</sup>
  - **Review** the free resources available at DiabetesAtWork.org, presented by the National Diabetes Education Program, and submit questions to their "Ask The Expert."<sup>2</sup>
- **STEP 2: Implement the Program(s)**
  - **Provide** a pre-diabetes and diabetes risk-factor assessment (beyond self-report) and feedback at low or no cost to employees. Follow up with blood glucose screening and/or clinical referral with higher risk employees.<sup>8</sup>
  - **Distribute** health promotion materials, such as brochures, videos, posters, emails, or other information that addresses the risk factors for and health consequences of diabetes.<sup>2,8</sup>
  - **Host** a series of educational seminars, workshops, or classes on the prevention and management of diabetes.<sup>2,8</sup>

- **Provide** lifestyle counseling and follow-up monitoring for employees who have pre-diabetes or diabetes. These programs can be one-on-one or group, on-line or in-person, and are available through a variety of healthcare practitioners and vendors.<sup>8</sup> The Centers for Disease Control and Prevention’s National Diabetes Program has a list of approved Lifestyle Coaches who deliver an approved curriculum.<sup>9</sup>
- **Encourage** people to work together. Feeling supported by others in a similar situation will help employees stay committed to the program(s).<sup>2</sup>
- **Participate** in the “5 Ways to Act to Stop Diabetes” or “Stop Diabetes @ Work” programs from the American Diabetes Association.<sup>10,11</sup> The “5 Ways to Act” program is an online community that provides specific ways individuals can take part in general diabetes prevention, including advocating, walking, bicycle riding, volunteering, or donating. The “Stop Diabetes @ Work” program is an evidence-based resource that offers educational materials, online health trackers, and other tools, which can be tailored to any given workplace.
- **Provide** health insurance coverage at little or no out-of-pocket cost for diabetes medications and supplies (e.g., glucose test strips, needles, monitoring kits).<sup>8</sup>
- **Implement** the recommendations from the “Physical Activity” and “Healthy Nutrition and Weight Management” sections of this guide. Physical activity, healthy nutrition, and maintaining a healthy weight are some of the most important controllable factors to prevent and manage diabetes.<sup>5</sup>
- **STEP 3: Evaluate Success**
  - **Administer** the same questionnaire you administered before implementing the program to assess changes in employee risk factors and diabetes health knowledge. This questionnaire should be administered approximately one year after the program starts, and annually thereafter.
  - **Calculate** improvements in absenteeism, disability, illness, and performance measures.
  - **Calculate** reductions in pre-diabetes and diabetes diagnoses, and reductions in diabetes-related medication and medical services usage.

Businesses that take these steps to prevent and manage diabetes will likely have healthier, more productive employees and reduced healthcare costs.

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# Sleep

## The Importance of Getting Enough Sleep

Sleep is a critical part of health and well-being, as it can protect mental health, physical health, quality of life, and safety.<sup>1</sup> Good quality sleep improves learning, attention capacity, decision making, emotional control, and creativity.<sup>1</sup> Moreover, sleep is involved in the healing and repair of heart and blood vessels, weight management, dietary cravings, and improving the functioning of the immune system.<sup>1</sup>

Unfortunately, it is estimated that between 50 and 70 million Americans chronically suffer from sleep deprivation, leading to increased rates of chronic diseases, such as hypertension, diabetes, depression and obesity, as well as from cancer, increased mortality and reduced quality of life.<sup>2,3</sup> Sleep deprivation can also lead to depression, suicide, risk-taking behavior, and using drugs or alcohol as a sleep aid.<sup>1,4</sup> Insufficient sleep is a particular hazard among drivers: sleep deficiency harms driving ability as much as, or more than, being drunk.<sup>1</sup> In a recent survey, 36% of respondents reported they have nodded off or fallen asleep while driving, 32% drive drowsy at least once or twice a month, and 26% drive drowsy during the workday.<sup>5</sup> The National Department of Transportation estimates that sleep-deprived drivers are responsible for 1,550 fatalities and 40,000 nonfatal injuries each year in the United States.<sup>6</sup>

Given the severe consequences of sleep deprivation, and its prevalence, the Centers for Disease Control and Prevention has declared insufficient sleep “a public health epidemic.”<sup>2</sup>

## The Business Case for Getting Enough Sleep

Most employees get less sleep than they need to function well at work.<sup>7</sup> This is due to a number of factors, including working extended hours, taking work home, working multiple jobs, and having long commutes.<sup>8</sup> This leads to a vicious cycle: people work longer hours to catch up on work, but lack of sleep reduces work performance, forcing them to work longer hours to compensate for diminished productivity and having less time for sleep.<sup>8</sup>

Recent survey participants reported a host of sleep deprivation-related impairments at work, including absenteeism, extreme sleepiness or falling asleep at work in the last month, difficulty with concentration and organization, avoidance of social interactions, and impatience with coworkers.<sup>7</sup> As sleep issues become worse (i.e., symptoms consistent with insomnia), workers are more likely to experience depression and anxiety, and increase their risk for occupational accidents.<sup>7</sup>

Shift workers represent a particularly high risk group, as approximately 10% of the night and rotating shift work population has a diagnosable sleep disorder.<sup>9</sup> Shift workers are more likely to report extreme sleepiness or falling asleep at work, four to six times more likely to have a mood-related work impairment (e.g., impatience with others, avoidance of social interactions, boredom), and four times more likely to have an accident.<sup>7</sup> Sleep deprived shift workers are also more likely to report ulcers, absenteeism, depression, and missed family and social activities.<sup>9</sup>

The effects of sleep deprivation take a serious toll on businesses. Research has shown that employees with insomnia miss an average of 3.1 more days of work each year, and their mean incremental health costs are between \$1,253 and \$2,053 greater than non-sleep deprived persons.<sup>10,11</sup> Insomniacs annually accrue an additional \$751 in medical costs, \$735 in drug costs, \$208 in sick leave, \$179 in short-term disability, \$10 in long-term disability, and \$170 in workers' compensation.<sup>11</sup> In addition to health costs, fatigue-related productivity losses have been estimated to cost \$1,967 per employee per year.<sup>12</sup>

### Evidence-based Actions Employers Can Take

Clearly, sleep is vital to good health and good business. Below, we synthesize the available research to provide a series of practical, scientifically supported, low or no cost actions employers can take to start implementing a sleep hygiene program right away:

- **STEP 1: Plan and Analyze**
  - **Administer** a questionnaire to employees to identify current sleep habits (e.g., number of hours slept per night, quality of sleep, perceived reasons for getting less than the recommended 7-8 hours) and current sleep-related work issues (e.g., sleepiness at work, difficulty concentrating or dealing with others).<sup>8</sup>
  - **Collect** data on sleep-related problems such as absenteeism, illness, performance problems, and accident rates, to serve as a baseline for determining the effectiveness of the sleep hygiene program.
- **STEP 2: Implement the Program(s)**
  - **Provide** access to a sleep wellness program, such as the Cleveland Clinic's online "Go to Sleep Program."<sup>13,14</sup> These programs can be on-site or remote, led by on-site staff or other healthcare practitioners, and can be part of a larger "workplace wellness" program.
  - **Promote** healthy sleep habits via brochures, posters, emails, and other media. Use the National Sleep Foundation's "Healthy Sleep Tips" as a source of scientifically-supported ideas, including "Go to bed at the same time each night and rise at the same time each morning," "Avoid large meals before bedtime," "Avoid caffeine and alcohol use

close to bedtime,” “Avoid nicotine,” and “Get physical activity during the day.”<sup>15,16</sup>

- **Educate** employees on healthy sleep environments. Experts recommend the bedroom be a quiet, dark, and relaxing environment that is neither too hot nor too cold. There should be no TVs, computers, or other “gadgets” in the bedroom, and the bedroom should only be used for sleeping and no other activities, such as reading, watching TV, or listening to music.<sup>15,16</sup>
- **Use** modern resources like sleep education Podcasts, available for free on the CDC’s Sleep and Sleep Disorders website, to reach employees.<sup>17</sup> Podcasts can be a great resource for commuters, because they allow them to use their commute time constructively.
- **Help** employees develop a better sleep schedule by minimizing schedule fluctuations.<sup>15,16</sup>
- **Encourage** employees with more severe sleep deprivation symptoms to visit a Sleep Professional.<sup>18</sup>
- **STEP 3: Evaluate Success**
  - **Administer** an annual questionnaire to employees asking about their current sleep habits, whether they have taken advantage of any of the sleep education programs, and what sleep-related issues are still not being addressed.
  - **Calculate** any reductions in sleep deprivation related issues, such as absenteeism, mood problems, attention deficits, poor work performance, and accidents.
  - **Continually monitor** and update sleep hygiene programs to ensure their continued use and effectiveness.

Businesses that take these steps to promote healthy sleep habits will likely have healthier, better-rested, more productive employees, and reduced healthcare costs.

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# Social Connectedness

## The Importance of Social Connectedness

Our relationships, both at home and in the workplace, play a critical role in our health.<sup>1,2</sup> People with strong social connections are more likely to live longer than those with weak or few social connections, and the effect is so powerful that it is comparable to the health impact of risk factors like cigarette smoking, high blood pressure, obesity, and physical inactivity.<sup>3,4</sup> Specifically, strong relationships have been shown to boost cardiovascular, endocrine, and immune systems, keeping people healthier and staving off illness.<sup>5</sup> For those who do fall ill, having a good social support network helps speed recovery: people with strong social ties recover from the common cold more quickly and have improved health outcomes after being hospitalized.<sup>6,7</sup> In addition to improving physical health, strong connections improve mental health: social support systems help prevent or deal with stress, depression, and anxiety.<sup>2,8</sup> In sum, having many strong social connections helps individuals live longer, healthier, happier lives.

## The Business Case for Social Connectedness

Scientific evidence has shown that strong social connections can promote good business. For example, researchers have found that employees with strong social connections in the workplace have increased levels of job satisfaction, improved productivity levels, improved coordination with coworkers, and greater commitment to their coworkers and organizations.<sup>9,10</sup> More generally, social connections lead to increased trust, working together towards a common goal, helping behavior, and sharing of new ideas, all of which can lead to higher quality and quantity work.<sup>9-11</sup> The effect is so powerful that one review of wellbeing in the workplace concluded that friendships at work are “vital and a key differentiator between successful work groups and less successful work groups.”<sup>12</sup>

In contrast, employees with few or weak social ties at work are more likely to feel job stress, burnout, and a desire to leave the company.<sup>13,14</sup> They are also more likely to become depressed, require medication or therapy for mental health issues, and have lower self-rated health, which could lead to increased rates of absenteeism and reduced productivity at work.<sup>13,15-17</sup>

## Evidence-based Actions Employers Can Take

Employers have a vested interest in ensuring their employees have strong social connections, both for the health of their employees and for the business benefits that come from good teamwork. However, while there is a great deal of research into the benefits of social connections, there is relatively little scientific research

into precisely how to develop and maintain good social connections at work. Below, we synthesize the available literature, primarily based on expert opinions, and provide a series of practical, low or no cost actions employers may use to improve social connections at work:

- **STEP 1: Plan and Analyze**
  - **Create** a survey for your employees to determine how they feel about coworkers. Inquire about measures like trust, support, idea sharing, ability to work together to achieve goals, and whether individuals have a “best friend” at work.<sup>11,12,18</sup> Having a best friend at work has been shown to have a positive effect on productivity, and a very positive effect on company profits.<sup>12</sup>
- **STEP 2: Implement the Program(s)**
  - **Foster** diversity in your workplace. Typically, similarity breeds connection. However, forming social connections with employees from different backgrounds may promote the sharing of new ideas, exposure to new experiences, and the development of new attitudes.<sup>19-21</sup>
  - **Be aware** that tight social groups, if they are managed poorly, can have negative consequences. Groups can become clannish, “old boy” networks can develop, a sense of “us vs. them” can arise and hinder coordination with other groups, and whistle-blowers can be silenced out of fear of upsetting the group.<sup>10</sup>
  - **Encourage** participation in workplace health groups or clubs. Walking clubs help people create bonds while getting physical activity, and sharing recipes for weight loss can promote social connections and better health.<sup>22,23</sup> The American Heart Association and the CDC have excellent free resources to help get clubs started.<sup>23,24</sup>
  - **Provide** opportunities for communities to meet face-to-face. Allowing people to meet in this more intimate way will help develop trust and facilitate the sharing of ideas.<sup>25</sup>
  - **Provide** the tools and channels necessary for people to maintain their relationships. Maintaining phone directories, personal web pages, directories of expertise and knowledge maps, chat rooms, and videoconferences can help employees get connected and stay connected to others.<sup>25</sup>
- **STEP 3: Evaluate Success**
  - **Administer** an annual survey to gauge changes in social connections in your workplace. Ask the same questions that were administered in Step 1, as well as questions about what still needs to be addressed, and adapt your programs as necessary.<sup>26</sup>

Employers have a number of means at their disposal to promote social connectedness in the workplace. Developing these social connections will help create a happier, healthier, and stronger workforce and workplace.

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# Alcohol Management

## The Importance of Alcohol Management

Excessive alcohol use leads to a host of health problems and physical impairments, both short and long term, and the damage goes far beyond hangovers.<sup>1</sup> For example, heavy alcohol use impairs brain function, leading to difficulties with mood and behavior control, coordination, and thinking. Alcohol can also lead to diseases of the heart, liver, and pancreas; impairs the immune system; and increases cancer risk.<sup>1</sup> Moreover, in the United States, excessive drinking is the third leading cause of preventable deaths, killing about 88,000 Americans each year.<sup>2,3</sup>

Heavy alcohol use also takes a severe economic toll. It is estimated that, in total, excessive drinking cost the US \$223.5 billion in 2006 alone, or approximately \$1.90 per alcoholic drink.<sup>4</sup> Of that, alcohol-attributable crimes cost \$73.3 billion, and the cost to the government was \$94.2 billion, or about \$0.80 per drink.<sup>4</sup> This led to a total economic impact of approximately \$746 per person due to excessive alcohol consumption, which experts describe as “a massive public subsidy of excessive drinking.”<sup>4,5</sup>

## The Business Case for Alcohol Management

Alcohol abuse directly impacts an estimated 15% of the US workforce, totaling 19.2 million workers each day.<sup>6</sup> Approximately 2% of workers drink before work, 7% drink during the workday, 2% work under the influence of alcohol, and 9% work with a hangover.<sup>6</sup> Drinking outside of work has been shown to decrease performance at work, with performance losses of approximately 33% on a variety of tasks.<sup>7,8</sup> Alcohol misuse leads to absenteeism, tardiness, high rates of turnover, injuries, and violence.<sup>8</sup> Employees who abuse alcohol are three and a half times more likely to be involved in a workplace accident than coworkers, and approximately 40% of industrial fatalities and injuries can be linked to alcohol misuse.<sup>8</sup> The total cost of these alcohol-related productivity losses came to \$129 billion in 2002 and \$161 billion in 2006.<sup>4,8</sup>

## Evidence-based Actions Employers Can Take

Employers have to strike a difficult balance between interfering with their employees' outside-of-work choices while requiring those choices not interfere with on-the-job performance. Specifically, most employees are of legal drinking age, and are therefore allowed to consume alcohol. However, employers should take action against alcohol use among their employees for a number of reasons. First, employers have a vested interest in ensuring employees perform their jobs well and do not disrupt or endanger coworkers.<sup>9</sup> Second, employees spend a lot of time at



work, and coworkers and supervisors have a unique opportunity to notice a developing alcohol problem and intervene early on.<sup>9</sup> Finally, employers maintain a degree of “leverage” over employees, and have the right to withhold pay or privileges if alcohol abuse interferes with on-the-job performance, thereby motivating positive behavior change.<sup>9</sup>

Below, we synthesize the scientific literature on workplace-related alcohol problem prevention tactics to provide a series of practical, evidence based, low or no cost actions employers can use to help prevent or stop problem drinking:

- **STEP 1: Plan and Analyze**
  - **Create** or review your company’s policy on alcohol use. A major barrier to an effective alcohol policy is a lack of clarity about the source and content of the policy, by both management and employees.<sup>10</sup> Consider whether alcohol should be allowed, what happens if someone violates the policy, and how anonymity in any programs will be ensured.<sup>11</sup> The Substance Abuse and Mental Health Services Administration has a model policy designed for workplaces that can be used as a guide.<sup>12</sup>
  - **Conduct** an anonymous survey, or have a third party conduct the survey and report the results in aggregate, to assess current alcohol use patterns and gauge employee interest in a workplace-based alcohol problem prevention program. Do not attempt to identify individuals, or diagnose alcohol abuse or dependence. Instead, only use this information to indicate whether alcohol use may be an issue for your employees, and whether they would be interested in getting help for themselves or coworkers.<sup>11,13,14</sup>
  - **Calculate** the number of on-the-job problems that may be linked to alcohol use, such as absenteeism, tardiness, poor-quality work, low quantity work, accident rates, frequent hospital visits, or problems interacting with clients or coworkers.<sup>13</sup>
- **STEP 2: Implement the Program(s)**
  - **Provide** an anonymous, free alcohol program to employees. These programs are most effective when (1) they are provided by a professional resource, (2) employees do not need a formal referral to participate, (3) employees use the service with the assurance of confidentiality, and (4) there is no penalty to any aspect of the employee’s job status for participating.<sup>9,13</sup> The Substance Abuse and Mental Health Services Administration maintains a free and comprehensive listing of supportive services.<sup>15</sup>
  - **Ensure** that health insurance covers a broad range of services, including outpatient and inpatient treatment, counseling, medication, and follow-up during recovery.<sup>8</sup>
  - **Focus** on monitoring employee performance and taking corrective actions to improve it (e.g., skills training, performance review

measures, clarification of expectations). Do not attempt to serve as a clinician, accuse employees of problem drinking, or get involved in employees' problems.<sup>13</sup> Online guides are available for how to frame conversations in a constructive and appropriate manner, and how to deal with common employee responses, both positive and negative.<sup>11</sup>

- **Communicate** the health risks of alcohol misuse via posters, websites, company wellness initiatives, emails and other media.<sup>8</sup> Both the National Institute on Alcohol Abuse and Alcoholism and the Centers for Disease Control and Prevention have free, informative, pre-made media that can be distributed and displayed at workplaces.<sup>16,17</sup>
- **Ask** a healthcare provider to deliver personalized electronic screening and brief intervention (e-SBI), which involves assessing an individual's drinking pattern and then giving personalized feedback about the risks and consequences of excessive drinking. This feedback can come from a counselor in person, over the telephone, or via computer.<sup>14,18</sup> Research has shown that motivational interviewing by healthcare providers can also have a beneficial effect on alcohol consumption.<sup>19</sup>
- **STEP 3: Evaluate Success**
  - **Calculate** improvements in absenteeism, turnover, tardiness, and accident rates, and improvements in work quality and quantity.<sup>20</sup>
  - **Conduct** a survey to gauge changes in alcohol use patterns, employee opinions of current alcohol issues in the workplace, and employee needs that are not being met.<sup>20</sup>

Employers have means at their disposal to prevent or stop problem drinking. The interventions above serve the interests of both the employee and the business, making the workplace an important venue for prevention of alcohol misuse.

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# Organizational Health Promotion

## Factors

The following section explains the importance of and business case for ensuring a variety of factors are present and optimized within an organization, followed by a series of steps employers can take to improve each factor and, in turn, strengthen their program. Resources to assist in following these suggestions are included in the addendum at the end of this guide.

# Leadership Commitment and Support

## The Importance of Leadership Commitment and Support

A successful health promotion program starts with a commitment from leadership, and its continued success depends on leadership support. In particular, leaders at companies with successful health programs express a commitment to promoting healthy lifestyles and establishing a healthy work environment, thereby integrating health into organizational strategy.<sup>1,2</sup>

One of the main ways leadership can promote health is by recognizing the importance of social, environmental, and policy influences on health.<sup>2-4</sup> Rather than putting the onus for health maintenance entirely on the employee, good leaders recognize that they can help drive and maintain positive changes by providing a supportive environment.<sup>2,3</sup> Leaders can help create such an environment through a variety of activities: leading by example by participating in the programs, cultivating support from other managers, appointing employees to take ownership of the programs (e.g., appointing an employee health coordinator, or creating a wellness council comprised of employees and managers), allocating resources necessary for the program to flourish, and communicating a genuine commitment to helping employees maintain their health all help a program succeed.<sup>1</sup>

Leaders have the difficult task of encouraging people to be healthy while not being coercive or paternalistic.<sup>5</sup> To avoid seeming coercive or paternalistic, be sure to make all program participation voluntary. In addition, frame messages and design programs to encourage employees' capability to be healthy, and help them achieve wellbeing through enhanced opportunities to achieve their own health goals.<sup>5</sup> Remember, the goal of a health promotion program is not to impose a paternalistic "nanny state," but to provide employees with opportunities to achieve better health.<sup>5</sup>

## The Business Case for Leadership Commitment and Support

A genuine commitment from leaders to workplace health promotion program success can yield tangible benefits for businesses. For example, research has shown lower absenteeism rates among employees of leaders who clearly communicate their strategies and views on health promotion, who design health promotion programs that focus on a number of health promoting issues, and who work to increase employee health knowledge.<sup>6</sup>

In addition to lowering absence rates, one study found employees who perceived their organizations as being committed to health had healthier weights, and higher rates of healthy eating and physical activity behaviors.<sup>7</sup>

More generally, research has shown that leaders who support their wellness programs achieve high value from their programs, get higher rates of participation from their employees, and help employees lower health risks, all of which improve productivity, job performance, and the physical and emotional health of the workforce.<sup>4</sup>

## Evidence-Based Actions Employers Can Take

Leadership commitment and support is a necessary condition for workplace health promotion programs to be successful. Below, we synthesize the scientific literature and provide a series of practical, evidence-based, low or no cost actions employers can take to help ensure program success:

- **STEP 1: Plan and Analyze**
  - **Conduct** an anonymous survey of employees to assess perceptions of leadership support. Ask employees whether they feel leadership cares about their feelings and how things are for them, provides a clear set of goals and expectations, has clear communications, and encourages employee participation in the scheduling of work. Employees who feel leadership supports them in these ways have lower risk of heart disease.<sup>1,8</sup>
  - **Create** a council comprised of employees and managers to advise, consult, and make program decisions, facilitate discussion between groups, and represent the needs and interests of employees.<sup>9</sup> Involving employees improves communication, lets employees know leadership supports them and values their opinions, and gives employees a sense of investment in the success of the program.<sup>1,9</sup>
- **STEP 2: Implement the Program(s)**
  - **Communicate** your commitment to employee health to all levels of the organization.<sup>1,10</sup> Delineate goals, objectives, and activities so people know and understand the program. Maintaining high program visibility lets workers know leadership is committed to the program.
  - **Lead** by example. Participate in the program, and encourage other management staff to participate. Employees are more likely to participate in wellness activities if senior staff participates.<sup>4,11-13</sup>
  - **Educate** employees and managers on the importance of employee wellness using e-mails, newsletters, and signage. Focus this messaging primarily on the importance of employee health and healthy behaviors, not on the company's return-on-investment (ROI) or other business benefits.<sup>4</sup>
  - **Provide** adequate resources for program success, including funding, staff, space and time.<sup>1,13</sup>

- **Update** written business objectives to include a commitment to employee health, and show the connection between employee health and business goals.<sup>1</sup>
- **Hold** leadership staff accountable for program success. This will reflect a commitment to success, and help maintain employee health as a priority.<sup>13</sup>
- **STEP 3: Evaluate Success**
  - **Survey** employees about their views of leadership commitment to employee health programs, and ask about areas that can be improved. Specifically, ask employees whether they feel leadership cares about their health and well-being. Also ask whether the work environment has improved in the last year (assuming the survey is conducted annually after program initiation).<sup>14</sup>

Leaders play a vital role in the success of workplace health promotion programs. By following the evidence-based recommendations above, leaders can show commitment and support to their employees' health, which will help create, maintain, and sustain the wellness program.

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# Creating a Culture of Health

## The Importance of Creating a Culture of Health

Employers having successful workplace health promotion programs report that creating a “culture of health” is critical to the programs’ success. A culture of health can be defined as a workplace that places value on and is conducive to employee health and well-being.<sup>1-3</sup> While a healthy company culture encourages the use of company equipment, facilities, and programs to support health, a culture of health extends beyond individual programs by incorporating the value of employee health into the overall mission and purpose of the company.<sup>2,4</sup> Employers with successful programs have learned that isolated programs, such as putting a fitness center on campus or adding calorie labels to the cafeteria menus, will not have much impact unless they are part of an overall culture that permeates all aspects of company life. For example, organizations like Cigna, Johnson & Johnson, and the American Hospital Association all state that a culture of health includes not only a physical environment that helps employees make healthy choices, but also considers health an integral part of the way the organization operates, thinks, and acts.<sup>1-3</sup>

Integrating health into the way the organization operates, thinks, and acts requires sustained effort on a number of fronts. It involves leaders practicing healthy behaviors; implementing health promoting policies and practices; allocating sufficient resources for programs to be sustained over long periods; and involving all employees in building and maintaining a wellness program. Smart managers recognize that human behavior is influenced by a combination of both individual characteristics and the entire ecological system surrounding that individual, so they take steps to address both individual and environmental factors.<sup>5</sup>

## The Business Case for Creating a Culture of Health

Employers have a vested interest in ensuring the success of their employee wellness programs in order to maximize the resulting benefits. While providing employees with the individual tools and opportunities necessary to create healthy habits is a critical component of employee wellness programs, research has shown that integration of employee wellness into an organization’s culture is one of five key elements of a comprehensive employee wellness program.<sup>6,7</sup> Interviews with experts stress that effective employee wellness programs “are embedded into organizational infrastructure, in its benefit design, compensation practices, disability policies, and the physical space of the organization.”<sup>6</sup> Experts also note that the best programs are those where senior managers see employee wellness as a central part of business operations, and not just a perk.<sup>6</sup> Creating a culture of health in this way helps foster employee wellness programs, and thereby maximizes program results.

There is evidence suggesting a relationship between company cultures of health, employee health, and financial outcomes. A study of 37 worksites at PPG Industries provides an example of the economic savings a culture of health can bring: researchers found that worksites rated highly on both leadership support and program implementation scores had lower medical costs; conversely, those that had the lowest leadership and program implementation scores experienced the highest medical cost increases. This suggests a connection between a culture of health and healthcare cost trends. The connection between cultures of health and financial outcomes is further evidenced by studies examining the stock performance of companies winning the Corporate Health Achievement Award and the C. Everett Koop Award compared to the S&P 500, which show that stocks of companies with award winning health programs outperform the market average.<sup>8,9</sup>

### Evidence-based Actions Employers Can Take

Creating a culture of health is an important part of an overall successful workplace health promotion program. Below, we synthesize the relevant academic literature and expert opinion to provide a series of practical, evidence based, low or no cost actions employers can take to help develop a culture of health:

- **STEP 1: Plan and Analyze**
  - **Analyze** benefit design, compensation practices, disability policies, and the physical environment of the organization to determine how they incorporate and encourage employee wellness.<sup>6</sup>
  - **Survey** employees about their views of the culture of health in the organization. Specifically, ask them whether they feel leadership cares about their health and well-being, to what extent employee wellness is considered in organizational decisions, and to what degree employees are encouraged to participate in health promotion programs.
- **STEP 2: Implement the Program(s)**
  - **Communicate** your commitment to employee health to all levels of the organization.<sup>3,10,11</sup> Delineate goals, objectives, and activities so people know and understand the programs. Maintaining high program visibility lets workers know leadership is committed to employee well-being.
  - **Lead** by example. Ensure that senior leadership participates in health promoting activities, and encourage middle managers to do likewise. Employees are more likely to participate in wellness activities if senior staff and their supervisors participate.<sup>2,3,12-15</sup>
  - **Educate** employees and managers on the importance of employee wellness using e-mails, newsletters, and signage. Focus this messaging on the importance of employee health and healthy behaviors, not on

- the company's return-on-investment (ROI) or other business benefits.<sup>12</sup>
  - **Provide** adequate resources for program success, including funding, staff, space, and time.<sup>3,10,15</sup>
  - **Update** written business objectives to include a commitment to employee health, and show the connection between employee health and business goals.<sup>2,6,10</sup>
  - **Hold** leadership staff accountable for program success. This will reflect a commitment to success, and help maintain employee health as a priority.<sup>15</sup>
- **STEP 3: Evaluate Success**
  - **Survey** employees about how the culture of health has changed in the past year (assuming the survey is conducted annually after program initiation). Specifically, ask employees whether they feel leaders care about their wellness, to what extent employee wellness is considered in organizational decisions, and to what degree employees are encouraged to participate in wellness programs. Also ask about changes or improvements that can be made.

Creating a culture of health plays a vital role in the success of a workplace health promotion program. By following the recommendations above, leaders can help develop and foster such a culture, which, in turn, will help wellness programs succeed.<sup>6,16</sup>

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## **Strategic Communications**

### [The Importance of Strategic Communications](#)

Communication efforts are key to the success of any health promotion program, as they play a critical role in every step of program design and implementation: from letting employees know what initiatives are available, to boosting enrollment, and to maintaining employee participation in the program.<sup>1,2</sup> Communications help employees answer basic yet critical questions such as “what’s in it for me,” “where do I sign up,” and “how does the program work?”<sup>3</sup> In short, communication is critical to securing engagement, and engagement is key to program success.

The most successful communication programs are (1) frequent, (2) varied in content, (3) multi-channel, and (4) tailored to the target audience.<sup>4</sup> For example, employees at two companies with exemplary health promotion programs have described the frequency of wellness communications as “relentless” and “surround sound.”<sup>4</sup> Delivering messages frequently ensures awareness of the program, and increases the likelihood of ongoing participation. In order to maintain employees’ attention, however, the messages’ content has to be varied. Variety will help prevent the messages from fading into “background noise,” and will give employees a reason to stay attuned.<sup>4</sup> Using many communication channels, such as posters, podcasts, meetings, and emails, can broaden the communication effort’s reach, and allow people to interact in their preferred way.<sup>3</sup> Finally, tailoring the message to the specific needs of the target audience will have the greatest impact: take into consideration employee interests, literacy levels, cultural backgrounds, and native languages.<sup>4</sup>

## [The Business Case for Strategic Communications](#)

Strategic communications have been shown to lead to greater participation in employee wellness programs, helping to overcome one of the top barriers to program success.<sup>1,5,6</sup> For example, one study of nearly 600,000 employees across 36 companies, and a second study of nearly 900,000 employees across 124 companies, found that using strategic communications was one of two most important factors in increasing employee participation in wellness programs.<sup>1,6</sup> The larger of those studies found that organizations with frequent and well-articulated communication campaigns were able to spend significantly less (\$80 per person less, on average) on financial incentives and still achieve high participation rates.<sup>6</sup>

## [Evidence-based Actions Employers Can Take](#)

Communications are critical to the success of workplace health promotion programs. Below, we synthesize the relevant academic literature and expert opinion to provide a series of practical, low or no cost actions employers can take to institute strategic communication programs at work:

- **STEP 1: Plan and Analyze**

- **Analyze** your employee profile (e.g., old vs. young, highly educated vs. less educated).<sup>3,7</sup> This information will help you choose the best communication modality for your audience.
- **Survey** employees about their current understanding of the health promotion program, if a program is already in place.<sup>3</sup> Employers often overestimate how well their employees understand the program, even on such basic concepts as how to participate.<sup>3</sup> This survey will help identify aspects of the program that need to be communicated more effectively.<sup>7</sup>
- **STEP 2: Implement the Program(s)**
  - **Frequently** contact employees.<sup>4</sup> Opportunities to communicate are everywhere: on cafeteria signs encouraging healthy choices, in front of elevators encouraging stair use, or via email encouraging people to stand up from their desks periodically.<sup>8-10</sup>
  - **Use** pre-made communication materials from a variety of sources. Most major health organizations have free, ready-to-use pamphlets, posters, and fact sheets. For example, both the American Diabetes Association and American Heart Association have free kits that include educational guides, stickers, and posters designed specifically for health promotion in the workplace.<sup>11,12</sup> These resources are frequently updated, allowing employers to provide fresh materials to the workforce.
  - **Identify** the communication platforms that will have the greatest impact. If employees are young and tech-savvy, consider using email and text alerts; for employees with low literacy rates or who speak English as a second language, consider using videos or one-on-one peer-to-peer awareness building sessions.<sup>7,13</sup>
  - **Tailor** messages to the needs of employees. Low health literacy is extremely common, with nearly 9 out of 10 people needing help interpreting health information. Follow the Centers for Disease Control and Prevention’s Health Literacy Guidelines to help ensure communications can be easily interpreted.<sup>13,14</sup>
- **STEP 3: Evaluate Success**
  - **Survey** employees about what communication materials they remember seeing in the past year, and what effect those materials had on their health and well-being. Also ask what changes or improvements could be made, such as in the frequency or channels of communication.

Effective communication is key to any wellness program’s initiation and success. By following the recommendations above, employers can effectively implement a strategic communications campaign, thereby helping ensure their workforce engages with the health promotion program and achieves both personal- and business-related improvement goals.

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# Implementing Smart Incentives

## The Importance of Implementing Smart Incentives

Offering incentives for healthy behaviors and outcomes is an increasingly popular tool for businesses' workplace health promotion programs.<sup>1</sup> Part of implementing smart incentives is determining what events will trigger the incentive.<sup>1</sup> Incentives can be used to increase participation rates, keep employees engaged with programs, and motivate employees to achieve health goals.<sup>1-4</sup> For example, one of the biggest obstacles to a successful workplace wellness program is persuading employees to participate, so incentives are often designed to increase initial program involvement.<sup>1,5</sup> Employees simply have to sign up or agree to take part in the program in order to earn this incentive. To keep employees engaged, incentives may be given for continued program participation, such as attending a given number of classes or going to the gym a certain number of times in a month. Incentives can also be given for achieving certain health-related benchmarks, such as completely giving up smoking or achieving a target weight set in consultation with a nutritionist.<sup>1</sup> The Affordable Care Act places certain limits on what can and cannot be part of a workplace health promotion incentive program, so it is wise to consult with a legal expert before instituting any incentive program.<sup>6,7</sup> While there are little data indicating how effective incentives are at achieving long-term behavior change and positive health outcomes, there is a body of evidence being built that describes alternative approaches to providing incentives for program participation, behavior change, and achieving health goals.<sup>1</sup>

In addition to considering what triggers incentives, employers need to consider the various forms incentives may take. Interviews with industry experts indicate that the most common incentives are tied to lower insurance premiums or a richer benefit plan when employees do more than just complete a health risk appraisal (HRA) – i.e., when they become fully engaged in a health promotion program and when internal motivation is the key driver for behavior change.<sup>5</sup> Incentives not related to health care, such as t-shirt giveaways or gift certificates, are generally not effective in achieving long-term behavior change.<sup>2,5</sup> Furthermore, the way incentives are delivered matters, because people use different “mental accounting” methods to register monetary accounts. For example, a \$100 check in the mail may register as a pleasant windfall because it comes unannounced, whereas a \$100 discount on insurance premiums may go unnoticed.<sup>8</sup> Incorporating smart incentive types and delivery methods can help “supercharge” incentive programs to improve health behaviors more effectively than simple premium adjustments.<sup>8</sup>

## The Business Case for Implementing Smart Incentives

Incentives can positively impact workplace health promotion programs, thereby reducing excess health care costs and productivity losses. For example, smoking

remains a major cause of preventable death and productivity loss.<sup>4</sup> A study at a large U.S. company found that employees who received both information about quitting smoking and financial incentives were more likely to quit (and remain tobacco free for over a year) than employees who only received information about quitting.<sup>4</sup> Specifically, employees offered a \$100 incentive for completing the anti-tobacco program, \$250 for quitting within the first 6 months of enrollment, and \$400 for remaining tobacco free for 6 months after initial cessation had 10% higher enrollment rates and 8.3% higher program completion rates than non-incentivized control groups.<sup>4</sup> Given that the financial benefit to employers of having their employees stop smoking is estimated to be about \$3,400 per smoker per year, spending \$750 on incentives makes business sense.<sup>4,9</sup>

Of course, not all incentive programs will produce such robust returns on investment, so employers have to maximize the impact of incentives while minimizing the actual dollar amount spent. What is a reasonable amount to spend on incentives? There is no right answer, but a 2012 review estimated that the average cash value of incentives ranged from \$152 to \$557.<sup>1</sup> The most recent data show a trend towards larger incentives; in 2015, employers at large companies were spending an average of \$693 per employee on incentives, up from \$594 the previous year and \$430 five years prior.<sup>10</sup> Other surveys have found a similar trend.<sup>1,11</sup> Incentives can be designed to be cost-neutral for the employer and should probably not exceed \$1,000 a year so as not to be viewed as coercive.<sup>1,3,4,7,12-14</sup>

## Evidence-based Actions Employers Can Take

Incentives can be an effective way to positively influence employee health behaviors. Below, we synthesize the relevant literature and expert opinion to provide a series of practical, effective actions employers can take to implement smart incentives for their wellness programs:

- **STEP 1: Plan and Analyze**
  - **Analyze** your budget to determine the cash value of the incentive you will offer. Interviews with industry experts indicated that the value of the incentive they offered was based on business rationale, rather than scientific literature, so determine what would be an appropriate amount for your business.<sup>1</sup> There are some legal limits for how large the value of the incentive can be (i.e., regulations issued as part of the 2010 Affordable Care Act and subsequent guidance provided by the Department of Health and Human Services, Department of Labor, and Equal Employment Opportunity Commission).<sup>1,6,15</sup>
  - **Determine** what will trigger the incentive(s). Incentives can be offered at any and all of the following time points or events: (1) simply signing up for a wellness program, (2) some level of program participation, such as going to the gym a certain number of times per month, (3) program completion, such as completing a wellness

education class, and (4) meeting a specific health goal, such as remaining tobacco free.<sup>1,16</sup> Be aware that some people are concerned about incentivizing specific health goals, particularly because they may involve collecting private health information and may be discriminatory if they violate state or federal laws.<sup>1,15</sup> To avoid this, make sure the incentive program allows reasonable accommodations for persons with disabilities who may not be able to participate in the incentive program.<sup>1,15</sup> Next, determine what form the incentives will take. The best options may be those that directly relate to health care costs, such as reduced health care plan premiums, lower deductibles, and higher health reimbursement account or health savings account contributions.<sup>1,5</sup> Other forms include cash, merchandise, time off, or recognition and awards.<sup>1,17,18</sup>

- **Calculate** the current status of the behaviors you intend to incentivize. For example, if you plan on providing an incentive for signing up for a wellness class, calculate the number of people currently in the class; if you plan on providing an incentive for going to the gym a certain number of times per month, calculate the frequency of gym attendance. This information will be used later to measure the impact of the incentives.<sup>19</sup>
- **STEP 2: Implement the Program(s)**
  - **Advertise** the incentive program to employees. Employees will only take advantage of incentives if they know about them, so be sure to promote their availability. Posters, emails, and announcements at meetings can all be used to alert people to new incentives, and to keep people motivated to reach incentive triggers. See the “Strategic Communications” section of this guide for ideas on how to communicate the incentive program most effectively.<sup>3,20</sup>
  - **Frame** incentives as rewards for positive behaviors, rather than penalties for poor behaviors. Industry experts report that employees view having a reward withheld as being more acceptable than being assessed an equivalent penalty.<sup>1</sup> While both rewards and penalties can incentivize healthy behaviors, rewards produce better overall results because people are more likely to view them positively.<sup>21</sup>
- **STEP 3: Evaluate Success**
  - **Survey** employees about what incentive advertising materials they remember seeing in the past year, and what effect the incentives had. Also ask what changes or improvements could be made in the incentive structure, such as in the frequency or size of incentive benefits.
  - **Calculate** increases in desired healthy behaviors. Calculate rates of enrollment, participation, and program completion as applicable.<sup>19</sup>
  - **Modify** the incentive program as necessary to benefit program goals.<sup>19</sup> Incentives can be raised, lowered, or applied to different triggers in order to achieve maximum impact.

Smart incentives can be used to drive employee participation in programs and, potentially, changes in behavior. By following the recommendations above, employers can effectively implement smart incentives, thereby helping ensure their workforce engages with the wellness program and achieves both personal and business related health promotion goals.

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# Employee Engagement

## The Importance of Employee Engagement

A workplace health promotion program will only be effective if employees are actively engaged with the program. However, according to one survey, a typical program may see as little as 20 percent of eligible employees participate.<sup>1</sup> Boosting participation in a workplace health promotion program is one of the most effective methods of bringing about organizational changes and health improvement.<sup>2</sup> Thus, it is imperative to utilize strategies that increase engagement; without engagement, health and wellness programs cannot succeed.

A variety of strategies have emerged to increase employee engagement. Involving employees in the design and implementation of programs, rather than making them passive recipients, is identified as one of the essential elements of success.<sup>2</sup> The CDC recommends establishing wellness committees and encouraging employees to participate, as this increases commitment and satisfaction, and results in employee buy-in.<sup>3</sup> The CDC further suggests involving union representatives, or other employee groups or associations, to improve the establishment and acceptance of health promotion programs. Incentives are another popular method of raising participation rates, and they come in a variety of shapes and sizes.<sup>14</sup> Cash, merchandise, and gift cards tend to be the most popular incentives, but public recognition of achievements and changes to health benefits can also be effective.<sup>5-7</sup> There is evidence that linking incentives to existing benefits may have the strongest effect, because this often allows for larger incentives and greater impact.<sup>4</sup> Strategic, targeted communications are also effective motivators, resulting in 12.8% greater participation than less thorough communications strategies.<sup>4</sup> Finally, spouses and family members have been found to be both a barrier and a motivator for behavior change, so involving them in a program can ensure they exert a positive influence and that concerns about losing time spent with family do not hold employees back from participating.<sup>8</sup> Including family members also helps create a culture of wellness at the organization, and studies have specifically found that spouses have a significant effect on smoking and exercise habits.<sup>9-11</sup>

While maximizing engagement is critical to the success of any health program, it is important to keep participation voluntary, and to provide incentives that are positive rather than punitive. This will help employees see that the workplace health promotion program is an opportunity for an improved quality of life, not a way for employers to unfairly punish or discriminate against less healthy employees.

## The Business Case for Employee Engagement

Attaining high participation is one of the seven promising practices in workplace health promotion identified by a study of past literature and interviews with expert panelists.<sup>12</sup> Maximizing engagement and participation is, therefore, key to optimizing outcomes. Motivating employees by engaging them in various stages of planning and implementation of the program has been shown to increase participation and, thus, success. One review cites successful practices that include making changes based on ongoing feedback, heavily publicizing the program, appointing employees to serve on a wellness committee, and encouraging program champions to work with vendors.<sup>9</sup> Engaging employees in the planning process and conducting surveys or focus groups can also help determine which aspects of health and wellness are appropriate for employees, and avoid wasting time and resources on issues not important to them.<sup>3,13</sup>

One important strategy to increase engagement is effective communication. Many employees are unaware of the offerings and benefits a health promotion program can offer, indicating a clear need for strategic messaging.<sup>6-8</sup> Consistency, clarity, and personalization are key to maximizing the effectiveness of communications materials, and including family members can enable behavior change and/or maintenance outside of the workplace.<sup>8</sup> Another common strategy is to create competitions. More than half of employers use competitions to help boost engagement.<sup>14</sup> Competitions can be incorporated into existing incentive strategies, but may work best in programs with outcomes that are easy to measure.

Engagement is likely to spread among coworkers, as past studies have shown that perception of leaders' and coworkers' attitudes toward a program influences commitment to the program.<sup>13</sup> In fact, perceptions may be more important than incentives for encouraging participation. Responding to concerns and presenting relevant, credible information have also been identified as important for increasing the internalization of information, or changing attitudes or behavior because employees have come to believe in the program.<sup>13</sup>

## Evidence-based Actions Employers Can Take

Clearly, employee engagement is critical to the success of workplace health promotion programs. Below, we synthesize the relevant academic literature and expert opinion to provide a series of practical, low or no cost actions employers can take to help encourage employee engagement with workplace health promotion programs:

- **STEP 1: Plan and Analyze**
  - **Survey** employees to find out what programs and benefits are most attractive to them (e.g., yoga classes, off-site gym memberships, on-site biometric screenings), what they feel are the key health issues affecting them (e.g., smoking, stress, nutrition, weight, blood pressure), and what factors at the workplace are influencing their



health (e.g., stressful workloads, lack of opportunity to exercise, few healthy options in the cafeteria). If a workplace health promotion program is in place, ask employees whether they are taking advantage of the offerings, and what barriers are preventing them from participating.<sup>15</sup>

- **Identify** program champions from different parts of the organization who have a good sense of what the people they work with want in a workplace health promotion program.<sup>3,13,16</sup>
- **Measure** current workplace health promotion program engagement, if a program is already in place. Calculate participation rates in various activities and programs, and the outcomes of those programs. This will aid in measuring improvements in employee engagement later.<sup>3</sup>
- **STEP 2: Implement the Program(s)**
  - **Make** wellness activities convenient and easily accessible for all employees.<sup>7,17,18</sup> Employees are more likely to participate when facilities are conveniently located and affordably priced (e.g., offer memberships to a gym located within close proximity to the workplace, and subsidize the cost of gym memberships). It is also possible to make unhealthy activities inconvenient and inaccessible. For example, put unhealthy potato chip bags on the bottom shelves of cafeteria displays, or put them in opaque jars so they are not as immediately visible and tempting.<sup>19</sup>
  - **Incorporate** survey findings into the development of the workplace health promotion program. By listening to the needs and desires of employees, employers can create programs that will be more engaging and help employees internalize healthy behaviors.<sup>20,21</sup>
  - **Use** smart incentives as appropriate, to help encourage initial employee engagement and sustained health behaviors. See the “Smart Incentives” portion of this guide for further reference.
  - **Make** programs fun. Interviews with industry experts show that employees having fun is a key component to engagement and success.<sup>22</sup> Consider turning wellness activities into a game, e.g., pit departments against each other to see who can log the most steps on their pedometers each week or who can log the most miles on free Smartphone apps.<sup>23,25</sup>
  - **Empower** program champions to aid in the design, implementation, and modification of programs. This will help keep programs fresh and relevant to the current needs of the workforce, and will help employees realize management is genuinely interested in employee input.<sup>4-6</sup>
  - **Communicate** the benefits of the wellness program in ways that help employees internalize the messages. Provide convincing evidence to managers and employees that participation in the program is beneficial to both business and workers, and is therefore an integral

part of the organizational mission.<sup>5</sup> See the “Strategic Communications” section of this guide for specific guidance.

- **STEP 3: Evaluate Success**
  - **Survey** employees about programs and benefits they have used in the past year, health issues still concerning them, improvements in the workplace they have noticed, and improvements they would like to see in the coming year.<sup>9</sup>
  - **Calculate** improvements in workplace wellness program usage, participation rates, and awareness of the programs’ offerings.<sup>9</sup>

Employee engagement is key to ensuring workplace health promotion programs have the desired impact. By following the recommendations above, employers can effectively encourage employee engagement with their programs, thereby helping achieve both personal- and business-related goals.

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# Tailoring Programs

## The Importance of Tailoring Programs

Employees' health needs and desires vary considerably across and even within organizations. Because there is no "one-size-fits-all" program that efficiently and effectively meets the needs of everyone, successful programs need to be tailored to employees' specific needs and wishes, as well as the organization's unique culture.<sup>1-</sup>

<sup>4</sup> Tailored health promotion involves providing necessary health services and communicating and delivering them in a relevant, engaging way.

A review of organizations with successful workplace health promotion programs found that tailoring programs to target specific needs was a key element of best practices in workplace health promotion programs.<sup>5</sup> Specifically, research and interviews with subject matter experts found that high quality programs develop ways to direct people into programs that best match their individual needs and learning styles.<sup>5</sup> These programs use a variety of channels to meet employees' needs, taking into account their different circumstances and backgrounds. For example, some employees are able to utilize internet-based services quite well, whereas others require printed materials, telephone counseling, and one-to-one coaching.<sup>5</sup> Moreover, quality programs factor language proficiency, cultural diversity, and baseline health literacy into program design and development.<sup>5</sup> By including these considerations, employers effectively tailor programs to address the needs of their employees, boosting employee engagement in workplace wellness programs and achieving subsequent health benefits.

## The Business Case for Tailoring Programs

Research has shown that tailoring programs to individual- or group-specific needs increases the likelihood that employees will begin a program and remain engaged with it.<sup>6</sup> For example, individually tailored physical activity programs resulted in a 35% increase in the amount of time people spent being physically active.<sup>6</sup> Another study of physical activity in the workplace found that physical activity interventions were 10% more likely to result in increases in exercise if they were tailored to individuals' current motivation level, rather than standard self-help materials.<sup>7</sup>

Similarly, a workplace nutrition and physical activity program tailored to the needs of rural female blue-collar employees found that the tailored intervention resulted in increases in fruit and vegetable consumption, decreased fat intake, and increased strength and flexibility for treatment subjects compared to the control group.<sup>8</sup> By addressing the specific needs and wishes of their employees, these programs have created better health outcomes among participants, resulting in a healthier workforce.

## Evidence-based Actions Employers Can Take

Tailoring programs helps boost employee engagement with and usage of workplace wellness programs. Below, we synthesize the relevant academic literature and expert opinion to provide a series of practical, low or no cost actions employers can take to appropriately tailor their workplace wellness programs to meet the needs and wishes of their employees:

- **STEP 1: Plan and Analyze**
  - **Survey** employees to find out what programs and benefits they prefer (e.g., yoga classes, off-site gym memberships, on-site biometric screenings), the key health issues affecting their health (e.g., smoking, nutrition and weight, blood pressure), and factors at the workplace influencing their health (e.g., stressful workloads, lack of opportunity to exercise, lack of healthy options in the cafeteria). If a workplace wellness program is in place, ask employees whether they are taking advantage of the offerings, and any barriers preventing them from taking fuller advantage.<sup>9</sup> The CDC employee assessment tool is free and available in the addendum.
  - **Identify** program champions from different levels of the organization and different departments, who have a good sense of what the people they work with want in a workplace health promotion program.<sup>10-12</sup>
  - **Examine** the profile of your workforce. Consider factors such as age, comfort with technology, education level, and health literacy level.<sup>5,8</sup> It may be helpful to group people by department, expressed health goals, desires, and needs, or some other factor. To prevent individuals feeling stigmatized, it may be best to allow employees to self-select which group(s) they belong to.
- **STEP 2: Implement the Program(s)**
  - **Incorporate** survey findings into the development of the workplace health promotion program. Employers can create programs that meet the specific needs of their employee population by listening to the expressed opinions and needs of their employees.<sup>13,14</sup>
  - **Create** or modify health communication materials as appropriate to help employees understand and internalize health communications. For example, if your workforce is tech-savvy, consider using web-based programs or Smartphone apps to deliver health information. For workers who have lower literacy rates, use pictures or guides provided by the National Institutes of Health that incorporate plain language, clear and simple directions, and cultural competency.<sup>15</sup> See the “Strategic Communications” portion of this guide for further guidance.
  - **Empower** program champions to aid in the design, implementation, and modification of programs. This will help keep programs tailored

to the current needs of the workforce and will help employees realize management is genuinely interested in employee input.<sup>10-12</sup>

- **Tailor** programs to as many groups as possible. This can be as fine-grained as individualized health coaching, or as broadly based as providing specific programs for women, or persons with health conditions, or older workers. The better these programs are tailored to meet the needs of the target population, the more likely they will have a positive influence.<sup>5</sup>
- **STEP 3: Evaluate Success**
  - **Survey** employees about their continued health desires and needs and what improvements they would like to see in the coming year. Also ask if they would like any particular program tailoring (e.g., programming targeting specific groups, or targeting a particular health condition or risk factor).<sup>16</sup>
  - **Survey** employees to find out whether they have seen and understood health communications materials. If employees report not understanding or internalizing the communications, ask how to improve them and make them more culturally or literacy-level appropriate.<sup>16</sup>
  - **Calculate** improvements in workplace wellness program usage, participation rates, and awareness of the programs' offerings.<sup>16</sup>

Tailored programs are key to any workplace wellness program's success. By meeting the communication and programmatic needs of the employee population, employers can ensure their workplace health promotion program has maximum engagement and impact.

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# Environmental Support

## The Importance of Environmental Support

Health behaviors are the result of a combination of factors: individual factors, the physical environment, and the social environment (e.g., tobacco free policies and programs to improve social connectedness among employees).<sup>1,2</sup> Thus, a successful health promotion program should address each of these factors to maximize its potential impact. Individual factors include things like genetics and personal preferences, which employers do not have much control over. Employers can, however, exert influence over the physical and social environments of their workspace by enacting policies that encourage employees to make healthy choices. Health promoting aspects of the physical environment include access to walking paths or other space for exercise and the selection of foods available in the cafeteria. The social environment includes tobacco free policies and programs like walking clubs or lunch and learns that allow for social connections between employees to be made at work.

Changes to the environment to support healthy behaviors are often referred to as “choice architecture” and their objective is to make the healthy choice the easy, or default, choice.<sup>3</sup> Choice architecture operates on the principle that most people will choose whatever the default option is, because it is the easiest choice to make. This means that if most of the food offered at the worksite is unhealthy, or if there is no place for employees to stretch their legs, then employees may not have many opportunities to engage in healthy behaviors.

## The Business Case for Environmental Support

To maximize the success of the health program, include environmental supports in the intervention plan. Having in place physical and social environments that support health improvements has been identified as one of the five key components of a comprehensive wellness program.<sup>4</sup> Social support in particular has been shown to be a powerful motivator for behavior change, especially with physical activity and smoking cessation interventions.<sup>4</sup>

Although many of the studies examining the effects of environmental changes suffer from poor methodology and measurement, two literature reviews have found that environmental changes, especially as part of multicomponent programs that also focus on individual level risk factors, are effective at changing employees’ behavior.<sup>5,6</sup> These reviews specifically studied nutrition, physical activity, and other related risk factors and found strong evidence that environmental policies influence dietary choices, and less conclusive evidence of their effect on physical activity.

There is limited research into the cost effectiveness of environmental changes, but workplace redesign was included in one modeling study examining the ROI on a variety of strategies to reduce obesity.<sup>7</sup> That study concluded that changes to infrastructure may cost less than individual level interventions and, thus, achieve a positive ROI after a lower level of weight loss than individual level interventions.

## Evidence-based Actions Employers Can Take

Developing a supportive work environment is an important part of an overall successful workplace health promotion program. Below, we synthesize the relevant academic literature and expert opinion to provide a series of practical, evidence based, low or no cost actions employers can take to help develop a workplace environment that supports health:

- **STEP 1: Plan and Analyze**
  - **Conduct** an environmental audit to determine whether the workplace contains features that support or hinder healthy behaviors.<sup>8</sup> Examine the types of food available onsite, smoke-free policies, and whether there are exercise areas available to employees.
  - **Survey** employees about the types of changes they would like to see in the workplace. Specifically, ask about their needs and priorities, their opinions about the options already offered, and their perception of workplace support for healthy choices.<sup>9</sup>
  - **Create** an advisory board or committee that allows employees to participate in program design and implementation.<sup>10,11</sup>
- **STEP 2: Implement the Program(s)**
  - **Use** findings from the environmental audit to determine what aspect(s) of the workplace environment the program should focus on. Some past programs have focused on social aspects of the environment like norms and leadership support, while others have focused on improving access to healthy foods and exercise areas.<sup>12</sup> Survey results can help determine whether one or both aspects should be the focus.
  - **Provide** adequate resources, including funding, staff, space, and time.<sup>10</sup>
  - **Communicate** regularly and effectively: let employees know what changes are being made to the workplace and why.<sup>10</sup> Point of decision prompts (such as signs reminding employees to take the stairs instead of the elevator) are a proven communication method.<sup>11</sup> See the “Strategic Communications” portion of this guide for further reference.
  - **Empower** advisory board or committee members to take an active role in implementing the program. Involvement can boost employee

engagement and lead to changes in behavior and culture within the organization, as well as improving commitment and satisfaction.<sup>1013</sup>

- **STEP 3: Evaluate Success**

- **Survey** employees about improvements made to the environment. Ask whether they believe their needs were met, what their opinion of the options available is, and their perception of workplace support for healthy choices. Also welcome suggestions for future improvements.<sup>14</sup>

The presence of environmental supports is an important component of successful, comprehensive health promotion programs. By following the recommendations outlined above, employers can develop a physical and social workplace environment that supports healthy choices and behaviors and enables employees to receive the most benefit from the program.

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# Benefit Plan Design

## The Importance of Benefit Plan Design

When creating a wellness program, it is important to consider not only the specific components of the intervention, but also how the program fits into the overall health benefits plan offered to employees. The CDC defines health benefits as “part of an overall compensation package including health insurance coverage and other services or discounts regarding health.”<sup>1</sup> Examples include insurance coverage for preventive services and screenings, coverage for tobacco cessation, and incentives for health promoting behaviors. Despite historical trends of treating health plans and employee wellness programs as separate entities, lately more and more employers have intertwined the two, a pattern that emerged even before the Affordable Care Act (ACA) mandated employer coverage of preventive services.<sup>2</sup> The ACA created requirements for minimum essential coverage that include guaranteed availability and renewal, an actuarial value of 60%, and provision of ten essential benefits (which include maternity and newborn care, mental health services, prescription coverage, rehabilitative services, and preventive services and wellness).<sup>3,4</sup>

About half of the employers who responded to The International Foundation of Employee Benefit Plans’ 2015 workplace wellness survey reported tying their incentives and penalties to employees’ insurance plans in the form of changes in premiums, copays, coinsurance, or deductibles, or contributions to health accounts.<sup>5</sup> The prevalence of this practice is further supported by the results of interviews with industry experts that revealed lower premiums and enriched benefits are among the most common incentives offered to employees who engage with a program beyond simply completing a health risk assessment (HRA).<sup>6</sup>

A starting point for choosing the right benefit plan design is choosing which health insurance plan(s) to offer employees. There are many plans available, and each has its own benefits and drawbacks. For example, a Health Maintenance Organization (HMO) may be more affordable, but it also restricts choice of doctor, while a more expensive Preferred Provider Organization (PPO) allows more flexibility in choosing service providers.<sup>7</sup> Offering a variety of plans allows employees to pick the amount and type of coverage they want, and may be especially important for younger employees.<sup>8</sup> A related benefit is a flexible spending account (FSA), which allows employees to set aside part of their pre-tax income for health related expenses. FSA contributions are now capped at \$2550 under the ACA.<sup>9</sup> The main risk for employers is that, because employees pay a portion of their contribution each month but are entitled to spend an amount equal to their total annual contribution on the first day of the year, there may not be enough money to reimburse expenses early in the year; employers should consider how much money they can afford to pay out when setting a maximum contribution.<sup>10</sup>

Another option is to offer a high deductible insurance plan and help employees set up HSAs (health savings accounts). An HSA is similar to an FSA in that both plans allow employees to add pre-tax income to the account and save on income taxes, but an FSA is offered with low deductible, high premium plans, while an HSA is offered with high deductible plans.<sup>11</sup> The cap for HSA contributions is also higher at \$3350, and these funds roll over from year to year, whereas the company absorbs unspent FSA funds.<sup>12</sup> HSAs may be particularly attractive for younger, single employees who will likely have few health expenses.<sup>12</sup>

Another valuable benefit to offer is paid maternity/family leave or other paid leave. Though paid leave is not required by law, a Rutgers study found economic benefits exist for both families and businesses when paid family leave is offered, i.e., those given family leave were less likely to need government assistance and were more likely to return to work.<sup>13</sup> Furthermore, both the CDC and the American Public Health Association support paid sick leave as a public health and prevention strategy. They have found that lack of paid sick leave is associated with increased transmission of infectious diseases and may prove an obstacle to preventive care; conversely, paid leave is associated with a reduction in risk of workplace injury and complications, as well as shorter recovery time.<sup>14,15</sup>

### The Business Case for Benefit Plan Design

Expanding work-related resources and opportunities by expanding compensation and benefits is one of the four strategies to improve health in the workplace recommended by the Robert Wood Johnson foundation.<sup>16</sup> Furthermore, about 90 percent of employees say health and wellness benefits are an important factor in choosing an employer, indicating that businesses seeking to attract talented and productive workers must offer a competitive benefits plan.<sup>17</sup> Robust benefits are not only useful for attracting talent: almost half of employees surveyed say that wellness benefits encourage them to work harder and perform better, and encourage them to stay at their current workplace.<sup>17</sup> Additionally, simple actions like providing benefits counseling can further improve employees' experience. In one survey, 96% of employees who met with a benefits counselor one-on-one said it improved their understanding of the benefits available to them, and 98% said the meeting was important to them.<sup>17</sup>

Benefit plan design is also an important factor in the success of a comprehensive wellness program. A panel of experts concluded that successful wellness programs are embedded in existing infrastructure, including benefit design.<sup>6</sup> An example included an employer depositing a monetary reward for completing an HRA into employee HSAs. Furthermore, incentives linked to existing employee benefits can have an important indirect effect on participation by allowing employers to offer larger incentives, which are associated with higher participation rates.<sup>18</sup>

There are, of course, legal considerations when choosing a benefit plan. The ACA increased the limit (to 30% of the cost of coverage) on rewards that can be offered through a group health plan for completing a wellness program, which might include premium discounts, reduction of cost-sharing, or improved benefits.<sup>19</sup> The ACA also requires plans to offer screenings and counseling, as well as routine immunizations, and requires wellness plans to reasonably promote health and be offered to employees regardless of health status.<sup>20,21</sup> Furthermore, there are additional requirements to prevent discrimination, namely those of the Genetic Information Nondiscrimination Act (which prohibits individually identifiable genetic information from being shown to employers)<sup>22</sup> and the Americans with Disabilities Act.

### Evidence-based Actions Employers Can Take

Choosing an effective benefit plan is an important part of an overall successful workplace health promotion program. Below, we synthesize the relevant academic literature and expert opinion to provide a series of practical, evidence based, low or no cost actions employers can take to select a benefits plan that meets the needs of the corporation and its employees:

- **STEP 1: Plan and Analyze**
  - **Survey** employees to determine what benefits are important to them and avoid wasting time and resources on unwanted benefits (for example, offering life insurance to a group of primarily young, single employees).<sup>23</sup> If there is little consensus, then it might be best to offer a “cafeteria plan” and allow employees to pick their own benefits package within a pre-determined price range.<sup>23</sup>
  - **Compare** plan options with employee needs in mind. Small and medium sized employers can seek the assistance of a broker or agent to navigate the plans available and find the best fit(s) for the company.<sup>24</sup> Brokers can compare benefits and premium quotes, and help with administrative tasks like explaining benefits to employees, completing enrollment forms, and providing assistance when service issues arise.<sup>24</sup> Though smaller employers may worry about the costs, commissions are usually built into all of a health plan’s premiums, meaning employers will pay for broker services whether they use them or not.<sup>24</sup>
  - **Analyze** the company’s financial capacity to offer certain benefits. Determine how much of the cost the company can absorb, and consider using copayments to deter those who do not actually need coverage from enrolling.<sup>23</sup> When considering FSA programs and setting a maximum contribution, remember that employees can request reimbursement for the full annual amount after making only one monthly payment, and set the maximum accordingly.<sup>10</sup>
- **STEP 2: Implement the Program(s)**

- **Educate** employees about the benefits plan. No matter how carefully planned and considered, without utilization a benefit plan is worthless. Providing one-on-one benefits counseling can help employees better grasp the breadth of benefits offered to them.<sup>17</sup>
- **STEP 3: Evaluate Success**
  - **Survey** employees about the new benefit program to determine whether or not their needs were met, and identify changes they would like to see in the future.<sup>25</sup>

A benefit plan that supports health and meets the needs of employers and employees alike is an important component of successful, comprehensive health promotion programs. By following the recommendations outlined above, employers can develop a benefit plan that supports healthy choices and behaviors and enables employees to receive the most benefit from wellness programs.

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# Measurement and Evaluation

## The Importance of Measurement and Evaluation

Impact/outcome measurement and evaluation is critical to maintaining accountability for and proving the effectiveness of a workplace wellness program, and for providing scientifically-supported, outcomes-based reasons to continue supporting the program.<sup>1,2</sup> Measurement and evaluation is just as important as careful program design and implementation; in fact, it is best to develop a measurement and evaluation plan in conjunction with program design and implementation so that useful baseline data collection (e.g., questionnaires of employee knowledge and current health behaviors, healthcare expenditures, absenteeism) can occur, and because designing a program with an evaluation plan in mind can help define the program's key activities and goals.<sup>1,2</sup>

There are a number of elements in each workplace wellness program that should be independently measured and evaluated. First, baseline measures should be collected from the very start of any intervention.<sup>1</sup> Baselines provide a benchmark against which progress can be measured. For example, if the number of employees who are current smokers is measured before implementing an anti-tobacco campaign, then that information can later be used to measure changes in the percent of the employee population who smokes. Second, process measures should be in place to determine what steps were taken during program design and implementation.<sup>1</sup> An example of a process measure is examining the number and type of stress-reduction educational materials that were developed and distributed to employees. Processes and outputs (such as the educational materials) are things that the organization has direct control over; a process evaluation can be used to assess whether a program was implemented appropriately, whether quality standards were met, or whether the approach should be changed if a program did not achieve its intended outcomes.

The third element to be measured and evaluated is program outcomes. Outcomes can generally be understood as the health impact of the program, usually measured in terms of short-, intermediate-, and long-term goals.<sup>1</sup> Short- and intermediate-term (e.g., monthly, annual) measures are often steps along the path to an ultimate goal.<sup>1</sup> For example, short- or intermediate-term measures might be the percent of employees eating 2.5-3 cups of vegetables per day, or the percent of employees exercising at least 30 minutes per day, five days per week. The long-term measure (e.g., 2-3 years) associated with these short- and intermediate-term measures would be the percent of employees who move from obese to healthy weight.

## The Business Case for Measurement and Evaluation

One of the most important questions for a business is whether a workplace health promotion program is a good investment. This is generally answered in two ways: return on investment (ROI) and value of investment (VOI). Return on investment examines how many dollars are saved or earned for every dollar that is invested, and is generally limited to examining tangible and measurable benefits of a program, such as reduced medical costs or increased productivity.<sup>3,4</sup> Businesses expect that all their investments will provide a meaningful return, and a workplace health promotion program is no exception.<sup>3,4</sup> Fortunately, a robust scientific literature supports the conclusion that well-designed and well-executed programs following best-practice principles to create a culture of health produce a positive return on investment, and simultaneously produce positive health outcomes.<sup>3,5-13</sup> Average returns on investment can vary and heavily depend upon the specifics of the health promotion or disease management program, but reviews have suggested savings of between \$1.20 and \$3.00 for every dollar invested.<sup>4,12,14,15</sup> Current expert opinion suggests that achieving a \$1.00 to \$1.00 ROI is worthwhile and of value to the organization if the economic analysis is supported by credible data documenting improvements in population health, such as reductions in obesity and smoking rates.<sup>13</sup>

ROI calculations can be a useful tool, but they fail to capture the full value of workplace health promotion programs. VOI calculations, on the other hand, allow employers to examine the broader impact of the workplace health promotion program on the core priorities of their organization.<sup>13</sup> Improved employee morale, talent attraction and retention, enhanced company loyalty, and improved company image are all benefits of workplace health promotion programs that may not show up in ROI estimates.<sup>3,4,13</sup> Thus, while programs need to save money (or at least remain cost neutral) to be sustainable, factors that may not show up in ROI calculations are a key part of a workplace health promotion program's impact evaluation.

## Evidence-based Actions Employers Can Take

Measurement and evaluation is key to the sustainability and improvement of a workplace health promotion program. There is a broad academic literature describing the important components of a measurement and evaluation program. Below, we synthesize this literature into a step-by-step process employers can follow to implement a successful measurement and evaluation program:

- **STEP 1: Plan and Analyze**
  - **Design** the measurement and evaluation plan at the very beginning of the workplace health promotion program. Write specific and realistic goals for the short-, medium-, and long-term, (e.g., 50% of employees who currently smoke attend monthly anti-smoking educational sessions; 50% of employees who currently smoke are tobacco-free within 1 year of program initiation) and determine how to measure

- progress towards those goals (e.g., questionnaires, attendance logs, cafeteria receipts to measure healthy eating habits).<sup>1,2,16</sup>
- **Collect** baseline measures of health behaviors and outcomes that the workplace health promotion program should improve.<sup>1,2</sup> For financial outcomes, estimate which health risks are the most prevalent and costly for the organization.<sup>17</sup> Quantify the areas that will be specifically targeted by the health promotion program (e.g., absenteeism, medical care costs).<sup>3</sup> Collecting data on these types of outcomes may be difficult, so professional organizations can assist with the process.<sup>3</sup>
  - **STEP 2: Implement the Program(s)**
    - **Estimate** the cost, per employee per year, of the health promotion program.<sup>3</sup> Consider the costs of communication (both program awareness and health education) efforts, behavior change programs, environmental changes, and staffing.<sup>3</sup> Exact figures for these are rarely available, so use reasonable approximations to come up with reasonable estimates.<sup>3</sup>
    - **Determine** where the savings necessary to justify the cost of the program will come from. For example, if medical care costs are \$6,000 per covered life and the program costs \$150 per covered life, the program must save \$150 per covered life (or 2.5%) in medical costs to pay for itself.<sup>3</sup>
    - **Consider** non-quantifiable benefits. Many benefits of workplace health promotion programs cannot be quantified, but are nonetheless important to organizational goals. Good corporate citizenship, improved employee camaraderie, and reduced presenteeism are all potential benefits of a workplace health promotion program that may not show up in ROI estimates.<sup>3,4,13</sup>
  - **STEP 3: Evaluate Success**
    - **Evaluate** whether the program is a good investment. Weigh the factors listed above, including financial gains, employee health outcomes, and other less quantifiable benefits, and determine whether the workplace health promotion program produces net benefits for the organization and the employees.

Measurement and evaluation is critical to ensuring the success of a workplace health promotion program. Following the steps above will help programs improve and remain sustainable, benefitting businesses and employees alike.

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## Employer Interviews

The following section contains interviews with employers whose organizations have built successful health programs that follow many of the best and promising practices mentioned in this guide. Each interview provides an overview of the program, its successes and challenges, and the advice each employer would like to offer to those interested in building a program of their own.



## Garrick Throckmorton, Assistant Vice President of Organizational Development, Allegacy Federal Credit Union

**“We ask employees to dedicate their career to fulfill our mission, so investing in workplace wellness is just the right thing to do for the employees and their families. Controlling healthcare costs and increasing productivity is a nice business byproduct.”**

**“Our employees report on their annual culture surveys that they care for the company because the company cares for them.”**

**“Investing in building a culture of health will never be a bad business decision. It is the right thing to do for the employee and for the business’ viability over the long term”**

**“The solution to the declining health of the United States worker lies inside companies. If we can invest in employees, we can solve a local, regional, and national problem. The healthcare industry doesn’t own the solution, the insurance companies don’t own it; our companies do.”**

With just 350 employees, Allegacy Federal Credit Union (Allegacy) manages over \$1 billion in assets, making it one of the largest credit unions in North Carolina. How does such a small company generate such success? According to Garrick Throckmorton, Assistant VP of Organizational Development, “investing in a culture of health is truly driving business.”

Allegacy’s wellness program started in 2009, when the CEO felt “an indebtedness to help improve the overall quality of life of our employees.” To do so, Allegacy’s AllHealth program built a holistic health promotion program, which has been key to success. Employees enjoy resources and incentives that support their desire to find “purpose” at work and set reachable career goals, while at the same time improving their physical, emotional, social and financial wellbeing through AllHealth. One key aspect of the program is that benefits can be tailored to each individual. As Throckmorton reports, the program “flexes to meet each person where he or she is.”

A second key to success has been Allegacy’s meaningful incentives program. The incentives are designed to reward outcomes as well as participation, and more importantly help employees “be accountable for their progress.” For example, employees get a 20 percent discount for gym memberships, and can earn an additional \$15 per month for going to the gym more than six times each month. Other incentives include the opportunity to earn up to \$1,000 in health savings accounts for participating in the program, and additional health insurance discounts for making reaching health goals set collaboratively with wellness coaches.

Moreover, to help with stress management, Allegacy pays for visits to employees' choice of mental healthcare providers.

A third key to success has been a strategic communications campaign. In addition to a weekly newsletter and an online webpage with health promotion information, employees receive messages from a wellness committee (comprised of representative groups from all over the company) and a wellness liaison, someone from each department who provides updates on wellness activities at that department. Throckmorton says the wellness liaison is sometimes more impactful than a newsletter, because "the message comes from someone you know; a familiar face."

This combination of a holistic design, high quality leadership support, a deeply-ingrained culture of health, individually tailored programs, smart incentives, and strategic communications have helped improve participation rates from 81 percent of employees in the program's first year to around 95 percent in 2015. At the same time, Allegacy employees have decreased their health risks by 50 percent since inception of the program.

In addition to improving employee wellness, the program has had a positive impact on business outcomes. Since the implementation of the wellness program, Allegacy experienced a zero percent increase in medical premiums for 2011, 2012, and 2013. In surveys of employees, trust is up 225 percent, engagement up 116 percent, and the composite culture score is up 113 percent. Throckmorton says, "When employees are asked if they would refer employment to a friend, 94 percent respond yes. This is arguably the greatest indication of employee trust."

## Cindy Ballog, Manager of Health Promotion, Wellness and Disease Management Medical Mutual

**“We believe there is value in wellness.”**

**“Those who participate in our wellness program have costs that go up slower than those who don’t.”**

**“A wellness program is more than just setting up a gym; it is looking at the entire employee population, the families, and corporate culture – and figuring out how you can encourage people to change their behavior.”**

The employee wellness program at Medical Mutual started in 2003 with a walking program, health assessment, and a \$50 gift card to incentivize participation. In the program’s second year, the gift card incentive was dropped, and so did participation rates, leading to Medical Mutual recognizing the importance of implementing smart incentives. Since that time, Medical Mutual has moved from a participation-based incentives program to an outcomes-based program, rewarding people for achieving measureable results. To motivate employees to achieve health improvements, Medical Mutual has upped the maximum allowable incentive from \$50 to \$350 in 2010, and again from \$350 to \$1,000 in 2014, with each increase in incentive value increasing participation rates. The employer also moved to a full replacement high-deductible health plan in 2014 and the increased incentive was used to promote healthcare consumerism.

To earn the maximum \$1,000 incentive, employees have to complete an online health assessment, participate in a variety of activities (e.g., attending lunch and learn sessions, taking online educational classes, making at least eight trips to the gym per month). In addition, if an employee is not tobacco free, he or she pays a higher monthly contribution, but tobacco users can participate in a telephone based quit program to earn the credit. Says Cindy Ballog, Manager of Health Promotion and Wellness at Medical Mutual, “the incentive is the main draw,” boosting participation rates to 90% for health assessments and to 70% for the full program.”

In addition to the strong incentive program, Medical Mutual’s success is bolstered by a strong culture of health and leadership support. Middle managers are encouraged to “make everyone feel it is okay to incorporate a healthy lifestyle into the work environment,” and help their employees maintain a healthy lifestyle by taking advantage of the on-site wellness center and joining running or walking clubs. Environmental supports also play an important role, such as the healthy options offered in the cafeteria, and a subsidized salad bar.

Ballog’s final piece of advice for those looking to implement a workplace wellness program: “Patience is key – implementing a wellness program takes a lot of

time, and you have to be patient and wait for employee buy-in.” For Medical Mutual, the patience has paid off in the form of a healthier and more productive workforce.

## Chloe Rosenthal, Director of Human Resources, Honest Tea

**“We really care about our employees, and we want to support them on their path to health and well-being.”**

The wellness program is a robust part of the company’s culture at Honest Tea. At its Bethesda Maryland headquarters, Honest Tea is helping its 40 employees get active and stay healthy through a variety of individual and organizational initiatives.

The idea of including health as part of the company culture came from president and CEO Seth Goldman, who cares very deeply about exercise and organic food (Honest Tea is an organic beverage company). Goldman headquartered Honest Tea next to a biking and walking trail in Bethesda, with an appreciation of the importance of environmental supports to engage his staff in physical activity. The company also hired a full-time wellness coach who is available to talk one-on-one to employees via phone or Skype, covering any health topic of interest to employees including diet, high blood lipid levels, weight management, and smoking cessation. In addition, based on employee recommendations, Honest Tea now offers monthly wellness workshops, quarterly wellness competitions/challenges, and on-site boot-camp workouts by leveraging an exercise video library.

The on-site exercise program came about after communications with employees. Initially, Honest Tea offered yoga and meditation classes twice a week. However, participation rates were low. The Director of Human Resources polled employees to get a better sense of their preferences. Honest Tea employees, who tend to be young, reported they would prefer to get fit and work out rather than do mild yoga. Consequently, more intense activities were begun, including the boot-camp workouts and rock climbing events, where participation now exceeds 50%.

Having learned from this experience, Honest Tea recognizes that a key to success is tailoring programs to employee needs, and “constantly getting feedback about what employees want and activities in which they would likely be engaged.” To aid in this effort, Honest Tea created a “Culture Committee” comprised of workers from all areas of the company who help organize fun events, fitness competitions, walks, and happy hours. Not only does this help increase participation rates, it helps employees feel empowered and lets them know the company is genuinely interested in their health.

Honest Tea’s leadership considers employee health integral to the company’s mission, not just a perk for employees. For example, the company budgets \$2,000 a month to hire coaches, provide incentives (e.g., cookbooks, Fitbits, pedometers, gift cards to exercise clothing retailers, team completion rewards), and offer other

tangible support for the wellness program. To celebrate the billionth bottle of Honest Tea being sold, each employee was given a branded bike. After receiving the bike, many employees began biking to work, or gave the bike to a spouse or partner so the pair could bike together.

Company leaders do not try to evaluate an ROI or estimate dollars saved. Instead, they state, “this is what we need to do to keep our culture going, and keep our employees healthy.” Honest Tea leaders recognize that employee wellness is part of good business and therefore should be supported. As reported by the head of human resources, “workers appreciate that we make good health a priority...a company like Honest Tea and wellness go hand-in-hand.”

Dr. Mike Roizen, Chief Wellness Officer and Chair of the Wellness Institute, Cleveland Clinic

**“We are saving more than \$3 per dollar invested in the program. The goal is to return all of that in premium savings back to the employees.”**

**“The major process isn’t putting in the fitness center or having a runathon; the major process is getting employees to understand why this is making them more competitive for jobs, why this is beneficial to them and their family members...they can have much more vitality than they ever visualized.”**

**“The key is the culture: make sure [employees] understand why the program helps them, their families, the organization, and America.”**

As one of the world’s leading medical institutions, Cleveland Clinic has long recognized the health and economic consequences of preventable health conditions brought on by tobacco use, physical inactivity, unhealthy diets, and unmanaged stress. In order to combat rising rates of chronic disease and subsequent medical costs among employees, Cleveland Clinic made bold choices to keep their employees healthier: first, in 2006, the organization became smoke free. Doing so required recruiting the leadership support of CEO Dr. Toby Cosgrove, who provided policy updates, funding, and public support for tobacco cessation efforts. For example, under the tough new anti-tobacco policies, employees would get a warning if caught smoking on campus, and be fired the second time they were caught. Other subsequent policies involved refusing to hire current smokers. These policies helped communicate to employees just how serious leadership and management were about stamping out tobacco use. Moreover, financial support from leadership made tobacco cessation aids (including counseling and medications) free to everyone in Cuyahoga County where Cleveland Clinic is located. Making it free caused a tremendous spike in participation at the Clinic: whereas only 100 employees had signed up for the tobacco cessation programs in the previous four years, 400 people signed up the day the program was made free. With strong leadership support, a rapidly developing culture of health, and improving access to health programs, Cleveland Clinic successfully banned tobacco on campus.

After that success, Cleveland Clinic addressed lack of physical activity among employees by removing the \$18 per month charge for the fitness center. Over the next three years, this small change led to a fifteen-fold increase in fitness center usage. At the same time, to combat obesity and stress among employees, Cleveland Clinic began offering a variety of healthy nutrition programs such as Mediterranean diet classes and Weight Watchers, e-coaching for weight loss and stress management programs. For example, from 2009 to 2015 any time eight or more employees want to join a yoga class, Cleveland Clinic paid for the instructor. Now, Cleveland Clinic runs over 50 yoga classes per day, some of which start as early as 4:00 AM for the bus drivers who asked for the sessions before their shifts started.

The overall goal of these programs was to help employees reach healthy outcomes, not just participate in health programs. Specifically, Cleveland Clinic wanted each employee to achieve “five normals,” which were defined as having 1) normal blood pressure, 2) normal fasting hemoglobin A1c, 3) normal body-mass index (BMI), 4) normal LDL cholesterol, and 5) no cotinine, plus having current vaccinations. The reasoning behind this decision was that early research had shown people who have five normals spend 33% less on healthcare over the course of their lifetimes, and they live much longer. The organization motivated employees to achieve these outcomes by guaranteeing 2009 insurance rates (the equivalent of a \$400 incentive for an individual, \$800 for a family) to everyone who met the five normals. The result was a dramatic shift in how employees interacted with their primary care physicians: rather than saying “I don’t want to take blood pressure medication,” employees were saying “get me to the five normals!” Within a few years of the program’s implementation, many positive outcomes were realized: 63% of people who had an abnormal at the start of the program were in programs aimed at or actually managed to achieve five normal status; the incidence of chronic disease, asthma and low-back pain was slowed, and costs, which were going up at 9% per year at the start of the program, slowed to a rate of only 2.5% per year, despite 19% per annum increases in medication costs

There were five major components that contributed to the success of the Cleveland Clinic program. First, there was a culture change. This meant having people understand they control their health and wellbeing, and that helping people improve their health was an organizational goal. One of the ways Cleveland Clinic communicated their commitment to this culture change for other organizations as well as Cleveland Clinic employees was by having employees who were not at five normals volunteer to be videotaped as they worked toward improved health – no longer needing diabetes or blood pressure medication, or better dealing with stress. These videos were then widely publicized to the rest of the workforce, to show that fellow employees are getting healthy by taking control. Throughout this process, leaders took time at company meetings to publically praise workers who have made significant health strides and hand out small rewards such as gym bags and workout clothes. Cleveland Clinic’s program has become so successful at the Clinic (and at other employer sites) that leaders report it is difficult to narrow it down to just two to three people per month who are worthy of public recognition.

The second major change was creating a healthy environment. Examples of this include offering healthier snacks in vending machines and reducing the availability of sugar-sweetened beverages. The goal of these environmental changes was to “make it hard to get ill, easy to get healthy.”

The third major change was implementing sustained programs that were accessible and fun. These programs were consistently offered, not “one-off” efforts. Programs were successful because they were often supported by coaches who helped guide employees’ progress.



The fourth change was creating a coordinated care program to help those who were not healthy get healthy through a variety of medical interventions, with the final offering being an intensive care program for individuals with significant health needs. The intensive care program can be especially cost effective, as approximately 20% of healthcare costs can be saved for people in that program who achieve the five normals.

The bottom-line business results of these programs and organizational changes have been profound. It took five years to get there, but Cleveland Clinic is now saving \$3 for every dollar invested in the program in direct medical costs, which can then be returned to employees in the form of lower insurance rates.

## Sheri Snow, Wellness Manager, American Cast Iron Pipe

**“The more that they feel that we truly care about their health, the more they care about it.”**

**“The worst thing that a company can do is a screening and that’s it... You’re not going to get the result you want.”**

**“Communication is key, and communicating all the time, not just when you’re having events.”**

Concern for employee health and wellbeing is nothing new for American Cast Iron Pipe, where health promotion programs have existed in varying form for decades. Over the years, the program has grown to include both a Health Risk Assessment (HRA) and the pursuit of health goals tailored to each employee’s own needs and desires. Employees are encouraged to get a full physical exam, and their results are used to determine their health risk levels and choose goals that are realistic and appropriate.

Incentives have become so engrained in the program that Wellness Manager Sheri Snow says, “if we changed it, they [employees] wouldn’t be happy about it.” Based on results of the HRA, employees are placed into one of four well body clubs. Each club receives a monetary incentive at the end of the year, with the lowest risk group receiving the largest amount. There is also an incentive for the goal-based program: employees receive a monthly reward of \$25 for reaching their goals. Each employee sets four goals: to remain tobacco free or join a cessation program, to address two of risk factors identified by the HRA—including high BMI, waist circumference, or body fat percentage, and to strive for an individual improvement the employee sets for him or herself.

Snow says that the overarching goal of the program is to create more opportunities for face-to-face interaction between employees and wellness staff. All employees have the chance to meet with staff to review HRA results while on the clock. Additionally, the wellness team visits individual departments, offers support groups, partners with local hospitals to bring in guest speakers on a variety of topics, and personally follows up with employees who may need extra help. This approach has led to an 81% participation rate in the HRA portion of the program, and to about one in three goal setting employees achieving all of their goals by the end of the year.

Another key to success is the support received from leadership, and the obvious company interest in protecting worker health. Achieving optimum health, safety, and wellness is important enough to be listed as one of the eight major tenets of the company’s strategic plan.

According to Snow, support and participation from management is a crucial driver of overall engagement. Reflecting on mistakes and lessons learned, Snow stresses that buy in from team leaders/champions can make or break a program, and that an idea is not automatically good just because the wellness team thinks it will work. Furthermore, she says, you cannot address every individual's need in one program, but still try to plan events at times when most people can attend. Snow also stresses the importance of using advisory committees and focus groups to make sure employees are offered the types of services they want and need. Finally, Snow advises companies to communicate health messages showing concern for individual employees and their families.

Lori Rolando MD, MPH, FACOEM, Medical Director, Health *Plus*,  
Vanderbilt University

**“You don’t want to make the person try to accommodate to the environment, you want to make the environment accommodate to the person.”**

**“You have to make it easy and convenient for employees to find you.”**

**“[We secured managerial support and funding for the program] by being able to demonstrate that developing an internal program would be more cost effective than purchasing services from a vendor.”**

When asked why Vanderbilt University decided to create its Health *Plus* workplace health promotion program, Lori Rolando, Medical Director of the program replies, “simply put, the desire to improve employee health was the driving factor.” The Health *Plus* program is but one leg of broader efforts to promote occupational, psychosocial, and personal health, using the World Health Organization’s healthy workplace model. Vanderbilt’s employee health program began decades ago with a focus on physical activity, and later a Health Risk Assessment (HRA) was added. This growth was fueled by the recognition that more comprehensive, population-based programming would address the broader concept of “health and wellness.” The program now includes Go for the Gold, which has three steps: completing the annual HRA, taking wellness action steps recommended by the program, and viewing the annual video featuring university members who serve as topic experts or share testimonials. A monetary incentive is offered for completing each of the three steps—for a maximum of \$240—and is either placed into an employees’ health plan account or used to cover membership costs at the recreation center on campus.

According to Rolando, there are three main components of the overall health promotion program, each of which address health on a population level by focusing primarily on modifiable lifestyle risks like smoking, overweight/obesity, nutrition, and physical activity. First is informational/educational programming that takes a global approach to maintain relevancy for Vanderbilt’s diverse population of employees, including those who are already low risk. Personalized risk reduction programming for higher risk individuals is the second primary focus of the programming. Finally, there are environmental enhancements like smoking bans, farmers markets, and walking trails that make the healthy choice the easy choice.

Rolando says that leadership has always understood the importance of having a healthy workforce, and that striving to maintain personal wellbeing and a good work life balance is so important that it is included in Vanderbilt’s credo. She says leadership also participates in activities and appears in promotional materials like newsletter features and video introductions. However, the program still conducts thorough evaluations and presents data on its outcomes. The university

benchmarks its data against State of Tennessee and U.S. norms on key health risk factors. Financial outcomes are not the sole focus: participation rates, engagement, and the value of increases in physical activity or the prevention of diabetes are also considered. Results are shared in academic papers to help inform the scientific community and other program implementers.

Despite successful outcomes and voluntary participation rates of 75-80% in the HRA (and a slightly lower number completing the entire Go for the Gold challenge), the program did recognize potential hurdles such as: communicating with a diverse population, and achieving message penetration. One of the main communication challenges was addressing the feedback from workers that “not everybody wants his or her information delivered in the same way.” Thus, the program both embraces technology to deliver messages and activities through phone apps and personalized web portals and offers low-tech paper alternatives when needed. The program also recruits about 200 Wellness Commodores to serve as liaisons between program staff and each department.

Offering suggestions for other employers, Rolando emphasizes the importance of building strong relationships: with leaders, to understand their goals and priorities; with employees to ensure buy in and find the best communication channels; and with internal and external partners because “you don’t always have to build everything from the ground up.” Programs should also ensure that environmental supports are in place and that an evaluation plan is laid out. While the evaluation does not necessarily need to focus only on financial outcomes, it should provide valuable information important to stakeholders that allows ongoing quality improvement.

Rolando’s main advice for employers looking to start and maintain an effective program: “In summary, the advice would be to know your population, be evidence-based, be inclusive of all employees, provide your employees with the tools and environment needed to be able to participate and benefit from the program, and identify your pertinent metrics (whatever they may be in your particular situation) and continually evaluate your program (and modify your program as needed based on results).”

Kristi Jenkins, Research Program Manager  
LaVaughn Palma-Davis, Senior Director of University Health &  
Well-Being Initiatives, University of Michigan

**“Recognize that what you are trying to accomplish is a change process.”**

**“We try to focus on positive encouragement to help people change.”**

Though the comprehensive employee wellness plan (MHealthy) at the University of Michigan (U of M) is fairly new, it has become part of the university’s culture of health, with some activities becoming a school tradition, according to MHealthy staff members Kristi Jenkins and LaVaughn Palma-Davis. Their program was born because of the former president’s belief that an academic institution with considerable resources has an obligation to look after the health of its employees. After researching the foundations of other well-developed wellness programs, the MHealthy program grew into an integrated organizational framework whereby wellness, occupational health, and employee assistance programs work together.

There are several characteristics that set Michigan’s program apart from other universities’. For one, the U of M has a dedicated communications staff to manage a comprehensive, multi-media strategy including a robust web and social media presence. The program takes advantage of health experts on UM’s staff, whereas other smaller programs often have to contract services from dietitians, counselors, and other health professionals. The university also relies on a rigorous evaluation structure, examining both program impacts and internal processes, to inform changes to the current program and identify subgroups in need of additional targeted services. These characteristics may explain why a five-year evaluation showed significant reductions in health risks and absenteeism.

The university’s culture of health also helps explain the program’s success. Jenkins and Palma-Davis say there are four key elements to their culture of health. The first is recruiting and training MHealthy champions from each work unit—currently about 500—to work with managers to encourage participation, as it is impossible for the MHealthy staff, on their own, to provide an effective amount of support for each department. Small grants are awarded to exemplary units that can use the money for special activities or to make improvements to their workspace. Leadership development is a second key, specifically educating new and existing leaders about their role in employee health and recognizing exemplary leaders throughout the year. Another piece of the puzzle is offering high quality programs that address the interests and needs of employees. Finally, healthy policies and environmental supports are implemented: Michigan is a smoke free campus and the health system is moving toward becoming tobacco free; healthy items are labeled in the cafeterias; farmers markets are offered year round; and catering guides are

circulated with advice on ordering healthy foods for meetings. The program also builds culture by extending program offerings and benefits to spouses or other qualified adults, although incentives for this group are only available for completing tobacco cessation counseling.

Despite its success, the program has encountered a few challenges. There was hesitation by some employees to share data with the program, as some were worried the information would be used to raise insurance premiums. There was also some difficulty taking all stakeholder positions into account (especially during challenging financial times); thus, Jenkins and Palma-Davis advise others to take time to understand and respond to stakeholders' interests and needs. Much like the initial concerns, these barriers can be overcome through active communication, sharing results that connect the benefits of the program with the organization's mission, and relationship building.

Maintaining clear communication with leaders and employees is the predominant advice Jenkins and Palma-Davis offer. They stress the need to establish benchmarks and present evidence from exemplary programs to ensure that leaders are on board with the plan and understand the importance of a comprehensive program. They also stress the need for bi-directional communication with employees to make sure the program truly addresses employees' wants and needs rather than coming across as a "quick fix."

Joan Hovatter MS, CRNP, Corporate Health and Wellness  
Manager, McCormick & Company

**“It has been easy for us to do wellness here because it has been part of McCormick’s culture for a long time.”**

**“There are so many resources out there that you don’t have to pay for. There are so many nonprofits that you can work with.”**

A focus on health, especially a healthy diet, comes natural to McCormick & Company. The spice and flavoring company encourages consumers to replace unhealthy salts and fats with seasonings that are better for their bodies. That messaging has made it easy to get leadership behind the employee wellness program, according to Health and Wellness Manager Joan Hovatter MS, CRNP. It also helps that wellness programs have existed at McCormick for more than 15 years, and that corporate pillars, “the Power of People” and “Inspiring Healthy Choices” are core company values.

Hovatter says that, while management was always open to wellness programming, sharing the results of a new and revised employee Health Risk Assessment (HRA) kick started a series of changes, including the creation of a new wellness facility, a change in the focus of the program, and a budget increase that allowed the hiring or contracting with nurses, dietitians, counselors, and health educators. Currently, the program focuses on self-help and goal setting, with an emphasis on coaching and supporting employees on their journey to wellness, in addition to providing traditional health education. The program offers incentives for completing the annual HRA and for taking a no tobacco pledge but, according to Hovatter, the most effective motivators are the small prizes awarded to winners of group and individual competitions and highlighting the accomplishments of employees who meet goals.

Because McCormick employs a blend of workers from different backgrounds, effective communication is a challenge. For example, Hovatter says, many of the hourly staff lack access to a computer at work, so emails don’t reach them. Thus, the program uses a variety of strategies that include distributing handouts, broadcasting on company TVs, using wellness champions to spread word-of-mouth messages, and giving short presentations at meetings. As Hovatter says, “We just try to use everything we can to get the word out.”

Tailored communication is not the only way the program strives to meet employee needs: program leaders welcome input and feedback. In fact, the program’s name (Ingredients for Health) and its messaging strategy (using the acronym S.P.I.C.E - **S** – Stretch Your Mind; **P** – Prevent Illness; **I** – Implement Healthy Eating; **C** – Change Your Knowledge; **E** – Exercise - to represent and



explain each area of focus) came from employees. The program also switched from encouraging gym membership to educating employees on a budget about exercising at home, and began offering off-hours activities for line workers who could not attend events during their shift.

Aware that her program's budget is likely the exception to the rule, Hovatter points out that both national and local nonprofits are excellent partners, and can offer free resources and help. She also stresses the importance of collecting routine data from annual HRAs to identify and plan the type of programming needed to address the problems faced by employees. As she says, "if the problem(s) and your program are a mismatch, you are not going to achieve the results you seek."

Joseph Appelbaum, Insurance Broker, President and Founder,  
Potomac Companies, Inc.

**“By really working hard at it, you can actually increase profits and business valuation...You can do that by valuing wellness.”**

**“Wellness, with proper cultural integration, makes people happy, makes companies happy, and keeps attrition down.”**

Potomac Companies is a 12 employee Maryland-based full-service employee benefit brokerage and consulting firm in business for over 25 years. The company services about 100 small- and mid-sized employers with 500-2,000 workers.

Consultants encourage their clients to promote wellness as part of their corporate culture, with readily available healthy foods, periodic biometric screenings, and frequent health improvement challenges. The business case for wellness holds that healthy workers help avoid future unnecessary healthcare costs. This is only possible, however, when senior management intentionally reinforces a culture of health as an organizational imperative.

There is no “secret sauce” according to Appelbaum, but the following components need to be in place:

- Top-down support – from senior and middle managers;
- Wellness needs to be viewed as a business strategy – vital to the growth of the enterprise;
- An annual budget for wellness is required -- about \$200-\$300/employee/year;
- A game plan (business document) for health promotion is necessary, with annual goals and expectations;
- Consistent messaging;
- Start with employees and then move the program to families; and
- Measurement and consistent reporting of outcomes to all levels of the organization is an imperative.

Potomac Companies consultants who meet with their client companies ask the following questions: “What do you want to accomplish in the next 2-3 years –save money, prevent catastrophic health events, and improve productivity? How will you do that without a healthy workforce?”

The key is moving beyond addressing individual employees' health issues – and expanding the focus to improving organizational health. Employees need to feel that management supports the program and that they should band together to achieve a common goal of health and well-being as a shared purpose.

It helps if professional health promotion partners are brought into the picture instead of just relying on internal resources. For example, it's helpful to contract with vendors providing telephonic smoking cessation programs, wellness experts with ample specific content expertise, and organizations able to track and report data on the company's experience.

On the other hand, programs are unlikely to achieve positive results when:

- They start and stop – without a continuous and ongoing messaging about health and wellness,
- They are limited to isolated events such as a “biggest loser” weight loss challenge where the prize is often a flat-screen TV when it should be a treadmill or wearable fitness tracker,
- There is no senior level buy-in and there are no internal champions,
- There is no or insufficient budget, and
- The program is added to the many other tasks an HR department is responsible for running.

The bottom line is that health promotion programs make sense when you consider what will happen to employees if they become unhealthier during their tenure in their companies. It is a “no-brainer,” according to Appelbaum. He says it is easy to convince customers that a healthy workforce is more committed to the job, more present at work, and performs at a higher level.

## Addendum

The following section contains links to valuable resources employers can use when designing, implementing, and evaluating a workplace health promotion program. It is divided into two sections: individual factors and organizational factors, with subsections for each factor described in the guide.

## Individual Factors

### Physical Activity

- General Physical Activity Toolkits
  - <http://www.cdc.gov/nccdphp/dnpao/hwi/toolkits/pa-toolkit.htm> CDC guide to implementing the Physical Activity Guidelines for Americans in the Workplace that has resources to help you from start to finish of your program, and provides forms for organizational assessments, reviewing policies and practices, and employee needs and interest surveys
  - <http://www.cdc.gov/nccdphp/dnpao/hwi/toolkits/physicalactivity.htm> CDC list of physical activity resources from state and local governments that can guide you through the process of implementing a variety of existing physical activity programs or developing a program of your own
  - <http://www.dshs.state.tx.us/wellness/worksiteresources.shtm> Texas Department of State Health Services guides to implementing a variety of existing programs or to developing your own program
  - <http://www.eatsmartmovemorenc.com/PAbreak/PAbreak.html> Eat Smart, Move More North Carolina guide with ideas for making physical activity part of meetings and other workplace events, including a sample policy
  - <http://www.acsworkplacesolutions.com/nuPA-Planner.asp> American Cancer Society's nutrition and physical activity online tool for assessing company's policies, programs, and benefits; you complete an organizational assessment and then receive a customized report with action steps
  - <http://www.thecommunityguide.org/pa/index.html> The Community Guide to Preventive Services guide to increasing physical activity through behavioral, social, informational, environmental, and policy approaches; includes links to a plethora of examples and recommendations
- Assessing Employee Physical Activity Levels, Needs, and Desires
  - <http://edb.sonoma-county.org/documents/wellness/Employee-Survey-of-Physical-Activity-at-Work.pdf> Sonoma County employee physical activity survey that assesses current physical activity levels and problems that may be related to a lack of physical activity
  - [http://www.cdc.gov/brfss/questionnaires/pdf-ques/2014\\_brfss.pdf](http://www.cdc.gov/brfss/questionnaires/pdf-ques/2014_brfss.pdf) The Behavioral Risk Factor Surveillance System Questionnaire has questions on exercise and health-related quality of life, as well as sleep, tobacco use, alcohol consumption, diabetes, cancer screenings, and sodium consumption

- [http://www.cdc.gov/nchs/nhanes/nhanes2013-2014/questionnaires13\\_14.htm](http://www.cdc.gov/nchs/nhanes/nhanes2013-2014/questionnaires13_14.htm) The National Health and Nutrition Examination Survey has sample questions on physical activity and physical fitness (among other topics) that can be adapted to the workplace to assess current health and physical activity levels
- Promoting Physical Activity
  - <http://www.cdc.gov/physicalactivity/resources/socialmedia.html> CDC physical activity social media tools, including podcasts, eCards, and web tools that can be distributed to employees and/or added to your website
  - [http://www.heart.org/HEARTORG/GettingHealthy/WorkplaceWellness/WorkplaceWellnessResources/The-American-Heart-Associations-Worksite-Wellness-Kit\\_UCM\\_460433\\_Article.jsp](http://www.heart.org/HEARTORG/GettingHealthy/WorkplaceWellness/WorkplaceWellnessResources/The-American-Heart-Associations-Worksite-Wellness-Kit_UCM_460433_Article.jsp) American Heart Association Worksite Wellness Kit, including posters, flyers, and web tools for physical activity programs that are ready to use
- Stair Climbing
  - <http://www.cdc.gov/nccdphp/dnpao/hwi/toolkits/stairwell/index.htm> CDC StairWELL to Better Health guide to encouraging employees to take the stairs at work, including a checklist, tips for improving appearance and installing music, motivational signs, and a list of ideas you can try
  - <http://www.eatsmartmovemorenc.com/StairwellGuide/StairwellGuide.html> Eat Smart, Move More North Carolina guide to encouraging stair use that includes suggestions, a set of posters, and an achievement certificate
  - <http://www.dshs.state.tx.us/wellness/worksite/resources.shtm> Texas Department of State Health Services guide to implementing the “Skyscraper Climb” program that encourages stair use that includes an evaluation form
- Walking
  - <http://www.cdc.gov/nccdphp/dnpao/hwi/toolkits/walkability/index.htm> CDC Worksite Walkability Audit Tool for designing safe and attractive places to walk around the worksite, including the tool itself, an explanation of terms, and an example of a completed audit
  - [http://www.heart.org/HEARTORG/GettingHealthy/PhysicalActivity/Walking/Walk-This-Way-With-AHA-Walking-Paths\\_UCM\\_437379\\_Article.jsp](http://www.heart.org/HEARTORG/GettingHealthy/PhysicalActivity/Walking/Walk-This-Way-With-AHA-Walking-Paths_UCM_437379_Article.jsp) American Heart Association guide to forming walking clubs (or finding an existing club), and finding or creating walking paths near you
  - <http://www.feetfirst.org/walk-and-maps/walking-meetings> Feet First guide to hosting walking meetings, including tips on where and when to have the meeting and how to address common challenges

- [http://www.saferoutespartnership.org/sites/default/files/pdf/The\\_Final\\_Active\\_Primer.pdf](http://www.saferoutespartnership.org/sites/default/files/pdf/The_Final_Active_Primer.pdf) The American Public Health Association's guide to promoting active transportation, such as walking or biking to work, to improve health; includes communication strategies and examples of successful programs
- Other Physical Activity Guides
  - <http://www.cdc.gov/nccdphp/dnpao/hwi/toolkits/fitnessclub/index.htm> CDC Guide to selecting a fitness club with discount fitness club (designed for government employees, but can be used to meet private employer needs); includes to assess needs, promote the program, and evaluate success
  - <http://public.health.oregon.gov/PreventionWellness/HealthyCommunities/HealthyWorksites/Documents/flextimeexample.pdf> Oregon Public Health Division flex time/physical activity policies for the workplace that can be used as a template to create your own policy

## Healthy Nutrition and Weight Management

- General Healthy Nutrition and Weight Management Toolkits
  - <http://www.cdc.gov/nccdphp/dnpao/hwi/toolkits/nutrition.htm> CDC guide to implementing a nutrition program at work that contains tools to help you implement existing programs or to create one of your own
  - <http://www.acsworkplacesolutions.com/nuPA-Planner.asp> American Cancer Society's nutrition and physical activity online tool for assessing company's policies, programs, and benefits; you complete an organizational assessment and then receive a customized report with action steps
  - <http://www.thecommunityguide.org/obesity/workprograms.html> The Guide to Community Preventive Services Obesity Prevention and Control: Worksite Programs guide provides a list of scientifically supported recommendations for worksite nutrition programs with brief examples of how to put the recommendations into action
  - [http://www.heart.org/HEARTORG/GettingHealthy/WorkplaceWellness/WorkplaceWellnessResources/Healthy-Workplace-Food-and-Beverage-Toolkit\\_UCM\\_465195\\_Article.jsp](http://www.heart.org/HEARTORG/GettingHealthy/WorkplaceWellness/WorkplaceWellnessResources/Healthy-Workplace-Food-and-Beverage-Toolkit_UCM_465195_Article.jsp) The American Heart Association's Healthy Workplace Food and Beverage Toolkit provides practical action steps and suggestions that are easy to understand and apply; registration is required to download the toolkit
  - <https://www.cdph.ca.gov/programs/cpns/Documents/Network-FV-WP-FADWorksiteBrieffinal.pdf> California Department of Health Services and the Public Health Institute's guide for improving healthy eating in the workplace; includes steps

- employers and employees can take and case studies of successful programs
- Assessing Employee Healthy Nutrition and Weight Management Statuses, Needs, and Desires
    - <http://www.cdc.gov/workplacehealthpromotion/evaluation/topics/nutrition.html> CDC guide to designing a nutrition program and assessment plan, including questions about productivity, health care costs, and environmental barriers
    - [http://www.cdc.gov/nchs/nhanes/nhanes2013-2014/questionnaires13\\_14.htm](http://www.cdc.gov/nchs/nhanes/nhanes2013-2014/questionnaires13_14.htm) The National Health and Nutrition Examination Survey has sample questions on dietary behavior, food security, and weight history that can be adapted to the workplace to measure current dietary habits and health status and some barriers to a healthy diet
  - Healthy Vending Machines
    - [http://www.phila.gov/health/pdfs/Healthy%20Vending\\_Executive%20Summary.pdf](http://www.phila.gov/health/pdfs/Healthy%20Vending_Executive%20Summary.pdf) Philadelphia Department of Health's snack vending standards, with sample criteria for what healthy options to include and how to position the healthy options to make them more attractive
    - <http://www.adph.org/NUTRITION/index.asp?id=4929> Alabama Public Health Department's healthy vending machine in worksites program, with suggestions for defining what qualifies as a healthy food and a guide to implementing healthy vending machines, including products, placing, and pricing
    - <https://www.cdph.ca.gov/programs/cpns/Documents/Network-FV-WP-VendingMachineStandards.pdf> California Department of Public Health's healthy vending machine strategy guide, including a list of healthy options and suggested nutrition and pricing/placement standards
  - Encouraging Tap Water Over Sugary Beverages
    - <http://www.healthylivingforlife.org/web-assets/pdfs/water-promo/Tap%20into%20Health%20Water%20Promotion%20Toolkit/Water%20Promotion%20Toolkit.pdf> Alameda County Public Health Department's tap water drinking promotion toolkit for schools; contains sections on promotion, water bottles, and fill stations (with posters and other promotional materials) that can be used in workplaces
    - <http://theweightofthenation.hbo.com/take-action/action/drink-water-instead-of-sugary-drinks> The Weight of the Nation videos and fact sheet on the health impact of replacing sugary drinks with water; links to a variety of resources and informational videos that can be shared with employees
    - <http://www.hsph.harvard.edu/nutritionsource/healthy-drinks/> Harvard School of Public Health fact sheet on healthy drinks,



promoting water in lieu of sugary beverages that can be shown to employees or used to inform other informational materials you wish to distribute

- Provide Healthy Foods at Workplace Events
  - <http://www.health.ri.gov/work/for/eventfoodvendors/> Rhode Island Department of Health's guidelines on what constitutes healthy foods at workplace events, and sample policies for caterers and vendors to follow
  - [http://www.heart.org/idc/groups/heart-public/@wcm/@fc/documents/downloadable/ucm\\_465693.pdf](http://www.heart.org/idc/groups/heart-public/@wcm/@fc/documents/downloadable/ucm_465693.pdf) The American Heart Association Healthy Workplace Food and Beverage Toolkit provides specific recommendations for meetings and events, including nutritional standards, an action plan, meal plans, and sample communication materials
  - [http://www.cdc.gov/nccdphp/dnpao/hwi/downloads/healthy\\_worksite\\_food.pdf](http://www.cdc.gov/nccdphp/dnpao/hwi/downloads/healthy_worksite_food.pdf) CDC guide for providing healthy foods and beverages at meetings, conferences, and events; breaks recommendations into six short steps
  - <http://www.acsworkplacesolutions.com/meetingwell.asp> American Cancer Society's tool for planning healthy meetings and events, including healthy replacements for common foods and a healthy meeting checklist
- Other Healthy Nutrition and Weight Management Resources
  - <https://www.bcm.edu/cnrc-apps/caloriesneed.cfm> Baylor College of Medicine's online adult energy needs and BMI calculator; this tool can help employees estimate the amount of calories they should be consuming

## **Tobacco Cessation**

- General Tobacco Cessation Toolkits
  - <http://www.cdc.gov/nccdphp/dnpao/hwi/toolkits/tobacco/index.htm> CDC guide to implementing a tobacco-free campus initiative in the workplace that includes tools for assessing needs, planning and promoting, implementing, and evaluating the program
  - [http://www.cdc.gov/tobacco/stateandcommunity/best\\_practices/index.htm](http://www.cdc.gov/tobacco/stateandcommunity/best_practices/index.htm) CDC guide to best practices for comprehensive tobacco control programs (designed for state health departments, but can be adapted to private employers); contains sections on communication campaigns, cessation programs, and evaluation
  - <http://www.acsworkplacesolutions.com/tobaccopolicyplanner.asp> American Cancer Society's Tobacco Policy Planner, a free, online resource to help assess a company's workplace programs, policies and benefits related to tobacco and moving toward being 100% tobacco-free; complete a survey and receive a customized plan of action

- <http://www.acsworkplacesolutions.com/freshstart.asp> American Cancer Society's Freshstart group-based tobacco cessation support program for the workplace; a representative must complete facilitator training before you can access the program materials
- <http://www.thecommunityguide.org/tobacco/index.html> The Guide to Community Preventive Services' guide to reducing tobacco use and secondhand smoke exposure; includes recommendations for a variety of programs, including mobile and quitline interventions and smoke free policies
- <http://www.lung.org/stop-smoking/workplace-wellness/guide-to-safe-healthy-workplaces.html> American Lung Association's toolkit for worksites to create a lung-friendly worksite (employers have to click on "Smoking Cessation" link); includes resources for making the business case, providing benefits, and offering a cessation program
- Tobacco Cessation Workplace Policies
  - <http://www.cancer.org/healthy/stayawayfromtobacco/smoke-freecommunities/createasmoke-free workplace/smoking-in-the-workplace-a-model-policy> A model tobacco use in the workplace policy from the American Cancer Society
  - [http://www.tobaccofreemaine.org/channels/workplaces/how\\_to\\_create\\_a\\_workplace\\_policy.php](http://www.tobaccofreemaine.org/channels/workplaces/how_to_create_a_workplace_policy.php) Maine Center for Disease Control and Prevention's policy formulation plan that includes steps to creating and enforcing the policy
  - <http://www.tobaccofreeutah.org/pdfs/shsworksitakit.pdf> Utah Department of Health's guide to creating a tobacco-free workplace policy with steps to create a policy and policy templates
- Tobacco Cessation Help and Quitlines
  - <http://www.jhsph.edu/about/school-wide-initiatives/tobacco-free-initiative/resources.html> Johns Hopkins Bloomberg School of Public Health's list of resources for help quitting tobacco that links to a variety of programs: in person, online, phone based
  - <http://smokefree.gov/> US Department of Health and Human Services' tobacco cessation website, with quitting apps, text messages, plans, and other resources
  - <http://www.quitterinyou.org/> American Lung Association's tobacco cessation website, with links to online resources, emails, and quitlines, as well as a tool to find programs in select cities
  - <http://ffsonline.org> American Lung Association's online tobacco cessation program that includes educational modules and quitting support
  - 1-800-Quit-Now is a national number which directs callers to the appropriate state quitline

## Stress Management

- <http://www.cdc.gov/niosh/docs/99-101/> National Institute for Occupational Safety and Health at Centers for Disease Control and Prevention's guide that highlights knowledge about the causes of stress at work, outlines steps that organizations can take to prevent job stress, and provides examples of successful programs
- [http://www.heart.org/HEARTORG/GettingHealthy/StressManagement/Stress-Management\\_UCM\\_001082\\_SubHomePage.jsp](http://www.heart.org/HEARTORG/GettingHealthy/StressManagement/Stress-Management_UCM_001082_SubHomePage.jsp) American Heart Association's tools for stress management; provides links to action steps and healthy habits to help manage stress
- <http://www.helpguide.org/articles/stress/stress-management.htm#checklist> HelpGuide's guide to stress management that lists unhealthy ways of dealing with stress and then explains eight healthy steps; also provides a self-help checklist and examples of items to include in a "stress relief toolbox"

### **Clinical Preventive Screenings/Biometric Assessments for Blood Pressure, Cholesterol, Blood Sugar**

- Recommended Screenings and Schedules
  - <http://www.uspreventiveservicestaskforce.org> The U.S. Preventive Services Task Force develops recommendations for clinical preventive services, including what screenings should be performed, who should partake in screenings, and how often screenings should occur.
  - <http://www.cdc.gov/workplacehealthpromotion/implementation/topics/blood-pressure.html> The Centers for Disease Control and Prevention's guide to blood pressure screening and control in the workplace, including public health evidence-base for screening, details on designing interventions for blood pressure screening and control, and links to examples and resources
  - <http://www.cdc.gov/workplacehealthpromotion/implementation/topics/cholesterol.html> The Centers for Disease Control and Prevention's guide to cholesterol screening and control in the workplace, including public health evidence-base for screening, details on designing interventions for blood pressure screening and control, and links to examples and resource
  - <http://www.cdc.gov/workplacehealthpromotion/implementation/topics/type2-diabetes.html> The Centers for Disease Control and Prevention's guide to type 2 diabetes programs in the workplace, including public health evidence-base for programs, details on designing interventions to manage diabetes, and links to examples and resources
  - [https://www.heart.org/HEARTORG/Conditions/Heart-Health-Screenings\\_UCM\\_428687\\_Article.jsp](https://www.heart.org/HEARTORG/Conditions/Heart-Health-Screenings_UCM_428687_Article.jsp) American Heart Association's recommended key screening tests and schedule for optimal

- cardiovascular health, also lists risk factors that may affect screening schedule
- <http://www.diabetes.org/are-you-at-risk/diabetes-risk-test/> American Diabetes Association's free online type 2 diabetes screening test
  - Answers To Questions and Explanation of Tests
    - <http://diabetes.niddk.nih.gov/dm/pubs/A1CTest/> Answers to commonly asked questions about the A1C test and diabetes that can be provided to employees to help them understand the test
    - <http://www.diabetes.org/diabetes-basics/diagnosis/> Diabetes fact page at American Diabetes Association's website; explains the different diagnostic test options and links to resources about prediabetes and steps to prevent the progression to diabetes
  - Online Trackers and Other Tools
    - <https://www.heart360.org/> The American Heart Association's free, online Heart360 program for blood pressure and cholesterol risk factor screening that can help employees keep track of their risks and how those risks affect their health
    - [http://www.heart.org/HEARTORG/Conditions/Cholesterol/CholesterolToolsResources/Cholesterol-Tools-and-Resources\\_UCM\\_001216\\_Article.jsp](http://www.heart.org/HEARTORG/Conditions/Cholesterol/CholesterolToolsResources/Cholesterol-Tools-and-Resources_UCM_001216_Article.jsp) Consolidated cholesterol tools and resources at American Heart Association; includes links to online health tracking tools, healthy recipes, and educational brochures

### **High Blood Glucose (Diabetes) Management**

- <https://diabetesatwork.org/> An online resource specifically designed to address the management of diabetes in the workplace; links to toolkits that are targeted to a wide variety of worker populations and more general toolkits on topics like cholesterol and exercise
- <http://www.diabetes.org/are-you-at-risk/diabetes-risk-test/?loc=alertday> American Diabetes Association's type 2 diabetes risk test that examines ten common risks and gives a score from 0-10, followed by links to resources to help reduce the risks identified by the test
- <http://www.cdc.gov/diabetes/prevention/training.htm> List of CDC-approved lifestyle coach and master training organizations that can help you select a certified coach to work with your program
- <http://www.stopdiabetes.com/> American Diabetes Association's Stop Diabetes campaign, including communication tools like a [fact sheet](#) and an explanation of [myths and facts](#), a [risk test](#), and a [database](#) of healthy recipes

## Sleep Hygiene

- Sleep Surveys
  - <https://www.worldsleepsurvey.com/> Free online sleep survey (part of a research study) that provides sleep score and profile about what factors may be affecting your sleep; option to take quick survey for score and then proceed to longer survey about habits/other factors
  - <http://www.neurokc.com/sleepiness-survey/> Short online survey that assesses whether or not sleeping pattern is normal and if a consultation with a doctor is recommended
  - <http://internalmedicine.med.sc.edu/forms/Sleep%20questionnaire2.pdf> In depth paper survey that assesses sleep patterns; includes a sleep log and a sleepiness log, and questionnaire for partners
- Employee Resources
  - [http://www.nhlbi.nih.gov/files/docs/public/sleep/healthy\\_sleep.pdf](http://www.nhlbi.nih.gov/files/docs/public/sleep/healthy_sleep.pdf) NIH resource that can be given to employees; explains how much sleep is needed and offers tips for improving sleep, also explains common disorders and includes a sleep diary
  - <http://sleepfoundation.org/sleep-tools-tips> Collection of all the National Sleep Foundation's tools, including a sleep diary, quizzes, and tips for a variety of people and circumstances
- Communication and Treatment
  - [http://www.cdc.gov/sleep/publications/podcasts\\_cards.htm](http://www.cdc.gov/sleep/publications/podcasts_cards.htm) CDC sleep podcasts and e-cards that can be sent to employees as reminders
  - [http://my.clevelandclinic.org/services/neurological\\_institute/sleep-disorders-center/treatment-services/go-to-sleep-program](http://my.clevelandclinic.org/services/neurological_institute/sleep-disorders-center/treatment-services/go-to-sleep-program) Cleveland Clinic's online treatment program, recommended for those suffering from short term insomnia (1-6 months)

## Social Connectedness

- Creating Groups and Clubs
  - [http://www.heart.org/HEARTORG/GettingHealthy/PhysicalActivity/Walking/Start-or-Join-a-Walking-Club\\_UCM\\_460019\\_Article.jsp](http://www.heart.org/HEARTORG/GettingHealthy/PhysicalActivity/Walking/Start-or-Join-a-Walking-Club_UCM_460019_Article.jsp) AHA resources on starting, promoting, and growing a walking club
  - <https://www.presidentschallenge.org/participate/gp-groups.shtml> The President's Challenge advice about creating groups, also links to other helpful guides about motivation, tracking progress, and giving awards
- Team Building
  - [http://www.mindtools.com/pages/article/newTMM\\_52.htm](http://www.mindtools.com/pages/article/newTMM_52.htm) A variety of team building exercises, tips, and training, as well as

- a link to a quick team effectiveness survey that assesses conflict and communication among other topics
  - <http://www.onlineexpert.com/elearning/user/pdf/natsem/managingdiverseworkforce/team-buildinggamesactivitiesideas.pdf> A list of 30 team building activities, with supplies needed and intended outcomes listed
- Satisfaction and Relationship Surveys
  - <http://shell.cas.usf.edu/~pspector/scales/jsspag.html> Job satisfaction survey that includes coworker relationships, can be used free for noncommercial purposes if results are shared (organization does not have to be identified)
  - <http://www.questionpro.com/a/jsp/library/v2/embedSurvey.jsp?surveyID=250> Template for a more general employee satisfaction survey, could be modified to include more questions about coworkers
  - <http://www.custominsight.com/employee-engagement-survey/sample-survey-items.asp> Variety of sample survey questions, including about teamwork, relationships/respect for management, relationships with coworkers, communication, and diversity

## **Alcohol Management**

- General Prevention Resources and Treatment Options
  - <http://www.workplacementalhealth.org/Business-Case/An-Employers-Guide-to-Workplace-Substance-Abuse-Strategies-and-Treatment-Recommendations-.aspx?FT=.pdf> Guide detailing common substance abuse problems, strategies to address workplace substance abuse, and treatment options
  - [http://pubs.niaaa.nih.gov/publications/arh26-1/49-57.htm?wptouch\\_preview\\_theme=enabled](http://pubs.niaaa.nih.gov/publications/arh26-1/49-57.htm?wptouch_preview_theme=enabled) Article describing workplace prevention options, complementary programs, and risk factors in the workplace
  - <http://www.samhsa.gov/sites/default/files/workplace/ModelPlan508.pdf> SAMHSA's complete guide to developing a comprehensive drug free workplace program, including sections on training and education
  - <http://www.samhsa.gov/treatment> SAMHSA's explanation of treatment options and links to resources for specific options
- Communication Materials
  - <http://www.cdc.gov/alcohol/onlinemedias.htm> Links to all of the CDC's pre-made online media that can be distributed to employees
  - <http://www.niaaa.nih.gov/publications/brochures-and-fact-sheets> NIAAA's pre-made communication materials including

- brochures, posters, and fact sheets that can be distributed to employees
- Alcohol Use Surveys
  - <http://www.niaaa.nih.gov/research/guidelines-and-resources/recommended-alcohol-questions> Sample alcohol use questionnaires of various length from NIAAA
  - <https://ncadd.org/learn-about-alcohol/alcohol-abuse-self-test> Alcoholism self test from NCADD

## Organizational Factors

### General

- Program Guides
  - [https://www.knoxcounty.org/health/pdfs/worksite\\_wellness\\_toolkit.pdf](https://www.knoxcounty.org/health/pdfs/worksite_wellness_toolkit.pdf) Complete implementation guide with planning tools, surveys and scoring metrics, and information to make the case for your program
  - <http://dhmh.maryland.gov/healthiest/Documents/Wisconsin%20Worksite%20Wellness%20Resource%20Kit.pdf> Complete implementation guide with steps to take and information to sell program, sample surveys, and disease specific resources
  - [http://www.hap.org/employers/worksite/pdfs/Workbook\\_2013.pdf](http://www.hap.org/employers/worksite/pdfs/Workbook_2013.pdf) Complete guide that links to outside resources, provides sample planning materials and surveys, and evaluation tools, and some disease specific resources
  - [http://www.tuftshealthplan.com/employers/health/pdfs/worksite\\_wellness\\_guide.pdf](http://www.tuftshealthplan.com/employers/health/pdfs/worksite_wellness_guide.pdf) Guide book with sample surveys, planning materials, and further guidance to using Tufts resources
  - [http://www.tuftshealthplan.com/employers/health/pdfs/worksite\\_wellness\\_program\\_development\\_guide.pdf](http://www.tuftshealthplan.com/employers/health/pdfs/worksite_wellness_program_development_guide.pdf) In depth guide to planning, implementing, and evaluating, with a variety of communications materials
  - [www.prevent.org/downloadStart.aspx?id=18](http://www.prevent.org/downloadStart.aspx?id=18) *Partnership for Prevention guide to employee wellness with sample survey questions*
- Wellness Committee Guides
  - [http://www.eatsmartmovemorenc.com/NCHHealthSmartTlkt/1\\_docs/committee\\_workbook/CW\\_entireworkbook.pdf](http://www.eatsmartmovemorenc.com/NCHHealthSmartTlkt/1_docs/committee_workbook/CW_entireworkbook.pdf) Wellness Committee Workbook with ideas for meeting agendas, mission statements, surveys, and communications materials
  - [http://www.mprisk.org/UserFiles/Servers/Server\\_84508/File/Wellness%20Docs/Wellness%20Committee/841765a\\_wellness%20committee%20toolkit\\_v1.pdf](http://www.mprisk.org/UserFiles/Servers/Server_84508/File/Wellness%20Docs/Wellness%20Committee/841765a_wellness%20committee%20toolkit_v1.pdf) Cigna Health and Life Insurance

Company's toolkit for creating a workplace wellness committee; explains the steps to creating a committee

- ROI and VOI Studies
  - [http://www.nexgenhce.com/images/RAND\\_Wellness\\_Study\\_-\\_May\\_2013.pdf](http://www.nexgenhce.com/images/RAND_Wellness_Study_-_May_2013.pdf)
  - <https://hbr.org/2010/12/whats-the-hard-return-on-employee-wellness-programs>
  - O'Donnell, M. P. Financial Incentives for Workplace Health Promotion: What Is Equitable, What Is Sustainable, and What Drives Healthy Behaviors? *Am. J. Health Promot.* **26**, iv–vii (2012).
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### **Leadership Commitment and Support**

- <http://www.prevent.org/Initiatives/Leading-by-Example.aspx> Partnership for Prevention's leading by example guides that provide examples of successful programs/employers
- <http://takeactionca.cdph.ca.gov/management-support.asp> Sample talking points, communication materials for reaching out to senior management, and sample letter from management to employees
- <http://www.healthinnovationcouncil.org/wp-content/uploads/2015/01/BPC-CEO-Council-Health-Innovation.pdf> The CEO Council on Health and Innovation consulted with leaders of some of the US' largest employers to share strategies they have used to improve the health and wellness of their employees and communities



## Creating a Culture of Health

- [http://www.michigan.gov/documents/cis\\_wsh\\_lb\\_survey\\_134162\\_7.pdf](http://www.michigan.gov/documents/cis_wsh_lb_survey_134162_7.pdf) Example of a more general cultural survey that includes health and safety, and a section on whether the environment is supportive/ employees think their work is meaningful
- <http://www.surveymonkey.com/r/?sm=p6%2fpdsSBvL6FikoP%2b3DkWQ%3d%3d> HERO survey of 24 elements of a culture of health that can be used as is or modified for your workplace
- [https://osha.europa.eu/en/tools-and-publications/publications/reports/culture\\_assessment\\_soar TEWE11005ENN](https://osha.europa.eu/en/tools-and-publications/publications/reports/culture_assessment_soar_TEWE11005ENN) Contains links to a variety of assessments on cultures of safety and health that can be used as is or modified for your workplace

## Strategic Communication

- General Communication Toolkits
  - <http://www.diabetes.org/advocacy/advocate-toolkit/messaging-tools.html> ADA toolkit: advocacy messages, ads, and stories that can be used in campaigns
  - [http://www.heart.org/HEARTORG/GettingHealthy/WorkplaceWellness/WorkplaceWellnessResources/The-American-Heart-Associations-Worksite-Wellness-Kit UCM\\_460433\\_Article.jsp](http://www.heart.org/HEARTORG/GettingHealthy/WorkplaceWellness/WorkplaceWellnessResources/The-American-Heart-Associations-Worksite-Wellness-Kit_UCM_460433_Article.jsp) AHA workplace wellness kit: messages, decals, and other promotional items, plus an implementation guide
- Health Literacy and Plain Language Resources
  - <http://www.cdc.gov/healthliteracy/gettraining.html> CDC online training for health literacy; some trainings are as short as an hour while others are longer and more intensive
  - <http://www.cdc.gov/healthliteracy/developmaterials/index.html> CDC resources to help with plain language, visual messaging, testing messages, and communicating with older adults
  - <http://www.nih.gov/clearcommunication/index.htm> NIH resources on plain language and cultural competency, including the Pink Book guide to making health communication programs work

## Implementing Smart Incentives

- <http://hero-health.org/wp-content/uploads/2014/03/IOEM-Joint-Consensus-Statement-article-on-Workplace-Wellness-Programs-and-use-of-Incentives-Published-7-13-12.pdf> HERO paper on using outcomes based incentives; provides advice on choosing incentive design, size, and providing reasonable alternatives; also explains legal concerns

- <http://healthaffairs.org/blog/2015/05/13/the-aca-the-ada-and-wellness-program-incentives/> Health Affairs Blog article on limits from the ACA and ADA (May 2015)

### **Employee Engagement**

- <http://www.healthinnovationcouncil.org/wp-content/uploads/2015/04/Physical-Activity-Challenge-Engagement-Satisfaction-Survey.pdf> BPC CEO Council: example of an engagement and satisfaction survey (this is specifically focused on physical activity but it could be easily modified to align with your program)

### **Tailoring Programs**

- [http://www.cdc.gov/nccdphp/dnpao/hwi/downloads/HRA\\_checklist.pdf](http://www.cdc.gov/nccdphp/dnpao/hwi/downloads/HRA_checklist.pdf) CDC checklist for planning an HRA, has sections for vendor or other personal, making it suitable for most programs
- <http://www.cdc.gov/niosh/topics/stress/pdfs/qwl2010.pdf> NIOSH quality of worklife survey that examines a wide variety of topics to identify employee concerns, including relationships and respect in the workplace, stress levels, and overall work environment
- [http://www.cdc.gov/nchs/nhanes/nhanes2013-2014/questionnaires13\\_14.htm](http://www.cdc.gov/nchs/nhanes/nhanes2013-2014/questionnaires13_14.htm) NHANES survey questionnaires covering a range of health topics; you can draw questions from health topics that are likely present among your employees to create a survey that determines prevalence or identifies employees with specific conditions/risks

### **Environmental Support**

- [http://www.cdc.gov/nccdphp/dnpao/hwi/programdesign/continuing\\_ed.htm](http://www.cdc.gov/nccdphp/dnpao/hwi/programdesign/continuing_ed.htm) CDC list of education/training opportunities for staff, ranging from conferences to workshops to certification programs
- Organizational support sections of the HERO (<http://hero-health.org/scorecard/>) and CDC Scorecards ([http://www.cdc.gov/dhdsp/pubs/docs/HSC\\_Manual.pdf](http://www.cdc.gov/dhdsp/pubs/docs/HSC_Manual.pdf)), and the BPC CEO survey

### **Benefit Plan Design**

- [http://www.dol.gov/ebsa/faqs/faq\\_hipaa\\_ND.html](http://www.dol.gov/ebsa/faqs/faq_hipaa_ND.html) FAQ on HIPAA requirements for health plans
- [http://www.prevent.org/data/files/topics/preventive\\_services\\_helping\\_employers\\_expand\\_coverage.pdf](http://www.prevent.org/data/files/topics/preventive_services_helping_employers_expand_coverage.pdf) Partnership for Prevention guide on expanding preventive coverage—a bit dated but it has a discussion of barriers and factors that increase utilization/coverage

- <http://www.inc.com/guides/2010/04/offering-competitive-employee-benefits.html> Inc's guide to building a competitive benefits package that covers different insurance plan options, FSAs, 401(k)s, leave, and flex time

### **Measurement and Evaluation**

- <http://www.healthinnovationcouncil.org/wp-content/uploads/2015/04/Physical-Activity-Challenge-Impact-Survey.pdf> BPC CEO Council: example of an impact survey; this survey is very general, but questions about specifics of your program could easily be added
- <http://hero-health.org/scorecard/> HERO Scorecard that includes workforce health measures (HRA, biometric screenings, claims), employee surveys (interests, engagement, satisfaction), and an organizational assessment (culture, performance data)
- [http://www.cdc.gov/dhdsp/pubs/docs/HSC\\_Manual.pdf](http://www.cdc.gov/dhdsp/pubs/docs/HSC_Manual.pdf) The CDC Worksite Health ScoreCard: an assessment tool for employers to assess their health promotion programs, identify gaps, and prioritize high-impact strategies to prevent heart disease, stroke, and related conditions
- <http://www.cdc.gov/nccdphp/dnpao/hwi/programdesign/swat.htm> CDC SWAT tools for programs related to healthy weight; assesses environment and policies, health benefits, leadership, and offers guidance on conducting environmental assessments and employee interviews
- <http://www.cdc.gov/workplacehealthpromotion/pdfs/WorkplaceHealthInterviewQuestions.pdf> CDC interview questions for assessing the aspects of a comprehensive workplace wellness program, examines a variety of factors and includes a consent form