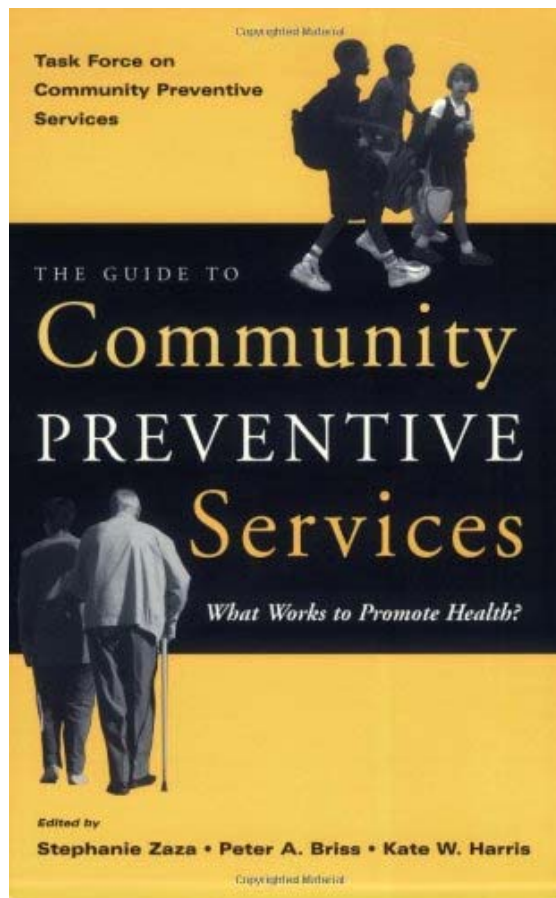


Evidence-based Health Promotion into the Workplace



Jeff Harris, MD MPH MBA

Overview

Why do workplace health promotion (WHP)?

Targeting highest need

The start: large/mid-size workplaces

Adapting: smaller workplaces



WHY WHP?

Chronic Diseases Kill Workers

Cancer #1

Heart Disease #2

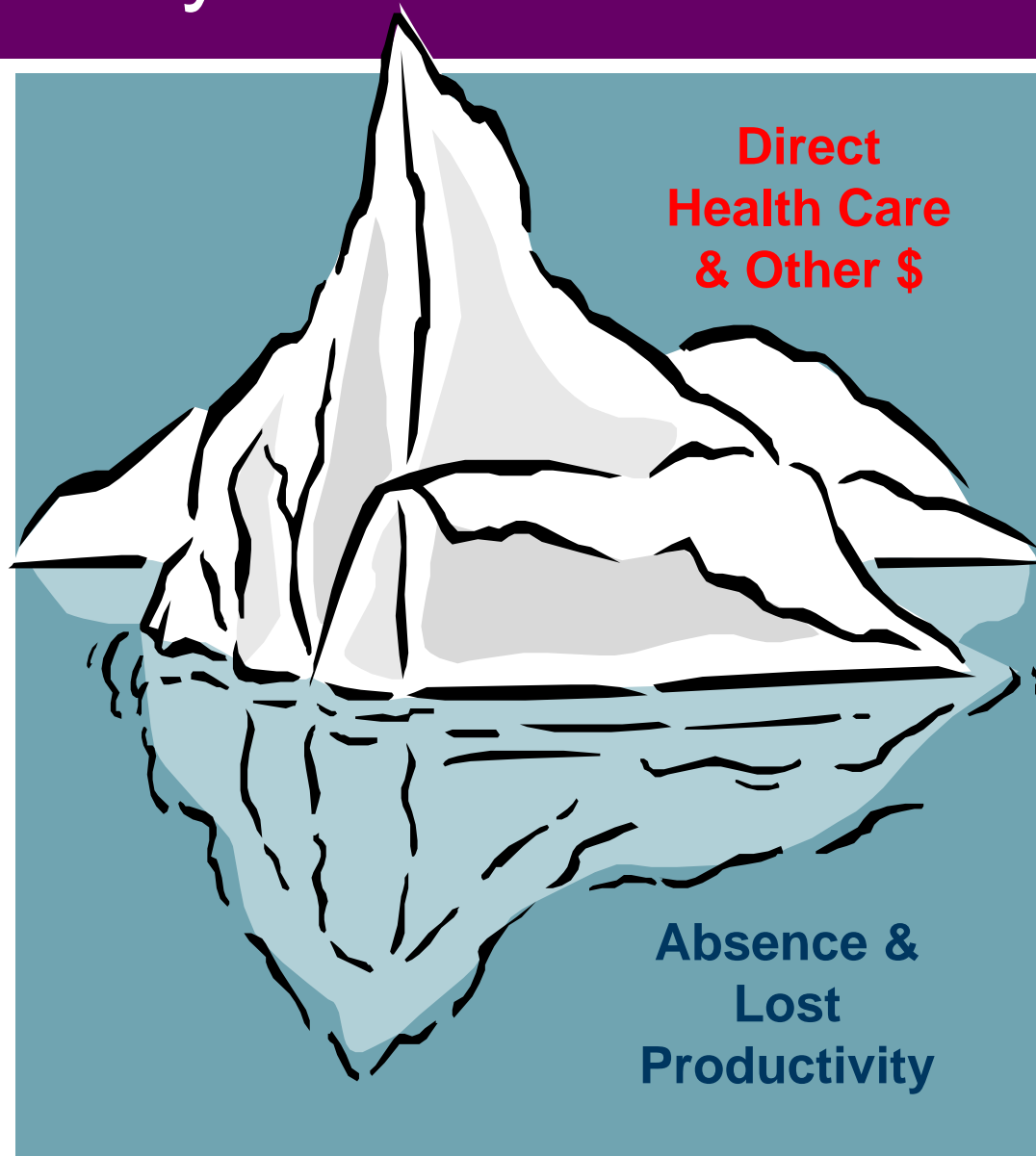
Diabetes #6

Emphysema #7

Stroke #8

WISQARS 2007, WA, Ages 18-64

Costly Chronic Disease Iceberg



WHP Saves \$

Meta-analysis of 22 WHP studies

6-fold ROI overall

Half from health care savings

Half from productivity savings

Spent **\$150** per worker per year

Baicker K et al. Health Affairs 2010;29:1-8.

NIOSH Interested in WHP

Holding conferences

Publishing newsletter

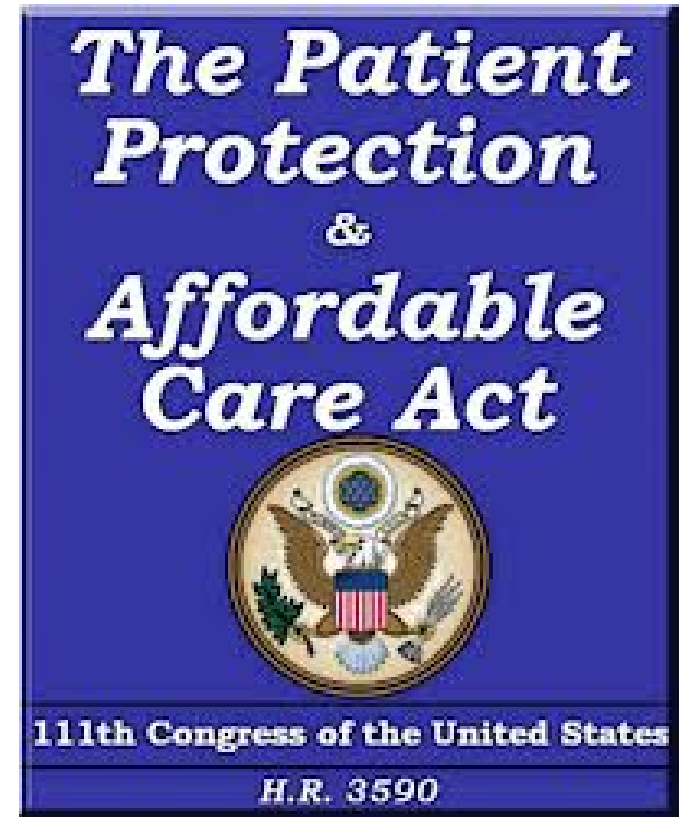
Funding research centers



WHP and the Affordable Care Act

Penalties for poor health habits

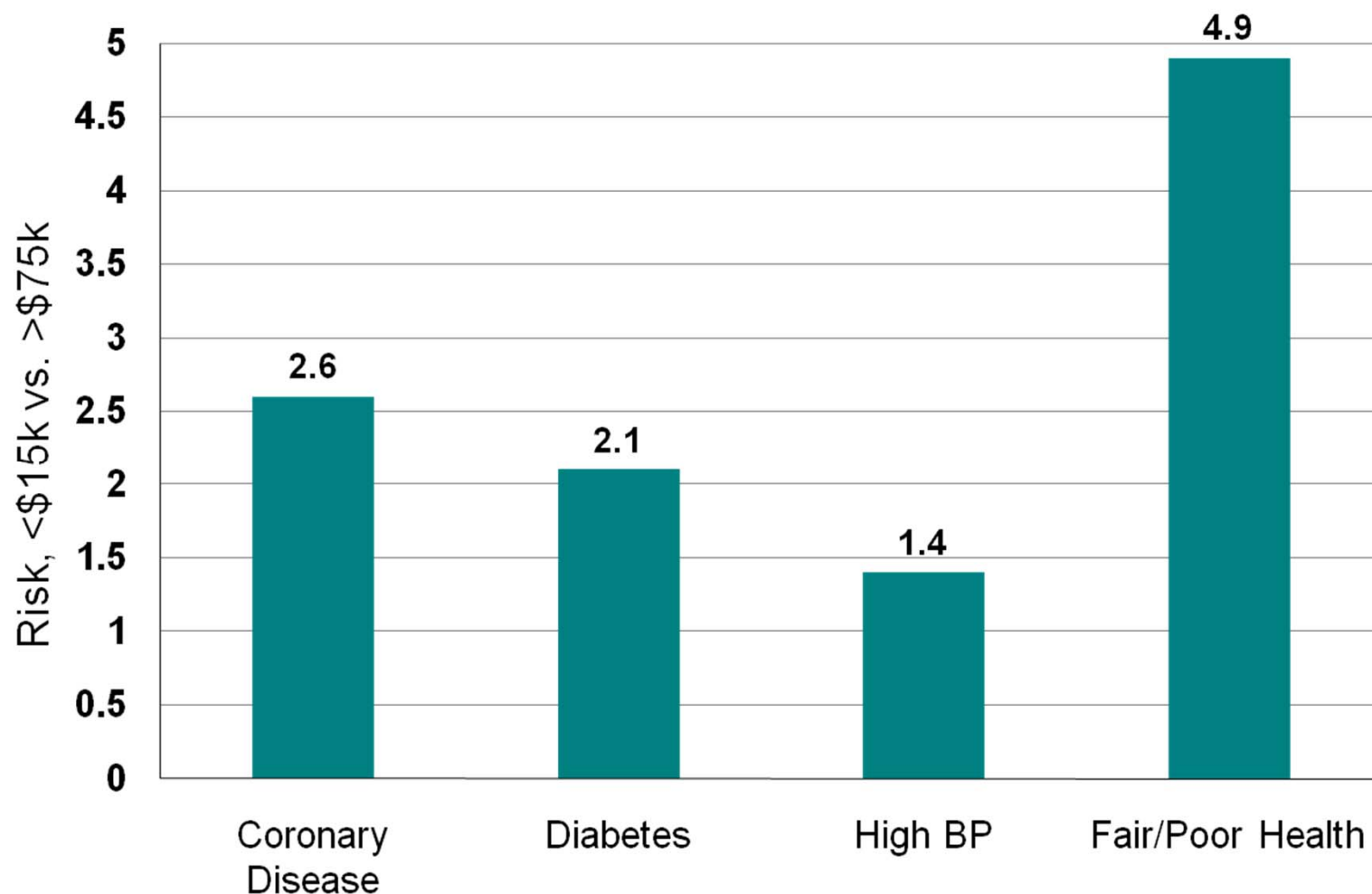
Major funding to CDC





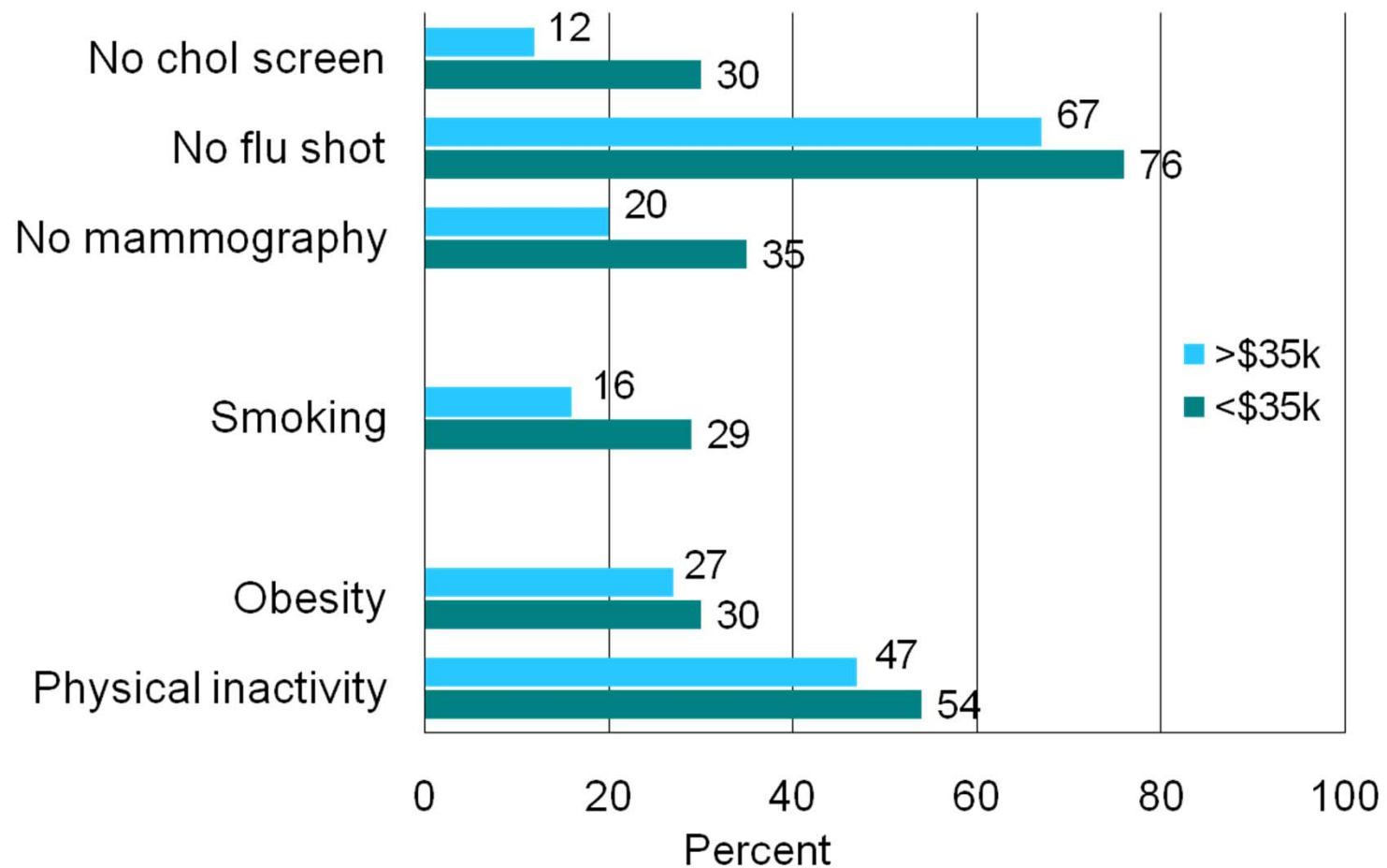
TARGETING HIGHEST NEED

Target: Low-SES Workers



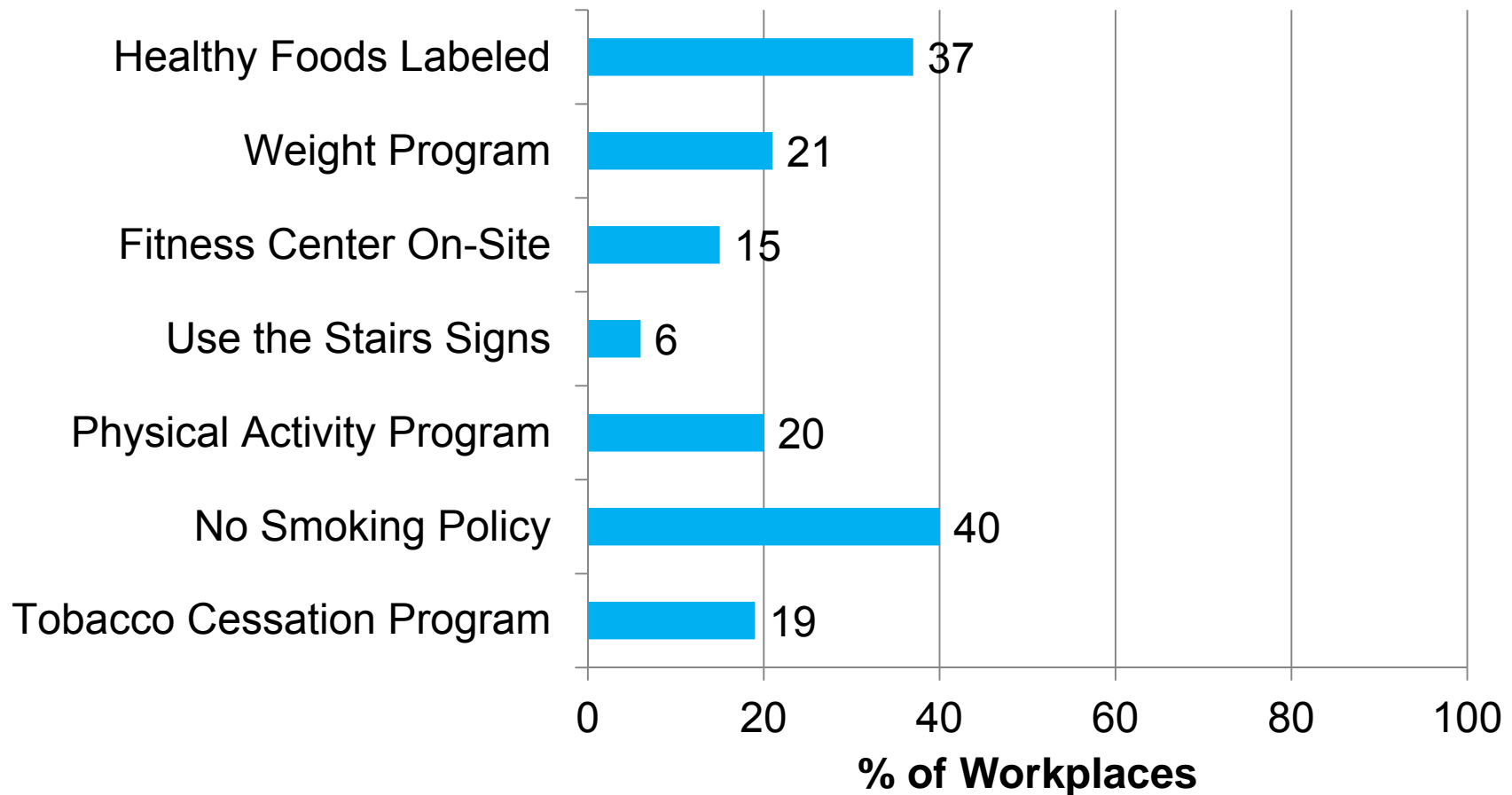
By household income, U.S. Workers. *BRFSS 2007-8*. Harris J et al. *JOEM* 2011;53:132-8.

Target: Health Behaviors



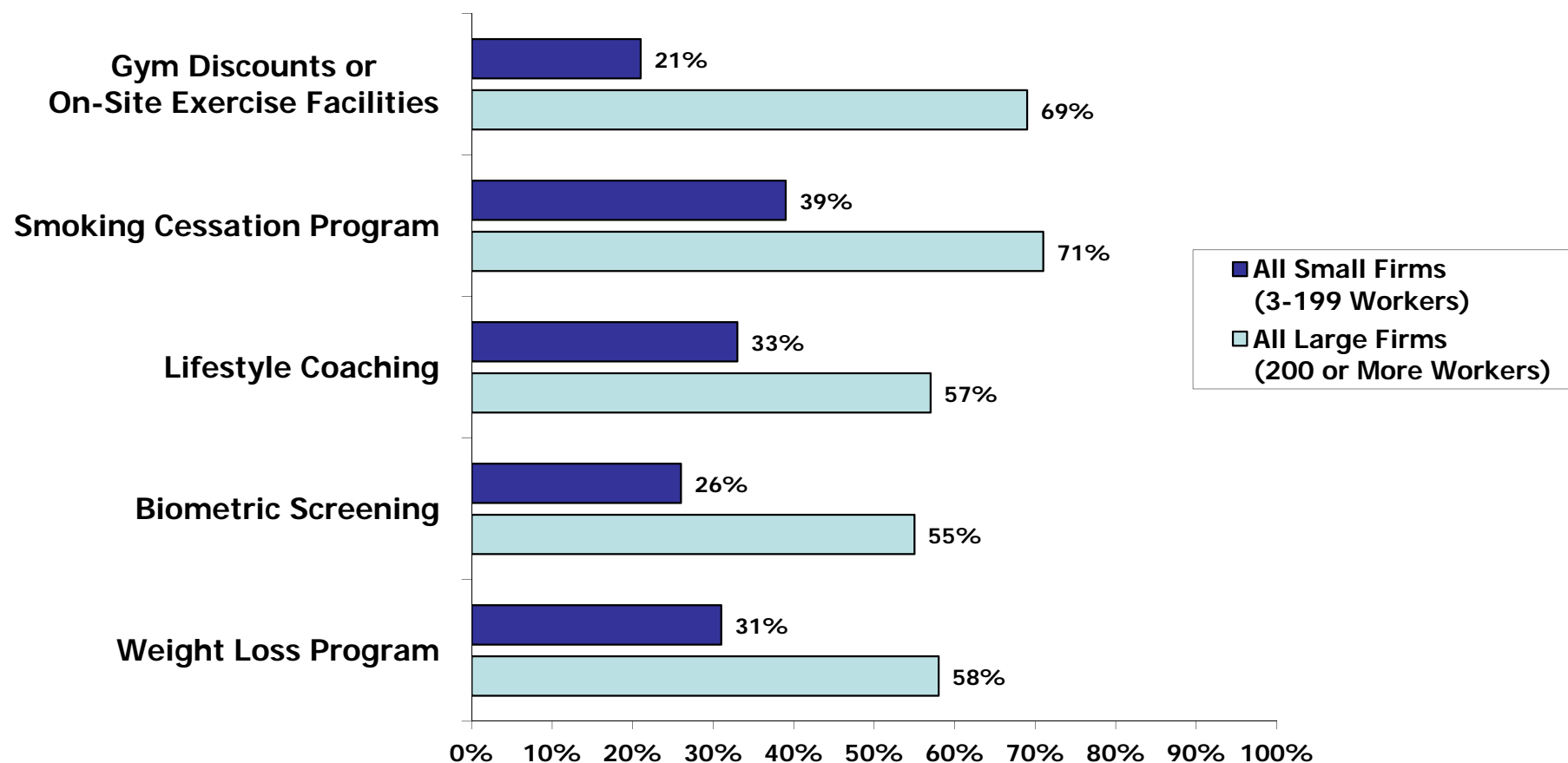
By household income, U.S. Workers. *BRFSS 2007-8*. Harris J et al. *JOEM* 2011;53:132-8.

Target: Doing More of What Works



Linnan L et al. Am J Public Health 2008;98:1503-9

Target: Smaller Workplaces



Kaiser HRET Employer Health Benefits Survey, 2013.



**THE START:
LARGE/MID-SIZED WORKPLACES**

ACS Workplace Solutions

Best Practices: Better Health



Employer Practices	Workers' Behaviors	Better Outcomes
Benefits Policies Programs Communicate Track progress	↓ Tobacco use ↑ Healthy eating ↑ Physical activity ↑ Clinical prevention	↑ Health ↑ Productivity Controlled costs

Best Practice Examples

Benefits	Cover tobacco cessation, minimize co-pay
Policies	Access to healthy foods at worksite
Programs	Group-based physical activity program
Communication	Promote all of the above, part of the culture

Workplace Solutions Process

Assessment Survey

Assess current practices

Recommendations Report

Overview of current practices

Compare to Best Practices

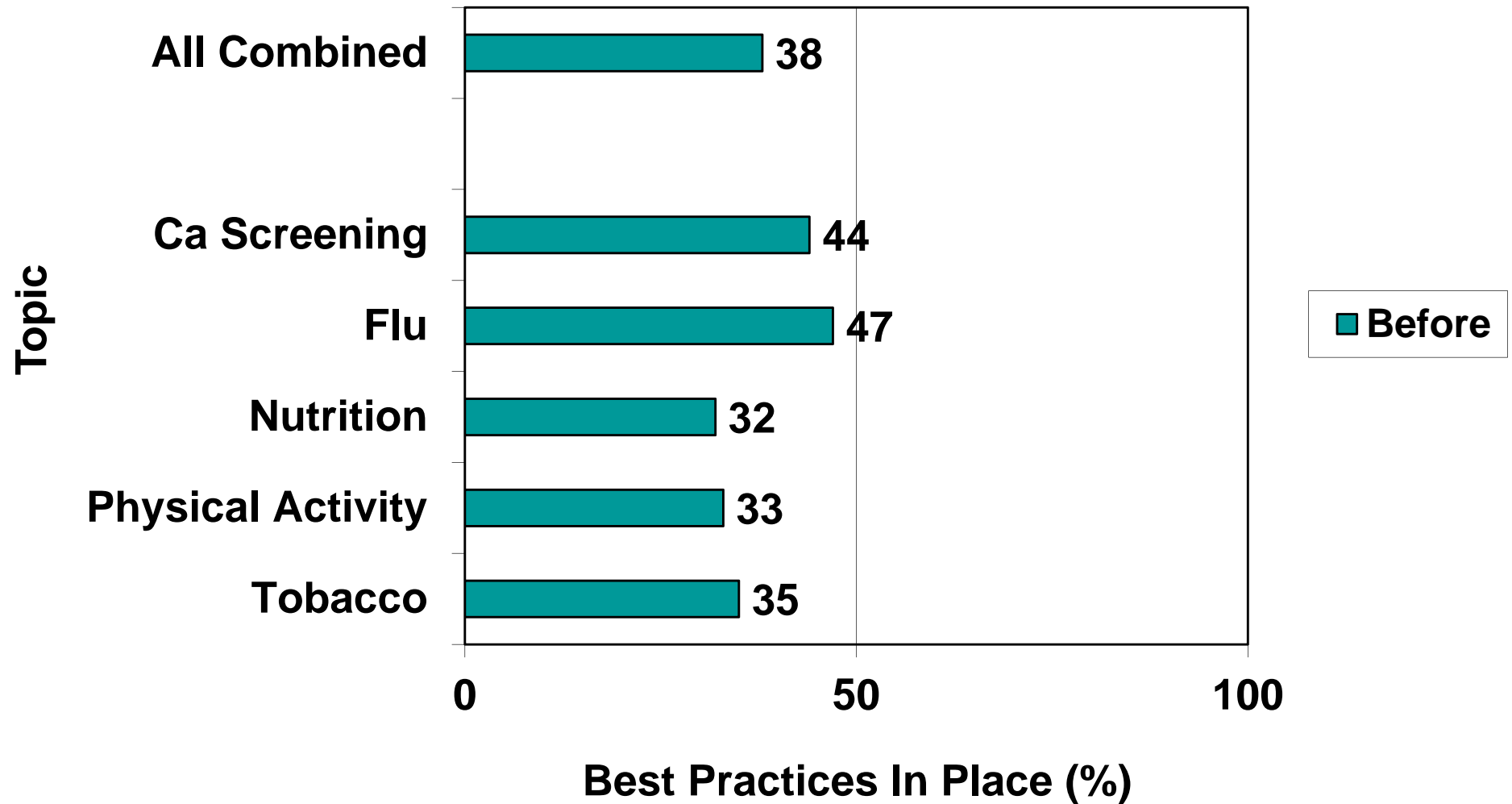
Prioritize 3-5 recommendations

Solution Sets

“Tool-kits” help implement Best Practices

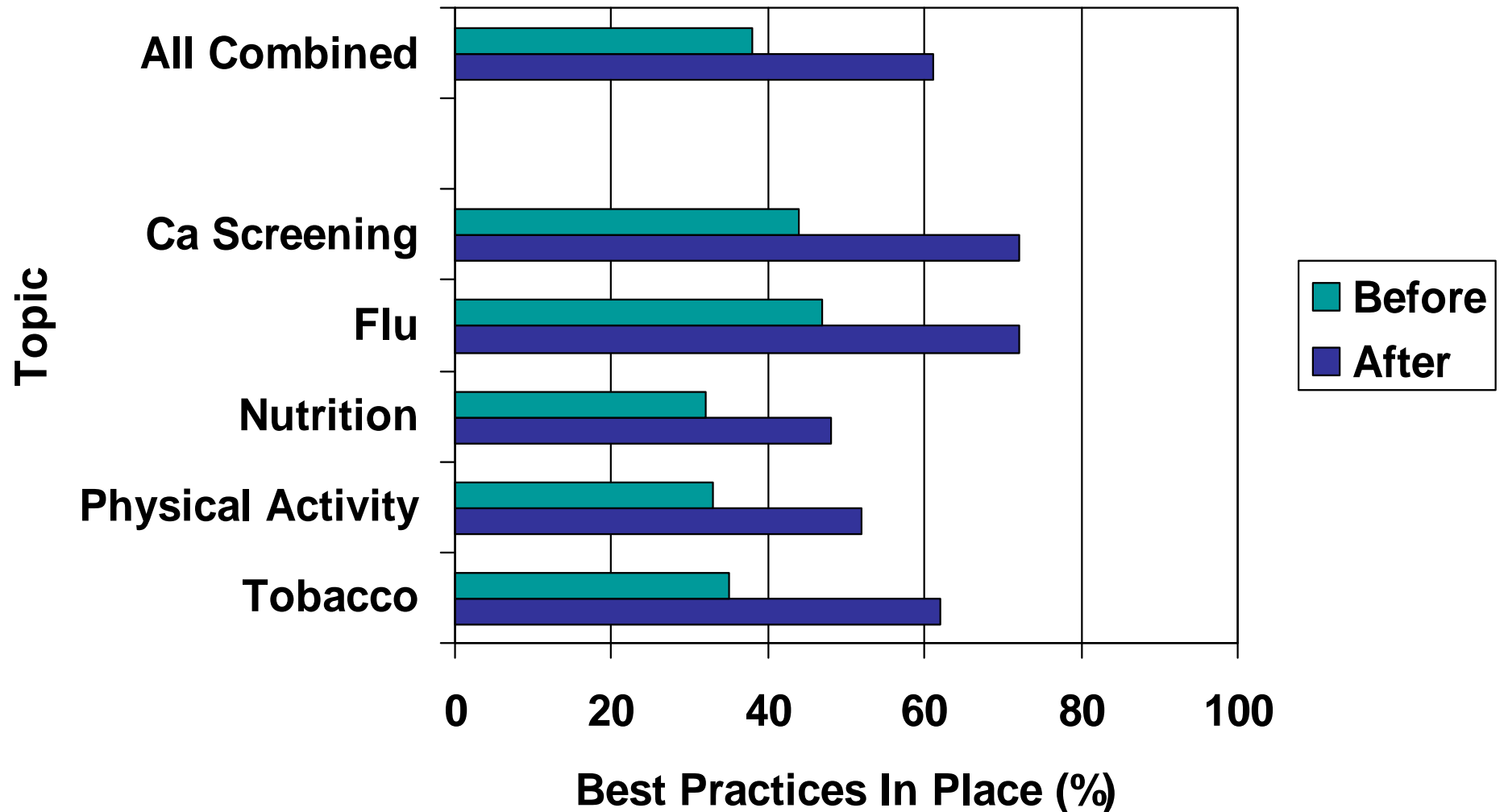
Provides options and resources

Did it Work?



Eight PNW employers. Harris JR et al. Preventing Chronic Disease 2008;5(3).

Big Improvement after WPS



Eight PNW employers. Harris JR et al. Preventing Chronic Disease 2008; 5(3).

ACS Workplace Solutions 10 Years After

900 ACS staff trained

WPS delivered to:

- 1,700 workplaces

- In 42 states

- With 6.9 million employees

Moving Into Mid-sized Workplaces

Mid-size: 100 – 999 workers

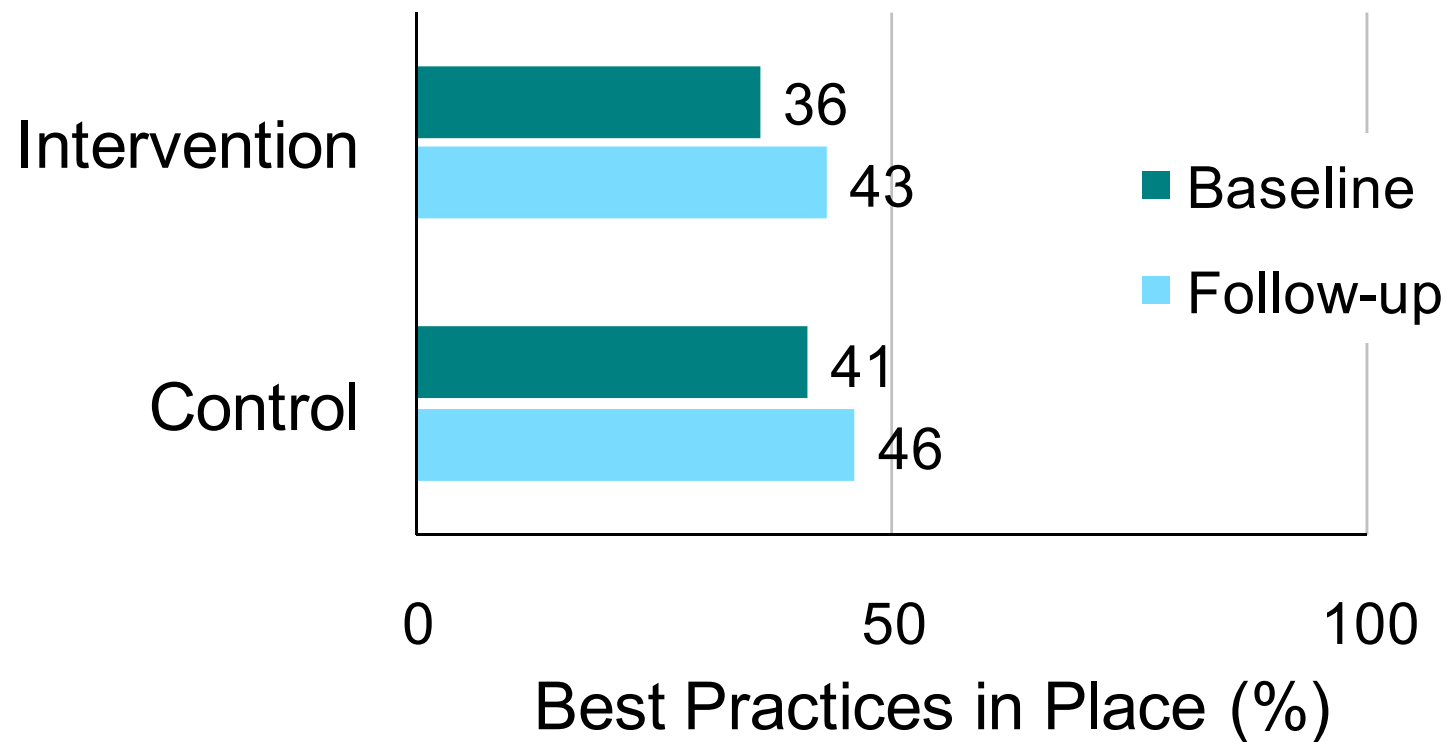
Average wage <\$50,000/year

Health insurance to full-time workers

Headquarters in King County



No Significant Improvement at Follow-Up



41 workplaces. Hannon PA et al. Am J Prev Med 2012;43:125-33.

What We Started to Learn

Everyone we work with wants a wellness program

Our approach to building a wellness program:

- Works great for some employers

- Helps other employers a little

- Doesn't work at all for others

If approach same, why varied effect?

Ask Them: Focus Groups

Design: 5 focus groups (90 min)

Setting: King County, Washington

Sample: Human resources professionals
Representing employers w/ 100-999 workers
5 large low-wage industries

Mixed Feelings About WHP

Potential: healthcare cost containment

“Wellness is part of being able to afford a health plan going forward.”

Potential: improved productivity

“You want them to feel well; you want them to be productive, and you want them to be at work...”

Delicate balance on intrusiveness

“...promoting health and quitting tobacco and losing weight – those are very personal subjects to people and they’re very touchy.”

Will it really improve health or reduce costs?

“They’re just really unhealthy and that’s not going to go away with a wellness program.”

Key Barriers to WHP

Money

“...there are limits...on what we can afford”

Time

“...wellness comes back to HR, and we don't really have enough people to keep it driving and moving forward...”

Logistics

“...with essentially ten locations and four states - plus a remote sales force of about 100 - I mean, how do we get to everyone?”

Lack of data

“It's very difficult to get any metrics (proving WHP works)”

Culture

“If (WHP) is foreign to the culture, then people don't have any...belief in it. It doesn't have any credibility”

Key WHP Facilitators

Turn-key programs and communications

"I need someone to give me the information...canned"

"It needs to be turn-key. Here it is, now lay it out"

Employee-driven

"...when you have an employee who is enthusiastic...it's just a lot easier for other employees to get around it (than a top-down approach)"

Management-level champions

"..if the executive staff are championing it, it's a lot easier..."



ADAPTING WPS FOR SMALLER WORKPLACES

ACS HealthLinks

20-250 workers

Four chronic disease behaviors

ACS delivers to workers at worksite

6 months



Comparing WPS and HealthLinks

WPS

Assess/Recommend/Toolkits

Target=large employers

15 Best Practices

Includes insurance

Connects employers with
vendors

HealthLinks

Assess/Recommend/Toolkits

Target=small/mid employers

~7 Best Practices

Does not address insurance

Connects employers with
vendors & free services

Wellness committees

Direct education from ACS

Connect Employees with Free Resources

Washington State Department of Health

Tobacco Quit Line

1-800-QUIT-NOW

toll-free

1-800-784-8669

QUITLINE.COM



Breast, Cervical and Colon Health Program

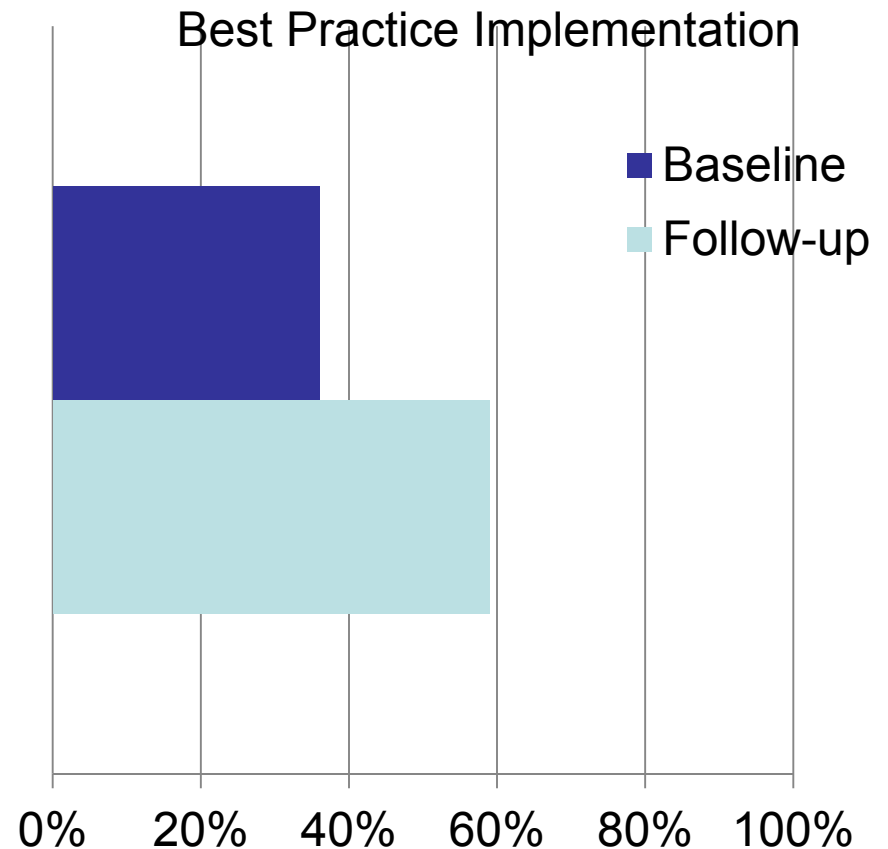
Saving Lives Through Early Detection

HealthLinks Pilot: Mason County, WA



Partner: WA Dept of Health

23 worksites



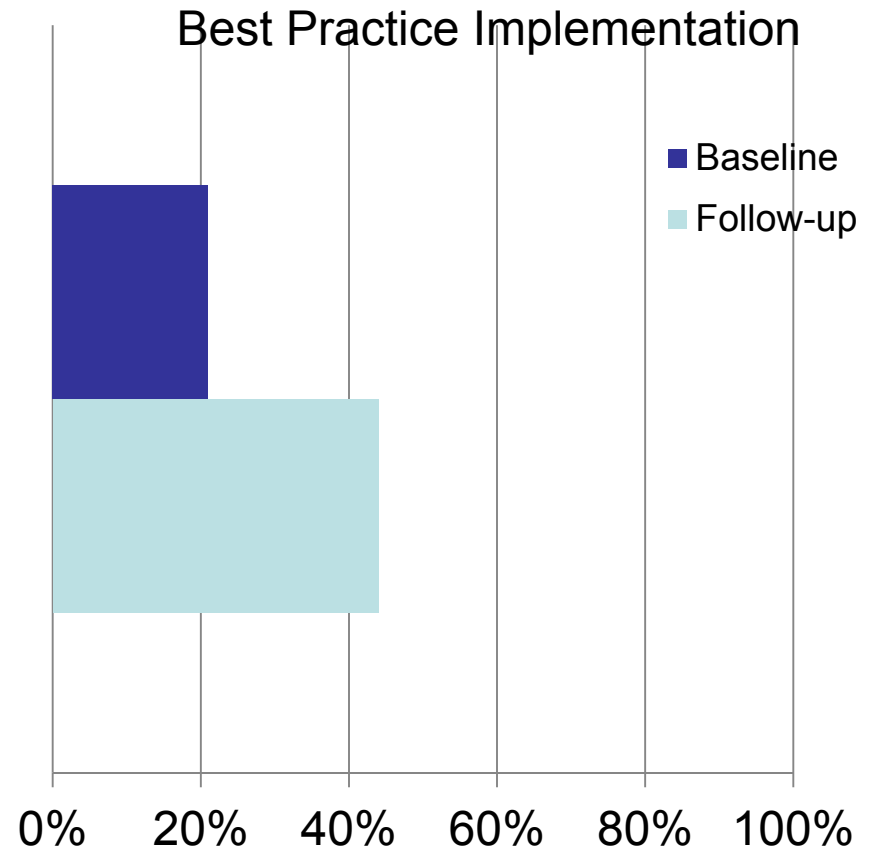
Laing S, et al. Prev Chronic Dis 2012;9:110186.

Communities Putting Prevention to Work



Partner: Public Health-
Seattle & King County

47 worksites



Acknowledgments

CDC

NCI

ACS

Public Health--Seattle & King County

Washington State Department of Health

Collaborators

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Kristen Hammerback, MA

Peggy Hannon, PhD MPH

ACS

Sara Teague

And 18 Others

Summary and Conclusion

Workplaces need evidence-based health promotion

Workplace size matters

TWH-ready

Need revenue model for smaller workplaces