Developing Culture of Health Metrics That Really Matter to Companies and Communities

Final Report

HERO

ABOUT THIS REPORT

This report was sponsored by the Robert Wood Johnson Foundation in partnership with the Health Enhancement Research Organization (HERO). This report is the final report for the project and was written with support and guidance from the HERO project steering committee. Special thanks go to these members who devoted their time and expertise for this report. Project steering committee members include:

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EXECUTIVE SUMMARY

This report explores culture of health collaborative efforts and the measures associated with those efforts. In particular, this work focuses on those strategies and measures that can be utilized by collaborations to engage nontraditional stakeholders such as the business community. Specific areas of focus include culture of health frameworks, collaborative case studies, measure perceptions and challenges/obstacles to engaging the business community.

The topics explored in this report are part of a broader conversation around the role culture can and should play in community and workforce well-being. There is some good evidence to suggest that a strong culture of health is associated with an individual's overall well-being, but HERO's (The Health Enhancement Research Organization) research into workplace based interventions focused on culture indicate there is a paucity of evidence concerning effective approaches to changing a culture of health and how such changes can impact the health of employees, families or communities.

Measures are an important part of this discussion because they can serve as a way to engage stakeholders, assess need, create momentum and encourage action. Many types of measures exist that have been used by community stakeholders. This report has explored those measures and offers insight into the perceived value of those measures by the employer community. In addition, challenges and obstacles to engaging employers beyond those associated with measures were explored and highlighted as future areas of exploration.

Culture of health efforts and community collaboration are vital to the health and well-being of our communities but may be only marginally successful without the engagement and support of the business community. This report provides important insight into challenges and strategies to engaging employers and, as you will see in our summation, HERO is eager to continue to partner with RWJF to address these challenges and mobilize employers for action in the years ahead.

To further partner with RWJF to create solutions for the challenges we identified in this report, we share the following summative observations and recommend next steps:

1. Community collaborations must have the ability to self-assess their progress for improvement and process their insights about what is working and about barriers to progress.
2. Collaboration leaders must understand the importance of and attain the skills needed to develop a strategy for employer identification and engagement in community work.
3. A strong body of evidence must be created that links community measures to organizational areas of focus.
4. An evidence based scorecard that supports communities in identifying best practices and that supports strategic planning in employer/community health collaborations is needed.
5. Networking opportunities must be created for community collaborations to share best practices and lessons learned.
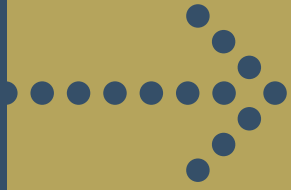
INTRODUCTION

This is the final report developed by the Health Enhancement Research Organization (HERO) as part of a grant funded by the Robert Wood Johnson Foundation (RWJF). This report represents efforts to better understand measures currently being used within community-wide culture of health efforts that matter to companies and communities.

HERO is a not-for-profit organization and national leader in employee health and well-being research, education, policy, strategy and leadership. HERO's vision is that "all workplaces will positively influence the health and well-being of employees, families and communities." Assessing, intervening upon and measuring the impact of a workplace culture of health is a priority on HERO's research agenda and is currently a focus of several HERO research efforts. Our most substantial endeavor per this agenda has been our working partnership with RWJF that launched the Healthy Workplaces Healthy Communities website (Get-HWHC.org), which is designed to offer resources and examples to employers who are interested in engaging in community-wide culture of health efforts. As a result of this work, HERO is creating a body of knowledge that will aid the RWJF efforts to engage employers in healthy community efforts across the country.

Project Purpose and Report Scope

The goal of the overall Culture of Health Measures initiative was to identify, develop, and test a set of measures that will support both employers and communities as they collaborate to address and successfully impact the culture of health for various populations. The initiative included three phases:
1. Environmental Scan
2. Measure Selection
3. Measure Testing

This report is a culmination of all three phases of the work and includes a detailed review of the initial environmental scan, data collection and final recommendations. In addition, the appendix of this report includes data collection agendas and surveys used for the data collection phase.

The process of collaboration between employers and communities is a partnership that changes over time. As a result of these process flows, measures that matter to employers also change over time. For example, measures that are important to employers during the early engagement stage of an initiative may be different from specific program measures (e.g., obesity rates) that may also appeal to an employer as an initiative develops goals and programs. This report explores sets of measures that matter to employers for both initial engagement as well as long-term involvement. Although program measures are very specific to the needs assessment and goals of individual communities, there are universal areas that are important to employers and should be considered in the measure selection process. For example, hiring productive and healthy employees may be a common concern for employers. Linking healthy community measures to an outcome of a healthier pool of potential workers will likely resonate with employers.

Culture of Health Defined

Many different definitions of a culture of health concept exist and are often focused on a specific set of stakeholders such as employers, communities or individuals. For the purpose of this report, the definition of a culture of health is based on RWJF's recent work in this area.

> A culture of health is viewed as one in which individuals and social entities (e.g., households, organizations, etc.) are able to make healthy life choices within a larger social environment that values, provides and promotes options that are capable of producing health and well-being for everyone regardless of background or environment. In short, the healthy choice becomes the valued and easy choice (RWJF, 2014).

Culture of Health Action Framework
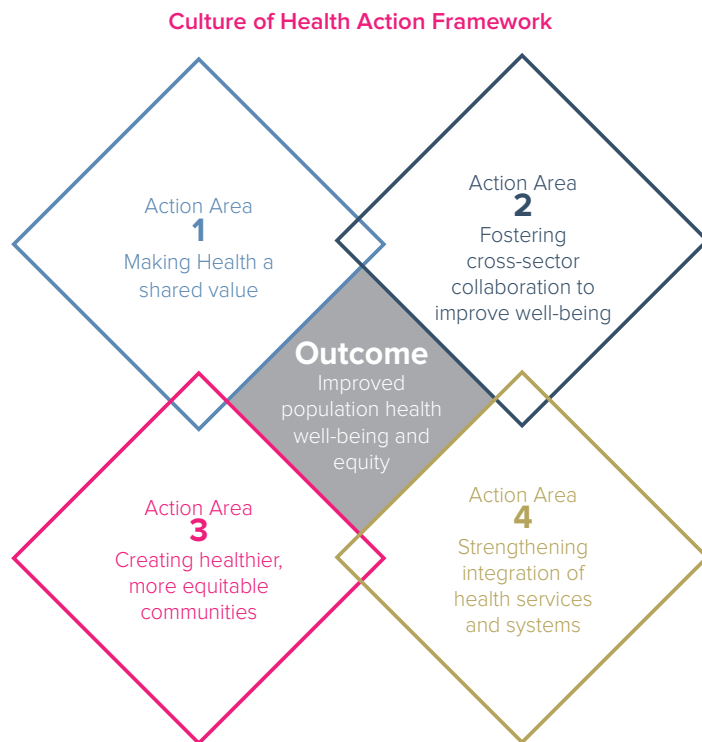
The RWJF Action Framework represents the components that are essential to improving population health and motivating culture change. Each action area overlaps with the other areas to represent the influence and interdependence that exists between all of the identified areas. The work represented in this report focuses mostly in Action Area 2, fostering cross-sector collaboration to improve well-being, but the information gathered and the findings are certainly applicable across all areas. Further, health system organizations are identified as a convener or included as part of the governance structure of the initiatives studied, clearly suggesting that the work included in this report is applicable to Action Area 4 as well.

Why Are Measures Important to the Discussion?

Measures are important to all collaboration efforts. Measures can support the assessment of progress or impact as well as encourage action and collaboration. Measures are a critical part of any effort and should be carefully chosen so that only those items that are important are measured, with the realization that ultimately what we measure is what is

valued. If agreed upon by all stakeholders, measures can enhance both collaboration and communication among diverse groups and create a unified approach to action. For these reasons, identifying measures that matter for any effort is essential and even more so for a concept such as culture of health, which can mean different things to different stakeholder groups. Martin Seligman (2013), a researcher known for broadening the science base in social psychology and credited for advancing the concept of positive psychology in a field not customarily attuned to rapid science innovation, suggested that measurement can:

- Help create the value statement;
- Assess intervention impact;
- Capture a population's interest;
- Create momentum and evidence for policy change;
- Create a basis for dialog and action; and
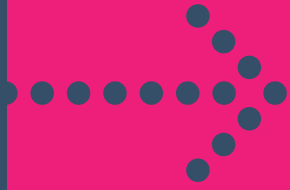- Shift the focus to outcomes and results.

Advancing a culture of health as a fundamental driver of improvements in the public's health will benefit from metrics that facilitate each of these six domains. Unleashing these domains with effective metrics will also serve to move stakeholder groups with a diversity of opinions and objectives (i.e. between community and company leaders) toward common ground and language and enable cooperation around shared goals. Often these measures are chosen once the initiative's mission and goals are clear and the collaborative is moving forward using a methodical process. However, effective planning and implementation processes typically benefit from measures early on in a process that a collaborative can utilize to attract and engage nontraditional stakeholders such as employers. These measures can be used to engage all stakeholders at various levels and set expectations from the beginning. We examine both early adopter measures as well as long-term, goal-focused measures in this report.

Process Overview

There were several phases to this project, and each is discussed below. Overall, the project process can be captured in this Process Flow diagram:

Environmental
Scan completed and stakeholders identified

Community SME Feedback
via online survey

Employer SME Feedback
via in-person discussion forum

Guiding Framework Draft Measure Areas developed

Site Visits, Collaborator Discussion, Employer Focus Group

Final Recommendations developed for RWJF review

ENVIRONMENTAL SCAN RESULTS

The goal of the first phase of this effort was to provide a summary of current efforts in community-wide culture of health initiatives through a scan of the existing literature, expert interviews, and a comprehensive overview of current tools, models and frameworks currently being deployed in culture of health related initiatives. The report included a summary of thirteen expert interviews as well as detail on several existing measurement tools and frameworks used in culture of health efforts at both the employer and community levels. Although the process of collaboration between employers and communities, as well as the implementation of strategies and interventions to raise the overall culture of health, are important concepts, this report was focused on the measurement aspect of initiatives that included a component of a culture of health.

This phase yielded several important findings. Overall, the Scan found that peer-reviewed literature specific to culture of health was limited, but literature related to broader topics such as health and wellness and organizational support were more extensive.

Much of the literature identified that focused on a culture of health has been developed in the context of an employer setting. Culture of health is often associated with health and wellness as a strategy employers utilize to enhance health and wellness activities and engage employees. Several workplace related culture of health models (Environmental Scan, 2014) suggest that components of a culture of health strategy would include:
- Leadership engagement
- Environmental focus (physical and social)
- Employee engagement
- Assessment
- External efforts (home, family, community)

Culture of health literature outside of the workplace was scarce and focused on stakeholder

engagement, the role of collaboration, and the use of measures to assess the needs and impact of communities (Aldana, 2012).

The Environmental Scan also offered several examples of frameworks and measurement tools aimed at a culture of health. Measurement tools highlighted in the report focused on assessing the environment, the perception of employees and outcomes. Well-being was an area often included in measuring the outcome of a strong community-wide culture of health. Several frameworks (e.g., Blue Zones, UK National Well Being, State of Well Being Australia Model, Samueli Model) include well-being in their models. Some researchers suggest that improvements in well-being or quality of life would be a meaningful outcome that all health, wellness and culture work could strive to achieve. There is recognition, though, that well-being and quality of life are less sensitive measures that change slowly over long periods of time. As a result, other more sensitive measures (e.g., process measures) are often recommended.

> **Overall, the Scan found that peer-reviewed literature specific to culture of health was limited, but literature related to broader topics such as health and wellness and organizational support were more extensive.**

The final section of the Environmental Scan highlighted six collaborations, each with a different convener. The goal of this section was to offer a broad view of collaborations and conveners for community-wide efforts. Examples highlighted in the report include:
- Anchor Institution Led Model – Drexel University
- Healthcare Led Model – HealthPartners
- Employer Led Model – Dow Chemical
- Community Led Model – Healthy Chicago
- Multi-Partner Led Model – Polk County – United Way
- External Partner Model – Blue Zones
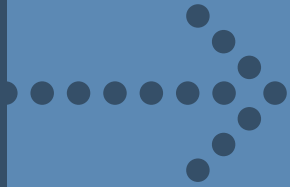
DATA COLLECTION / ANALYSIS

There were five data collection events used for the final report analysis. The first two provided insight into measures that were currently being used and the perception of these measures by both community collaborators and employers. Information was gathered on successes and challenges engaging employers in community work during these events.

The second set of data collection events was used to gather additional insight into engaging employers, the role measures played in engagement and level of engagement. These events included eight site visits and two discussion groups. The table below lists each of these events.

Event Type	Attendees	Topics Discussed
SME Discussion Group	Employers	Community collaboration and measures
Community Collaborator Online Survey	Community Collaborators (non-employers)	Measures used Success and challenges engaging business
Site Visits (8 total)	Collaboration leadership groups and engaged business leaders	Measures Role of the convener Business engagement motivation
Convener Discussion Group	Site Visit Conveners	Use of measures Successes and challenges engaging business
Employer Measure Focused Discussion Group	Employers	Measures that matter

SME Discussion Group
Goal: Gather feedback from topic experts on employer collaboration in community efforts and the use of measures to help define what elements of a

community health initiative are of significant value to participating employers and other community stakeholders.

Overview: The first discussion group was held in October 2014 and included employers, researchers and community focused experts. Employers attending the group discussion represented large and midsize employers mostly from the manufacturing sector. A total of 18 experts attended the event. The discussion guide is included in the Appendix of this report. The discussion focused on gathering feedback specific to employer collaboration, the value of measures and the identification of specific measures.

Findings: Discussion themes were organized into three main categories: challenges, learnings, opportunities. Topics included in each of these themes are represented below. The experts agreed on an overarching theme that education to employers and evidence demonstrating the link between community health and organizational health were keys to successfully engaging employers in healthy community efforts. The group also reached consensus on a two-part guide to the selection of measures that matter to employers and the community.
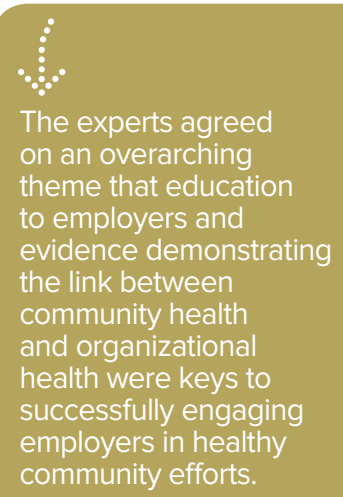**Part 1 –** Start with principles of what to expect from measures, which should include outcomes oriented measures specifically addressing community needs.

Part 2 – Organize into a framework with categories that fit into domains of interest to employers and the community.

Online Survey
Goal: The goal of the online survey was to gather information regarding measures used and employer engagement from non-employer stakeholders engaged in community work.

Overview: Community subject matter experts were identified through in-depth interviews and the identification of healthy community initiatives

The experts agreed on an overarching theme that education to employers and evidence demonstrating the link between community health and organizational health were keys to successfully engaging employers in healthy community efforts.

Challenges

- Measures and language are interconnected.
- Employers lack a clear understanding of measures and how they can be translated to organizational benefits.
- Lack of strategy and process in community collaboration frustrates employers.
- Lack of trust and perceived credibility is prevalent among employers.

Learnings

- Good health starts with employer and expands to the community.
- Selecting measures and goals is a parallel process.
- Employers are more likely to engage if their own mission goes beyond business.
- Credible partnerships must be created to ensure success.
- It matters why employers come to the table and impacts engagement and long-term commitment.

Opportunities

- Social constructs must change in order for businesses to see themselves as a part of the solution.
- Must help employers understand, validate and demonstrate the link between health and what matters to them.
- Menu of measures must be developed so that collaborations can select measures based on goals and needs.
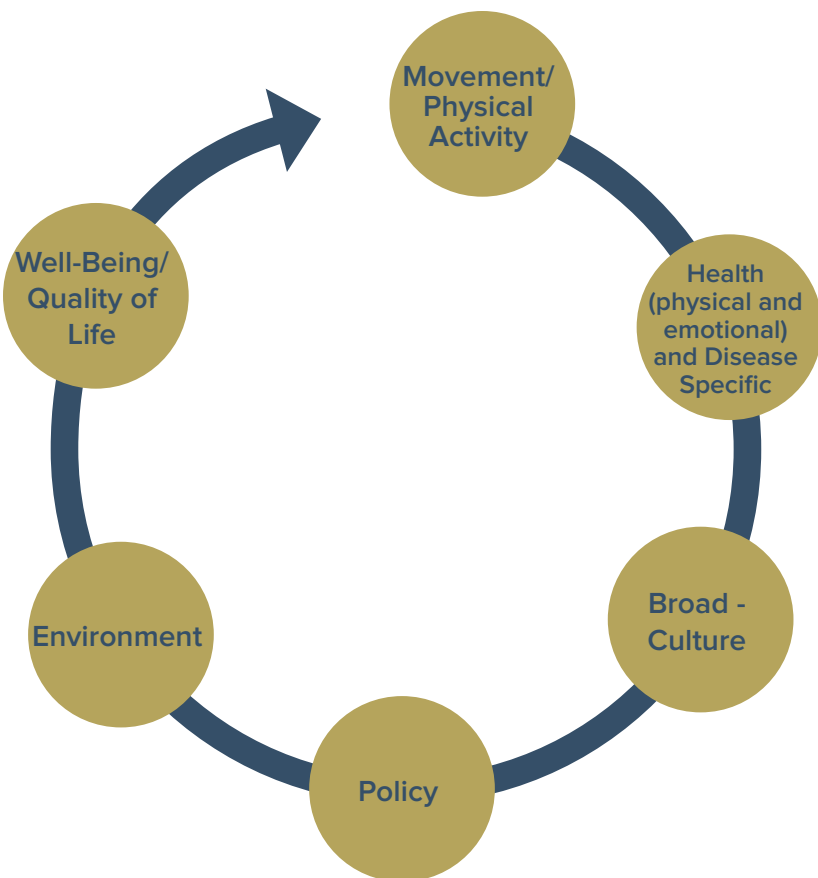
across the country. Several past RWJF Culture of Health winners were also invited to offer comment and feedback. The SMEs were sent an electronic survey that included questions related to recommended measures for culture of health efforts, perceptions of the roles of stakeholders, suggestions on how to engage stakeholders in community focused culture of health efforts and the challenges to engagement. The survey is included in the Appendix of this report.

Sample: The survey was sent to 25 community experts and 15 responded (60% response rate). The sample included representatives from public health, universities, school districts, community development, United Way and the YMCA.

At a high level, respondents felt that measures must be easy to collect, real-time, holistic and relevant.

Findings by Category:
Measures: At a high level, respondents felt that measures must be easy to collect, real-time, holistic and relevant. Measures offered as important were organized into the following categories:

Movement/ Physical Activity

Health (physical and emotional) and Disease Specific

Broad - Culture

Policy

Environment

Well-Being/ Quality of Life

Measures List		
Quality of life in a community	Level of activity among a community population	Overweight/obesity prevalence in the community population
Substance use prevalence	Graduation rates	Emotional health
Teenage pregnancy rates	Access to healthcare	Health insurance coverage
Availability of affordable and acceptable housing	Environment – walkable paths, parks, etc.	Access to healthy food
Disease prevalence such as diabetes	Health disparities	Stress level of individuals living in the community
% of population practicing healthy behaviors	% of population without a chronic disease	% of population being engaged in fulfilling work, family and leisure activities
Ratio of bottled water to sugary drinks sold	# of employee sick days across organizations	

Suggested Measure Criteria:
- Evidence based
- Sensitive
- Transparent
- Scalable
- Representative
- Demonstrates value to multiple stakeholders
- Potential for success

Stakeholder Role in Healthy Community Collaborations

Respondents generally agreed that stakeholders need to work together to drive a community effort. In addition, the group must be diverse and represent all groups living and working in the community.

Engaging Business

Respondents reported that, overall, there is little engagement from employers, but when involved employers serve in many different roles, including serving on committees and raising funds. There is an interest in programs that address graduation rates and workforce development.

Challenges to Engaging Business
- Lack of time
- Frustration with pace
- Not aligned with goals
- Difficulty understanding the value to the organization

Strategies to Engage Business
- Make the link to improvement in workforce and productivity
- Involve them early in the process
- Work through credible community leaders to engage business
- Link to economic development

Site Visits

Eight sites were selected for Phase III and are identified on the map below. Analysis from the first two data collection efforts suggested that employers that were engaged early on in an effort were more likely to stay engaged at a high level. Recognizing that measures would not be selected at this early stage, site visits included interview questions that would shed light on the aspects of a collaboration that motivated early engagement from employers. In addition, interviews with non-employer stakeholders focused on gaining deeper insight into their strategies to identify and engage employers. The site visit interview guide is included in the Appendix of this report.
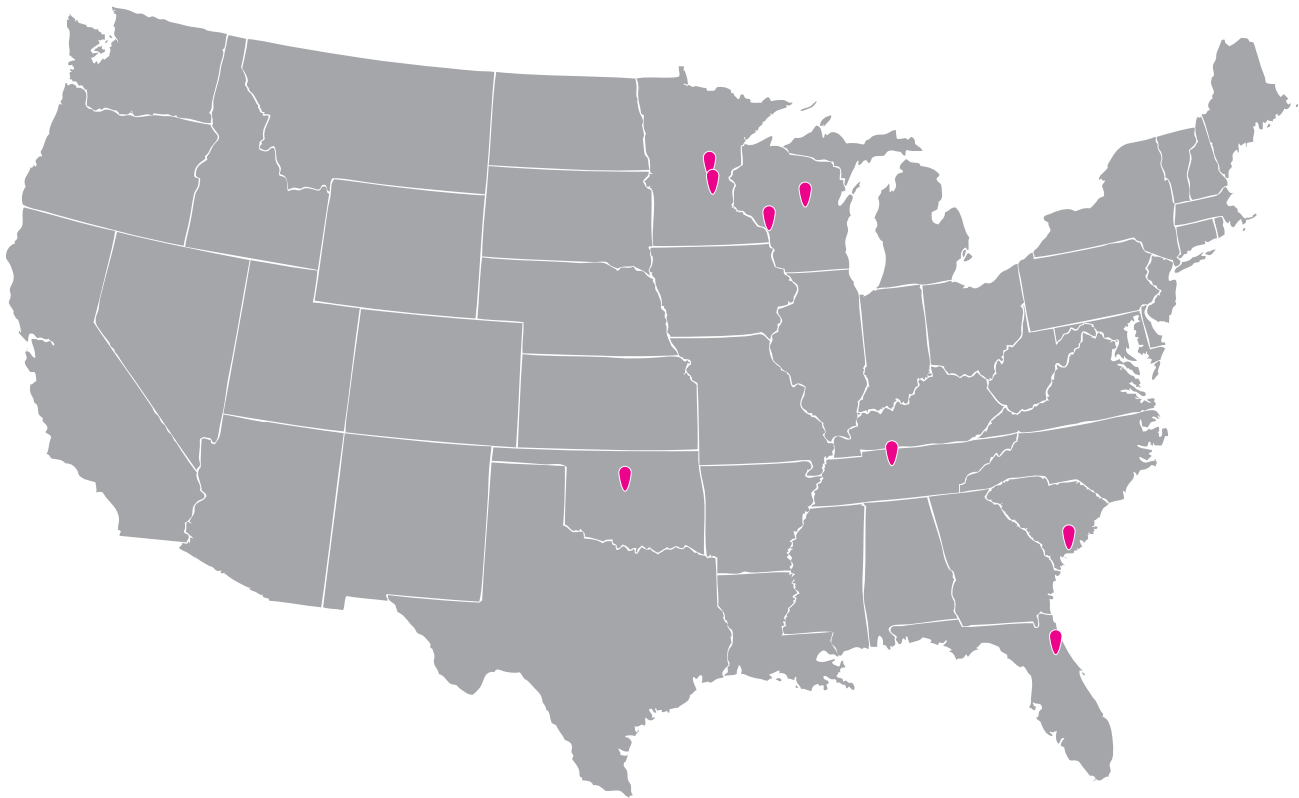
South Carolina — Working Well

Convener: South Carolina Hospital Association
Age of Collaboration: 5 years
Location Description: Statewide initiative
Initiative Description: The initiative is led by the statewide hospital association, which partners with regional hospitals to encourage and implement health and wellness efforts. The initiative was originally focused on hospital employees but quickly expanded to the community as well as employers and the local government. To date, 101 hospitals and businesses have committed to the initiative across the state.
Measures Used: Measures sets related to nutrition, physical activity, tobacco and culture of wellness
Visit Overview/ Data Collection: Two-day site visit included interviews with the leadership of the hospital association, hospital partners, academic institutions and community partners.

La Crosse, Wisconsin —

Convener: La Crosse Health Science Consortium
Age of Collaboration: 22 years

Location Description: Regional – Multi-state initiative

Initiative Description: The La Crosse Health Science Consortium is a collaboration between Western Technical College, University of Wisconsin La Crosse, Mayo Clinic, Gundersen Health System, and Viterbo University. The goal of the Consortium is to focus on regional health improvement and health care and to support applied research in health and medically related disciplines. The Consortium began community work in 2005 and was recently awarded a 12-month RWJF action grant to help the Consortium strategically plan for additional community work.

Measures Used: The Healthy County initiative does have a dashboard that includes: chronic disease indicators, mental health indicators, injury and violence indicators, infectious disease indicators, smoking status, alcohol status, violent and property crime, depression risk, Chlamydia rates, other infectious disease rates.

Visit Overview/ Data Collection: Two-day site visit included interviews with the leadership of the La Crosse Health Science Consortium and several members of the advisory board. Also participated in the Advisory Board meeting for the new RWJF Impact Grant.

Waconia, – All's Well Waconia

Convener: Ridgeview Medical Center (largest employer in the area – integrated delivery system)

Age of Collaboration: 5 years

Location Description: City initiative with plans to expand countywide

Initiative Description: The initiative is led by the local hospital and the hospital's Executive Director of Strategy and Organizational Effectiveness. The initiative is governed by an advisory board that includes a variety of stakeholders including small business and local government.

Measures Used: Process measures focused on event attendance

Visit Overview/ Data Collection: Two-day site visit included interviews with the leadership of the hospital and members of the initiative's advisory board. Also toured several sites and attended a community forum for the effort.

Northeast Florida —

Convener: PGA and the Clinton Foundation

Age of Collaboration: 2 years

Location Description: Regional initiative focused on northeast Florida

Initiative Description: The initiative is funded by the PGA and led by the Clinton Health Matters Initiative (CHMI). The initiative began with a convening of community stakeholders to develop a "blueprint for action" document. The blueprint document identifies core strategies (bold action steps) for the initiative. The following bold action steps were identified for the region:
- Education, employment and income
- Family and social support
- Community safety
- Substance abuse, tobacco and alcohol use
- Healthy eating and food quality
- Physical activity
- Sexual activity
- Clinical care - access to care and quality of care
- Environmental quality and built environment

Measures Used: None yet

Visit Overview/ Data Collection: Two-day site visit included interviews with the leadership of the hospital association, hospital partners, academic institutions and community partners.

Wausau, Wisconsin - Healthy Marathon County

Convener: County Public Health Department

Age of Collaboration: 7 years

Location Description: County level initiative

Initiative Description: The board is led by the county public health director and works to bring together organizations in the community for health improvement. Goals of the initiative include:
1. Create conditions for collective impact around a common agenda to be the healthiest county in Wisconsin.
2. Healthy Marathon County board members need to be working with co-chairs of the Action Teams.
3. Board and action teams must have an

understanding of Community Health Assessment, the Community Health Improvement Plans and Processes, and the role of the board in each of the steps.

Measures Used: Track needs assessment data

Visit Overview/ Data Collection: Two-day site visit included interviews with the leadership of the effort as well as key stakeholders representing employers, health care and local government. Also attended the quarterly advisory board committee meeting and toured several of the local sites.

St. Cloud, Minnesota — Workplace Well-Being

Convener: Greater St. Cloud Economic Development Corporation, St. Cloud State University and CentraCare Health

Age of Collaboration: 1 year

Location Description: Regional initiative

Initiative Description: The initiative is a partnership between Centracare Health, Greater St. Cloud Development Corporation and St. Cloud State University. The goal of the effort is to improve the health and well-being for employers and employees living and working in the St. Cloud region. The effort is very well organized and includes seven strategic process steps that are clearly defined in the mission.

Measures Used: Well-being (Gallup/Healthways assessments)

Visit Overview/ Data Collection: Two-day site visit included interviews with the leadership of the hospital association, hospital partners, academic institutions and community partners.

Nashville, Tennessee — Nashville Health

Convener: Dr. Bill Frist, former U.S. Senate Majority Leader

Age of Collaboration: 1 year

Location Description: Regional effort

Initiative Description: The initiative is very new and focused on improving health and culture of health in the Nashville area. Recently received RWJF support to kick off the initiative and currently recruiting advisory board members. First advisory board meeting will be late 2015. Three focus areas include smoking cessation, hypertension and infant mortality.

Measures Used: None yet

Visit Overview/ Data Collection: None yet

Oklahoma — Work Healthy

Convener: Oklahoma Hospital Association

Age of Collaboration: 2 years

Location Description: Statewide initiative

Initiative Description: The initiative is led by the statewide hospital association, which partners with regional hospitals to encourage and implement health and wellness efforts. The initiative is young and focused on hospital employees but plans to expand into the community soon. The Oklahoma Hospital Association launched Work Healthy Hospitals in 2013 in partnership with Prevention Partners and is funded by the Oklahoma Tobacco Settlement Endowment Trust.

Measures Used: None yet

Visit Overview/ Data Collection: Phone interviews with leadership and one partner hospital. Site visit being discussed for late 2015.

Methodology

A narrative/phenomenological qualitative design was used for the data collection phase of the project. Sites were selected based on the criteria below, and the sample size criteria was designed to gather a large enough sample to reach saturation in the data collection themes and insights.

Site Section Criteria:
- Convener type
- Geographic location
- Size of the initiative
- Health of the population
- Funding mechanisms

Data Collection Summary Table

Site	Group Feedback	Interviews	Employer Specific Interviews
La Crosse	1 – Advisory Board	5	4
St. Cloud		9	9
Wausau	1 – County Board	7	3
Waconia	2 – Steering Committee, Community Forum	11	6
Jacksonville	1 – Steering Committee	7	6
South Carolina	1 – Community Event	7	4
Nashville		1	
Oklahoma		3	1
Total	6	50	33

Interview process:

Both focus groups and in-depth interviews were used to informally explore the Phase II measures and related concepts. Interview participants for each of the selected test sites included the conveners as well as a variety of stakeholders currently engaged in the initiative. In addition, stakeholders not engaged, specifically employers, were also interviewed during the test site visits. Topics included in the interviews explored many areas related to the initiative and stakeholder engagement, as well as questions specific to the key measure topics identified in Phase II. Employers were asked to offer feedback on areas specific to engagement and to prioritize those attributes that most influenced their decision to be engaged in the collaborative, and at what level. The results of the prioritization exercise are included in the table that follows. Additional information and observations about each of these attributes follow the table.

Employer Prioritization Grid

Order of Priority	% Pick as either 1st or 2nd Priority
1 - Credibility of the convener	41%
2 - Broad representation from the community	30%
3 - Identify with mission or goals	27%
4 - Individual commitment to health and wellness	10%
5 - Organization commitment to health and wellness	6%
6 - Demonstrated commitment from collaboration leadership	6%

Credibility of the Convener – The professional and personal attributes of the convener was an important reason for staying engaged in a community collaboration for the majority of employers interviewed for this report. Although credibility was the variable being explored for the purposes of a measure, other attributes of importance regarding the convener were also highlighted by several employers. These included the likelihood of the convener being successful, sense of readiness of the convener to change or drive change, health knowledge of the convener and the ability of the convener to be seen as neutral. Employers were also asked to identify the attributes of a credible convener. In general, attributes discussed included:

- Champion for the mission/goal
- Brings tools and resources to the effort
- Seen as a leader in the community
- Seen as a leader in the space
- Does not need to be in the spotlight
- Broad perspective

• Brings thought leadership
• High impact
• High trust
• Authentic

Broad Representation From the Community –
Most employers discussed the need to see other employers around the table in order to commit fully to the effort. Employers, particularly smaller employers, looked to the collaboration as a potential networking opportunity, so broad representation from many different sectors was seen as the best possible scenario. Other employers, particularly those in smaller communities, could identify the champion employers in the community and would be more likely to engage if one or several of those community champion employers were present. When asked to define what a community champion employer looked like, employers typically commented that these champions were either the largest employer in the area or an employer with a history of committing resources to community efforts.

Identify with Mission/Goals – The ability to identify with the goals or the mission of the collaborative was very important to many of the employers interviewed. Several employers also stated that a sense that the mission/goals could be accomplished was equally important. In addition, several employers stated that they would engage in a collaborative with a weak convener and a strong mission, but they would not engage in a collaborative that had a weak mission but strong convener. When asked what attributes were associated with a mission/goals that would engage employers, the following attributes were suggested:
• Broad
• Worthwhile and important to the community
• Health as part of the core mission
• Perceived in the community as an important mission/goal
• Clearly articulated

Individual Commitment to Health and Wellness –
Many of the employers and other collaborators interviewed for this effort had a strong commitment to health and wellness but stated that their level of engagement was not due to their own interest

in the topic. Smaller initiatives did have several stakeholders more likely to prioritize this measure at a higher level, but when asked if their organizations would continue to be engaged in the initiative if they left the company, the answer was "no". This response suggests that individual commitment may be as important to sustainable engagement as the level of the business's engagement. Other variables may exist that are more important for long-term engagement of a company, but our findings suggest that a strong, committed individual representative from a company is critical.

Organization Commitment to Health and Wellness –
Although this variable was not prioritized at a high level by employers, several employers interviewed were extremely committed to a strong health and wellness culture within their organizations. These employers could be defined as wellness champions for the initiatives they were involved in because they often played a very engaged role in the community initiative and led recruitment efforts to engage other employers in the community as well. It was clear in the discussions that if a champion company was interviewed, they had a very strong wellness culture. The sample of champion employers interviewed for this work was small and we may need to do more research to truly understand the importance of this variable, but there is some indication that champion companies can be excellent conveners for community-wide culture of health efforts and can also conduct successful outreach to other employers and important stakeholders in the community.

Demonstrated Commitment From Collaboration Leadership – Although this variable was rated the least important, there was some discussion around the idea of authenticity among the leadership and the role that authenticity plays in engaging other stakeholders in the effort. During several community forum focus groups, the majority of community members highlighted the excitement and authenticity of the leadership group as the reason for success and for the high level of engagement from the community and other stakeholders.

Convener Discussion Group
Goal: Gather additional insight from collaboration

leaders regarding stakeholder engagement, measures selection, challenges and barriers.

Overview: Through the test site visit interviews, it became clear that healthy community collaboration leaders struggled in several areas including process and strategy, stakeholder engagement, measure selection and long-term funding. In addition, interview data suggested that conveners often felt unsure that they were progressing at an appropriate pace and expressed that they felt "alone" in their efforts to improve the health and culture of their communities.

To address these concerns and to gather additional data on the various areas of concern, we gathered leaders from each of the selected sites for a day-long discussion regarding success, challenges and measures needs. The discussion guide is included in the Appendix.

Findings: Overall, participants appreciated the opportunity to network and hear about the work of other collaborations. There was a general sense of uncertainty among the participants regarding their work to date, resources and the ability to find the right measures. Each participant was asked to describe the one thing that would help them succeed in their community effort. These responses highlight the needs of collaboration leadership, specifically regarding measures and stakeholder engagement.

- A way for partners involved in community work, regardless of project, to recognize if not making progress or going slowly that everyone else is too

- A better way to evaluate our work as it relates to the impact on the community and the value our effort has brought to the community
- We need to do a better job of documenting more along the way (collecting data, documenting tools used).
- More time to volunteer – models for how to devote employee time to community work
- Help non-traditional partners to take ownership in their piece of work and how it relates to them.
- Having healthcare see ourselves as part of the solution and admitting we're part of the problem/challenge. Reengineer what healthcare looks like (not sick care).
- Data! We need baseline data and a way to incorporate self-reported data and integrate with hospital discharge and claims data.
- Magic business model for healthy community efforts
- Impact measures
- Create a set of online video testimonials from authentic people, credible experts (lay people) on value of health and well-being to give people the words to change culture (for CEOs, human resources folks, and frontline employees), whatever the organizational unit.
- That the community would find the value in the convener and pool together to fund staff
- More money for wellness programs

Organizational Areas of Focus

(Performance, Productivity, Safety, Attract/Retain Talent, Worker Engagement, Employee Satisfaction, Social Responsibility, Profitability, Corporate Reputation, Sustainability, Continuous Quality Improvement, Managing Healthcare Costs, Employee Health and Wellness)

Employer Measure Exploration Discussion Group
Goal: Gather employer feedback on areas of importance and their perceptions of the utility of select measures.

Overview: Eight employers representing manufacturing (midsize and larger) and universities were gathered together to discuss and reach consensus on areas that are important to employers and to prioritize measures based on those areas of importance.

Findings: Employers discussed areas that were most important to their leadership. Participants noted that their efforts relating to community involvement must support one, some or all of the measures of interest that follow. The group reached consensus on the following variables of importance to the development of a measurement approach.

The attendees were then asked to prioritize (low, medium, high) the set of measures that were suggested by the community subject matter experts

in the online survey. Individual priorities varied by business sector and access to data related to employee population risk and costs by disease. The discussion regarding each measure and level of priority tended to focus on three attributes:

1. The ability to draw a clear line from the measure to one, some or all of the organizational areas of focus highlighted above
2. The ability to convince leadership that there was a clear evidence based link
3. The measure's impact on clear health/risk issues prevalent in the employee population (identified through claims, etc.)

Measures by Priority
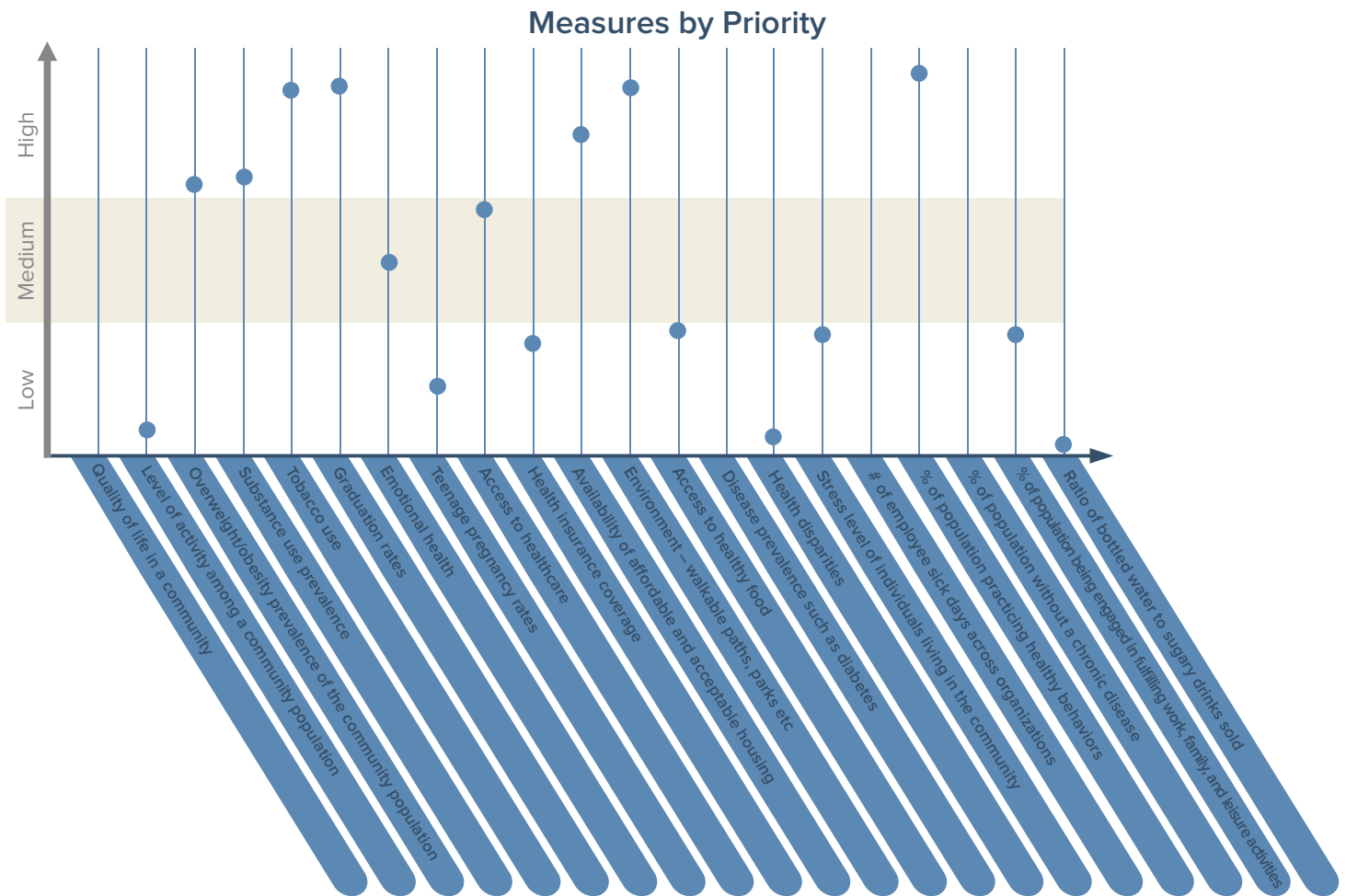
Additional Measure Suggestions: Employers were asked if there were any missing community-related measures that would matter to their organizations as well. The following measures were recommended:

| |
|---|
| Workforce skill readiness |
| Transportation |
| Daycare access |
| Elder care access |
| Life satisfaction |
| Cost and quality of available healthcare |
| Dental health (access and affordability) |
| Screening rates |
| Overall fitness levels (think pacer) |
| Financial fitness |
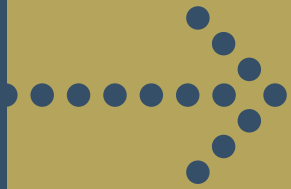
SUMMARY / CALL TO ACTION

This report has explored employer-community collaborations at a very comprehensive level. Through both the Environmental Scan and the analysis of data collected through discussions, surveys and focus groups, we have gained valuable insight into the role of measures to both foster and enhance employer engagement. In addition, we have explored the overall process of employer engagement and have been able to identify both best practices and opportunities for improvement.

The work of RWJF and others has created a momentum around sustainable improvements in community, culture and health. This report validates the role of employer-community collaborations as a key contributor to this momentum. Although the insight gained through the work highlighted in this report helps to frame the discussion, there is still more work to be done.

In order to achieve a high level of engagement and collaboration from a broad and diverse group of employers in community collaboration, the action items on the right must be addressed.

1 Community collaborations must have the ability to self-assess their progress for improvement and process insight purposes.

2 Collaboration leaders must understand the importance of and attain the skills needed to develop a strategy for employer identification and engagement in community work.

3 An evidence based scorecard that supports communities in identifying best practices and that supports strategic planning in employer-community health collaborations is needed.

4 A strong body of evidence must be created that links community measures to organizational areas of focus.

5 Networking opportunities must be created for community collaborations to share best practices and lessons learned.
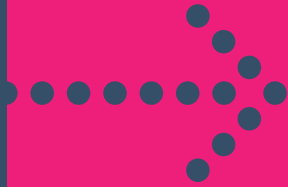
APPENDIX

A. HERO Forum – Thought Leader Discussion Agenda

B. Community Subject Matter Expert Measures Survey Questions

C. HERO-RWJF Culture of Health Measures Identification Test Site Interview Guide

D. Employer Focus Group - Measures that Matter

A - HERO Forum – Thought Leader Discussion Agenda

Introductions

Level Setting
Review RWJ Goals
Review HERO World Café
Review Phase I Environmental Scan
Review Phase II/III Goals and Objectives

Discussion

How should employers engage in community health efforts?

How can measures be used to demonstrate value internally to employers and externally to community?

What might these measures look like?

B – Community Subject Matter Expert Measures Survey Questions

This survey is designed to gather your thoughts, experiences and opinions related to measuring community efforts related to a culture of health. We are specifically interested in measures that have resonated with a broad set of stakeholders engaged in healthy community efforts and in particular the business community. A culture of health can be defined as:

A culture of health is viewed as one in which individuals and social entities (e.g., households, organizations, etc.) are able to make healthy life choices within a larger social environment that values, provides and promotes options that are capable of producing health and wellbeing for everyone regardless of background or environment. In short, the healthy choice becomes the valued and easy choice.

Your thoughts and opinions will serve as the foundation for a recommended set of measures that can be used in community health efforts that are designed to enhance a community's culture of health. We will share the summary report of the results with you once the final analysis has been complete.

1. Please briefly describe your community health efforts over the last several years.

2. What role do measures play in your health community efforts? (On a scale from 1-5, with 5 being the most important.)

3. Which of the following AREAS do you measure in your current efforts? (Please select all that apply.)
   ☐ Wellness and prevention efforts
   ☐ Youth indicators such as graduation rates and teenage pregnancy rates
   ☐ Health insurance coverage
   ☐ Access to healthcare
   ☐ Housing
   ☐ Environment, such as walking paths, air quality
   ☐ Healthy food, such as access and affordability
   ☐ Disease specific, such as diabetes and obesity rates
   ☐ Overall quality of life
   ☐ Other (please specify) _____
   _____

4. How were your measures selected? (Please select all that apply.)
   ☐ Selected by stakeholder consensus
   ☐ Selected based on ease of use
   ☐ Selected based on availability of data
   ☐ Selected based on priorities identified through a community health assessment
   ☐ Other (please specify) _____
   _____

6. Thinking to your partners and the broad array of measures you use to assess impact, please rate the level of interest your partners have related to the measure you CURRENTLY USE in each of these areas. (On a scale from 1-5, with 5 being the most interested.)
   ☐ Wellness and prevention efforts
   ☐ Youth indicators such as graduation rates and teenage pregnancy rates
   ☐ Health insurance coverage
   ☐ Access to healthcare
   ☐ Housing
   ☐ Environment, such as walking paths, air quality
   ☐ Healthy food, such as access and affordability
   ☐ Disease specific, such as diabetes and obesity rates
   ☐ Overall quality of life

7. If you could select three MEASURES THAT CURRENTLY EXIST that would engage your stakeholders and help you better understand the population level impact of your healthy community efforts, what would they be?
   Measure 1 _____
   Measure 2_____
   Measure 3_____

8. Thinking now to the definition of a culture of health stated above, what measures would you like to have to assess your efforts related to a culture of health that do not exist?

Measure 1_____

Measure 2_____

Measure 3 _____

Measure 4 _____

Measure 5_____

9. Please tell us the role of stakeholders in your community health efforts.

10. More specifically, how is the business community engaged?

11. What are the challenges, if any, to engaging stakeholders like the business community?

12. From your experiences, what strategies have you used to successfully engage stakeholders (e.g., the business community) in healthy community efforts?

13. Please tell us who you are and your organization.

Name: _____

Organization: _____

C – HERO-RWJF Culture of Health Measures Identification Test Site Interview Guide

Tell me a little about the _____ effort/ collaboration, etc?

What is the governance structure?

What has been the process used to move the effort forward?

What are the overall goals?

How would you determine if the overall effort will be a success?

What measures are you using or thinking about using to measure your progress?

How long have you been a part of the effort?

What role do you play?

What other organizations are represented around the table?

In your opinion, is there anyone/any organization missing from the effort?

Could you describe the level of you/your organization's involvement?

What influenced your decision to become involved? (e.g., convener, others around the table, effort goals)

Who is leading the effort?

How important was it to you to know who that leader was before you committed to being involved in the effort?

What challenges/barriers has the effort encountered?

Please prioritize these topics by how important they were to you when you were making the decision to become involved in this effort.
- ☐ The credibility of the convener
- ☐ A broad representation from the community
- ☐ Being able to identify with the overall goals of the initiative
- ☐ Level of commitment from the leadership group
- ☐ Your own commitment to health and wellness
- ☐ Your organization's commitment to health and wellness

D - Employer Focus Group - Measures that Matter

Welcome, thank you for joining us.

My name is Jeanette May (and introduction).

HERO's work with RWJF: finding measures that matter to employers and communities.

Our focus today will be measures that matter to you. We have surveyed communities and have a list of measures most often used to assess healthy community efforts. We also have surveyed employers to find out what matters to them with regard to their workforce. I will first share the areas that employers told me matter to them and ask for your comments and feedback. Then I will share measures that we have gathered from collaborations around the country. As we go through each measure, I will ask you if that measure matters to any, all or some of the areas of interest. Once we are at the end of the measures list, I will ask if there are any additional measures that I have missed and then we will be finished!

What questions do you have that I can answer before we get started?

Great! Here are the areas of interest that we gathered through our survey of a large group of employers:

Performance
Employee Health and Wellness
Productivity
Managing Health Care Costs
Safety
Sustainability
Attract Talent
Corporate Reputation
Worker Engagement
Social Responsibility
Employee Satisfaction

Did I miss something? Is this a good list? Can we group any of these together for our exercise?

Now I will offer a measure that was reported to us by a community collaboration, and I want to ask everyone (we can do this very informally..perhaps just a shout out) if the measure matters to any one, several, all or none of these key areas of employer interest. Questions?

Ok, let's start.
- Quality of life in a community
- Level of activity among a community population
- Overweight/obesity prevalence in the community population
- Substance use prevalence
- Graduation rates
- Emotional health
- Teenage pregnancy rates
- Access to healthcare
- Health insurance coverage
- Availability of affordable and acceptable housing
- Environment – walkable paths, parks, etc.
- Access to healthy food
- Disease prevalence such as diabetes
- Health disparities
- Stress level of individuals living in the community
- # of employee sick days across organizations
- % of population practicing healthy behaviors
- % of population without a chronic disease
- % of population being engaged in fulfilling work, family, and leisure activities
- Ratio of bottled water to sugary drinks sold

Are there any additional measures that we should add to the list we have covered today?

Thank you for your time and enjoy your evening!
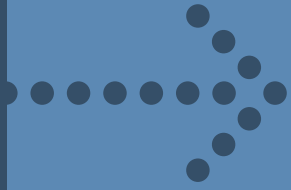
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