



Small Business Worksite Wellness

A Community-Based Approach

Presenters

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The Challenges

- ▶ Micro-businesses (≤ 5) are neglected by insurance and wellness market
 - Unpredictable—sometimes like individual and sometimes like group
 - No economies of scale
 - almost same work to serve as midsize group
 - one-time/fixed costs don't get diluted
 - Little margin for workers, employer, resources
 - Many can't afford insurance

The Opportunities

- ▶ Exchange and state-level health reform offers a model for community-based grouping
- ▶ Healthy Maine Partnerships (HMPs) doing community-based wellness
- ▶ ACA stresses health, not just medical care
- ▶ Businesses and brokers need a different option
- ▶ Hospital wants to reduce avoidable illness
- ▶ Medical homes are building community teams

Somerset County, Maine

- ▶ More than half of the businesses (55%) employed fewer than five; 89% 10 or less.
- ▶ Poor county health statistics
- ▶ High rates of obesity, poor eating habits, smoking...
- ▶ Engaged community health partnership (HMP), health and business leadership
- ▶ Strong ties among health providers, businesses

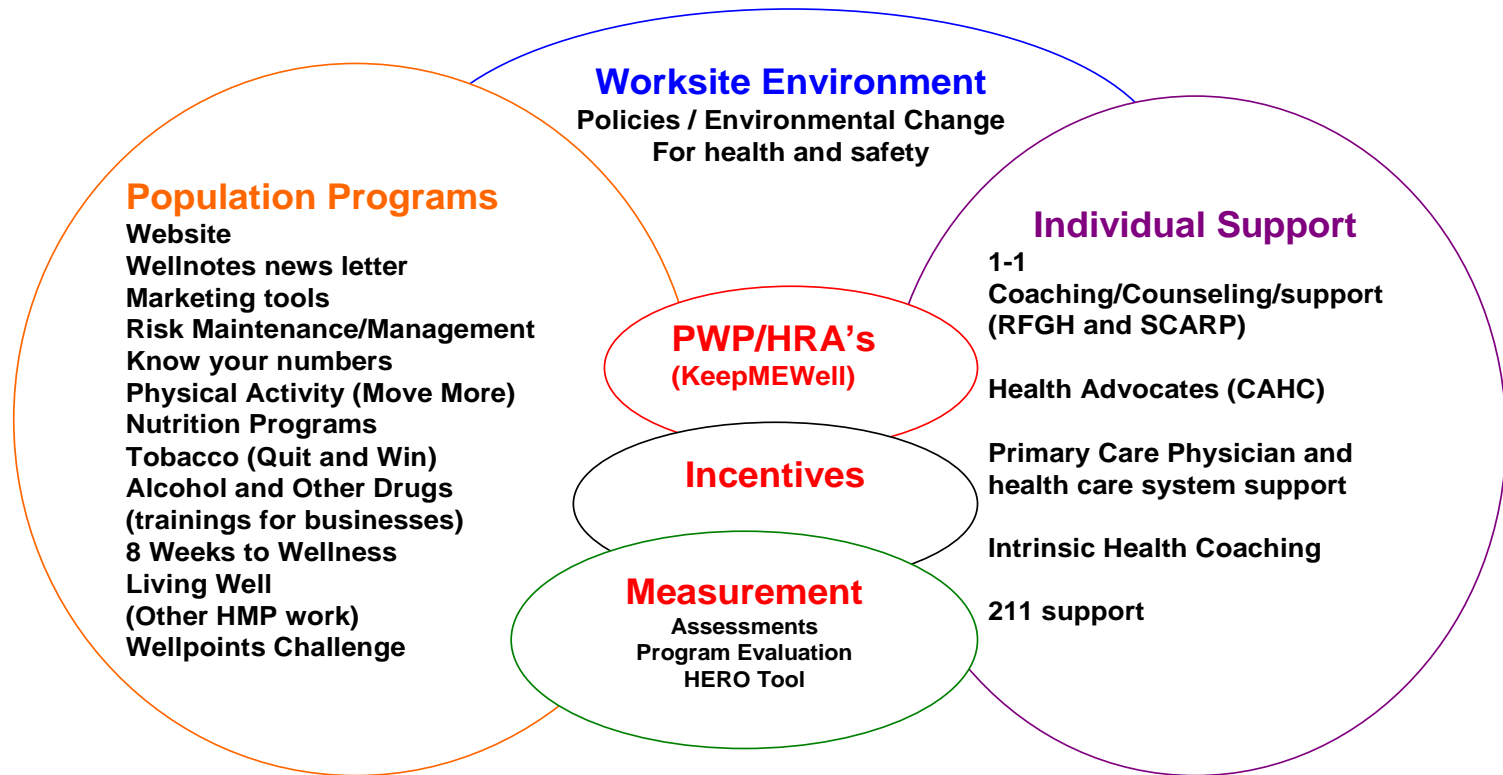
The Journey and Destination

From where we began...
to where we are headed.



A Community Based Proactive Health Care Model for Small Businesses

(Adapted from the UM, HMRC, 2008)



adapted from **Dee Edington**, Ph.D., University of Michigan Health Management Research Center,
“Health Management as a Serious Business Strategy” presentation .

<http://www.somersethearthealth.org>

<https://wellsuite.com/somerset/ws/Default.aspx>

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Getting Started

▶ Focus Groups

- Talk with employers to identify needs and interest for worksite wellness
- Relationship with local employers did not start overnight

▶ Recruitment of Employers

- 6 months
- 24 of the 40 employers approached committed to participating in the project

Getting Started

- ▶ Local Advisory Council
- ▶ Wellness Measurement Subcommittee
- ▶ Incentive / Rebate Advisory Committee
- ▶ CARE Model Group

Getting Started

- ▶ Analyzed HERO Scorecard and selected strategies to determine criteria employers would need to meet
- ▶ Develop two Tiers
 - Tier 1 – Criteria to meet Tax Credit
 - Tier 2 – Criteria to meet Insurance Rebate

HERO Scorecard

- ▶ Inventory of best practices in employee health management
- ▶ Indicator of program success
- ▶ Normative database for benchmarking and research

Source: http://the-hero.org/scorecard_folder/scorecard.htm

Scorecard Adaptations

- ▶ Convert from scoring tool to a set of criteria by which the very small businesses wellness program will be measured
- ▶ Modify HERO Scorecard language to better match the communication style of small-businesses
- ▶ Wellness program criteria identified as employer responsibility or provided by the community health agency
- ▶ Program criteria will be used to...
 - Educate and communicate regarding the best practice approach
 - Inform program planning and setting of targets
 - Measure program attainment annually

The Best Practice Approach

- ▶ Approach 1 – Environmental interventions that support healthy lifestyles.
- ▶ Approach 2 – Policies and financial incentives that support healthy lifestyles.
- ▶ Approach 3 – Frequent and simple prevention messages.
- ▶ Approach 4 – Health education classes, workshops, medical self-care.
- ▶ Approach 5 – Screenings, HRAs and referral leading to risk factor follow-up education and counseling.

• Reference: Matson Koffman D, Goetzel R, Anwuri V, Shore K, Orenstein D, LaPier T. Heart Healthy and Stroke Free: Successful Business Strategies to Prevent Cardiovascular Disease. Am J Prev Med 2005;29(5SI):113-121.

The Best Practice Approach

- ▶ Complete an Environmental Scan with Management
 - Modified HERO Scorecard
- ▶ Have Employee complete Employee Interest Surveys
- ▶ Report back on findings
- ▶ Use this report , Scorecard & the HMP Worksite Framework to create a work-plan *WITH* the business.

The Best Practice Approach

- ▶ Work plan for Employers
 - 6 month plan
 - Used data from health needs and interest surveys, modified HERO scorecard and Healthy Maine Works Worksite Inventory tool
 - Targeted low hanging fruit
 - Low Cost / Easy Implementation → Higher Cost / More Complex Implementation
 - Examples include
 - No smoking policies
 - Substance Abuse policies
 - Fire Escape Routes / Smoke detectors
 - Wellness Boards
 - Walking Route Maps

The Best Practice Approach

- ▶ Complete an HRA or Personal Wellness Profile with every employee
- ▶ Seize the moment!
 - Have community resources available to provide employees
 - This is the time when employees are very eager to make change
- ▶ Work the work-plan with the business
- ▶ Make sure each business has an identified place to hang/share all resources & community program.

Data – Outcome Slides

Three Data Sources:

- ▶ Employee Assessment of Business Wellness Offerings & Own Health Status
- ▶ Environmental Scan – Report from Owner and Documentation from GSHC staff on site activities.
- ▶ Employee and Owner Personal Wellness Profiles

Presentation of Select Results....

Data – Employee Assessment of Wellness Programming

- ▶ Data collected in two time periods;
 - 7.1.2011 – 6.30.2012
 - 7.1.2012 – 12.18.2012.
- ▶ 22 businesses represented in the sample to date.
15 businesses are “Level II” and 7 are “Level I”.
- ▶ Time two reporting includes follow up data on 73% of the businesses enrolled in the project.
- ▶ Number of workers/owners reporting in time one was 110 and an additional 56 respondents are represented in the time two period. Across the two time periods a total of 166 responses collected to date.

Data – Employee Assessments

All Who have taken Assessment Only One Time – responding “yes”...	(n=110)
Wellness Program	17%
Provided Opportunity for Health Risk Appraisal	14%
Health Plan Covers Preventative Screenings	32%
Business has Written Policies for Tobacco	50%
Policies for Substance Abuse	32%
I would participate in a wellness program...	82%

Data – Employee Assessments

Respondents to two sets of Assessments – “Level II” Sites – responding “yes”...	BASELINE (n=65)	FOLLOW UP (n=56)
Wellness Program	20%	73%
Provided Opportunity for Health Risk Appraisal	20%	80%
Health Plan Covers Preventative Screenings	56%	44%
Business has Written Policies for Tobacco	43%	75%
Policies for Substance Abuse	29%	71%
I would participate in a wellness program...	75%	83%

Data – Employee Assessments

All Who have taken Assessment Only One Time – responding “yes”...	(n=110)
Have health coverage for myself...	76%
All family members have health care coverage...	66%
Have a primary care physician...	93%
Had an annual exam in past 12 months...	69%

Data – Employee Assessments

Those responding “yes”...	BASELINE (n=65)	FOLLOW UP (n=56)
Have health coverage for myself...	53%	47%
All family members have health care coverage...	54%	46%
Have a primary care physician...	55%	45%
Had an annual exam in past 12 months...	49%	51%

Data – Environmental Scan

- ▶ Data is also organized into two time periods for reporting – as previous slide.
- ▶ Total of 38 scans done by GSHC staff:
 - 23 businesses scanned in time one period.
 - 15 businesses scanned in time two period.
 - Total of 13 businesses have baseline and follow up data.

Data – Environmental Scan

	BASELINE (n=14)	FOLLOW UP (n=13)
Employer has a written tobacco policy...	29%	100%
Employer participates in an EAP program...	7%	31%
Designated (staff) for wellness...	57%	92%
Worksite has health insurance plan for employees...	29%	31%

Data – Personal Wellness Profiles...

- ▶ A total of 69% of those eligible completed Personal Wellness Profile during first time period.
- ▶ 62% of those eligible have completed Personal Wellness Profiles during current time period – only six months into data collection period.
- ▶ At both time periods, the average score across all business sites was in the “Doing Well” range (65 at time one and 68 at time two).
- ▶ Over half, 52%, of the respondents who took the Profile twice made improvements in their overall wellness scores.

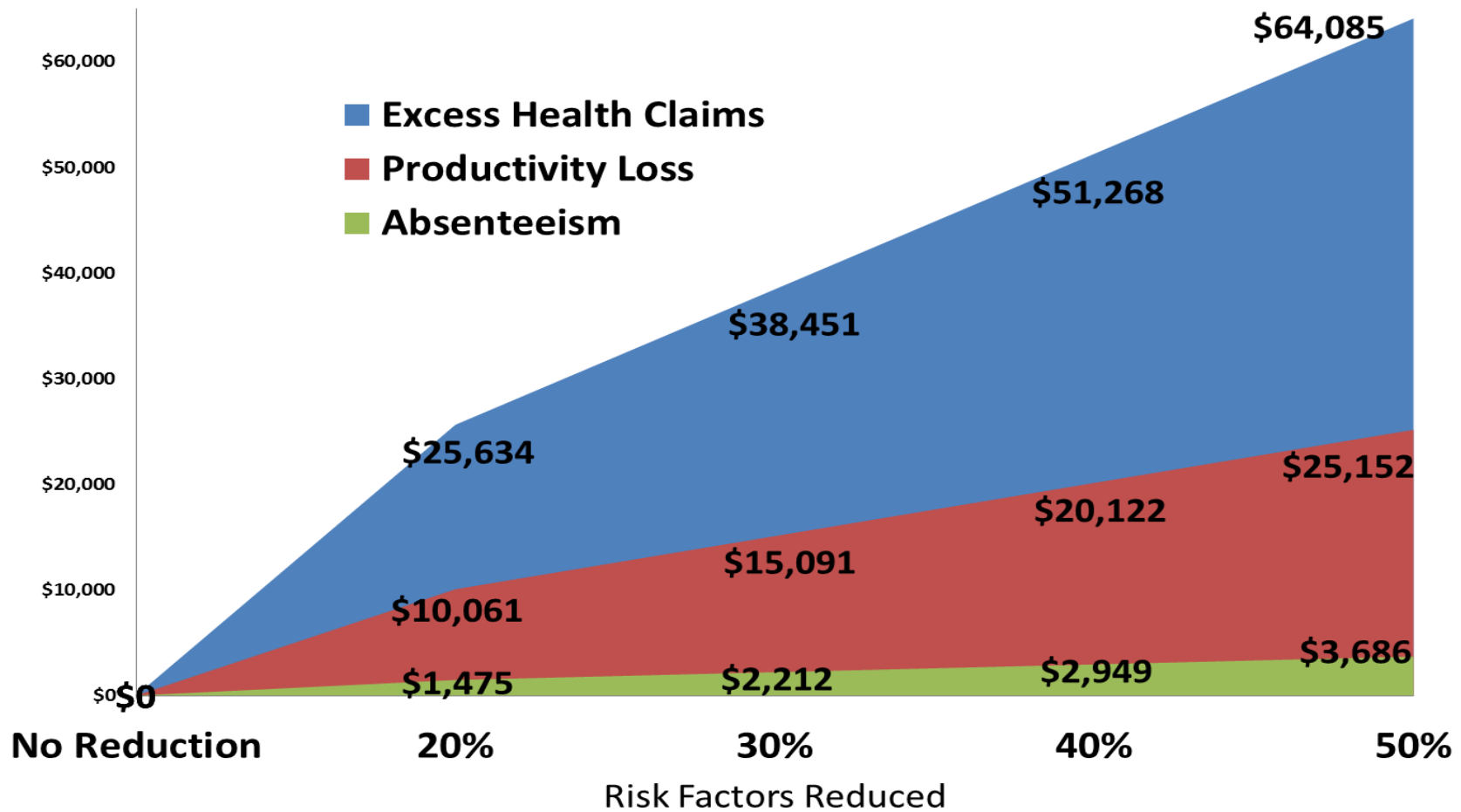
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Data – Personal Wellness Profiles...

- ▶ Common Areas of Focus for Future Programming Based on Results from All Respondents:
 - Nutrition
 - Fitness Promotion
 - Osteoporosis
- ▶ Biggest Areas of Improvement Comparing Same Respondents at Two Time Periods:
 - Safety Issues – now have 6+ good safety indicators
 - Diabetes – now have less than 3 major risks
 - Cancer – now have either no cancer or less than 3 risks
 - Nutrition – now have 10+ good eating indicators. Particularly in increase intake in fruit and vegetables, and increase in whole grain intake.
 - Weight Loss

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Estimated Total Savings per Risk Factor Reduction



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Gains and Challenges to Implementation...

Challenges...

- ▶ Turnover
- ▶ Time to Implement
- ▶ Nature of Small Business Development / Seasonal Nature of the Business

Gains...

- ▶ Policy Implementation
- ▶ Environmental Focus
- ▶ Community Resources

Achievements so far

- ▶ 100% of Business now have bulletin boards
- ▶ 100% have Wellness toolkits and wellness news letters
- ▶ Smoke detectors have been installed
- ▶ Fire escape routes posted
- ▶ Walking trails built on the property
- ▶ Healthy snacks made available to employees
- ▶ CSA Program for employees
- ▶ Tobacco and substance abuse policies added
- ▶ Increased incentives for employee engagement

Next Steps

- ▶ Wellness Tax Credit
- ▶ Insurance Rebate
- ▶ Insurance Exchange / COOP
- ▶ Replication of Model – Healthy Maine Streets

Questions

