Instituting an Evidence-Based & Collaborative Regional Approach to Building Cultures of Health and Wellbeing

August 17, 2023

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Introductions

The Emerging Culture of Health and Wellbeing Science and Movement   **Ray Fabius MD**

Review of the CDC Corporate Culture of Health and Wellbeing Learning Collaborative   **Ray Fabius MD**

Greater Philadelphia Business Coalition on Health

- **Overview, reach, and role in the learning collaborative**   **Neil Goldfarb**
- **Learning collaborative participants, aggregate demographics, and mission**
- **Monthly learning collaborative sessions**
- **Summary of experience to date**

CDC Foundation role   **Michele Bildner**

- **Importance of measuring the impact of the program**
- **HealthNEXT baseline assessment and predictively modeled re-assessment, evaluation**

Results: baseline assessment versus predictively modeled re-assessment   **Ray Fabius MD**

An employer's perspective

- **Insights from the assessment, the power of working with other employers, and progress achieved to date**   **James Startare**
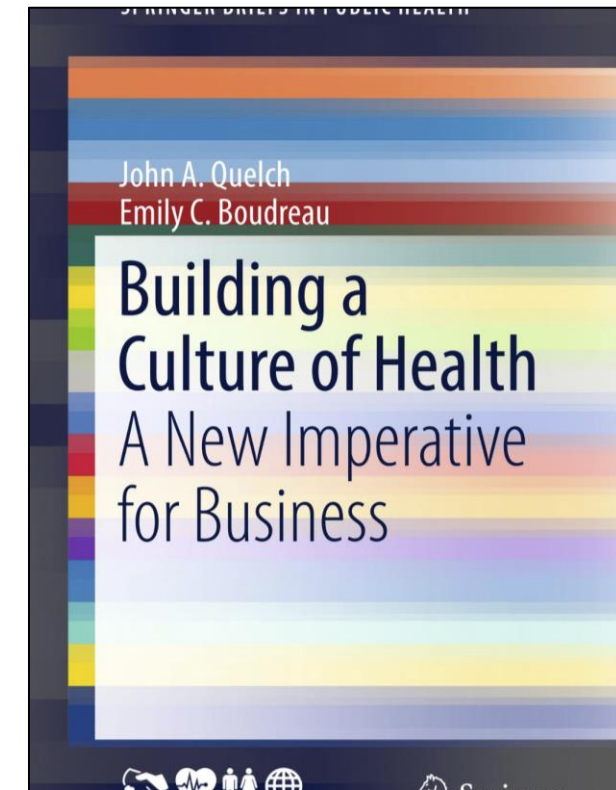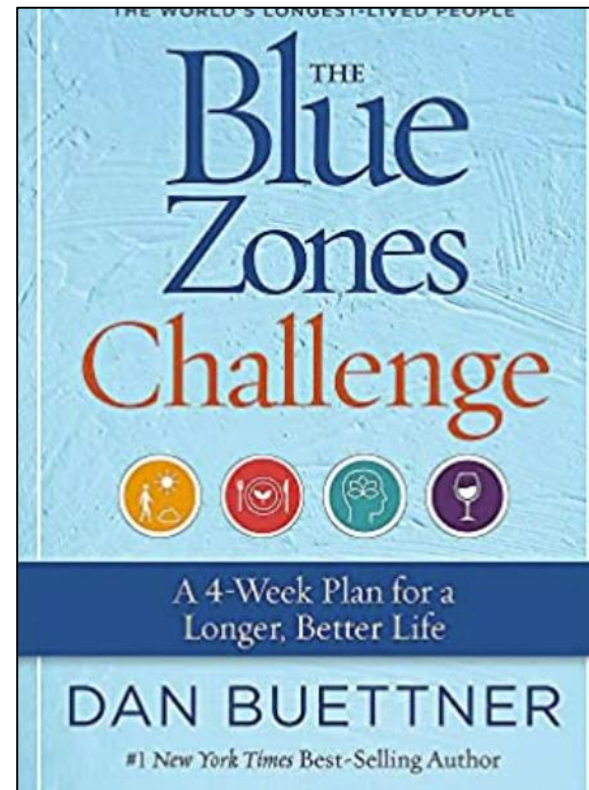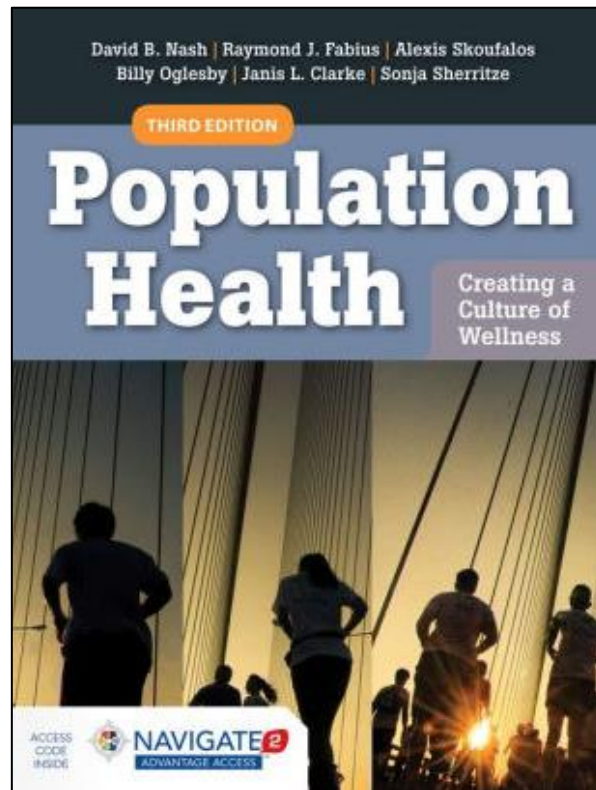
Summary Insights / Q & A   **Ray Fabius MD**

Disclosure

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The Culture of Health and Wellbeing
Movement Accelerating with Publications - Books

The inextricable link between employee wellness and retention

BY KRISTINE GILL
October 28, 2022 at 7:45 PM EDT

The Rise Of Corporate Wellness To Support Employee Retention

The health-savvy CEO

Health and wellness have become urgent CEO priorities

Future of work

Chief medical officers are now at the heart of business

The C-suite's role in well-being

How health-savvy executives can go beyond workplace wellness to workplace well-being—for themselves and their people.

According to the U.S. Bureau of Labor Statistics, 4.15 million people quit their jobs in August 2022. This statistic is alarming as the recruitment process is time-consuming and can be as expensive as one-half to two times the employee's annual salary, according to Gallup. With increases in turnover, it's difficult to know the exact reason why employees move on from their current company, but a study done by Flexjobs found that 62% of employees leave due to a toxic company culture, and 49% of employees leave due to a lack of healthy work-life boundaries.

"The HBR article also references a study by Towers Watson and the Business Group on Health, which shows that "organizations with highly effective wellness programs report significantly lower voluntary attrition than do those whose programs have low effectiveness (9% vs. 15%)."

Forbes

Harvard Business Review

FORTUNE

FT FINANCIAL TIMES
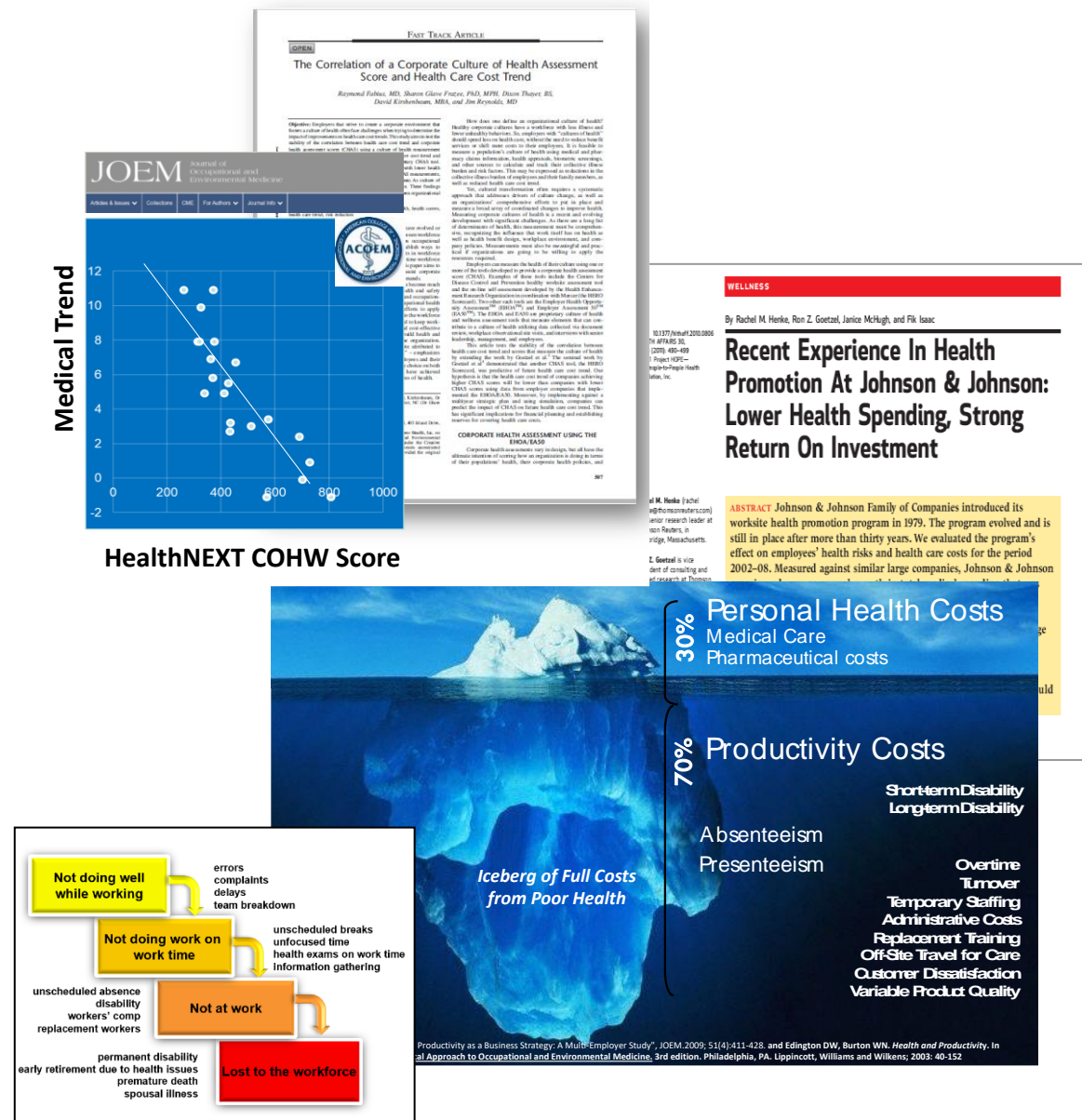
Deloitte. Insights

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Research

Reaffirming *"The Benefits of Building a Culture of Health and Wellbeing"*

- Improved:
  - Workforce performance
  - Engagement & loyalty
  - Employee Wellbeing

- Reduced:
  - Turnover
  - Business risk
  - Rate of healthcare cost inflation

Medical Trend vs **HealthNEXT COHW Score**

Iceberg of Full Costs from Poor Health

30%	Personal Health Costs — Medical Care, Pharmaceutical costs
70%	Productivity Costs — Short-term Disability, Long-term Disability, Absenteeism, Presenteeism, Overtime, Turnover, Temporary Staffing, Administrative Costs, Replacement Training, Off-Site Travel for Care, Customer Dissatisfaction, Variable Product Quality

Recent Experience In Health Promotion At Johnson & Johnson: Lower Health Spending, Strong Return On Investment

Not doing well while working → errors, complaints, delays, team breakdown

Not doing work on work time → unscheduled breaks, unfocused time, health exams on work time, information gathering

Not at work → unscheduled absence, disability, workers' comp, replacement workers

Lost to the workforce → permanent disability, early retirement due to health issues, premature death, spousal illness
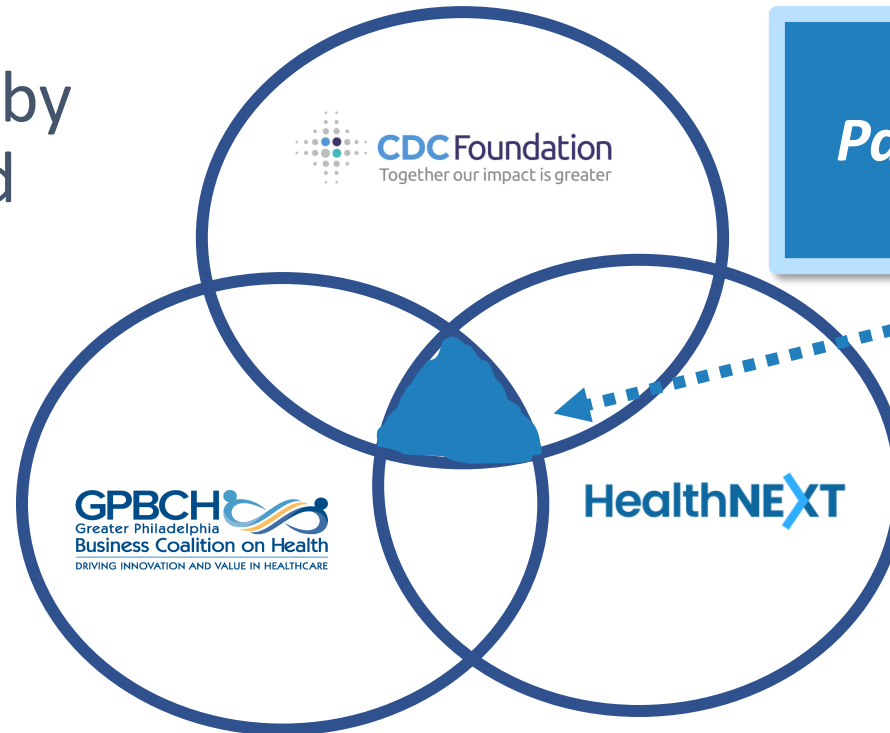
CDC Foundation

- Funding and support by active monitoring and facilitation

Greater Philadelphia Business Coalition on Health

– Recruit employers, orchestrate collaboration and collect data for analysis and publication

Participating Employers

HealthNEXT

– Provide physician executive guidance and proven method to build workforce cultures of health and well-being
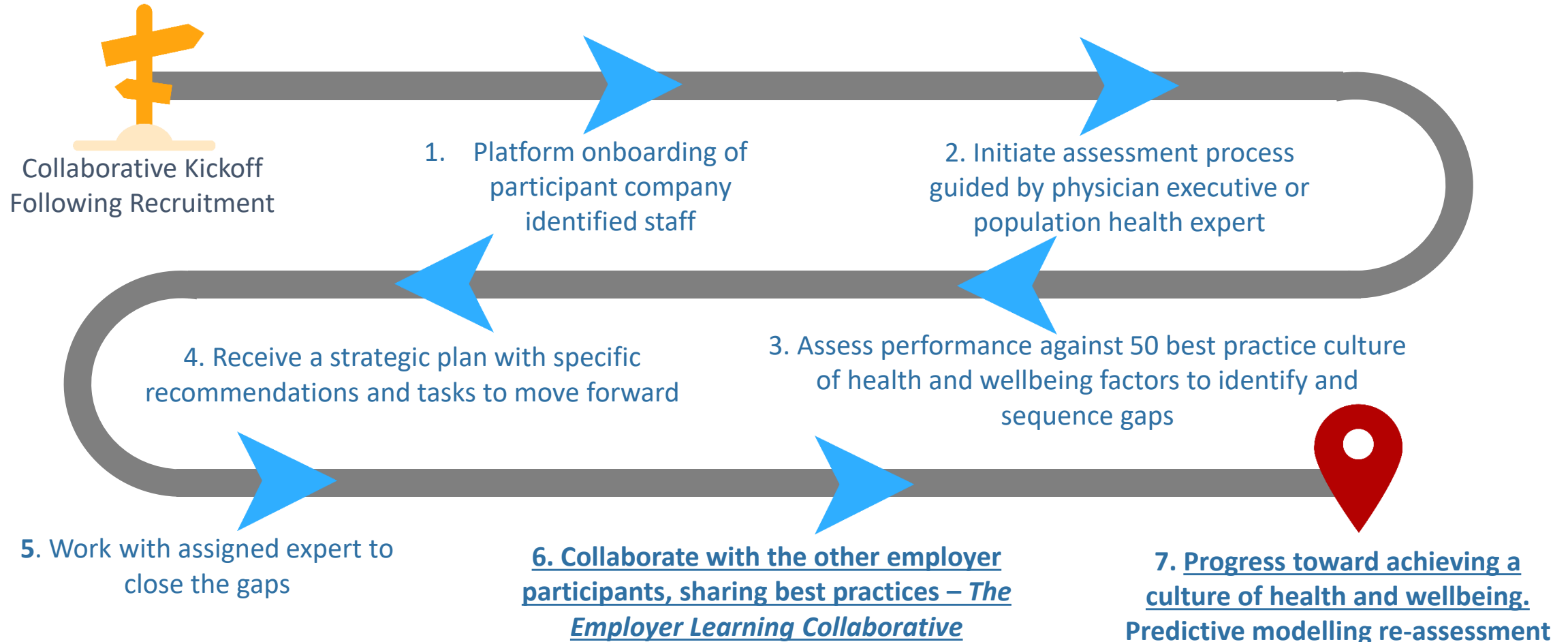
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Poll 1 - Have you participated in a learning collaborative in the past?

- Never
- Once
- 1-2 times
- Two or more times

The Greater Philadelphia Employer Culture of Health Collaborative Process
Focus of Today's Presentation Are Steps 6 & 7

Collaborative Kickoff Following Recruitment

1. Platform onboarding of participant company identified staff

2. Initiate assessment process guided by physician executive or population health expert

3. Assess performance against 50 best practice culture of health and wellbeing factors to identify and sequence gaps

4. Receive a strategic plan with specific recommendations and tasks to move forward

5. Work with assigned expert to close the gaps

6. **Collaborate with the other employer participants, sharing best practices – _The Employer Learning Collaborative_**

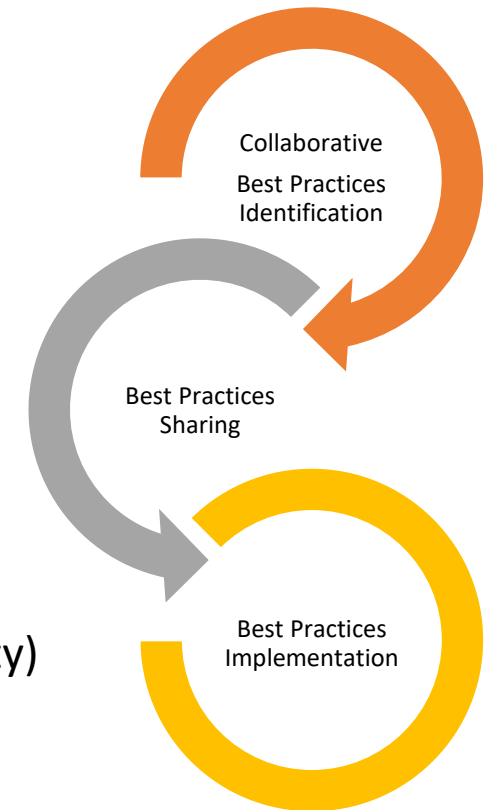7. **Progress toward achieving a culture of health and wellbeing. Predictive modelling re-assessment**

Impressions from hosting
the Learning Collaborative

Greater Philadelphia Business Group on Health
Addressing Health and Healthcare Needs

- Brief overview of GPBCH

- How does this project fit?

- Learning Collaborative Rationale

  o Learning from local and national experts to support culture development

  o Learning from each other: challenges, solutions

  o Peer pressure to keep employers moving forward

- Experiences to date

  o Initial meetings: building foundational knowledge, building comfort with each other

  o More recent meetings: focusing in on specific pillars (generally low scoring or high variability)

  o Generally high attendance and engagement for very busy professionals

  o It takes time to build a community and environment of openness and trust

Collaborative
Best Practices
Identification

Best Practices
Sharing

Best Practices
Implementation

Characteristics of the 7 Participating Employers Impacting a Significant Cohort in our Community

Total number of employees across all organizations	**185,000**
% of population that is female (range):	**53% - 65%**
% of population that is non-white (range):	**22% - 70%**
Health Risks:	
% with obesity (range)	**2% - 14% (3 don't know)**
% with a mental health issue (range)	**4% - 31%**
% with tobacco use (range)	**5% - 32% (4 don't know)**
E.D. visits per 1,000 (range)	**147 – 324**
Total PEPY cost (medical and Rx, range)	**$9,411- $16,500**

Working with the CDC Foundation

- Where Private Resources Join World-Class Science to Save and Improve More Lives

Together Our Impact Is Greater

We **unleash the power of collaboration** between CDC and philanthropies, organizations, corporations, governments and individuals in order to protect the health, safety and security of America and the world.

We believe that by aligning diverse interests and leveraging all parties' unique strengths, these collaborations create **greater impact** than any one entity could alone.

Advancing Major Health Priorities

Our work, and our partners' and donors' involvement, generally falls into these categories:

1. **Safeguarding Americans' health**

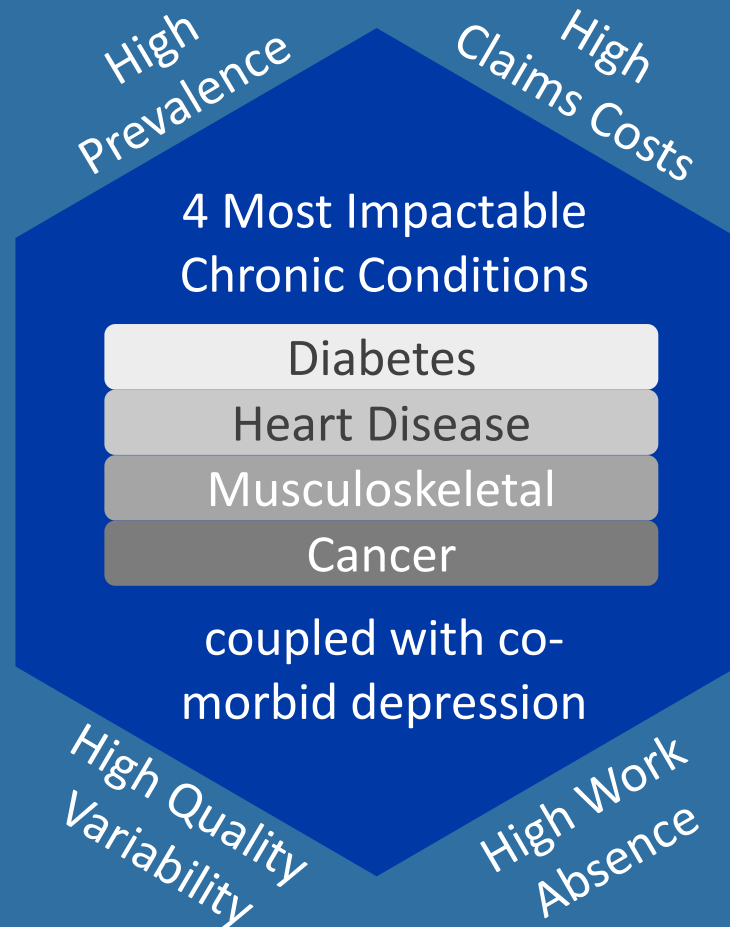2. **Fighting global threats**

3. **Responding to emergencies**

4. **Developing disease fighters**

5. **Supporting a specific fund or cause**

6. **Giving for greatest need**

# The Persistent Burden of Complex Chronic Conditions

High Prevalence

High Claims Costs

4 Most Impactable Chronic Conditions

Diabetes

Heart Disease

Musculoskeletal

Cancer

coupled with co-morbid depression

High Quality Variability

High Work Absence

Unparalleled Risk Burden

1 out of **2** adults have a chronic disease

1 out of **4** adults have **2** or more chronic diseases

1 out of **3** adults with a chronic disease is at-risk for depression

Complex Chronic **5%**

50% **Total Spend**

Data Source: CDC, 2015
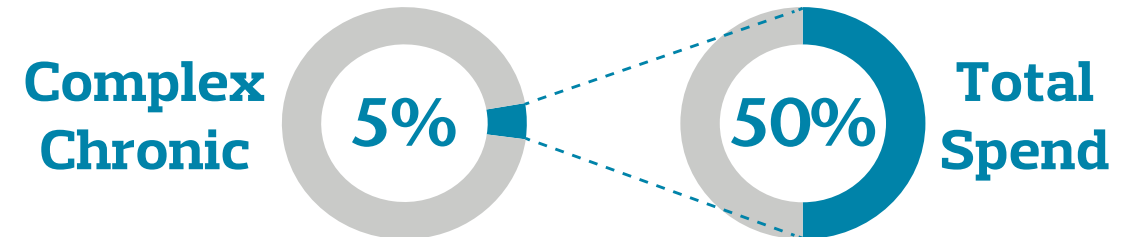
How Workplace Health Promotion Impacts Communities

Healthy + Well + Resilient + Vital Workforces are a piece of the puzzle for Healthy + Vibrant + Productive Communities

Impact of a culture of workplace health & well-being

Communities

Employers/ Organizations

Dependents/ Interpersonal

Employees/ Individuals

Level of influence on health outcomes

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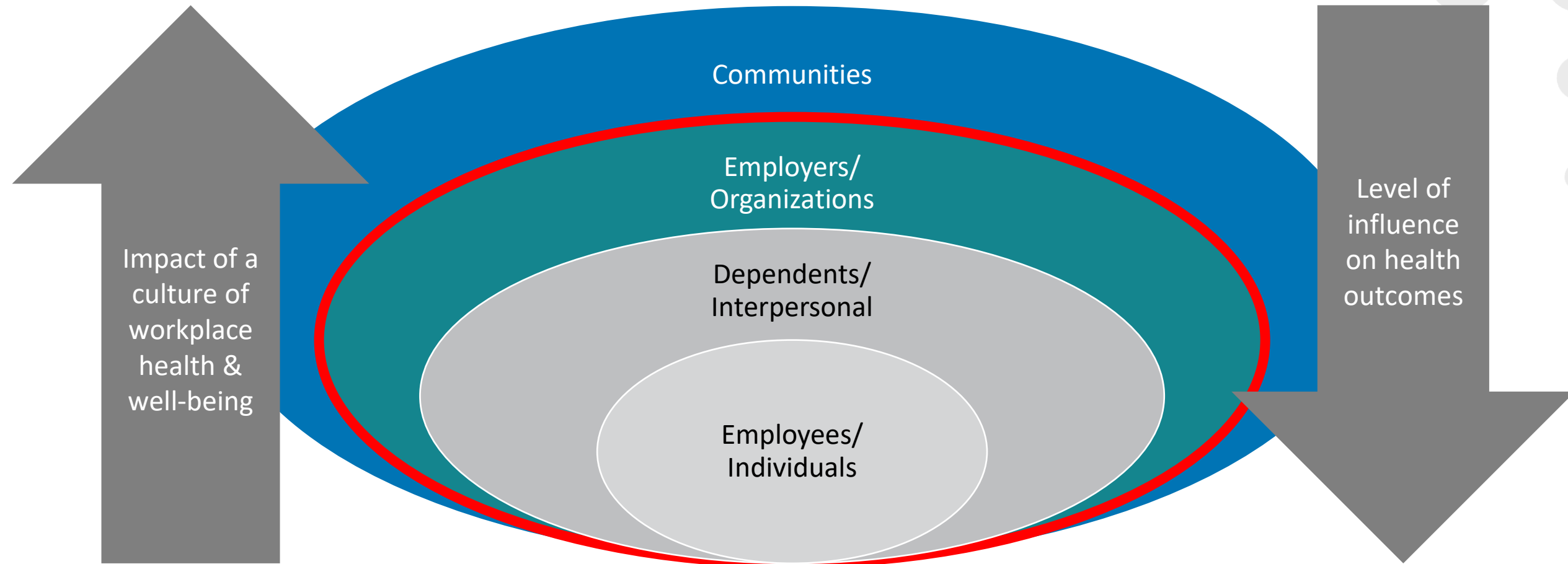
Our Role as Strategic Implementation Partner

We come to the table with 28 years of complex program management experience. Our strategic oversight **extends your philanthropic impact** and allows CDC experts to focus on the science.

We work with partners on **all stages of program strategy:** from helping to catalyze new innovations, to developing successful pilots and proofs of concept, to building out capacity and strengthening existing systems, to amplifying critical public health efforts to a wider audience.

Budgeting and deploying funds

Recruiting and hiring staff and consultants

Overseeing capacity improvement projects

Securing and mobilizing equipment

Facilitating ongoing dialogue across partners and sectors

Employers have the power to drive the culture they want to see reflected in their workforces.

A Holistic Approach

Improving the ***culture of workforce health and wellbeing*** is intended to lead to:

- Improved health and well-being

- Improved workplace productivity

- Increased work engagement, satisfaction, and retention

- Decreased or stabilized medical cost trend

- Improved community health and goodwill

Collaborative (Project) Objectives

- Articulate barriers and facilitators for improving employee health and wellbeing among business decision-makers.

- Identify which pillars and factors of employee health and wellbeing are identified as the most common strengths and opportunities.

- Achieve a model for creating change in decision-making approaches among participants and their organizations.
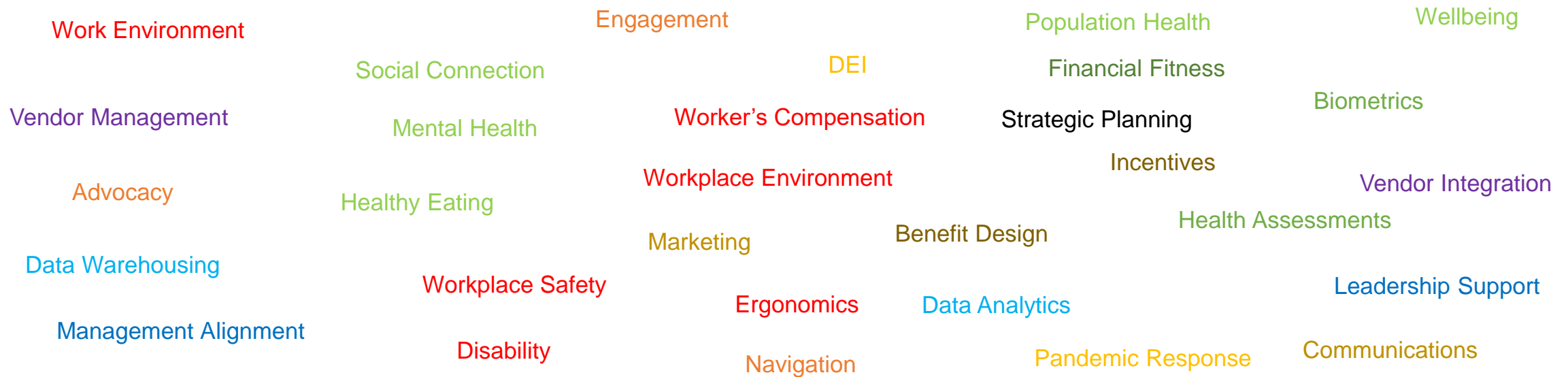
Methodology, Process and Reassessment Results

Culture of Health & Wellbeing
Building a Comprehensive Management System

TO ACHIEVE A CULTURE OF HEALTH YOU NEED TO IMPLEMENT A CRITICAL MASS OF PROGRAMS & SERVICES WITH OPERATIONAL EXCELLENCE

Work Environment

Engagement

Population Health

Wellbeing

Social Connection

DEI

Financial Fitness

Vendor Management

Mental Health

Worker's Compensation

Strategic Planning

Biometrics

Incentives

Advocacy

Workplace Environment

Vendor Integration

Healthy Eating

Health Assessments

Marketing

Benefit Design

Data Warehousing

Workplace Safety

Leadership Support

Ergonomics

Data Analytics

Management Alignment

Disability

Navigation

Pandemic Response

Communications

Research led to a digital platform capturing best practices for benchmarking & scale

The Employer Assessment protocol includes 10 pillars and 50 factors which are scored and sequenced

Based on a decade of the research identifying attributes and capabilities of best practice employer programs

Culture of Health and Well-being Pillars
Leadership Support / Management Alignment
Well-being Strategic Plan
Workplace Environment
On-site Well-being Activities
Health and Well-being Programs and Activities
Data-Driven Approach: Warehousing/Analytics
Marketing and Communications
Incentive and Benefit Design
Engagement and Navigation
Vendor Management- Oversight and Integration

Reporting on Results
Improvement Phase

- **Define** (goals & processes)
- **Measure** (initial EA50 assessment)
- **Analyze** (NEXTpert assisted planning)

- **Improve** (expert assisted gap closing)
- **Control** (track & troubleshoot)

- The monthly Collaborative sessions presented and discussed other assessment tools such as the **HERO scorecard** to better compare their status against peers and the **CDC Worksite Scorecard** to assess performance at the local level

- **High Tech / High Touch** - **Assigned EXperts have performed over 400 total hours of support to the members:**
  - Identifying gaps from benchmark
  - Sharing best practices
  - Helping members prioritize their efforts
  - Reviewing member implementation progress against goals
  - Establishing a "predicted" estimate of where members could be by yearend 2023

Poll 2 - Which pillar of the baseline bottom five, do you believe will improve the most, based on the predictive modeling?

- Health and Wellness Strategic Plan

- Leadership and Management

- Marketing and Communications

- Vendor Oversight and Integration

- Engagement and Navigation

# Collaborative Members, Assessed on 50 Factors, Within 10 Pillars

Predicted modelling shows a significant narrowing of the gaps from benchmark in many if not most Factors

Average improvement of score from baseline to predicted year-end score was 80 points (450 to 530) moving from 60% to 71% of benchmark

Range of scores at baseline and after predicted modeling went from 187-580 to 313-663

Lowest scoring enterprise improved the most – over 125 points

Harder to improve as score gets higher

Initial Assessment

Year-end Prediction
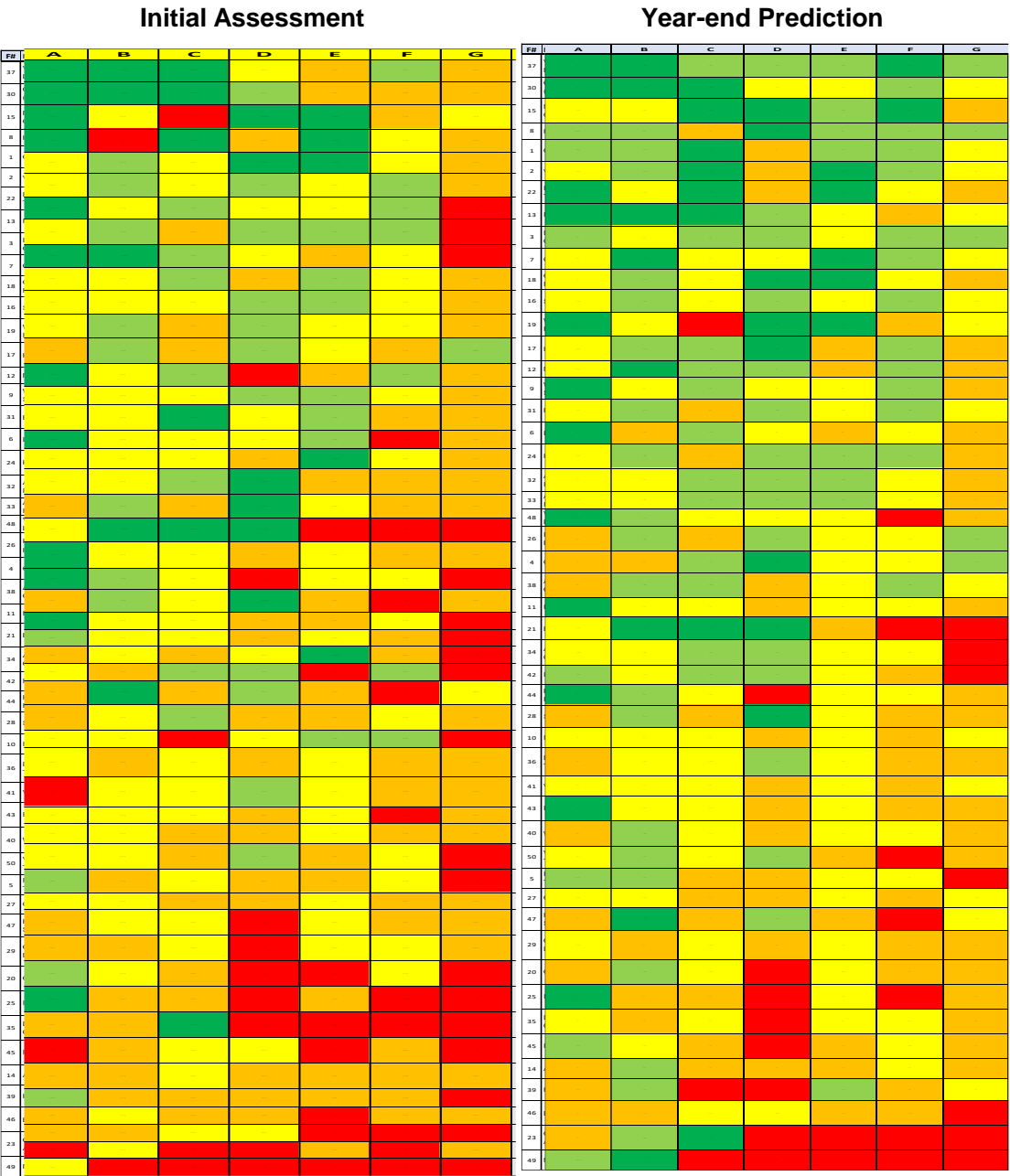
Predicted Pillar Performance Ranking

- **Many more pillars improved on an enterprise basis. We predict 36 out of 70 Pillar cells (51%) will be approaching Benchmark Threshold by year-end, versus 21 out of 70 (30%) in the initial assessment**

- **The rank order of Pillars has shifted from the Initial Assessment to our year-end prediction**
  - **"Leadership & Management" followed by "Marketing & Communication", and "Health & Wellness Strategic Plan", improved the most moving to the top of the list on a % of Benchmark Threshold basis**

- **For many participating enterprises there is still much work to be done to achieve best practice in pillars such as "Vendor Oversight" and "Incentives and Benefit Design".**

- **Each employer has their own strategic plan maps out for the next few years.**

Initial Assessment

	Pillar	A	B	C	D	E	F	G		Avg % BT
3	Workplace Environment									
5	Health & Wellness Activities									
6	Data Warehousing & Analytics									
4	On-site Health Activities									
8	Incentives & Benefits Design									
2	Health & Wellness Strategic Plan									
1	Leadership & Management									
7	Marketing & Communications									
10	Vendor Oversight & Integration									
9	Engagement & Navigation									

Year-end Prediction

	PILLAR	A	B	C	D	E	F	G		Avg % BT
1	Leadership & Management									
7	Marketing & Communications									
2	Health & Wellness Strategic Plan									
3	Workplace Environment									
6	Data Warehousing & Analytics									
9	Engagement & Navigation									
5	Health & Wellness Activities									
4	On-site Health Activities									
8	Incentives & Benefits Design									
10	Vendor Oversight & Integration									
	TOTAL									

Common Actions Taken with the Aid of the Designated Experts and Supported by the Collaborative

- Creation of **health and wellbeing vision and mission**
- The assessments all led to the development of **multi-year strategic plans**
- **Business cases** were presented
- **Dedicated budgeted** were constructed including staff requirements
- Increased **focus on health equity**
- **Governance Committees** was planned or organized
- **Annual Marketing & Communication Calendars** were developed or refined
- The science of **population health and wellbeing** were deployed
- **Silos within companies were connected** – benefits, wellness, benefits, risk....
- Actions taken based on better **understanding of health and utilization data**
- Coordination of **vendor summits**

Poll 3 - Which of the below do you believe are the most helpful reasons to work with a Population Health Expert/Physician Executive? (Choose three)

1. Troubleshoot healthcare issues such as Covid-19, flu, RSV, etc.

2. Analyze the illness burden of a population and develop an evidence-based population health strategy

3. Share how benchmark employers create an enduring culture of health and well-being

4. Recommend how to get better control of healthcare costs

5. Reduce/address the prevalence/cost of catastrophic claimants and chronic conditions

Impressions From a Participating Employer and Summary

Brief description of Aramark

- 25,000 covered employees; 50,000 members +

Overview of experience

- Monthly collaborative sessions
- Assessment and re-assessment process
- Value of identifying gaps from best practice and instituting a strategic plan

Actions Taken

- Wellness mission generation
- Central governance and wellness committee formation
- Deepening vendor collaboration and accountability

Action to achieve and sustain:

- Hired staff with to concentrate on wellbeing efforts
- Address different sections of population (80% of personnel are field-based)
- Central vs De-centralized approach – top down/bottom up
  - Integrate HR leaders from each line of business - give then the tools they need to do the job
- Follow the good work and success of the safety team who have already established a culture of safety
- Leveraging the sustainability group
- Intensify marketing, branding and communications

Summary
Important Messages

- **The power of a learning collaborative is significant**
  - Participating enterprises learning best practices from their peers and external evidence-based best practices

- **Operational excellence is required to make all other business activities within an enterprise**
  - Systematic process improvement (DMAIC process)
  - **Gaps from best practice** vs. comparison to the mean

- **Evidence-based process requires baseline and periodic remeasurement**
  - CDC/GPBCH/HealthNEXT validation – all contributing to the results
  - Measuring and tracking improvement – ideal for reporting to the C-suite / governance committee
  - Supplemental tools – CDC scorecard and HERO Scorecard

- **High tech / High Touch Approach – The need for a Chief Health / Medical Officer**
  - For employers large and small – full-time; part-time; fractional / shared