

Best Practices to Engage Employees in their Health

Thursday, February 10 | 10:00am – 12:00pm



Introduction

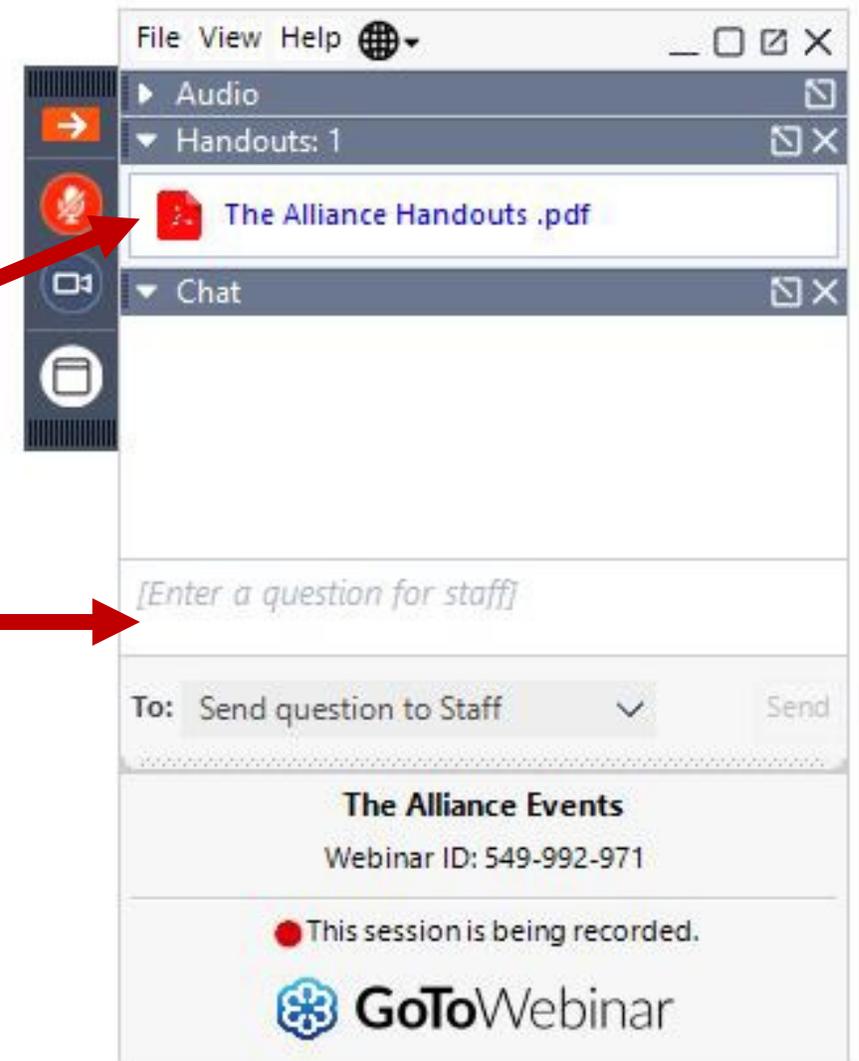


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Best Practices to Engage Employees in their Health



Dr. Jessica Grossmeier

Best Practices to Engage Employees in Their Health

February 10, 2022

How is your organization doing in terms of employee engagement in their health?

(check all that apply)

- Employees are putting off preventive health actions
- Employees are not participating in wellness programs
- Employees appreciate wellness offerings, but interest seems to be waning
- Employees are prioritizing their well-being and self care
- Not sure, we don't measure



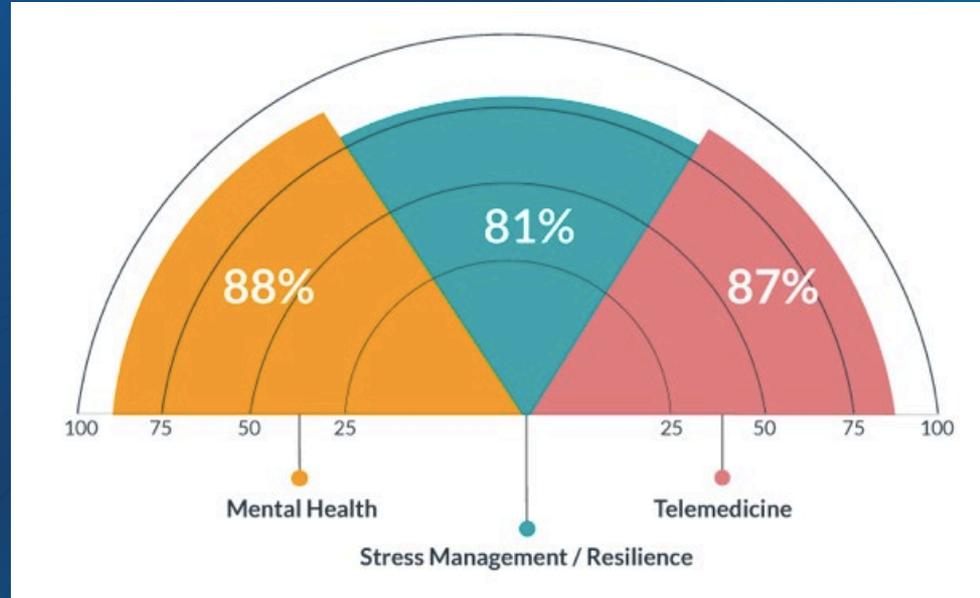
Key topics

- Current context
- What does it mean to engage employees in their health?
- Use of financial incentives to encourage participation
- Best practices to support engagement in health
- Tools to support best practices approach
- Applications for hybrid work arrangements

Current context

Employee interest in health

- Increased interest in mental and emotional well-being
- Increased concern about workplace health and safety



Source: <https://www.aihr.com/blog/workplace-wellness-trends/>

Pandemic impact on health behaviors

- Office workers (WFH) reported less physical activity, higher food intake less attention to ergonomic work.¹
- Preventive exams substantially decreased in 2020. Mammograms, PAP smears, and PSA tests recovered but colonoscopies remained 25% lower.²

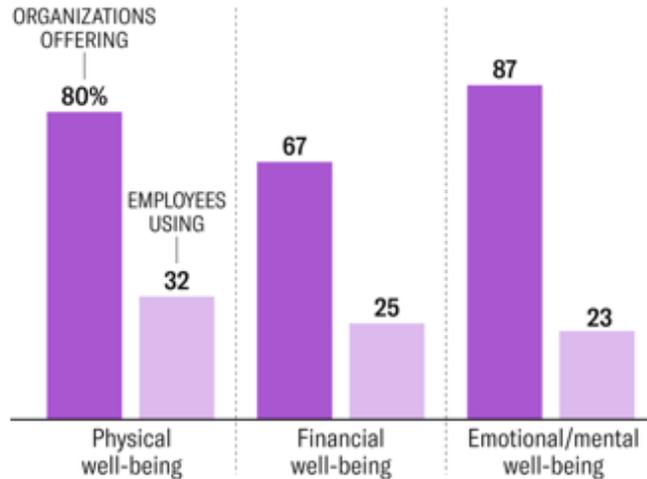
Sources:

1. Xiao et al. JOEM. March 2021; Vol 6(3): 181-190
2. Martin et al. HCCI Report. April 2021. <https://healthcostinstitute.org/hcci-research/the-impact-of-covid-19-on-the-use-of-preventive-health-care>

Pandemic impact on use of workplace wellness

Organizations Offering vs. Employees Using Well-Being Programs

Of organizations offering various well-being programs, only about a third of HR leaders and employees report using them.



Source: Gartner 2021 EVP Benchmarking Survey;
Gartner 2021 EVP Employee Survey



Source: Gartner research <https://hbr.org/2021/10/how-to-get-employees-to-actually-participate-in-well-being-programs>

What does it mean to engage employees in their health?



Employee Engagement
in Work and Health:
**Definition and
Measurement
Insights —
Opportunities for
Industry**

- Study committee reviewed 222 published research articles on employee engagement
- No consensus definition or measure of participation or engagement in health
- Participation in a program not the same as engagement in health
- “A personal commitment to optimize one’s health and well-being”

Source: <https://hero-health.org/resources/committee-publications/>



- Committee re-examined 60 articles on employee engagement in health
- 6 types of influencers:
 - Employee health-related factors
 - Employee demographics (age)
 - Organizational factors
 - Financial incentives
 - Environmental factors
 - Communications
- Lots of factors influence employee engagement in their health!

Source: <https://hero-health.org/resources/committee-publications/>

Program Measurement and Evaluation Guide:

Core Metrics for Employee Health Management

2015



Health Enhancement Research Organization
and Population Health Alliance

- Industry-wide collaboration focused on measurement (60+ organizations)
- Guidance on measurement of participation (not engagement)
- Recommends a range of measures focused on number of contacts and delivery modality (e.g., in person versus digital)

Source: <https://hero-health.org/resources/committee-publications/>

**Grossmeier
Consulting**

Guidance on measuring engagement

- Engagement is deeper than enrollment/participation
- Consider what % of eligible population:
 - completed more than one action
 - completed all available actions (genuine completion)
 - demonstrated increased knowledge, skills, behavior change
- Total reach = % of entire population reached (not just the % of eligible contacted)

Incentives and participation



How is your organization using financial incentives to encourage participation in health and well-being programs?

- For participation in program components or healthy actions
- For making progress towards or achievement of health outcomes
- For a combination of participation and health outcomes
- Don't offer financial incentives to encourage participation
- Other

Research on incentives

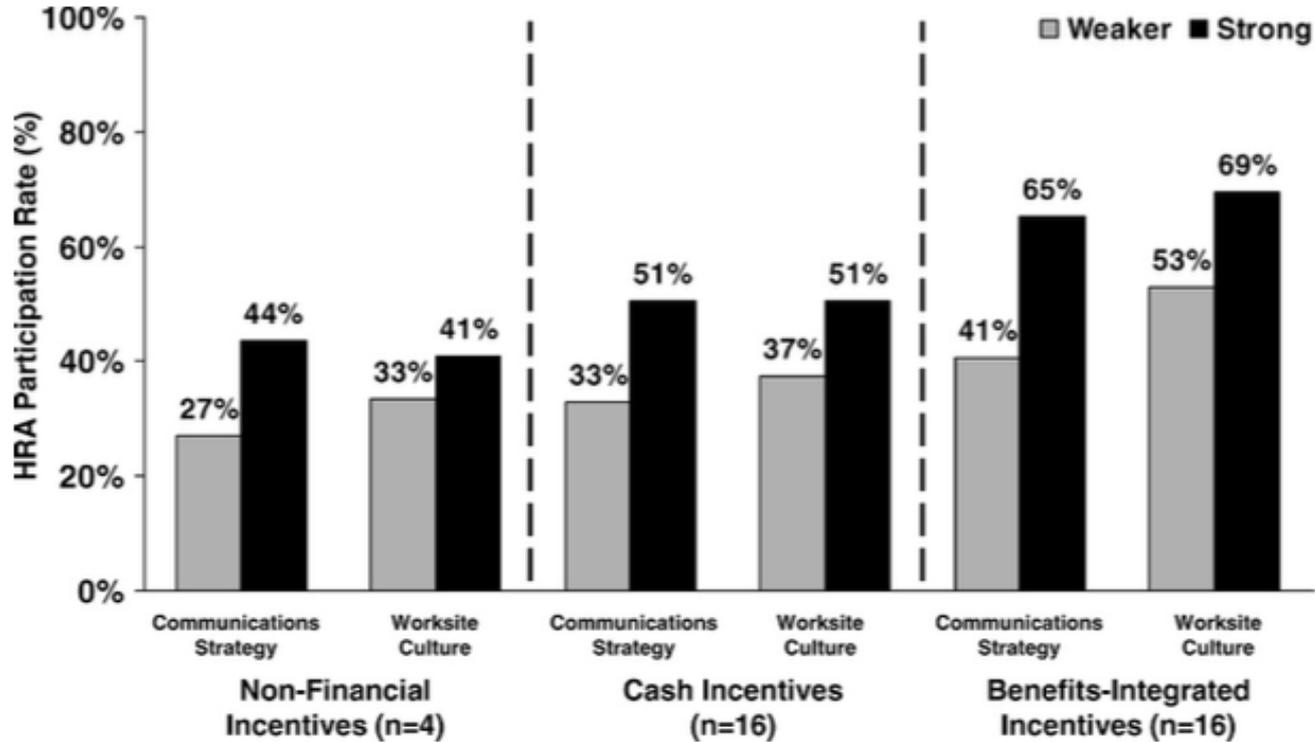
- 53% of organizations use incentives to encourage participation
- Financial incentives promote participation in simple health behaviors (e.g., health surveys, preventive exams, flu shots)
- Some effectiveness in promoting short-term increased physical activity and reduced tobacco use (as part of behavior change program)
- Age, gender, health status of individual influences how they will respond to various types of incentives

Source: Grossmeier et al. Journal of Occupational and Environmental Medicine. 2020. Vol 62(10): 874-882

Research on incentives (continued)

- Higher dollar valued incentives generally tied to higher participation rates, but participation tends to diminish over time
- Little research supporting effect of incentives on sustained behavior change and health outcomes
- Incentives strategies must be complemented by other strategies to promote population-level engagement in health

Incentives perform better with stronger worksite culture of health & communications



Source: Seaverson et al. American Journal of Health Promotion.. May/June 2009: 343 – 352.

Incentives study: workplace culture matters

FAST TRACK ARTICLE

Influence of Incentive Design and Organizational Characteristics on Wellness Participation and Health Outcomes

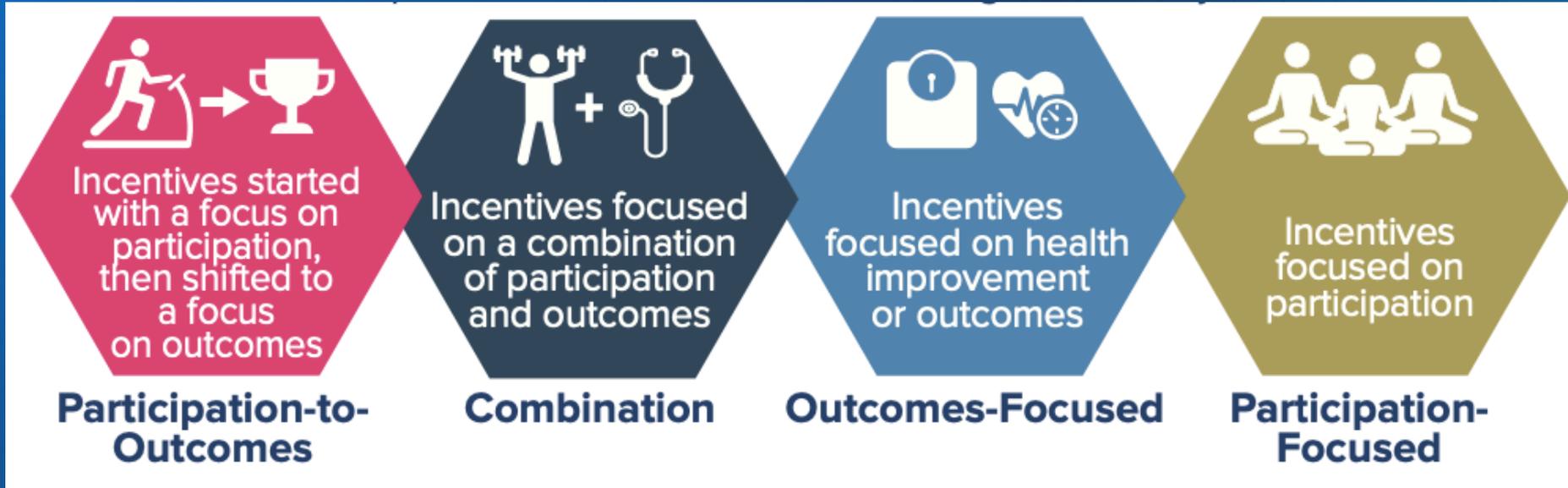
Jessica Grossmeier, PhD, MPH, David J. Mangen, PhD, David R. Anderson, PhD, Stefan B. Gingerich, MS, Rebecca J. Mitchell, MPH, Mary T. Imboden, PhD, Gordon D. Kaplan, PhD, Gregg M. Gascon, PhD, Seth A. Serxner, PhD, MPH, and Tony Bodak, MBA

Objective: To explore how changing incentive designs influence wellness participation and health outcomes. **Methods:** Aggregated retrospective data were evaluated using cluster analysis to group 174 companies into incentive design types. Numerous statistical models assessed between-group differences in wellness participation, earning incentives, and over-time differences in health outcomes. **Results:** Four incentive design groups based on requirements for earning incentives were identified. The groups varied in support for and participation in wellness initiatives within each company. All four design types were associated with improved low density lipoprotein (LDL) ($P < 0.01$), three with improved blood pressure ($P < 0.001$), and two with improved fasting glucose ($P < 0.03$). No incentive plan types were associated with improved body mass index (BMI), but designs predominantly focused on health outcomes (eg, Outcomes-Focused) exhibited a significant increase over time in BMI risk. **Conclusion:** Incentive design and organizational characteristics impact population-level participation and health outcomes.

A representative survey of US companies found that most (53%) offered incentives, with larger employers being most likely to offer them (78%).⁴ Research has shown an association between the use of financial incentives and participation in health assessment (HA) activities (eg, health risk assessment surveys, biometric health screenings), participation in health behavior interventions,^{6–8} and short-term improvements in health behaviors, such as increased physical activity and reduced tobacco use.^{9–14} These changes were typically made in association with participation in a health behavior change program,^{15–18} and all of these studies focused on individual-level participation in HWB initiatives, behavior change, and health outcomes. There is a dearth of research examining the independent effect of incentives on population-level results.

Since companies continue to provide financial incentives in their HWB initiatives, it is important to increase our understanding of what types of incentive designs are effective¹⁹ in

Four common incentive design patterns



24%

17%

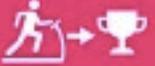
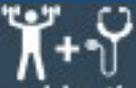
44%

16%

Source: Health Enhancement Research Organization.

https://hero-health.org/wp-content/uploads/2020/10/Infographic_HERO-incentives-study_100220_FINAL.pdf

Combo design + culture = best participation over time

	 Participation-to-Outcomes	 Combination	 Outcomes-Focused	 Participation-Focused
 CULTURE OF HEALTH	Modest score	Highest score	Lowest score	Modest score
 VALUE OF INCENTIVES OFFERED	\$538	\$753	\$1,526	\$449
 PARTICIPATION IN HEALTH ASSESSMENT SURVEYS & SCREENINGS	Close to Combination but decreased over time	Second highest and improved over time	Highest but decreased over time	Lowest and decreased over time
 PARTICIPATION IN HEALTH BEHAVIOR CHANGE INTERVENTIONS	Highest and maintained over time	Second highest and decreased over time	Very lowest and maintained over time	Very low and decreased over time

Source: Health Enhancement Research Organization.

https://hero-health.org/wp-content/uploads/2020/10/Infographic_HERO-incentives-study_100220_FINAL.pdf

Combo design + culture = best health outcomes

	 Participation-to-Outcomes	 Combination	 Outcomes-Focused	 Participation-Focused
BLOOD PRESSURE RISK				
	Significant improvement	Most improvement	Significant improvement	Non-significant improvement
CHOLESTEROL RISK				
	Significant improvement	Most improvement	Significant improvement	Significant improvement
GLUCOSE RISK				
	Most improvement	Significant improvement	Non-significant improvement	Marginal improvement
OBESITY RISK				
	Non-significant increase	Non-significant increase	Significant increase	Non-significant increase

Source: Health Enhancement Research Organization.

https://hero-health.org/wp-content/uploads/2020/10/Infographic_HERO-incentives-study_100220_FINAL.pdf

Application of research to practice

- Financial incentives work best when supported by organizational commitment to a culture of health, for example:
 - Senior leadership support
 - Comprehensive communications
 - Written strategic plan
 - Measurable written objectives for well-being programs
- A combination of participation and health-related objectives are associated with higher participation and improved health outcomes

Guidance for a Reasonably Designed, Employer-Sponsored Wellness Program Using Outcomes-Based Incentives

Consensus Statement of the Health Enhancement Research Organization, American College of Occupational and Environmental Medicine, American Cancer Society and American Cancer Society Cancer Action Network, American Diabetes Association, and American Heart Association.

Guidance for a Reasonably Designed Wellness Program

JOEM • Volume 54, Number 7, July 2012

Guide on incentives design



Source: <https://hero-health.org/resources/hero-consensus/>

Culture of health

HERO study of best practices for wellness

Quantitative Research

Workplace Well-Being Factors That Predict Employee Participation, Health and Medical Cost Impact, and Perceived Support

Jessica Grossmeier, PhD, MPH¹ , Patricia H. Castle, PhD², Jennifer S. Pitts, PhD³, Colleen Saringer, PhD⁴, Kristi Rahrig Jenkins, PhD⁵, Mary T. Imboden, PhD^{1,6}, David J. Mangen, PhD⁷, Sara S. Johnson, PhD², Steven P. Noeldner, PhD, MS⁸, and Shawn T. Mason, PhD, LP⁹

American Journal of Health Promotion
2020, Vol. 34(4) 349-358

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Source: Grossmeier et al. American Journal of Health Promotion. 2020. Vol 34(4): 349 – 358.

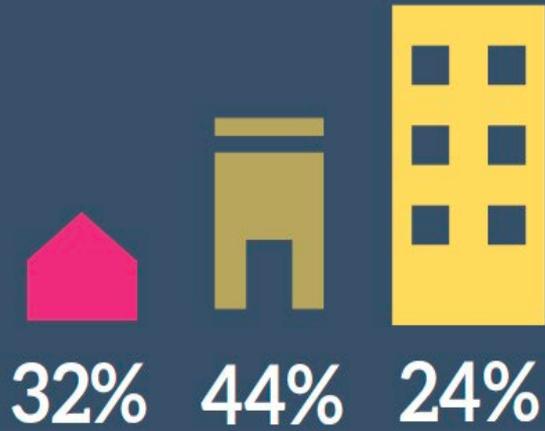
HERO Health & Well-being Best Practices Scorecard in Collaboration with Mercer[©]



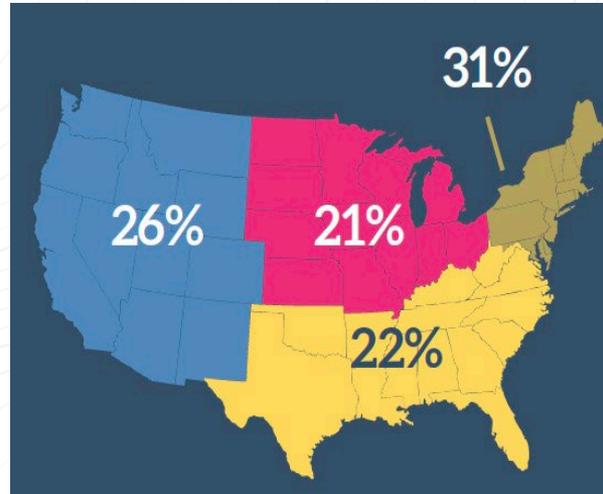
- Free online survey tool
- Study used version 4 (revised in 2021)
- Instantaneous best practice report
- Over 2,000 companies have taken the Scorecard since 2006
- <https://hero-health.org/hero-scorecard/>

Source: <https://hero-health.org/hero-scorecard/>

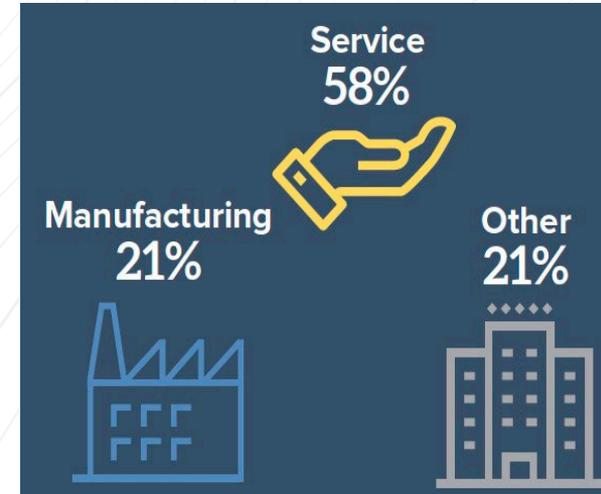
Characteristics of study companies (n = 812)



Organization Size



Geographic Region



Industry Type

10 practices drove the best outcomes

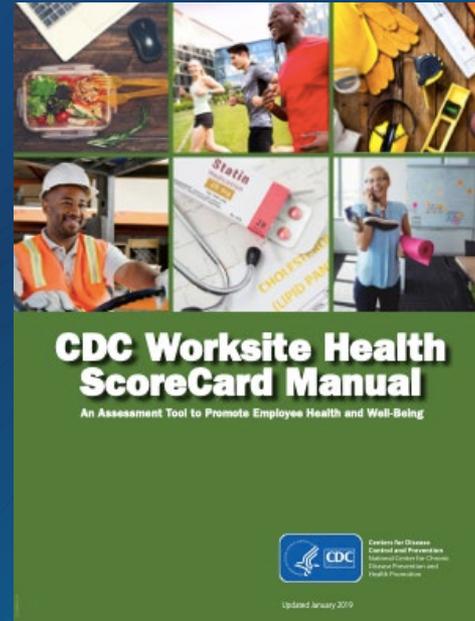


Source: https://hero-health.org/wp-content/uploads/2020/04/HERO_Infographic_Scorecard-engagement-2_FINAL.pdf

FREE tools to assess best practice approach



<https://hero-health.org/hero-scorecard/>



<https://www.cdc.gov/workplacehealthpromotion>

Application to hybrid workplace

Culture of health best practices

- Provide managers/supervisors with training, support, and resources for their well-being and to foster well-being for teams
- Encourage leaders at all levels to role model self care
- Incorporate movement moments into onsite and virtual meetings
- Incorporate mindful moments into onsite and virtual meetings
- Support flexible work schedules and prioritize short breaks
- Prioritize relationship building and meaningful connections
- Get employee feedback on what feels supportive to their well-being

Programming for hybrid workplace

- Ensure robust offerings for onsite and at home workers
- Ensure digital solutions offer 1:1 and small groups
- Reduce barriers to participation
- Allow participants in video sessions to turn cameras off
- Offer a wellness reimbursement or allowance
- Ensure offerings are relevant to worker interests / needs

Questions and Discussion





Thanks!

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Questions



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Moderator & Consultant Panel



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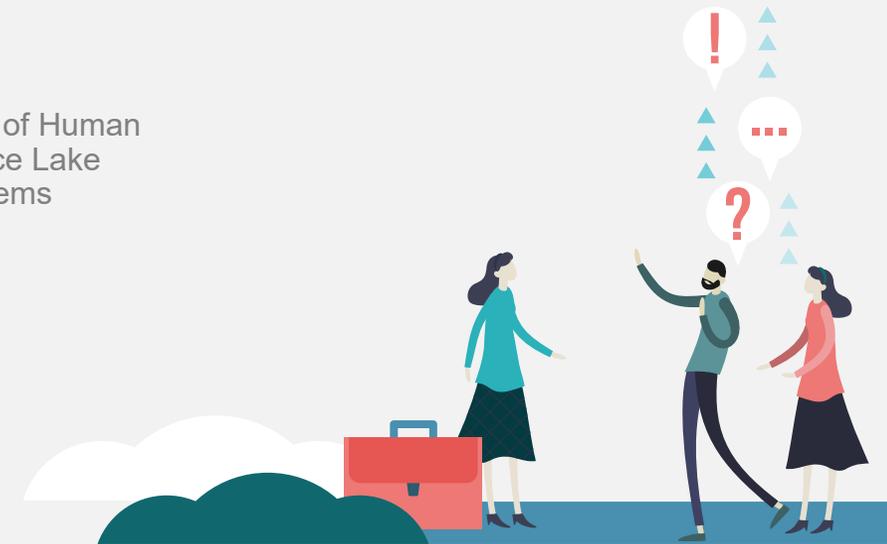
Wendy Whitehead

Director of Rewards & HR Service Delivery, Kwik Trip



Jake Nolin

Vice President of Human Resources, Rice Lake Weighing Systems



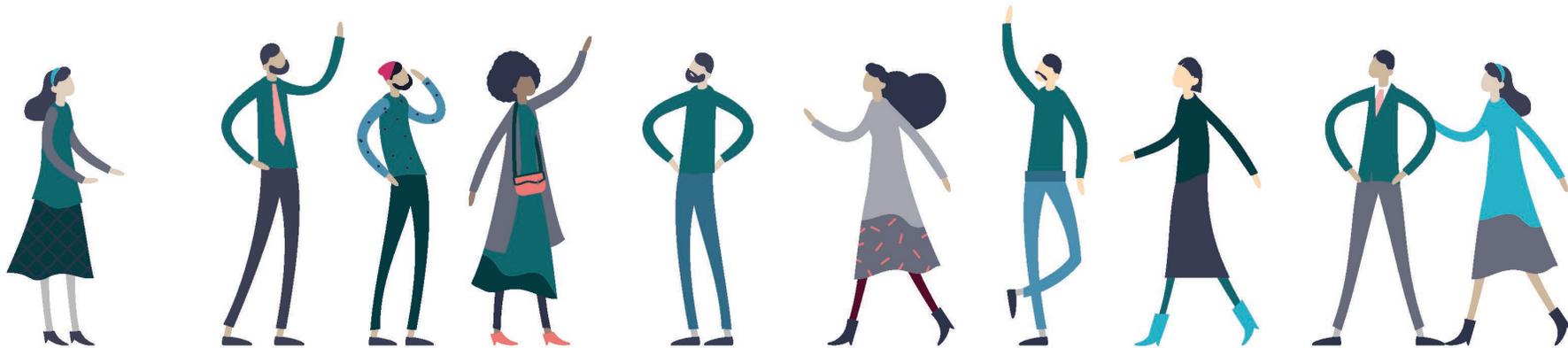
Healthcare Transformation Awards Nomination



Healthcare Transformation Awards

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