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In fall 2014, a Staff Health and Wellness Committee was formed under the charge of Staff Assembly to provide recommendations to administration as to what a comprehensive health and wellness program at UC Davis should include. Chancellor Katehi advised that including faculty in this endeavor would be beneficial, thus, faculty from the Academic Senate joined, and the committee became the Staff and Faculty Health and Wellness Committee.

The deliverables of this committee were to:

1. Develop and disseminate a Health and Wellness Needs Assessment to all faculty and staff employed by UC Davis and;
2. Establish a set of recommendations for a comprehensive staff and faculty health and wellness program based on results of the needs assessment as well as best practices.

Why should UC Davis implement a comprehensive health and wellness program for staff and faculty?

- It is in alignment and contributes to the University’s mission as well as the goals stated in the Vision of Excellence, The University of the 21st Century and the Financial Sustainability Action Plan.
- It is a “win-win” for administration and our employees.

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<th>Documented Employer Benefits Include:</th>
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<td>Better management of chronic health conditions</td>
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What is a comprehensive worksite health program?

According to the Centers for Disease Control and Prevention (CDC), programs that include the following components:

Assessment; Leadership; Culture; Environmental Supports; Policies, Benefits and Incentives; Communication; Education; Integration; and Evaluation

Current State of UC Davis Health and Wellness Programming:

UC Davis has been supporting employee health and wellness with minimal time and resources
through WorkLife and Wellness, Occupational Health, Physical Medicine and Rehabilitation Therapies and multiple mutually beneficial partnerships. However, in order to help staff and faculty improve their long-term health and wellness, implementation of a medically-based program focused on behavior and lifestyle change will be essential.

Conclusions from the Staff and Faculty Health and Wellness Needs Assessment:

1. Survey respondents provide reasonable representation of the demographics of the two campuses.
2. The top six health and wellness goals were: (1) Improve well-being, (2) Increase physical activity, (3) Improve energy, (4) Lose weight, (5) Improve work/life balance, and (6) Manage or reduce stress.
3. Most respondents consider themselves in an Action or Maintenance stage for health and wellness, which provides great opportunities.
4. The top 4 priorities for a health and wellness program includes the facilitation of: (1) Exercise, (2) Work/life balance, (3) Stress management, and (4) Weight loss.
5. Financial incentives would encourage respondents to participate in health and wellness programs.
6. The greatest percentage of respondents would prefer to participate in health and wellness programs during work hours or after work.
7. Managers need to provide a culture that supports and encourages employees to participate in health and wellness activities.

Recommendation from the Staff and Faculty Health and Wellness Committee:

Development of a comprehensive and integrated health and wellness program across UC Davis, with emphasis upon medically-based behavior and lifestyle change programs, is warranted to address the priorities identified in the needs assessment and afford the documented benefits to both the employer and employee.

Recommended Strategies:

To achieve this goal, we recommend adequate and appropriate resources to:

1. Expand the infrastructure already built through a Health Promotion Committee Driven model as defined by the CDC;
2. Establish and implement medically-based behavior and lifestyle modification programs;
3. Operate as a Professional Staff Driven model as defined by the CDC.

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\( ^a \) See Appendix A for current UC Davis assets

\( ^b \) See Section 5 for Needs Assessment results

\( ^c \) Stage 4 and 5 in the 5 Stage of Change Theory Model developed by Carlo C. DiClemente and J.O. Prochaska
Recommended Actions:

1. **Provide a budget** that will allow for continuous assessment, environmental support, incentives, communication, education and evaluation (See Section 2).
2. **Hire a 1.0 FTE Worksite Health Program Manager** to lead the initiative and to coordinate campus and Health System health and wellness efforts (See Section 2).
3. **Establish an Administrative Advisory Committee** on Staff and Faculty Health and Wellness with leadership involvement (See Section 2).
4. **Align health system and campus resources** (See Appendix A) to coordinate an integrated, comprehensive worksite health and wellness program that covers Sacramento, Davis and remote sites.

Specific to the priorities of **exercise** and **weight loss**, we recommend:
- Providing greater resources for employees including, but not limited to, access to exercise equipment and space, exercise training programs, exercise and weight management education and individual wellness programs (See Section 5).

Specific to the priorities of **work-life balance** and **improved stress management**, we recommend:
- Providing additional resources as well as programs, policies and services that support work-life integration and workplace flexibility to enable employees to better coordinate work and personal schedules (See Section 5).

Specific to the goal of **well-being (health and happiness)**, we recommend:
- Creating campaigns and programs to increase awareness and skills on scientifically proven strategies and practices (See Section 1).
  - Examples include: Mindfulness meditation, Gratitude education (UC Davis Emmon’s Lab), Nutrition and Physical Activity programs and UC Berkeley’s Greater Good Science Center.
Causes and Costs of Modifiable Health Risk Factors in America

The widely available data describing the current state of health in the United States reveals increased rates of poor mental and physical health outcomes resulting from modifiable risk factors. Modifiable risk factors, such as smoking and high blood pressure are conditions that increase one’s risk of developing a disease, but these risk factors can be intervened upon. The Centers for Disease Control and Prevention (CDC) cites that less than one-third of adults in the United States consume an adequate serving of vegetables per day, and 81.6% of adults do not perform enough physical activity. Poor diet and physical inactivity levels are known risk factors for adverse health conditions such as obesity, high blood pressure, high cholesterol, diabetes, and heart disease. Physical inactivity has also been associated with poor mental health outcomes, including depression and loss of cognitive functions. Due to the rising prevalence of preventable illness, annual healthcare spending in the United States has increased from $75 billion in 1970 to $2.7 trillion in 2011, accounting for 17.9% of the Gross Domestic Product. Direct medical expenditures were approximately $147 billion for obesity in 2008 and $313.8 billion for cardiovascular disease and stroke in 2009. The importance of targeting modifiable risk factors in public health programming is evident in the health care expenditures recorded in recent years.

Costs of Poor Employee Health in America

It is projected that almost one-third of Americans entering the workforce today will become disabled before they retire. Furthermore, the majority of long-term absences result from cancer, heart disease, and other largely preventable illnesses. This is costly for employers, who typically subsidize the cost of health coverage for employees and their families. Studies have shown that employees with risk factors such as obesity and physical inactivity can cost employers billions of dollars in excess healthcare costs; the CDC states that employers spend up to $93 billion dollars per year on health insurance claims as a result of obesity and related chronic diseases.

While the costs of health insurance for employers are onerous, a 2009 study showed that indirect costs of productivity loss among employees can actually be 2.3 times higher than direct costs.
medical and pharmacy costs. Productivity loss consists of absenteeism and presenteeism; absenteeism is the lack of presence at work (e.g., sick days), while presenteeism is diminished performance at work due to impairment by health problems, risk factors, or work-life issues. There is evidence that modifiable health risks and health conditions, such as obesity and diabetes, can impair job output and quality of work. These productivity losses ultimately translate into financial losses to employers nationwide. A 2003 study of a random sample of nearly 29,000 employees in the United States showed that productivity losses as a result of personal or family health problems cost employers $225.8 billion (or $1,685 per employee) in the previous year.

Prevalence and Costs of Poor Employee Health at UC Davis

UC Davis is a leading teaching and research institution, employing more than 29,800 faculty and staff, many of whom are subscribers to the Kaiser Permanente health plan. 6,259 UC Davis employees who were subscribed to the Kaiser Permanente health plan were assessed between 2013 and 2014 in its Partnership in Health Report, and it was revealed that 51% of UC Davis’ health care costs were driven by the 19% of employees with chronic conditions. This report indicated that 64.9% of employees were overweight or obese and 33% had borderline high or high total cholesterol. Although these values are slightly lower than the Kaiser Permanente adjusted regional averages (i.e., 69.2% for overweight/obese and 36.3% for high cholesterol), the percentage of UC Davis employees falling into these categories is significant. Kaiser Permanente also identified a 6.4% high blood pressure rate, a 5.3% hypertension rate, and a 5.6% diabetes rate amongst subscribers.

StayWell, a health engagement company that uses data, research, and behavioral science to optimize organizational success, also conducted a health assessment of 679 UC Davis Health System employees and 213 spouses in 2011. The report uses StayWell's Book of Business (BoB), which draws averages from nearly one million StayWell assessments as a basis for comparison. Results showed that 48% of UC Davis Health System employees surveyed were classified as moderate to high risk in the category of eating (defined as the consumption of too many servings of foods high in trans or saturated fat, as well as inadequate consumption of healthy food), and 36% in the category of exercise (defined as not enough moderate to vigorous intensity physical activity). Although the BoB prevalence for moderate to high risk in the categories of eating and exercise, 55% and 37%
respectively, were slightly higher than those of the UC Davis Health System employees, there is still much room for improvement among both groups. Compared to the BoB, the UC Davis Health System had a higher percentage of individuals classified as moderate to high risk in the category of stress (56% compared to 53%). Improvements in both exercise and dietary intake will be critical, as they affect both mental and physical health.

The StayWell report projected the costs to the UC Davis Health System resulting from adverse employee health outcomes. An analysis of modifiable health risk factors showed that UC Davis Health System employees generated about $5,333,500 in both direct healthcare costs and avoidable indirect costs (i.e., absenteeism, disability workers’ compensation, lost productivity, and employee turnover) in 2011. The five risks that contributed the most to the group’s avoidable direct healthcare costs were stress (28.4%), overweight (24.5%), well-being (14.3%), cholesterol (10.2%), and exercise (8.2%). Insufficient exercise was estimated to contribute $173,600 in avoidable direct healthcare costs, while stress contributed about $600,000 (about $674 per participant). Productivity losses resulted from 2,477 missed work days in the 12 months prior to the assessment. StayWell estimated that the 679 participants in the assessment generated $3,218,900 in avoidable indirect costs to UC Davis in 2011.

Intervention Evidence

The significant amount of time spent in the workplace make it an optimal location to promote wellness initiatives intended to improve health behaviors and outcomes. Additionally, the potential social support in an office space, the opportunity to target health behaviors through a variety of influences, and the ability to improve behaviors synergistically make workplaces perhaps the most efficient settings for health interventions. According to Berry et al., a worksite wellness program is “an organized, employer-sponsored program that is designed to support employees (and, sometimes, their families) as they adopt and sustain behaviors that reduce health risks, improve quality of life, enhance personal effectiveness, and benefit the organization’s bottom line.” Other important components include managerial support and integration of activities and resources into the existing workplace environment.

Key measurements of a worksite wellness program include its utilization (the total number of
employees involved), penetration (the percentage of participants in at least one activity), and depth (the relative use of activities by different employees). Studies show that participation and interest are critical to observing successful changes in health outcomes. Worksite wellness participation rates vary by location, but are often below 50%. Maintaining long-term participation in workplaces is a challenge for worksite wellness programs, so to ensure a sustained and lasting impact, the program must extend beyond competitions and incentives that attract participants in order to maintain improvements and progress.

Making activities more accessible to each department as well as integrated into work schedules is critical to sustaining participation. In a study of 10 organizations in various sectors, key components of successful worksite wellness programs include multilevel leadership, ranging from a chief financial officer to volunteer champions; alignment with the organization’s mission; scope, relevance, and quality; accessibility; external partnerships; and appropriate and thorough communications. The most successful programs (regardless of size) have six pillars: engaged leadership at multiple levels; strategic alignment with the company’s identity and goals; a design that is broad in scope and high in relevance and quality; broad accessibility; internal and external partnerships; and effective communications. According to the Institute of Medicine’s Healthy People 2010 objectives, a comprehensive wellness program includes health education, screenings linked to medical care, and integration into organizational structure.

Comprehensive worksite wellness programs show significant and consistent evidence of potential health benefits. In a systematic review of 33 large-scale comprehensive programs, 64% showed improved levels of physical activity based on education and individual counseling that increased participants’ readiness to change and maintained progress past the intervention. Half of the programs increased fruit and vegetable consumption and reduced caloric intake, and they similarly included group-level counseling and access to farmers markets. Of those programs that measured biological markers, half reported reduced Body Mass Index (BMI), blood pressure, and body fat. Finally, of those that evaluated perceived mental health, three-quarters improved risk of stress and general mental health.

These health improvements translate into benefits to employers. A meta-analysis of 42 workplaces that initiated health promotion programs measured a 28% reduction in sick leave
absenteeism, 26% reduction in health care costs, and 30% reduction in workers’ compensation and disability management claims. Studies focused on the effectiveness of physical activity interventions show they typically improve productivity, decrease employee turnover, reduce healthcare costs, and can ultimately save up to $700 per year per participant (averaged over various employers). Many studies have estimated a return on investment to employers as high as six to one. A meta-analysis found that medical costs fall by $3.27 and absenteeism-specific costs fall by $2.73 for each dollar spent on wellness programming. This value reaches $3.36 if participants are randomly assigned, indicating that healthier subjects are more likely to voluntarily participate. Finally, larger employers such as universities, may expect more success due to scaled programming and resources that increase their reach.
Defining Health and Wellness

The World Health Organization (WHO) defines Health as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity; and Wellness as the ability to live life to the fullest and to maximize personal potential in a variety of ways. Wellness combines all dimensions of well-being into a quality way of living. UC Davis’ eight dimensions of wellness include; occupational, emotional, spiritual, environmental, financial, physical, social, and intellectual all interacting to contribute to optimal health and wellness.

University of Michigan MHealthy Employer Health and Well-Being Benchmarking Study

A 2015 benchmarking study done by the University of Michigan found that well-developed employer health and well-being programs addressed most if not all of the following topics: health risk appraisals, wellness screenings (e.g., cholesterol, blood pressure, glucose, BMI, height, and weight), flu shots, online behavior change programs, online physical activity trackers, health coaching (telephonic and onsite), healthy food options, fitness center(s), smoking cessation, weight management, and stress management programs, onsite occupational health clinics, ergonomics, employee assistance programs, disease management programs, evaluation, and organizational integration.

The findings of this survey also showed that peer universities and health systems with well-established wellness programs spend from $65 to $178 per employee per year on wellness programming (additional budgets are in place for administration of programs, employee assistance programs, occupational health services, disability management, etc.). In addition, the majority of programs had more robust incentive strategies, ranging from $240 to $1,200. The majority of incentives were integrated with the health benefit plan. Based on the respondents to this study, the amount of incentive offered for participation seems to be correlated with the percentage of participation by employees.

The Centers for Disease Control and Prevention (CDC) Work@Health® Recommendations for a Comprehensive Worksite Health Program

With individuals spending over one-third of their waking hours at work, the CDC deems it

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Adapted from CDC’s Work@Health® Program Training Manual: [http://www.cdc.gov/workathealth/](http://www.cdc.gov/workathealth/)
essential to address lifestyle, behavior and health in our work environment throughout the day. How much we move, what we eat and how we manage stress at work influences our health and wellness.

In April 2014, UC Davis staff participated in the CDC’s Work@Health® Hands-On Training in Oakland, CA. This training and on-going technical assistance throughout the year provided a structure and base from which to launch the Staff and Faculty Health and Wellness Committee through Staff Assembly. The following section details the components of a comprehensive worksite health program.

The CDC Work@Health® Program’s overarching goals are; to increase the number of science-based worksite health programs, policies and practices; increase the access and opportunities for employees to participate in them; and to promote peer-to-peer community based employer cooperation and mentoring. The CDC Work@Health® Program created eight modules to guide employers in creating a comprehensive science-based worksite health program.

Module 1 – Making the Business Case

There are three “arguments” for a comprehensive worksite health program according to the CDC’s Work@Health® Program; “health cost,” “productivity,” and “great place to work.” The CDC Work@Health Program refers to strong evidence that a worksite health program can positively impact tobacco use, high blood pressure/blood cholesterol, days absent due to illness or disability, musculoskeletal disorders and psychosocial work factors that impact chronic disease. They also produced evidence that implementing such a program improves recruitment, retention and leads to the employer becoming an “Employer of choice.”

Module 2 – Assessing Your Worksite

Assessing the worksite is key in any successful worksite health program. Assessments should be done at the individual, interpersonal, organizational and environmental level. In order to design a program effectively, continuously improve it, and make value based investments, assessing the employee population is essential.

Module 3 – Building Leadership Support

Supportive leadership is an essential element for a sustainable program, and successful programs have leaders that understand that employee health is a core business value, and that leadership drives the establishment of a culture of health.
The CDC defined the “culture of health” as: *The creation of a working environment where employee health and safety is valued, supported and promoted through worksite health programs, policies, benefits and environmental supports.* This means that the “culture of health” exists through all levels of the organization; it is a routine part of business operations and it is aligned with business goals.

There are two “leadership” models for a comprehensive health program according to the CDC Work@Health® Program.

1. Professional Staff Driven (Example 1):
   - Led by a professional staff/manager
   - Health Promotion Committee acts as an advisory board
   - Common among large employers with more resources and a larger population to engage

2. Health Promotion Committee Driven (Example 2):
   - No professional staff
   - Employees are assigned or volunteer
   - Guides program
   - Secures leadership support
   - Best suited for employers that are small with limited resources

In addition to leadership, three other groups are stated as key to a successful program; middle managers, health promotion champions and a health promotion committee. Middle managers are the
decision makers, implementers, enforcers and gatekeepers to participation and health promotion
champions provide feedback, promote within their work groups, organize healthy events and create
action plans for their work group. The CDC Work@Health® Program suggests that a Health Promotion
Committee be composed of no more than 2-8 members with broad representation meeting at least
monthly. Duties include; evaluating current programs, services and policies; assessing employee needs
and preferences; developing a health promotion operating plan; managing the delivery of health
promotion programs and services; assisting in getting buy-in and support; and assisting in program
delivery by implementing, promoting, monitoring and evaluating.

Module 4 – Developing Policy, Benefit, and Environmental Supports

By implementing key policy, benefit and environmental supports, a reduction in barriers and an
engagement in positive health practices will contribute to a “culture of health.” The CDC
Work@Health® Program states that the common barriers to engagements are: Trust, Time, Money,
Access/Convenience, Lack of awareness/Communication, and Lack of incentives. It is suggested that
using multiple interventions for a single health issue and using interventions that address multiple
health issues at the same time can be more effective. To maximize effectiveness, it is encouraged that a
worksite health program be integrated with other programs such as safety. Examples of what policies,
benefits and environmental supports can accomplish are below.

- **Policies**
  - Tobacco free
  - Combat obesity – e.g. healthy food policies
  - Encourage physical activity – flex time policies

- **Benefits**
  - Affordable medical benefits
  - Tobacco cessation benefits
  - Preventive benefits

- **Environmental Supports**
  - Incentives
  - Discourage tobacco use
  - Promote physical activity
  - Encourage healthy nutrition
Help manage stress

Module 5 – Designing Effective Communications

The CDC Work@Health® Program recommends a robust communication plan. Suggestions include:

1. Knowing your audience
2. Perform a communication audit – formal and informal channels
3. Use different learning styles
4. Know the needs/interests of demographics
5. Create a brand and the mission and vision statement for the program to create recognition and buy-in
6. Create 3-5 key messages articulating the value and benefits of worksite health
   a. Program is aligned with mission, goals and objectives
   b. Key messages do not change unless your program focus changes
   c. Reinforce key messages throughout your communications
7. Use different methods of communication based on goal of information
   a. Awareness
   b. Knowledge
   c. Motivation
   d. Reinforcement

Module 6 – Evaluating Your Program


Module 7 – Planning and Designing Your Program

The CDC Work@Health® Program suggests that the overall program plan should include the following:

- Systematically linking health and productivity metrics
- Ensure confidentiality of employee information
- Leverage and build on existing activities
- Recognize the diverse needs of individuals and groups
• Provide multiple education and participation opportunities

9 programming components and 9 steps to planning and designing a worksite health program are listed.

Programming components consist of:

1. Assessment
2. Leadership
3. Culture
4. Environmental Supports
5. Policies, Benefits, Incentives
6. Communications
7. Education
8. Integration
9. Evaluation

Steps to planning and designing:

1. Forming a health promotion committee
2. Integrating data
3. Identifying needs/interests
4. Prioritizing needs/interests
5. Composing a mission statement
6. Writing overarching goals and objectives
7. Determine program scope
8. Determine program mix (awareness, lifestyle/behavior change, environmental support) and intensity
9. Determine program reach and effectiveness

Module 8: Implementing and Sustaining Your Program

According to the CDC Work@Health® Program, program implementation should consider multiple components. A master schedule with responsibilities is recommended with a staffing structure necessary to implement and maintain the program; a carefully planned launch; and a full program roll-out or a phased-in approach should be decided upon. Considerations to include family members should also be made. It is important to take proactive steps in establishing positive relationships with vendors and ensuring that incentives and rewards comply with ACA guidelines. In addition, completing policy and
procedure manuals will help standardize operations.

Program sustainability is achieved through capacity building, maintenance of program components and institutionalization. Institutionalization can be measured by how well the program fits the worksite culture, leadership style and mission. Is it:

- Aligned with employee benefits (e.g. medical, disability, incentives)
- Aligned with employer’s business strategy
- Aligned with the best practices
- Aligned with leadership job performance criteria/annual reviews
- Part of the annual budget
University of California, Berkeley

UC Berkeley has the most comprehensive staff and faculty health and wellness program (Health*Matters) of all the UC campuses. Founded in 1990, it has permanent funding through the Employee Support Fund and in 2006, added funding through Be Smart About Safety. UC Berkeley has an annual budget that covers 5 full time staff members working on wellness programming, including a Program Manager, Dietitian, Worksite Wellness Specialist (focused on high injury departments), Wellness Program Specialist, and a Wellness Program Coordinator.

Health*Matters is a collaborative partnership between University Health Services and Environment, Health & Safety, Human Resources, Recreational Sports, and the Physical Education Program. Health*Matters is housed under Employee Health Services and strives to create a healthy campus community and work environment through integrated programs and services designed to:

- Provide tools to faculty and staff so they can develop skills to lead healthier lifestyles and prevent injury and illness.
- Build a workplace culture that supports healthy lifestyles by making the healthy choice the easy choice.

Health*Matters Programs:

- **Know Your Numbers**: A voluntary, fasting health screening including total cholesterol, HDL, LDL, and triglycerides, glucose, blood pressure, weight, body mass index (BMI), and waist circumference.
- **Active @ Work**: Includes a variety of activities/programs such as Berkeley Walks (walking groups & campus walking tours), various fitness classes, activity breaks (standing and stretching breaks, breathing/relaxation breaks, power breaks, and movement breaks) and recreational sports.
- **Nutrition Programs**: Classes, webinars, and workshops on healthy eating and cooking; Eat Well logo is used on campus to help people identify healthier food options throughout campus and the community.
- **Tools for Managers and Supervisors**: Offers resources and suggestions on how to promote a healthy work environment and support staff wellness.
- **Wellness Ambassadors**: Volunteers who play a vital role in supporting Health*Matters Wellness Program for Faculty and Staff by promoting health and wellness programs amongst co-workers, departments, or friends on campus. Any UCB faculty or staff can volunteer to be...
a Wellness Ambassador.

Other UC Berkeley Programs:

- **WorkFit**: An in-house fitness program developed by the Department of Recreation and Sports that provides certified fitness instructors to lead group classes at work sites around campus.
  - Unlimited classes for 8 weeks: $20; unlimited classes for 12 weeks: $30

- **WorkFit U**: WorkFit U is a 12 week wellness program for UC Berkeley faculty and staff that focuses on making small habit changes through workouts, educational workshops and a health coach in order to promote a healthier lifestyle.
  - Cost is $299 for 12 weeks and is limited to 20 participants.

University of Michigan

**University of Michigan’s MHealthy Program** was established by former President Mary Sue Coleman in 2005 to encourage a culture of health at the University of Michigan. This comprehensive program currently offers more than 100 classes at a number of locations on both campuses spanning from fitness to stress management. Housed under Human Resources, MHealthy is led by the Senior Director of University Health and Well-Being Initiatives and the Chief Health Officer and Director of University Health Service. MHealthy also has a number of staff specializing in health behavior change, including fitness, nutrition, tobacco cessation, alcohol management, and health behavior and health education.

MHealthy aims to:

- Promote the health and well-being of the University of Michigan community
- Develop a more cost-effective delivery of health care as a model for other institutions
- Advance public discussion and social commitment to change by harnessing the intellectual capacity of the University to develop, test and study efforts to improve the wellness of employees, dependents, and retirees.

Notable programs include:

- **Active U Autumn**: Open to U-M faculty, staff, students and retirees, spouses and OQA’s. Launched every September, Active U Autumn is MHealthy’s six-week physical activity challenge designed to get the entire university community moving more. Individuals of all fitness levels are encouraged to participate.

- **Personal Trainers and Personalized Exercise Sessions**: A free MHealthy Personalized Exercise
Session; meet with a Physical Activity Coordinator for 30-45 minutes to discuss goals, barriers and other factors related to physical activity and fitness.

- **Fit-Script**: Exercise program for people with special needs.
- **Move, Lose, and Maintain**: A free eight-week healthy lifestyle program designed to help participants move more and eat in a healthier manner.
- **Thrive!**: A comprehensive stress management and prevention program that aims to foster psychological well-being by energizing work climates, enhancing relationships, and maximizing personal strengths.

MHealthy Annual Report highlights the program’s most recent achievements.

MHealthy Five-Year Strategic Plan (2009-2013)

*The Cleveland Clinic*

The Cleveland Clinic is an example of an academic medical center that provides a self-funded insurance plan for their employees. As it has been announced, the University of California will also be partially or entirely self-funded by 2017. The Cleveland Clinic offers a Healthy Choice Program for their employees, spouses and domestic partners who are enrolled in the “Health Plan.” The Healthy Choice Program lowers premiums for their members when they complete certain requirements. Members and their partners need to “actively participate” in the program in order to qualify. This means that they join the program, follow all rules, which includes regularly communicating with care coordinators, responding to messages, completing/submitting required forms and actively participating in modifying lifestyle behaviors to help maintain/improve health. The key diagnoses that are flagged for lifestyle modification programs are asthma, diabetes, hyperlipidemia, hypertension, tobacco use and overweight/obesity. A 2012 report from the UC Davis Health System’s Integrative Medicine Program, “Wellness: The Cleveland Clinic Experience,” summarizes a presentation given by Dr. Michael Roizen of the Cleveland Clinic and provides recommendations to UC Davis to model this program in order to reduce healthcare expenditures.°

° See Appendix B
Systemwide Efforts and Support

**UC Living Well** is a systemwide wellness initiative coordinated by the University of California Office of the President (UCOP) housed in UCOP Human Resources. The program was piloted in 2007 to increase employee participation in wellness programs and services that focus on prevention and encourage a healthy lifestyle. UC Living Well’s mission is to transform the University of California into the “healthiest university system in the nation” by building a culture of health and wellness among UC staff, faculty, and retirees.22

UC Living Well has provided a Health Risk Assessment (HRA) that is administered by a third party vendor (StayWell and most recently in 2014 and 2015, Optum). The HRA provided eligible UC employees (a member of a UC health plan and in a union that had opted in) with a yearly snapshot of their health, follow-up health coaching and offered the opportunity for a small financial incentive. Originally, the HRA was intended to provide each campus’ wellness program with data that they could use for future programming at their location, however, in the past two years no data has been available for this purpose. The third-party contract will end in 2015 and a task force will be gathered to determine what the next steps for UC Living Well will include.

In addition to UCOP’s efforts, wellness coordinators across the system communicate monthly to work on UC Living Well’s strategic goals and have formed subcommittees dedicated to meeting the 2014 three year priorities.† A document has been produced by a subcommittee of this group that describes the UC Living Well – Wellness Program Minimum Standards Framework.‡ This framework is based on best practice, evidence based strategies and is aligned with the CDC Scorecard, UC’s current tool for wellness program evaluation. In the future, all UCs will use these standards to guide programming and to ensure that best practice and evidence based strategies are utilized.

**WorkStrong** is a systemwide University of California program housed in UCOP Risk Services. It was developed with the expertise and collaborative support of UC staff in wellness programs, occupational health and recreational sports, and is designed to promote recovery and prevent future

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† See Appendix C
‡ See Appendix D
workplace injuries. Each UC campus has a unique program to suit the needs of the employees on its campus. UC Davis and UC Davis Health System each has a WorkStrong Program that serves the UC Davis employee population. The UC Davis campus WorkStrong program is housed in Occupational Health Services and the UC Davis Health System program is housed in Physical Medicine and Rehabilitation Therapies (PM&R). Both programs show promising results; and after a 2015 actuarial study of the first 31 months of inception, the UC WorkStrong Program, systemwide, has produced 39% less worker’s compensation claims than expected and 29% less dollars spent.  

**The Need for a Comprehensive Worksite Wellness Program at UC Davis**

As previously stated, an individual spends a significant portion of their day at work, thus the work environment is critical in determining access to and engagement in healthy behaviors. The CDC states that a positive culture of wellness in the workplace is an important contributor to physical and mental health. Worksite wellness programs provide a space for employees to maximize their health during the workday as well as reduce health-related costs and the number of sick days. Healthy behaviors adopted in the workplace may also be used at home and shared with family. This sharing of information could increase employee productivity, which may be impacted by familial health problems, and reduce costs to employers who may subsidize health care for family members.

Kaiser Permanente and StayWell reports indicate the need to improve the less-than-optimal health of employees at UC Davis. A robust comprehensive worksite health and wellness program does not currently exist, and it would require both funding and staff who can dedicate time to its implementation and management. Several employees at UC Davis who have volunteered to become Wellness Ambassadors within their departments have shown a desire to create more environmental support for healthy behaviors, but their impact is limited by the lack of wide-reaching health and wellness programming and leadership support. UC Davis has an opportunity to strengthen current efforts to improve physical, nutritional, and mental well-being amongst its employees by establishing a more robust comprehensive health and wellness program.

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\(^{h}\) See Appendix E for the UC Davis campus WorkStrong 2012-2014 Summary
**UC Davis Efforts and Support**

Although, currently uncoordinated, there are many existing assets on both the UC Davis main campus and at the Health System that provide ways for staff and faculty to maintain and improve upon all dimensions of health and wellness. A number of them grant opportunities to engage in worksite wellness activities and programs during working hours. These programs and partnerships have various levels of organization, administration and participation by employees. Furthermore, they offer a solid platform for expansion to a comprehensive and integrated health and wellness program for staff and faculty. Assets available to UC Davis employees support health and wellness in a number of ways, including physical spaces to exercise, instruction, motivation and incentives, communication, education and evaluation. However, there is a lack of coordination to integrate these assets into a comprehensive health and wellness program.

**HR: WorkLife and Wellness (WLW)**

WorkLife and Wellness offers a variety of programs, services and information to encourage healthy living and well-being, including resources to help with family care, breastfeeding support, volunteering, and workplace flexibility. WLW is the designated representative for the UC system wide Wellness Coordinators group and UC Living Well initiative. WLW leads the annual Wellness Fair, UC Walks, Food Day observance, Aggies on the Move and the Wellness Ambassador Program pilot. WLW also provides a wellness website, newsletter and publications intended to communicate the wide array of assets that currently exist within the university and local community. WLW works closely with Strategic Communications and Staff Assembly to disseminate the information through Dateline and Staff Voice.

**UC Living Fit Forever**

UC Living Fit Forever (UCLFF) is a free program offered to all UC Davis Health System employees, faculty, residents and students. This program was initiated as a pilot program in August of 2011, and outcome results clearly demonstrated improvement in physical conditioning and improved mental health. UCLFF offers a multidisciplinary approach (fitness trainers/health coaches, physical therapist, dietitians) providing group fitness classes, individualized health coaching, and group educational classes. Currently there are over 1200 employees signed up and expansion has occurred to 4 satellite Primary

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1 See Appendix A
Care Network sites. Initially the pilot program consisted of twice weekly fitness classes, and the current program now provides 50 on-site fitness classes, averaging 85 participants per day. This program and the new pilot program UFit (a wellness program designed for employees currently utilizing Federal Medical Leave Act (FMLA)) have shown promising results, and are examples of how to engage and empower employees to improve their health and wellness.

**Initiative for Wireless Health and Wellness (iWHW)**

There is also a promising program stemming from a UC Davis Research Investments in Science and Engineering (RISE) funded project out of the Initiative for Wireless Health and Wellness (iWHW). This project provides support and new tools for guiding health professionals and consumers toward increased health. This group has developed a web portal (*UCmHealthy*) for individuals to see their health and wellness related data and for researchers to access this data unobtrusively. By using devices such as FitBits®, participants can track their health improvements and increase their motivation to exercise. The current study’s “Healthy U Initiative” main goals are to:

- Identify, characterize, describe and instantiate knowledge domains related to health and lifestyle improvement
- Design information infrastructure for capturing health and lifestyle data, information, and knowledge
- Formulate evolve-able personalized recommender systems for extended health, pleasure & happiness

The current study “Healthy U Initiative” is completing data collection and will be quantitatively comparing the effectiveness in lifestyle changes utilizing only the FitBit® vs. health coaching with the FitBit®. Preliminary data from the Healthy-U Employee Wellness study is demonstrating that employees who receive technology like FitBits®, as well as personalized health coaching based on these data streams are significantly more successful at improving a variety of health metrics including weight loss and aerobic fitness. Utilizing a program such as this for staff and faculty health and wellness would serve the original purpose of the UC Davis RISE grant to, “lead to transformative knowledge and technologies that will aid in solving major problems facing our state, nation and the world.”

**Current Staffing**

Currently, the Health System has one 0.6 Full Time Equivalent (FTE) WorkLife and Wellness Coordinator. The main campus has 25% of 1.5 FTE in the form of a WorkLife and Wellness Manager and a WorkLife and Wellness Coordinator. The WorkStrong Coordinators on campus and at the Health
System both dedicate some of their time to staff and faculty health and wellness as well, with the WorkStrong Coordinator at the Health System heading up UC Living Fit Forever and UFit.

UC Davis has been working on supporting employee health and wellness with minimal time and resources, essentially with a Health Promotion Committee driven model\(^1\) that is better suited for smaller employers with limited resources. The current offered events and services are a good start, but in order to support staff and faculty improve their health and wellness long term, a comprehensive, medically based program focused on behavior and lifestyle change will be essential.

Communication and increased engagement between departments and the campus community will be key moving forward. As the Staff and Faculty Health and Wellness Committee learned from results from the campus-wide needs assessment,\(^k\) just over 43% of respondents have never participated in any of the health and wellness programming already offered by UC Davis; almost a third of respondents reasoning for this was that they were unaware of what is offered.

Without sufficient resources (both monetary and dedicated staff), a robust communication strategy, and a plan to align existing and future resources, a comprehensive campus-wide worksite health and wellness program will not be sustainable.

**Current UC Davis progress toward a comprehensive worksite health program as defined by the CDC Work@Health® Program**

**Module 1 – Making the Business Case**

“Making the Business Case” was an essential deliverable of the Staff and Faculty Health and Wellness Committee. Presentations made at Staff Assembly updates to leadership and this white paper serves this purpose.

**Module 2 – Assessing Your Worksite**

The Staff and Faculty Health and Wellness Committee has now provided UC Davis with an initial “Needs Assessment”\(^k\) which will be essential in guiding future programming for both the Health System and campus. Currently, data (absenteeism, presenteeism, disability, worker’s compensation, health risk assessment, etc.) is not collected in an organized, coordinated approach to determine the state of UC Davis employee health, and therefore it is difficult to measure change over time. However, an individual

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\(^1\) See Section 2, Example 2
\(^k\) See Section 5 and Appendix F
assessment infrastructure has been developed at UC Davis through the RISE grant funded Initiative for Wireless Health and Wellness (iWHW), and with some additional funding could be made available to all staff and faculty and utilized organizationally. The UCmHealthy portal housed on secure servers in the UC Davis Health System is a user friendly portal and database capable of securely collecting data from multiple health and fitness devices (e.g. FitBit®, Jawbone UP®, MisFIT®) as well as smartphone and web applications. The UCmHealthy portal is currently providing a platform for multiple campus mHealth research studies, and also being leveraged for operational programs for UC Davis Student Health and Wellness. The UCmHealthy portal allows users to visualize their data from multiple devices and apps, and securely share that information at a granular level, with friends and health coaches of their choosing.

Module 3 – Building Leadership Support

UC Davis currently utilizes the health promotion committee driven model. This is recommended for small employers with limited resources and is therefore insufficient with providing any meaningful programs, services or metrics to our employee population and administration. Up until this point, leadership support has not existed for a comprehensive program, so it has been challenging to engage middle managers and health promotion champions. The “Wellness Ambassador Program” is a pilot that was launched in September 2015, with the support of our new Vice Chancellor and Chief Financial Officer, and it is our hope that “Wellness Ambassadors” will fulfill the CDC’s recommendation for Health Promotion Champions. In addition, there are multiple committees on campus and at the Health System devoted to wellness, however they lack senior leadership participation.

Module 4 – Developing Policy, Benefit, and Environmental Supports

UC Davis joined the rest of the UCs in going smoke and tobacco free in January 2014, which is one of the largest public health policies to be implemented in our University system. To date, we do not have a healthy food policy in place, and although we have a flex-time policy, it is not widely utilized due to cultural norms. UC Davis does, however, have affordable medical benefits as well as tobacco cessation benefits, but lacks many preventive benefits. As far as environmental support, incentives are limited and provided by the University of California Office of the President (UCOP). UC Davis discourages tobacco use

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1 See Section 2, Example 2
2 See Section 2
with the Smoke and Tobacco Free policy and enforcement strategies, but could do more to promote physical activity, encourage healthy nutrition and help manage stress.

Module 5 – Designing Effective Communications

Current methods to communicate health and wellness messaging to the campus are limited at best. There are multiple listservs, blogs, Dateline, Staff Voice, the Insider, various departmental newsletters, etc. In addition, there is no refinement in approach.

Module 6 – Evaluating Your Program

Currently, no metrics are collected for the purpose of evaluating a comprehensive health and wellness program because this does not exist at UC Davis. We do however collect data on the number of participants that attend various brown bag presentations and evaluations are collected at the end of a program. In addition, the UC Davis campus and health system WorkStrong Program and the UC Living Fit Forever Program do collect metrics and this guides the future programming.\(^n\)

Module 7 – Planning and Designing Your Program

Although UC Davis has made strides in many of the steps to planning and designing a worksite health program through the work of the Staff and Faculty Health and Wellness Committee, much work remains to be done.

Module 8: Implementing and Sustaining Your Program

A comprehensive worksite health and wellness program does not currently exist.

\(^n\) See Appendix E
As detailed in the narrative above, comprehensive health and wellness programs benefit employers through increasing employee engagement, boosting productivity, reducing injuries/claims, lowering healthcare costs and improving recruitment and retention rates. UC Davis staff and faculty could see benefits that include better health, more energy, less stress, fewer acute and chronic illnesses, better management of chronic health conditions, and a better quality of life.

The UC Davis Staff and Faculty Health and Wellness Committee, coordinated by the UC Davis Staff Assembly, developed a needs assessment\(^o\) to guide recommendations for campus administration outlining what a comprehensive health and wellness program should include at UC Davis. The needs assessment was distributed electronically to all staff and faculty on both the main campus and the Health System Campus in May 2015; 4,368 complete responses were collected. The total number of faculty and staff on both campuses is 22,098, so the survey response rate was 19.8%.

**Demographics**

![Figure 1](image)

According to the 2013 University of California Statistical Summary of Students and Staff, the UC Davis employee breakdown was 41% male and 59% female.\(^p\) As shown in figure 1, three times as many females took the needs assessment compared to males.

\(^o\) See Appendix F

\(^p\) No other gender identities were accounted for in the 2013 report
The age distribution of respondents was relatively well dispersed and a good representation of the age distribution of employees at UC Davis.

2013 data from the Office of the President showed the age distribution of employees of UC Davis as:

A significantly higher number of staff took the needs assessment compared to faculty (see figure 4). However, these response rates are representative of the number of staff versus faculty at UC Davis.
The response distribution from the health system campus compared to the main campus was almost even – 44.3% compared to 42.2% respectively.

![Figure 5: Personal Health and Wellness](image)

**Personal Health and Wellness**

**What best fits your personal health and wellness goals?**

The most common health and wellness goals amongst all respondents were; Improve well-being (health and happiness): 80.1%, Increase physical activity: 66.8%, Improve energy: 63.8%, Lose weight: 54.9%, Improve work/life balance: 51%, and Better manage or reduce stress: 50.1%.

When stratified by **work site**, responses were similar with the top four goals for both the main campus and the health system campus. When comparing staff and faculty responses, results were slightly different as shown in figure 6:

![Figure 6: Goals - Employee Type](image)
In which of the following categories would you place yourself?

**Precontemplation:** I am not interested in pursuing a healthier lifestyle: 31.8%

**Contemplation:** I am thinking about changing some of my health behaviors: 15.2%

**Preparation:** I am planning on making a health behavior change within the next 30 days: 13.9%

**Action:** I have been making some health behavior changes within the last 6 months: 35.3%

**Maintenance:** I have been living a healthy lifestyle for at least 6 months: 31.8%

**Decline to State:** 1.9%

As shown in figure 7, most respondents placed themselves in either the Action or Maintenance stage.

**How could an employee health and wellness program help you to achieve your health and wellness goals?**

Overall results highlighted increased exercise as the main reason an employee health and wellness program could help respondents achieve their goals with 62.6% choosing this option. This was followed by better work/life balance (56.2%), better able to manage or reduce stress (47.7%) and weight loss (45.4%). Similar outcomes were also highlighted when results were stratified by employee type. Among staff and faculty the top four priorities were the same for both groups; increase exercise, improve work/life balance, better manage or reduce stress, and weight loss.
Other ways a program could help you reach your goals (according to qualitative data):

- Increase motivation
- Increase morale
- Increase physical activity
- Decrease stress
- Increase energy

When stratified by age, individuals aged 21-30 thought that an employee health and wellness program could help them; increase exercise (68%), improve their work/life balance (64%), better manage or reduce stress (53%), and improve nutritional habits (53%). Among age groups 31-40, 41-50 and 51-60, the top four priorities were the same: weight loss, increase exercise, improve work/life balance, and better manage or reduce stress. Those age 60 and up had some of the same priorities, but also highlighted; increase mental alertness/capacity and improve health measures.
Would an incentive increase your motivation to improve (or maintain for active individuals) your health and wellness?

![Figure 9](image)

Respondents overwhelmingly agreed that an incentive would increase their motivation to improve their health and wellness. Money (49%), gym membership subsidization (49%) and release time during the work day (43%) were the most popular choices for an incentive.

When stratified for employee type, responses changed slightly. For staff, money (54%), discounted gym membership (51%) and release time (47%), remained the top three choices. For faculty, the numbers were slightly different with discounted gym membership coming in first with 34%, followed by money (31%) and lower health premiums (29%).

- “I think monetary incentives help. A decrease in health premium cost or a bonus for people who attain and keep a health weight would be a big incentive.” –Staff member

Would you participate in any of the following health and wellness activities on a REGULAR basis if they were offered for staff and faculty?

The most popular health and wellness activity was an on-site fitness center/space specifically for staff and faculty OR one that offers dedicated hours for staff and faculty desired by 61.1% of respondents.
Other top activities that respondents would participate in include (according to qualitative data):

<table>
<thead>
<tr>
<th>Activity</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Massage</td>
<td>54.1%</td>
</tr>
<tr>
<td>Personal training</td>
<td>54.1%</td>
</tr>
<tr>
<td>Swimming</td>
<td>29.8%</td>
</tr>
<tr>
<td>Free or reduced childcare</td>
<td>29.8%</td>
</tr>
<tr>
<td>Yoga/Meditation</td>
<td>29.8%</td>
</tr>
<tr>
<td>Help with work/life balance</td>
<td>29.8%</td>
</tr>
<tr>
<td>Healthy food offerings</td>
<td>29.8%</td>
</tr>
<tr>
<td>Online resources/portal</td>
<td>29.8%</td>
</tr>
<tr>
<td>Mental health services</td>
<td>29.8%</td>
</tr>
<tr>
<td>Group Program (e.g. cycling or running group)</td>
<td>29.8%</td>
</tr>
</tbody>
</table>

When would you be most likely to participate in health and wellness programming offered by UC Davis?

As seen in figure 11, most respondents would participate in health and wellness programming either during lunch/at work or after work. Only 5.2% (n=227) of respondents stated that they would not...
participate in activities offered by UC Davis. Results differed slightly when comparing worksite as seen in figure 12 (participants could choose more than one option):

When stratified by employee type, 12% of faculty compared to 4% of staff stated that they would not participate in health and wellness programming offered by UC Davis. When comparing responses based on age, those aged 21-30 would prefer to participate after work, while all other age groups would prefer to participate during work or at lunch. 15% of those aged 60 and older would not participate in health and wellness programming offered by UC Davis.

Have you filled out the UC Living Well Health Risk Assessment provided through the University of California Office of the President (UCOP) in the past 12 months?

![Figure 12](image1.png)

![Figure 13](image2.png)
Over two-thirds of respondents have *not* filled out the UC Living Well Health Risk Assessment within the last 12 months and almost three-fourths of respondents reasoning for not doing so was because they did not know about it (see figure 14):

- “[A] $75 gift card is attractive, but [I] can’t do the follow-up activities because I don’t live in Davis. If you want those who do not live in Davis to participate, you have to figure another way to include them.” –Retiree

Have you participated in any of the following health and wellness programs offered at your location, Health System or Davis campus?

The UC Davis Farmers Market was the most popular response with a third of individuals having attended. However, just over 43% of respondents have not participated in any of the listed health and wellness programs already offered by UC Davis. Results comparing staff and faculty highlighted a participation gap:
When stratified by work site, those on the main campus had higher participation rates compared to the health system campus in the following activities: UC Walks (17% vs 11%), Webinars (10% vs 8%), Brown bags (18% vs 9%) and group fitness classes (8% vs 2%). Most activities listed had relatively low participation rates, thus expanding and diversifying communication on current offerings may be necessary.

Do you have any barriers to participating in health and wellness programs at your location, Health System or Davis campus?

The most common barrier to participating in health and wellness programs was work schedule with over 45% of respondents relating to this. When stratified by work site, respondents from the health system campus with work schedule as a barrier was slightly higher at 53% compared to 42% on the main campus. Almost a third (29%) of respondents stated that they were unaware of what health and wellness programming is offered at their location. Other barriers include; programs not offered near my work site (23%), unable to attend due to family obligations (15.2%), as well as (according to qualitative data):
<table>
<thead>
<tr>
<th>Time</th>
<th>Don’t want to work out with students</th>
</tr>
</thead>
<tbody>
<tr>
<td>Commute/location</td>
<td>Facilities/shower not available</td>
</tr>
<tr>
<td>Injury</td>
<td>Privacy concerns</td>
</tr>
<tr>
<td>Uncomfortable/don’</td>
<td>Don’t know about options</td>
</tr>
<tr>
<td>t like group</td>
<td></td>
</tr>
<tr>
<td>activities</td>
<td></td>
</tr>
<tr>
<td>Supervisor doesn’</td>
<td></td>
</tr>
<tr>
<td>t support</td>
<td></td>
</tr>
</tbody>
</table>

Furthermore, qualitative data analysis produced themes of work related stress, lack of managerial support, and family obligations as barriers to health and wellness:

- “Probably 90% of my worklife stress could be alleviated by improving my daily work situation. Instead, it seems to be my responsibility to do ever more to keep myself healthy despite an increasingly unhealthy workplace. The grief/bereavement area of campus wellness programs—besides ASAP, which is operating on a constantly shrinking budget—are non-existent, as far as I know... Some support and training for us and our supervisors would help a lot. Thus, I would like to see the campus work toward healthier job conditions in addition to increasing wellness programs.” –Staff member

- “I have noticed it has become increasingly difficult to remain healthy and energized since my job is so sedentary. I walk in the arboretum for 30 minutes every day and do my best to get up between appointments with students, but I still feel like I need more exercise time. I’m often rushed and sometimes have to choose between eating lunch and walking... My husband is a police officer and his department offers employees workout time. They work out for an hour before or after their shifts and flex that hour, so their workday is not extended (nor do they have to gobble up lunch before or after a workout). I think UC Davis should consider offering paid workout time.” –Staff member

- “Our working force % which are parents is extremely high, [and] as all parents know this responsibility takes so much of our free time, that our own health and well-being is often not part of our day.” –Staff member
How satisfied are you with UC Davis’ currently offered health and wellness programs for staff and faculty?

![Figure 16](image)

62.2% of all respondents noted that they are either “neither satisfied nor dissatisfied” or “N/A.” When stratified by **employee type**, 22.1% of staff are either “mostly satisfied” or “satisfied,” compared to 14.7% of faculty in the same categories. Furthermore, 14.2% of faculty are “dissatisfied” compared to 9.8% of staff feeling dissatisfied with UC Davis’ current health and wellness offerings. When comparing responses from the main campus to the health system campus, results were very similar.

Qualitative data analysis highlighted several respondents’ desire for dedicated staff time at the ARC or other fitness facilities (qualitative data):

- “The campus doesn’t support faculty and staff with free access to the ARC; or free access to some other, on campus, faculty/staff specific facility; or even reduced fees for the private gyms in town. I find the ARC a very faculty-unfriendly (maybe 'adult-unfriendly') environment” — Faculty member
I feel that UC Davis, as my employer, supports my health and well-being:

- “I would like to put a word in for an on campus daycare that all staff, students, faculty... have access to. Being a new parent and knowing that your children are well taken care of is a huge support and makes a significant impact on parent’s wellbeing and peace of mind as well as productivity. I believe this should be a priority in any wellness program and institution.”
  – Faculty member

When stratified by both employee type and work site, results highlighted some differences as shown in figure 18:
As shown in figure 18, 28.6% of main campus respondents compared to 15.5% of health system campus respondents feel that UC Davis does not support their health and well-being. Conversely, those identifying as staff feel more supported in their health and well-being compared to those identifying as faculty (46.4% of staff versus 38.2% of faculty answered true to the preceding question).

Additional comments regarding what respondents would like to see in a comprehensive staff and faculty health and wellness program were compiled from emails to the Staff and Faculty Health and Wellness Committee and can be found in Appendix G.
A comprehensive and integrated health and wellness program across UC Davis, with emphasis upon medically-based, behavior and lifestyle change programs, is warranted to address the priorities identified in the needs assessment (1) exercise, (2) work/life balance, (3) better stress management, and (4) weight loss (See section 5). Such programs have been documented to improve work efficiency, reduce health care costs and improve an employee’s quality of life. The July 2015 roundtable report of the Global Wellness Institute concluded that “successful companies will strive to create healthy “whole culture” businesses. Those businesses will succeed in lowering healthcare costs, and in attracting, retaining and motivating employees.33

**Recommended Strategies:**

To achieve the development of a comprehensive and integrated health and wellness program across UC Davis, we recommend adequate and appropriate resources to:

1. Expand the infrastructure already built steadily through a Health Promotion Committee Driven model as defined by the CDC;
2. Establish and implement evidence based, behavior and lifestyle modification programs available to all UC Davis employees;
3. Operate as a Professional Staff Driven model as defined by the CDC.

**Recommended Actions:**

1. Provide a budget that will allow for continuous assessment, environmental support, incentives, communication, education and evaluation.
2. Hire a 1.0 FTE Worksite Health Program Manager to lead the initiative and to coordinate campus and Health System health and wellness efforts (See Section 2).
3. Establish an Administrative Advisory Committee on Staff and Faculty Health and Wellness with leadership involvement (See Section 2) to:
   a. Develop and institutionalize the *Principles of Health and Wellness*
   b. Advise the Worksite Health Program Manager
4. Align health system and campus resources (See Appendix A) to coordinate an integrated, comprehensive worksite health and wellness program that covers Sacramento, Davis and remote sites
   a. Reinforce and capitalize on the numerous resources and partnerships already available
   b. Build new partnerships to leverage subject matter expertise and facilitate access to all employees
   c. Create a health and wellness program resource portal modeled on the UC Davis Front Door website

5. Expand the newly-launched Wellness Ambassador Program (See Sections 2 & 4)
   a. Encourage a policy that every department should have a designated Wellness Ambassador
   b. Wellness Ambassadors and Safety Coordinators should collaborate

6. Integrate the comprehensive worksite health and wellness program with student interests for training, research, internships and education.

7. Integrate and utilize promising new research and web portals that have already been designed by UC Davis to collect metrics for individuals and the organization (Section 4).

8. Implement a forum similar to the initiative for Administrative Reorganization and Transformation whereby employees can submit feedback for improving UC Davis’ health and wellness. Feedback would be followed up in a timely manner along with a possibility of funding if requested.

9. Educate managers and supervisors through trainings offered by HR Talent Management on the definition and vision of a healthy and well culture and how to create one in their own departments/units (See Section 2)
   a. Review *Principles of Health and Wellness* during new employee on-boarding
   b. Support flexible schedules through the existing workplace flexibility policy and procedure to accommodate employees’ participation in health and wellness programming

10. Demonstrate leadership's commitment to a culture of health and wellness through role modeling, benefits and programs (See Sections 1 & 2)
   a. Support healthy workplace policies.
   b. Take part in public events, such as UC Walks and the Annual Wellness Fair.
   c. Attend meetings of the Administrative Advisory Committee on Staff and Faculty Health and Wellness.
Specific to the priorities of exercise and weight loss, we recommend:

1. Providing greater resources for employees to have access to exercise equipment and training programs (See Section 5).

2. Reducing or eliminating recharge rates for on campus room rentals to enable the campus to provide programming similar to UC Living Fit Forever at the Health System and WorkFit at UC Berkeley (See Section 3 & 4).

3. Working with Campus Recreation and campus architects to provide a space specifically for faculty and staff to exercise indoors at both the Health System and on campus (See Section 5).
   a. Making this space available 24/7 to accommodate the different schedules (See Section 5).

4. Implementing a group exercise program, in partnership with Campus Recreation, similar to UC Berkeley’s WorkFit Program (group exercise classes throughout campus for a nominal fee) and UC Davis’ UC Living Fit Forever Program (now only available at the Health System) (See Sections 3 & 5).

5. Implementing an individualized wellness program, in partnership with Campus Recreation, similar to UC Davis’ WorkStrong Program and UC Berkeley’s WorkFit U Program (See Appendix D & Section 3).

6. Researching an incentive model that includes gym membership subsidization, monetary awards and/or release time (See Sections 1, 2, & 5).

Specific to the priorities of work-life balance and better stress management, we recommend:

1. Providing additional resources for programs and services that support work-life integration and enable faculty and staff to succeed at work, at home and in the community (See Sections 3 & 5).

2. Providing additional resources for programs which improve all dimensions of wellness (emotional, environmental, financial, intellectual, occupational, social, and spiritual) that complement physical health.

3. Promoting workplace flexibility to enable employees to better coordinate work and personal schedules (See Section 5).

Specific to the goal of well-being (health and happiness), we recommend:

1. Providing informational resources and counseling.

2. Providing health improvement programs to improve overall well-being (See Appendix C).
3. Creating campaigns and programs to increase awareness and skills on scientifically proven strategies and practices.
   a. Examples include mindfulness meditation, gratitude education (UC Davis Emmon’s Lab), nutrition and physical activity programs and UC Berkeley’s Greater Good Science Center.
4. Implementing an incentive program that rewards individuals who are striving to attain a healthy lifestyle (See Sections 2 & 5).
Section 7: Acknowledgements

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- Jackie Bjorkman – Environmental Science and Policy
- Keavagh Clift – Occupational Health Services
- John Conway – Physics
- Jasmine Engracia Durias – Division of Mathematical & Physical Sciences
- Julie Gross – UCDHS, PM&R Therapy Services
- David Hawkins - Neurobiology, Physiology and Behavior
- Matthew Lange - Knowledge Engineering
- Grant Nejedlo – Staff Assembly
- David Wong – Communications Resources
- Yevgeniy Gnedash – BFTV Cluster

Staff Assembly

Academic Senate


Appendix A: Existing UC Davis Assets

PROGRAMS AND SERVICES

Available on both campuses:

- **WorkLife and Wellness** offers a variety of programs and information to encourage healthy living, including resources to help with family care, breastfeeding support, volunteering, and workplace flexibility.
  - *Brown Bag Program* offers hour-long classes during lunch that are offered to the UC Davis community on topics around social, intellectual, spiritual, emotional, physical, environmental, financial and occupational well-being.
  - *Maintain Don’t Gain* is an 8-week program sponsored by UC Living Well and Kaiser Permanente beginning in November that aims to prevent holiday weight gain through weekly email challenges, support and motivation, and a Personal Success Tracker. There are weekly incentives and a grand prize for those who complete the program.
  - *Wellness Fair* is a campus-wide event showcasing programs and resources available for staff and faculty as well as local vendors who offer services related to health and wellness within the greater Davis-Sacramento community.
  - *Wellness Ambassador Program* (main campus only) is designed to enlist staff and faculty members from departments across campus that serve as a wellness resource for their colleagues by; creating opportunities for movement and healthy choices throughout the workweek, promoting greater campus wellness, and encouraging participation in activities.
  - *Breastfeeding Support Program* provides university affiliates and their partners with lactation consultations, support group meetings, and the use of hospital grade breast pumps located in almost 40 lactation sites on the UC Davis campus as well as 10 sites on the Health System campus. Learn more on their [website](#).
  - *Lunchtime Yoga* is a hatha-style yoga class for staff and faculty that meets during the lunch hour on Fridays on the UC Davis main campus. Visit the [Staff and Professional Development Services website](#) for an up to date calendar.

- **UC Living Well** is a UC-wide wellness program, in partnership with Optum, that provides activities and resources to help staff, faculty and retirees reach their wellness goals. Upon completion of a Total Health Profile as well as additional campus activities, participants are eligible to receive a $75 gift card incentive.
  - *UC Walks* is the annual system-wide walk for employees to promote healthy living. There are small gift incentives as well as grand prizes for participating.
  - *Food Day* is a nationwide celebration and a movement for health, affordable and sustainable food.
• **Smoke and Tobacco Free UC Davis** UC Davis main campus and the Health System campus are 100% smoke and tobacco free. There are a number of resources through this program for those who wish to quit smoking. Smoke Free and Tobacco Free UC Davis website.

• **UC Davis Farmers Market** is designed to increase the access for students and employees to fresh fruits and vegetables. The main campus website also offers e-newsletter sign ups and a flyer for starting a Healthy Snack Club (HSC) in offices on campus.

• **WorkStrong Program** is a referral program designed to help employees who have been injured at work to help mitigate compensation costs, recover from their injuries, and prevent injuries from happening again.

• **Ergonomics & Body Mechanics Program** provides employees with ergonomic information, training and evaluations, including; self-evaluations of workstations, ergonomic chair fitting, ergonomic assessments, and the furniture program.

• **Initiative for Wireless Health and Wellness** brings together researchers from medicine, nursing, computer science, and life sciences to transform healthcare delivery with mobile and wireless technologies.

*Available on the UC Davis main campus:*

• **Occupational Health Services** is a campus-based medical clinic that offers treatment for work-related injuries and illness, work-related preventive medicine and injury and illness prevention services, and OSHA- and departmentally-mandated medical surveillance programs.

• **Campus Recreation and Unions** provides fitness, wellness and recreation programs to the campus community through the operation and administration of a wide variety of programs, services and facilities.

• **Environmental Stewardship and Sustainability**, now called Sustainable 2nd Century develops, leads and coordinates sustainability efforts throughout the UC Davis campus.

• **Green Workplace Program** is part of the “Take Action” section of the Sustainable 2nd Century movement on campus, which provides individuals with achievable steps toward a greener workplace and celebrates their accomplishments. Employees can participate as individuals or as part of an office or lab.

• **Massage Therapy** offers 30-minute and 45-minute massage therapy sessions for students, staff and faculty at the Student Health and Wellness Center.

• **The Nutrition and Exercise Program** communicates nutrition and wellness information to the campus community, including healthy diet tips, exercise recommendations, and current trends in nutrition. Staff and faculty can schedule an individual appointment to meet with a Registered Dietician free of charge.

*Available on the Health System Campus:*

• **Integrative Medicine Program** is a comprehensive, interdisciplinary approach to health promotion that combines complementary and conventional therapies.

• **Employee Health** is a clinic on the health system campus that provides services to help with work-related health problems, injuries and illnesses. The Employee Health Services triathlon is a program through the UC Davis Health System, Employee Health Services, which encourages employees and family members to participate in a “triathlon” of walking 1.5 miles a day, doing standing push-ups, and limiting sugar intake.
• **Sports Medicine Program** is a research facility and clinic that provides consultation, physiological assessments, injury prevention programs and rehabilitation to professional, collegiate and recreational athletes.

• **UC Living Fit Forever Employee Wellness Program** is a fitness and wellness program for employees looking for a permanent lifestyle change. Program highlights include: fitness testing and on-site fitness training as well as lecture series on nutrition, stress reduction, preventing injuries and aging well.

• **Health Management and Education** is a team of educators offering interactive health classes and individual appointments aimed at helping others manage chronic health conditions, develop specific self-management skills, improve chronic condition(s) and optimize overall health status.

**Available on both campuses:**

• **Staff Assembly Pin Program** is available to UC Davis staff, retirees and student employees, and presents negotiated discounts on goods or services purchased by Staff Pin holders.

**EMOTIONAL/SPIRITUAL RESOURCES**

***Available on UC Davis main campus:**

• **Wake Up at UC Davis Meditation Group** aims to provide students, staff and faculty, or other interested parties, a space to meditate twice a week on campus. The meditation sessions are designed to provide time for relaxation and nurture and encourage mindfulness in daily life.

• **Mindfulness Meditation** is a lunchtime guided meditation class open to all UC Davis staff and faculty through Occupational Health Services.

**Available on UC Davis Health System campus:**

• **Meditation Series** is a workshop offered during the lunch hour through WorkLife and Wellness.

**INTELLECTUAL/OCCUPATIONAL RESOURCES**

For staff and faculty employed at either campus, there are a number of assets that support additional learning and/or professional services geared toward helping employees reach short- and long-term career goals.

**Available on both campuses:**

• **Staff Development and Professional Services (SDPS)** fosters and supports learning and performance by providing innovative, high-quality programs, resources and services. SDPS offers staff a wide array of courses, programs and certificate series on nearly 300 topics, as well as confidential career counseling, a resource library, online toolkits and management consultation regarding learning or performance support.
  
  o **Career Catalyst** a brown bag series geared toward professional development tools is available for staff and faculty on a number of topics, during the lunch hour on the UC Davis main campus.
• **UC Davis Extension** is the lifelong learning arm of UC Davis that provides opportunities that transform the lives of people, organizations and communities. There is a 20% discount on extensions school courses for UC Davis employees.

• **Fee Assistance** is available for UC Davis employees who wish to advance their education through:
  - *UC Reduced Fee* (up to 2/3 reduction for UC Davis programs for regular status employees)
  - *Career Staff Development Fee Assistance* (up to $600 award for courses supporting their individual UC career plans)
  - *UC Davis Extension* (20% discount on courses)
  - *UC Online Education* (33% discount on the cost of UCOE online courses to full and part time faculty, staff, spouses, domestic partners and eligible dependent children)

**Available on UC Davis main campus:**

• **Osher Lifelong Learning Institute** aims to further the pursuit of lifelong learning by offering a diverse education program of high quality, affordable courses and events for seniors living in Davis and nearby communities.

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**COMMITTEES**

Several committees on both campuses bring together a mix of staff and faculty who volunteer their time outside of their regular work duties to focus on a range of issues relating to the well-being of UC Davis employees.

**Available on both campuses:**

• **Staff Assembly** promotes the welfare, interests and diversity of all UC Davis staff. While all staff are considered members of the Staff Assembly, committee members meet regularly with UC Davis administration to enhance communication and sponsor programs and activities committed to the interests of staff. **The Staff and Faculty Health and Wellness Committee** is housed under Staff Assembly and focuses on improving the health and wellness of employees on both campuses.

• **Faculty WorkLife Committee** represents the needs of faculty to the WorkLife and Wellness program.

• **Wellness Committee** houses the Wellness Ambassador Program and organizes several events, including the annual Wellness Fair.

**Available on UC Davis Health System campus:**

• **UC Davis Medical Staff Well-Being Committee** supports the health and wellness of our Medical Staff members, and in so doing, protects patient welfare, improves patient care, and improves Medical Staff functioning.

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**ACADEMIC DEPARTMENTS**

Several academic departments on both the main campus and the health system campus are dedicated to studying different aspects of physical and mental health. The institutional expertise and knowledge of students,
staff and faculty working within these departments are an enormous asset to a comprehensive campus health and wellness program.

Available on UC Davis main campus:

- **The Department of Environmental Science and Policy** uniquely brings together the natural sciences and social sciences – two essential components of sustainable solutions to environmental challenges from population growth, habitat degradation, climate change and pollution.
- **The Department of Neurobiology, Physiology and Behavior** This academic department trains students to perform fitness testing and prepares them for work in the medical field. Students with an Exercise Biology emphasis have previously acted as coaches for the Active Aggie program and provided services at the annual Wellness Fair.
- **The Department of Nutrition** researchers extend science-based information about nutrition and health through a variety of departmental publications and resources.
- **Physical Education Program** offers activities and lecture classes intended to provide students an enjoyable format in which to acquire and advance skills in specific physical activities and sports, as well as to develop an appreciation for health and wellness, while promoting the concept of lifetime fitness.

Available on UC Davis Health System campus:

- **The School of Medicine** offers many renowned departments and programs and distinguished faculty and researches in all areas of medicine, including but not limited to; specialized programs related to Alzheimer’s disease, cancer, neurodevelopmental disorders, public health and violence prevention.
- **Department of Public Health Sciences** is a clinical and research department that aims to improve the health of people using approaches based in epidemiology, biostatistics, economics and behavioral science through research, educational programs, clinical programs, public service and policy development.

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**Facilities**

UC Davis houses a number of dedicated fitness spaces for both indoor and outdoor activities, as well as instructional programming.

Available on UC Davis main campus:

- **Activities and Recreation Center (ARC)** offers both informal and formal recreation opportunities, including group exercise classes, dance classes, martial arts, personal training, rock climbing and intramural sports, as well as access to fitness machines and weights. Membership rates vary for UC Davis faculty, staff, alumni, retirees and community members.
- **ARC Pavilion** is a 150,000-square-foot reservable arena. It also serves as a space for informal recreation during the ARC’s normal hours of operation.
- **Outdoor Adventures** offers hiking, camping, backpacking, whitewater rafting and kayaking trips, as well as comprehensive healthcare classes in CPR and first aid.
- **Swimming Pools** Hickey Pool is open throughout the year for lap swimming before work, during the lunch hour and after work. The Recreation Pool is open during the summer and offers adult swim classes.
• **Hickey Gym** houses the Physical Education Department and includes floor space for a number of campus sports for student athletes. Aside from the Hickey Pool, also at this location, there is no official program for faculty or staff at this time.

• **Arboretum** is 100-acres of maintained and landscaped gardens, walking and biking paths situated along Putah Creek, adjacent to the UC Davis main campus.

• **Lower Freeborn Hall** has a large space with mirrors that can be used for group exercise activities for staff, including weekly yoga classes during the lunch hour on Fridays.

• **Recreation Fields/Courts** A number of fields and courts (basketball and tennis) are available for recreational use and can be reserved for various intramural sports or sport clubs activities.

• **Mondavi Center Vanderhoef Studio Theatre** is an intimate, flexible space able to cater to many uses and can accommodate up to 250 people.

• **Student Community Center** has more than 4,800 square feet of event space, including a multi-purpose room, meeting rooms and patios, and features state of the art audio visual systems.

### Available on UC Davis Health System campus:

• **UCDHS Fitness Center** is equipped with treadmills, stair climbers, elliptical trainers, bicycles, weight equipment, free weights and a dip station and pull up bar.

### WEB RESOURCES

• **Wellness Portal** ([https://shcs.ucdavis.edu/wellness/](https://shcs.ucdavis.edu/wellness/)) is a website created to assist students, staff and faculty in locating resources related to the various aspects of wellness.

• **Sustainable 2nd Century** ([http://sustainability.ucdavis.edu/](http://sustainability.ucdavis.edu/)) provides information related to UC Davis’ long-term commitment to environmental, economic and social sustainability. Users can browse the site by topics such as energy, climate, community and biology.
  
  • [Walking and Biking Tour Map](https://shcs.ucdavis.edu/wellness/) through the UC Davis Sustainable 2nd Century provides a sustainability map showing where to go on campus to see and experience how UC Davis is working towards meeting its sustainability goals.

• **UC Living Well**: See “Programs and Services” for more information.

• **Ergonomics Program**: See “Programs and Services”

• **WorkLife and Wellness**: See “Programs and Services”

• **UC Focus on your Future** offers assistance and information for staff and faculty regarding the UC Retirement System, including classes, webinars, and a “Financial Fitness Library” with articles, tools and tutorials related to retirement and financial savings.

• **UC Television** is public-serving media outlet featuring programming from the University of California system on topics such as Health and Medicine; Arts and Music, Gardening and Agriculture and Medical Education.

• **Aggies on the Move UC Davis Walking Routes** is a walking resource that provides several mapped 1-mile walking routes on the main campus or close by.
• **Walk Around Work** is a walking map for employees at the Health System campus showing different routes for walking close to the campus. There are various routes from 1.5 miles – 4.8 miles, plus some suggestions for being safe while walking.

• **Student Health and Counseling Services** provides medical, mental health and wellness services to all registered UC Davis students regardless of insurance coverage. The SHCS website provides additional information on resources for the main campus that cover the wider campus community, including staff and faculty.
  
  o **Physical Activity Map** is an online, interactive map of the City of Davis showing the locations for classes and facilities related to physical activity.

• **Public Art Walking Tour** through the City of Davis offers a listing and map of all art galleries and outdoor art in Davis, including the UC Davis main campus.
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Executive Summary

On May 1, 2012, Dr. Michael Roizen of the Cleveland Clinic presented his roadmap to employee wellness to the Integrative Medicine Program at UC Davis. Healthcare costs are rising steadily, and employee wellness strategies have the potential to reduce expenditures and improve population health.

The components of Dr. Roizen’s initiatives rest on four health problems and their corresponding solutions:

- Tobacco use → Quit smoking
- Poor diet → Change or eliminate five foods
- Physical inactivity → Walk 10,000+ steps each day
- Stress → Meditate 15 minutes every morning and evening

Employee wellness programs should use a four-pronged approach to address the four health concerns above and to provide the best atmosphere for starting and sustaining wellness activities:

- **“Aha” Moments**: Enable the initial decision and culture change with top-level support
- **Environmental Changes**: Make it easy to be healthy and hard to be unhealthy at work
- **Social Media**: Support change with e-coaching, buddies, social networking, and online programs
- **Serious Employee Incentives**: Tie substantial incentives to the 5 Normals

These approaches should be used to address the four major health concerns directly through strategies such as the following:

- Banning smoking on campus and offering “First Dollar Free” coverage for smoking cessation, place a ban on hiring smokers, test for cotinine in urine
- Redesigning food options at campus restaurants, vendors, and vending machines; making healthy food choices available via farmers’ markets and local merchants
- Offering on campus exercise facilities, free fitness club memberships, and pedometers
- Providing stress management classes and employee call centers

First steps for implementing these changes at UC Davis include:

- Garner support from UC Davis employee unions and groups eager to see this type of change
- Use this wide support base as leverage when approaching local government and healthcare providers for support
- Utilize a positive slogan to increase employee support, such as “We Care About Your Health”
- Implement changes incrementally, beginning with stress relief and tobacco cessation
Introduction
On May 1, 2012, Dr. Roizen of Cleveland Clinic explained how UC Davis could benefit from implementing an employee wellness program targeting his recommended areas of change. The presentation, entitled *The Cleveland Clinic Experience: Motivating/Sustaining Change to Improve Health & Save Big Money*, is summarized in this report. In addition, this report includes the main advice Dr. Roizen had for UC Davis in following Cleveland Clinic's example.

U.S. Healthcare: Focus on Health to Bring Back Wealth
U.S. healthcare is in the international spotlight, with recent national healthcare spending increasing sharply. From 1970 to 2000, healthcare spending increased from 7.2% to 12% of GDP; by 2009 it had increased to 17%. Further projections predict healthcare spending will rise to an alarming 28% of GDP by 2017. Increased healthcare spending harms economic productivity.

The cause of rising healthcare costs and an increasingly less productive economy is, in part, poor population health. In 2011, the U.S. spent $2.6 trillion on healthcare, 75% of which went to treat preventable chronic conditions. Research shows that most chronic diseases are caused by four key habits: tobacco, food choices and portion size, physical inactivity, and stress.

Wellness: Four Simple Steps to Prevent and Reverse Disease
Dr. Roizen used a guest of the Dr. Oz Show as a case study for his four-factor health improvement plan. Rocco, a 53 year-old American faced with serious health problems (such as diabetes, hypertension, and a high BMI), received Dr. Roizen’s support in making the following changes to address the four key causes of chronic disease:

- Quit smoking.
- Change or eliminate five foods in the diet.
- Walk 10,000 steps a day or more.
- Meditate 15 minutes every morning and evening.

After only 28 days, Rocco had “cured” his Type II Diabetes. After two months he no longer needed medication for hypertension or osteoarthritis, and in 11 months he had substantially reduced the plaque in his arteries.

Dr. Roizen believes these four simple changes are the key to population wellness, citing similar results in the prevention or reversal of disease for a number of other chronic conditions, including prostate cancer. Diet and lifestyle can help control risk factors for disease, regardless of a genetic predisposition for a condition.

Cleveland Clinic Employee Wellness Program
Cleveland Clinic’s Fourth Pillar
To emphasize the importance of health for employees and patients, Cleveland Clinic adopted Wellness as a fourth pillar in their mission of Patient Care, Research, and Education (Appendix 1). This gave birth to the Cleveland Clinic’s Employee Wellness Program as designed by Dr. Roizen.

The 4 Factors
At the foundation of the Employee Wellness Program were the Four Factors: Tobacco, Food Choices and Portion Size, Physical Activity, and Stress.
People initially change health behaviors because of emotion, but they maintain them because of environmental support. Employee wellness program must address these factors to enable and promote sustainable health behavior changes.

The Cleveland Clinic has adopted a four-step approach for starting and sustaining change:

- **“Aha” Moments:** Enable the initial decision and culture change
- **Environmental Changes:** Make it easy to be healthy and hard to be unhealthy
- **Social Media:** Support change with e-coaching, buddies, social networking, and online programs
- **Serious Employee Incentives:** Tie substantial incentives to the 5 Normals

**The 5 Normals**

5 Normals is the goal for every Cleveland Clinic employee. Those who achieve and maintain the following five normal test results in a given year receive a substantial check ($2,000):

- Blood Pressure <125/<85
- LDL Cholesterol <130 without CV or <100 with CV
- HgBA1C <5.7 or Fasting Glucose <106
- BMI <30 or Waist <1/2 Height
- No Cotinine in Urine

A person with 5 Normals is purportedly 12 years younger (in Dr. Roizen’s concept of “Real Age”), and their lifetime healthcare costs are 33–50% less than costs for individuals with even one abnormal result. Former smokers, for instance, may show a spike in healthcare expenses for the first year post-quit but can achieve and maintain the same average expenses as “never” smokers by the second year post-quit, while continuing smokers show consistently higher expenditures (Fishman, et al., 2003).

**The Cleveland Clinic Employee Wellness Activities**

Employers and communities—extending to the national level—will save money by financially rewarding good health and encouraging healthy living. Making employees healthier can impact the bottom line and significantly reduce healthcare expenditures.

The Cleveland Clinic Plan took the following steps to achieve healthier employees:

- **They banned tobacco.** A campus-wide, enforced smoking ban (extending to cars in the parking lot) had real consequences; offenders, no matter their status, received two “pink slips” before being fired for a third non-compliance. They then began not employing smokers and started “First Dollar Free” payment programs to help smokers quit.
- **They enabled healthy food choices.** They redesigned the cafeteria food choices and preparation techniques, changed vending machine options, banned sugared drinks, required new contracts with vendors, pursued healthy food labels in local grocery stores, and facilitated the use of farmers’ markets.
- **They offered fitness opportunities.** Free on-campus fitness classes (like yoga) were offered at any time of the day or night if enough employees signed up. They also paid 100% of monthly membership fees for programs like Curves and Weight Watchers—even for high earners.
- **They addressed employee stress levels.** In retrospect, they recommend tackling this subject first because it is an underlying factor in poor physical health habits. They offered short
weekly programs (one hour per week for 6-8 weeks) to help reduce employee stress. A call center and support network was available for employee use.

Cleveland Clinic also raised its insurance premiums by 9% and instituted the $2000 incentive check for achieving (or approaching) the 5 Normals. The incentive is essentially a rebate of the increased premium for employees with the 5 Normals. Cleveland Clinic also offers other wellness support initiatives, such as a cost-effective e-coaching system (enabling thousands of daily automated responses or tips via employee emails).

Results of the Cleveland Clinic’s Employee Wellness Program
Cleveland Clinic healthcare costs have been stable or decreasing for 19 quarters. In addition to the financial benefits, their strategies appear to be affecting employee health significantly:

- Employees lost 279,000 lbs.
- Self-reported cigarette usage decreased from 15.4 to 6.8 %
- Type II diabetes diagnosis rates slowed
- Blood pressure decreased
- Employee engagement and satisfaction improved 33%, vitality 74%
- Absenteeism went down 8%

UC Davis Wellness Initiative: Next Steps
UC Davis plans to follow the steps of the Cleveland Clinic Employee Wellness Program. The average healthcare cost curve will take two years to see any movement, five years to flatten, and seven to begin to bend down.

The UC Davis employee wellness initiative should target the four areas discussed below. To enable the implementation of such a program, consider the following strategies:

- Gather the five campuses together to improve leverage and negotiating power for healthcare expenditures and wellness initiatives.
- Garner support from administrative and leadership groups, unions (e.g., nursing union), and community groups that support the wellness endeavor to advocate for the initiative. Consider expending full-time wellness support staff.
- Work with government to encourage lower taxes for companies with such programs to attract companies that share a focus on employee wellness.
- Emphasize job competitiveness and creating a healthier workforce, which will attract employees to California and UC Davis.

Reduce Employee Stress
Stress is costly and contributory to many health problems. Stress reduction strategies are relatively low cost and highly effective. They can be implemented quickly and should be addressed first.

- Observe Cleveland Clinic’s Stress Free Now call center program and consider implementing a similar program.
- Help employees change their perception of stress and stress management to enable easier and more sustainable adoption of healthy habits.

Eliminate Tobacco Use
UC Davis can anticipate cultural resistance but fast results with smoking cessation efforts.
• Work with local government to allow a ban on hiring smokers using pre-employment urine cotinine tests. California has anti-discrimination policies that may be possible to work around, as has happened in Missouri and elsewhere (Ellis, 2011). Voluntary testing may help gradually soften employee and community reactions and should be included immediately in the 5 Normals assessment for the incentive check.
• Implement a campaign that portrays a compassionate, motivational organizational response to tobacco use: “We Care about Your Health.”
• Help employees quit smoking with “First Dollar Free” initiatives.
• Implement a substantial financial incentive for achievement of the 5 Normals.

**Improve Food Choices**
Making it difficult to eat poorly can improve employee and visitor diet and enable better health outcomes.

• Change food options and preparations on UC Davis property, including vendor menus.
• Change patient food and vending machines products to healthier options.
• Tackle changes incrementally by removing fried food and sugary drinks; consider working up to a meat-free environment by removing fatty red meat before leaner options.

**Promote Physical Activity**
Encourage physical activity as a key step to achieve the 5 Normals.

• Build a fitness center and make it available for employees around the clock.
• Pay for health programs such as Weight Watchers for all interested employees.
• Promote physical activity on campus and at home; provide free pedometers.

### UC Davis Wellness Program Implementation Chart

1. Gather volunteers, wellness staff, unions, and government support to help lead the change
2. Implement Employee Stress Management Programs
3. Implement Smoking Cessation with a "We care about your health" approach
4. Change the Food Environment (patient food, vending machines, cafeterias)
   - Build a Fitness Center, create Weight Management Programs

**Conclusion**
An effective, cost-saving employee wellness program can be implemented quickly. By targeting the four main components of preventive health and encouraging the 5 Normals, UC Davis may see substantial changes in healthcare expenditures in as little as two years, with considerable reductions in costs and improvements in health in only in five to seven years.
References


Appendix C: University of California Wellness Initiative

University of California
Wellness Initiative

Rationale
A healthy, engaged, and productive workforce is critical to support the UC's academic and research mission. Making prevention and wellness a priority, UC can make a difference in employee health and in the health of the university system.

What is UC Living Well?
The University of California cares about the health and well-being of all faculty, staff, and retirees. The UC Living Well wellness initiative was established in 2007 by the UC Office of the President (UCOP) to encourage all faculty, staff, and retirees to live healthier lifestyles and create a culture of health throughout the system.

UCLW Vision and Mission
Vision: University of California is the healthiest university system in the nation.

Mission: Develop a comprehensive, outcomes oriented, integrated health and well-being initiative that results in healthy lifestyles, reduced risks, enhanced quality of life and a culture of health throughout the system.

UC Living Well Strategic Goals
The main strategic goals of UC Living Well are:
1. Improve the health and quality of life of UC faculty, staff, and retirees.
2. Build a culture of health and wellness at UC that supports healthy lifestyles.

Components of the UC Living Well Initiative
UC Living Well is the overarching "umbrella" brand for the UC systemwide Wellness Program and offers the UC community access to wellness programs, activities, resources, and culture of health initiatives at all locations. Components of UCLW include:

1. Campus/Health System Wellness Programs
Campus/Health System Wellness Programs provide faculty and staff with behavior change tools and skills for leading healthy lifestyles and environmental wellness initiatives that build a healthy workplace culture. Campus/Health System wellness programs address the location priorities, goals, and initiatives in collaboration with campus/health system partners and in support of UCLW branding, strategy and framework.

2. Wellness benefit and incentive program
UC Living Well partners with a wellness vendor that provides:
- A Health Assessment and Aggregated Reports on the Health of the Population
- Telephonic wellness coaching
- On-line programs
- Incentive for participation in vendor and campus programs

3. UC Benefit Plans – partnerships with health promotion/disease management resources
UC benefit plans work with locations to provide support and resources for Wellness Program implementation. Partnerships complement and enhance existing programs and vary due to location needs.

UC recognizes the importance of our greatest asset, our employees and retirees, and that health and well-being is critical to the University’s overall success.

Updated October 3, 2014
3-YEAR PRIORITIES

1. Identify leadership support/champion for UC Living Well and form an Advisory Committee to be accountable for the Strategic Plan.

2. Set standards for a comprehensive wellness program strategy based on evidence-based methodology. This includes awareness campaigns, education, behavior change, environmental/cultural initiatives, and wellness incentive program.

3. Evaluate Wellness Coordinator infrastructure and explore opportunities for support.

4. Create brand awareness of UC Living Well systemwide initiative through the development of a Marketing/Communications strategy and plan.

5. Measure impact and outcomes of the UC Living Well systemwide Wellness Program.

6. Increase outreach to populations currently not engaged in Wellness programs and activities such as Unions not eligible for incentive program, High Risk employees, etc.
Appendix D: UC Living Well Wellness Program Minimum Standards

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<tr>
<th>Programme</th>
<th>Organizational Support (provided by UCOF)</th>
<th>Organizational Support (Campus/Health System)</th>
<th>Wellness Communications</th>
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<tbody>
<tr>
<td></td>
<td>Health Risk Assessment*</td>
<td>Needs Assessment/interest survey*</td>
<td>Promote UCLW wellness initiative*</td>
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<td></td>
<td>Health &amp; Productivity data*</td>
<td>Annual Program Plan*</td>
<td>Promote and encourage taking the Health Assessment/Coaching (from wellness vendor)*</td>
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<td></td>
<td>Location and systemwide</td>
<td>Budget*</td>
<td>General Communication Strategy/Plan*</td>
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<td>HR, medical/workers' comp claims,</td>
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<td>Newsletter, program promotion, flyers, website, etc.*</td>
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<td>risk stratification, risk prevalence, etc</td>
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<td>Mission Statement for Wellness Program*</td>
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<td>Wellness Coordinator systemwide workgroup*</td>
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(*) Designated as recommended minimum standards.

Implementing and expanding evidence-based workplace health promotion/wellness programs will offer the University of California the opportunity to improve the health and productivity of our UC population. Evidence shows that workplace health programs have the potential to influence social norms; establish health-promoting policies; facilitate healthy behaviors; improve employees’ health knowledge and skills; help employees get necessary health screenings, immunizations, and preventive care; and reduce on-the-job risks and injury.

Research reported by the CDC has shown that the most effective way to promote wellness is to … implement an evidence-based comprehensive health promotion program that includes individual risk reduction programs, coupled with environmental supports for healthy behaviors, and is coordinated and integrated with other wellness activities.*

Based on location and available resources, UC Living Well (UCLW) has established a wellness program minimum standards framework for a comprehensive Wellness Program at all UC locations. The framework is detailed below and includes programmatic and culture of health interventions that target UC’s top risk areas and high cost claims. The standards are based on best practices, evidence based strategies and aligned with CCC scorecard, UC’s current tool for wellness program evaluation. These standards are to be implemented over time under the Wellness Program Manager in partnership with other key stakeholders including: Employee Assistance Program (EAP), Human Resources, WorkLife, Recreation, Safety, Ergonomics, WorkStrong, UC benefit plans, etc.

July 2015
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<th>Physical Activity</th>
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<td>Walking Program**</td>
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<td>Promote onsite exercise facility, programs, services*</td>
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<td>Behavior change program/activity challenges*</td>
<td>Promotion of the alternative transportation (walk/bike to work) in partnership with Park and Transportation*</td>
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<tr>
<td></td>
<td>Promotion of lifestyle counseling/coaching resources*</td>
<td>Marked or posted walking routes or maps</td>
</tr>
<tr>
<td></td>
<td>Organized group activity programs (other than the exercise facility)</td>
<td>Walking/Standing meeting guidelines</td>
</tr>
<tr>
<td></td>
<td>Promotions or participation in surrounding community walk, run/bike events</td>
<td>StairWell initiative</td>
</tr>
<tr>
<td>Healthy Eating</td>
<td>Education on healthy eating and nutrition-related topics*</td>
<td>Healthy Meeting and Events Guidelines*</td>
</tr>
<tr>
<td></td>
<td>Annual Food Day activities*</td>
<td>Promote/organize Healthy Eating/Nutrition standards for vending, catering, retail residential, and other food venues</td>
</tr>
<tr>
<td></td>
<td>Behavior change programs/challenges*</td>
<td>Promote and/or organize Hydration Stations</td>
</tr>
<tr>
<td></td>
<td>Promotion of Lifestyle counseling/coaching resources*</td>
<td>Subsidy or discount on healthier foods</td>
</tr>
<tr>
<td>Weight Management</td>
<td>Education on weight management*</td>
<td>Promote and/or organize CSA's and Farmers' Market</td>
</tr>
<tr>
<td></td>
<td>Behavior change programs/challenges*</td>
<td>Healthy Food and Beverage Policy</td>
</tr>
<tr>
<td></td>
<td>• i.e. Maintain Don’t Gain</td>
<td>Dedicated space for demo/teaching kitchen</td>
</tr>
<tr>
<td></td>
<td>Promotion of lifestyle counseling/coaching resources*</td>
<td>Tobacco/Smoke-Free Policy**</td>
</tr>
<tr>
<td>Tobacco</td>
<td>Education on tobacco use*</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Promote/offer Cessation services*</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Awareness Campaigns (ex: GASC) *</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Promotion of lifestyle counseling/coaching resources *</td>
<td></td>
</tr>
<tr>
<td>Initiative</td>
<td>Programmatic</td>
<td>Culture of Health Initiatives</td>
</tr>
<tr>
<td>----------------------------------------------------------------------------</td>
<td>-----------------------------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------------------------------</td>
</tr>
</tbody>
</table>
| **Stress Management/Mental Health** (Initiatives in collaboration with EAP and/or WorkLife, etc.) | - Education on topics such as Depression, Mental Health, Mindfulness, etc.*  
- Depression/Mental Health Assessment  
- Training for supervisors on workplace stress and depression | - Dedicated space for relaxation activities (i.e. meditation, yoga, biofeedback)  
- Support local social/team-building activities (i.e. staff picnic, faculty/staff sports teams, holiday party, etc.)  
- Influence opportunities for employee participation in decisions on work processes, etc.  
  - i.e. collaboration with training, HR, etc. |
| **Wellness Champion/Culture**                                               | - Wellness Ambassador/Champion Program*                                                          | - Wellness Toolkit/Training for Managers and Supervisors  
- Healthy Department Certification                                                                 |
| **Screening/Preventive Care** (Initiatives in conjunction with UC benefits plan) | - Flu education and/or vaccination*  
- Promote preventive care with health professional*  
- Know Your Numbers Health Screenings |                                                                                                 |
| **Financial Wellness** (Initiatives in collaboration with Fidelity, WorkLife, EAP, etc.) | - Promote/offer Financial Education resources*                                                    | - Financial Counseling*                                                                         |
| **Chronic Conditions (Cardiovascular and Cancer)** (Initiatives in collaboration with UC benefit plans) | - Promotion of resources for chronic conditions*  
- Promotion of lifestyle counseling/coaching resources*  
- Behavior Change Programs focused on Diabetes, Heart and Stroke, Cancer, Cholesterol  
- Onsite Health Screenings  
  - Body comp, BMI, blood pressure, cholesterol, glucose, bone density, etc.  
- Warning Signs/Symptoms campaign  
  - i.e. heart attack, stroke | - Blood Pressure kiosks                                                                         |
| **Injury Prevention/Musculoskeletal** (Initiatives in collaboration with Ergonomics and WorkStrong partnership) | - Injury Prevention/Education*  
  - Osteoarthritis/Musculoskeletal  
- Injury prevention fitness program | - Organized Activity/Fit Breaks  
- Sit/Stand workstations                                                               |
| **Work-Life**                                                              | - Education on child care, eldercare, tuition subsidy or reimbursement*                         | - Wellness Time policy                                                                           |
| **Lactation Support**                                                      | - Education on Breastfeeding                                                                    | - Accommodations for Nursing Mothers Policy*  
- Lactation Rooms*  
- Access to hospital-grade breast pumps |
<table>
<thead>
<tr>
<th>OCC Health &amp; Safety (Initiatives in collaboration with EHS, Occupational Health, WorkStrong)</th>
<th>Programmatic</th>
<th>Culture of Health Initiatives</th>
</tr>
</thead>
<tbody>
<tr>
<td>WorkStrong program</td>
<td></td>
<td>CPR/AED program</td>
</tr>
<tr>
<td>Health and Safety partnership (training for supervisors, health and safety committee, Safety Spotlight)</td>
<td></td>
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</tr>
</tbody>
</table>

**Recommendation**

In order to meet these minimum wellness standards, we require at least:

- 1 FTE Wellness Program Manager dedicated to each location
- Wellness advisory committee
- Wellness program start-up budget
Appendix E: UC Davis Campus WorkStrong 2012-2014 Summary

Occupational Health
WorkStrong 2012-2014 Summary

UC Davis
University of California
"The UC Davis WorkStrong program changed my life!"
- Pat Bevington, UC Davis Extension

What is WorkStrong?

The WorkStrong program is a University of California systemwide program developed with the expertise and collaborative support of UC staff in wellness programs, occupational health and recreational sports. It was designed to promote recovery and prevent future workplace injuries. Each UC campus has its own unique program to suit the needs of the employees on its campus.

UC Davis’ WorkStrong program enrolled its first participant in May 2012. Initial referrals are initiated by Sedgwick, a third party worker’s compensation company and participants are enrolled after the Occupational Health physician’s evaluation and clearance. The WorkStrong program is currently managed by a WorkStrong Coordinator, an exercise physiologist, who performs initial, mid and final fitness testing as well as wellness coaching services for participants. A registered dietitian, also housed in Occupational Health, provides nutrition consultations. This program provides a continuity of care for patients that have been injured on the job as most first go through physical therapy on site before graduating to the WorkStrong program to continue their recovery.
Program Components

12 week program

- Pre- and post-program lipid profiles, glucose and HgA1c measurements
- Wellness coaching sessions: 12 weekly sessions including 3 fitness testing sessions
- Individual ergonomic evaluations and recommendations
- Personal training: 24 sessions, 2x/week for 60 minutes
- Campus gym membership for 6 months
- Registered dietitian visit with 3 day food record analysis and follow-ups: 3 visits
- Pain and Stress Management techniques: 3 individual sessions
- Lifestyle and Wellness group class
- Meditation group class
- Nutrition workshop
- “Shopping Tour” — a trip to the UC Davis Farmers Market

The WorkStrong program is a rigorous wellness program that requires active participation. The effectiveness of the program is measured primarily by re-injury rates of the participants and secondarily by SF-36 pre- and post-questionnaire and pre- and post- fitness testing measurements. In addition, testimonials are collected that describe how the WorkStrong program has contributed to on-going behavior change.

Partners

Our partners include the Academic Staff Assistance Program (ASAP) and Campus Recreation. ASAP provides two group classes held at Occupational Health from 12-1 p.m., rotating biweekly: Lifestyle and Wellness and Meditation. These are taught by post-doctoral students and, on occasion, Spanish interpretation can be provided. ASAP also provides a Health Enhancement series that focuses on a neurobehavioral method to reduce chronic pain and/or stress. This series is taught one-on-one at ASAP by trained staff. Campus Recreation provides 1-2 professional trainers for WorkStrong participants and a 6 month ARC membership.
Participation Statistics: May 2012 – April 2014

- 381 individual referrals from Sedgwick; 183 invited into WorkStrong
- 91 total participants = 50% enrollment rate
  - 11 dropped
  - 6 participants on hold for medical or personal reasons
  - 6 active participants
  - 60 grads = 87% Graduation Rate
- 15 actual new graduate injuries; 11 claimants = 18% re-injury rate; actual cost = $38,000
- 23 expected new injuries; expected cost = $296,000*

*Actual data from Bichmore

### Significant Health and Fitness Improvements; n=44-57

<table>
<thead>
<tr>
<th></th>
<th>Average Change after WS Program</th>
<th>Average % Change after WS Program</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Anthropometrics</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Weight</td>
<td>-2.18 lbs</td>
<td>0.9%</td>
<td>&lt;0.0001</td>
</tr>
<tr>
<td>BMI</td>
<td>-0.31</td>
<td>0.9%</td>
<td>0.0213</td>
</tr>
<tr>
<td>Body Fat %</td>
<td>-2.4%</td>
<td>6.2%</td>
<td>0.0164</td>
</tr>
<tr>
<td>Waist Circumference</td>
<td>-1.61 cm</td>
<td>1.5%</td>
<td>0.0016</td>
</tr>
<tr>
<td>Hip Circumference</td>
<td>-0.18 cm</td>
<td>1.5%</td>
<td>NS</td>
</tr>
<tr>
<td><strong>Cardiovascular</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Resting Heart Rate</td>
<td>-0.39 bpm</td>
<td>0.1%</td>
<td>NS</td>
</tr>
<tr>
<td>Resting Systolic BP</td>
<td>-3.93 mmHg</td>
<td>2.6%</td>
<td>0.0105</td>
</tr>
<tr>
<td>Resting Diastolic BP</td>
<td>-1.81 mmHg</td>
<td>2%</td>
<td>0.0374</td>
</tr>
<tr>
<td>Max Heart Rate</td>
<td>-3.45 bpm</td>
<td>2.3%</td>
<td>0.0074</td>
</tr>
<tr>
<td>Heart Rate Recovery</td>
<td>-5.49 bpm</td>
<td>4.2%</td>
<td>0.0104</td>
</tr>
<tr>
<td>YMCA Fitness Rating</td>
<td>1.18</td>
<td>85%</td>
<td>&lt;0.0001</td>
</tr>
<tr>
<td><strong>Strength and Flexibility</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Push Ups</td>
<td>11.33 #</td>
<td>176.3%</td>
<td>&lt;0.0001</td>
</tr>
<tr>
<td>Curl Ups</td>
<td>2.18 #</td>
<td>20%</td>
<td>0.0035</td>
</tr>
<tr>
<td>Plank</td>
<td>41.91 sec</td>
<td>108.9%</td>
<td>&lt;0.0001</td>
</tr>
<tr>
<td>Sit and Reach</td>
<td>2.23 in</td>
<td>14.6%</td>
<td>&lt;0.0001</td>
</tr>
</tbody>
</table>
Body composition was measured by skinfold calipers using a 7 site equation. The YMCA step test was used for cardiovascular fitness measurements. All other strength and flexibility tests were done with American College of Sports Medicine (ACSM) protocols except for the plank test which was simply the amount of time the participant could hold a forearm plank in proper form.

**Significant SF-36 Questionnaire Improvements; n=36**

![Image](image.jpg)

All SF-36 measurements improved significantly pre to post WorkStrong with the exception of Emotional Role Function. The SF-36 survey is a generic measure of 8 categories of functional health and well-being as well as psychometrically-based physical and mental health summary measures and a preference-based health utility index.

**Participant Testimonials**

"What a fantastic program WorkStrong is! I felt depressed and disgusted in the way I felt and the way I looked. I was not physically fit or felt very active. Due to some previous injuries I was not able to or motivated enough to exercise, until the opportunity to enroll in this program came along.

"I went from 255lbs when the class started to 231lbs at the end of it, by, in addition to my normal training regimen, I also started riding a bike, and following some nutrition guidelines that the WorkStrong Coordinator had set up for me. I gained better balance and straighter posture because of the training and learned how to lift properly."
"I continue to stay motivated to continue to work out as I don't wish to be where I was before my opportunity in this program came along. Everyone, either healthy or not should be given the opportunity to have access to this class. I feel that all will benefit in some way or another from this and will take something away from the program.

"Thanks for a wonderful program and the opportunity to start my life over."

– Steve Plocher, Primate Center

“I feel the program helped me right from the start. For various reasons, not all work related, I could not walk up a flight of stairs without great difficulty. After just one workout I was able to walk up 2 long flights of stairs without holding on to the rail. I guess I had forgotten how to do it after a previous injury. Now I am so proud I go out of my way to use the stairs whenever I have the opportunity. It is a big deal for me. I broke my habit of drinking too much soda and now grab for water instead of soda. My trainer was excellent and I was able to do things I never thought I could before. I could feel my strength increase from the exercises. Also the moral support I received at the weekly meetings was very helpful as well as the hour long noon seminars. I was able to learn about and make use of The Academic and Staff Assistance Program which has also helped in my family life."

– Vincent D'Antonio, Plant Sciences

“For years I had been telling myself I need to exercise more and eat better. Every New Year I made those same resolutions. But somehow I never got around to it, until I was invited to participate in WorkStrong. With Stacey's help, I was able to set both short and long-term goals that were realistic, measurable, attainable, and that I felt strongly about. They were personal to me, not just things I "should" do. And with Bob's expert guidance, I learned exercises that allowed me to gain strength, balance, and stamina, and that, very importantly, I could do at home without expensive equipment. Bob and Stacey both encouraged me to meet my goals, and with their help I stayed on course, developed new healthy habits, and met my short term goals.

“If you are interested in changing to a healthier lifestyle, WorkStrong will give you the tools to do it! I've made improvements in my diet and exercise habits that I expect to last a lifetime. Because of WorkStrong I discovered that I do have the ability to make these changes.

“This program is very beneficial, and I hope many more people will be able to join the program. It worked for me, and I am very grateful for being allowed to participate."

– Pat Bevington, UC Extension
Contact

**Stacey Brezing, MS, RCEP, CHWC**
WorkStrong Coordinator
1 Shields Ave
Cowell Hall
Davis, CA 95616
(530) 752-6004
sbrezing@ucdavis.edu

**Roger Belcourt, MD**
Medical Director
1 Shields Ave
Cowell Hall
Davis, CA 95616
(530) 752-6031
rmbelcourt@ucdavis.edu

**UCDAVIS**
SAFETY SERVICES
Occupational Health Services
Appendix F: UC Davis Staff and Faculty Health and Wellness Needs Assessment

The UC Davis Staff and Faculty Health and Wellness Committee is developing recommendations for administration regarding a comprehensive employee health and wellness program. We ask that you spend approximately 5-10 minutes sharing information about your interests in health and wellness related activities. By completing this needs assessment, you are participating in research. Your participation is voluntary and your responses will remain private. Any information you provide will be aggregated by Stacey Brezing, Chair of the Staff and Faculty Health and Wellness Committee, Matthew Lange, Associate Director of Knowledge and Engineering and Keavagh Cliff, Health Promotion Specialist, in a final report submitted to UC Davis administrators. If you have any questions, please contact the Staff and Faculty Health and Wellness Committee at healthandwell-info@ucdavis.edu. Thank you for participating!

Demographics

1  Gender Identity

☐ Male
☐ Female
☐ Transgender
☐ Other gender identity
☐ Decline to state

2  Age Group

☐ Under 20
☐ 21-30
☐ 31-40
☐ 41-50
☐ 51-60
☐ 60 +
☐ Decline to state

3  Employee Type

☐ Faculty (Includes Academic Federation AND Academic Senate members)
☐ Staff
☐ Other
☐ Decline to state

Other employee type

4  Worksite

☐ UC Davis CAMPUS
☐ UC Davis MEDICAL CENTER
☐ Other
☐ Decline to state

Other UC Davis location
5 What best fits your personal health and wellness goals? (Please check all that apply)

- Improve well-being (health and happiness)
- Improve family well-being
- Improve energy
- Improve productivity
- Improve job satisfaction
- Improve life satisfaction
- Increase physical activity
- Manage or prevent injury
- Lose weight
- Manage or maintain current weight
- Improve eating habits
- Decrease health risks or improve medical conditions
- Reduce need for medications
- Improve work/life balance
- Improve sleep
- Better manage or reduce stress
- Reduce or quit smoking
- Improve finances
- Improve personal relationships
- Manage drug or alcohol issues
- Do not have any personal health or wellness goals
- Other
- Decline to state

(Please check all that apply)

Other personal health and wellness goal(s)

6 In which of the following categories would you place yourself?

- I am not interested in pursuing a healthier lifestyle.
- I am thinking about changing some of my health behaviors.
- I am planning on making a health behavior change within the next 30 days.
- I have made some health behavior changes within the last 6 months.
- I have been living a healthy lifestyle for at least 6 months.
- Decline to state

7 How could an employee health and wellness program help you to achieve your health and wellness goals? (Please check all that apply)

- Improved nutritional habits
- Weight loss
- Increased exercise frequency
- Improved health measures (i.e., blood pressure, cholesterol, glucose, body composition, etc.)
- Better work/life balance
- Improved career satisfaction
- Increased productivity
- Better able to manage stress
- Practicing environmentally friendlier activities
- Reduced injuries
- Increase mental alertness/capacity
- Better sense of purpose or meaning in life
- A program would not help me achieve my goals
- Other
- I do not have health and wellness goals
- Decline to state

(Please check all that apply)

Other ways a program could help you achieve your goal(s)

8 Would an incentive increase your motivation to improve (or maintain for active individuals) your health and wellness?

- Yes
- No
- I don’t know
- Decline to state
If yes, what type of incentive(s)? (Please check all that apply)

- Monetary
- Gym membership subsidization
- Release time during work day
- Lower health premiums
- Various prizes
- Other
- Decline to state
(Please check all that apply)

Other type of incentive(s)

Personal health and wellness interests

Would you participate in any of the following health and wellness activities on a REGULAR basis if they were offered for staff and faculty? (Please check all that apply)

- Group exercise classes held in or near your department/building
- On-site fitness center/space specifically for staff and faculty OR one that offers dedicated hours for staff and faculty
- Sports league activity
- Walking event or club
- Running event or club
- Healthy cooking classes
- Weight management program
- Stress/anxiety management program
- Meditation space or room in department or building
- Sleep management program
- Parenting skills and support
- Health fair
- Fitness or wellness challenges
- Monthly wellness seminars/brown bags
- Smoking cessation program
- Support group
- Individual health and wellness coaching
- Online personalized dashboard for sleep, nutrition and physical activity tracking program (technology supported)
- Confidential health screenings
- Medical self-care training or disease management programs
- Wellness Ambassador Program led by yourself or a colleague in your department
- Other
- I would not participate in health and wellness activities
- Decline to state
(Please check all that apply)

Other activities you would participate in

When would you be most likely to participate in health and wellness programming offered by UC Davis? (Please check all that apply)

- Before work
- During lunch or at work
- After work
- I would not participate
- Decline to state
(Please check all that apply)
Feedback on existing systemwide and local programs and services

11. Have you filled out the UC Living Well Health Risk Assessment provided through the University of California Office of the President (UCOP) in the past 12 months?  
☐ Yes  
☐ No  
☐ Started, but did not complete  
☐ Decline to state  
If no, why not?  
☐ Not eligible because of my union  
☐ Not eligible because I do not have health insurance through UC  
☐ It is too time consuming  
☐ I did not want to take it  
☐ I did not know about it  
☐ Decline to state  

12. Have you participated in any of the following health and wellness programs offered at the Medical Center or Davis campus? (Please check all that apply)  
☐ UC Walks  
☐ UC Food Day  
☐ Telephonic wellness coaching (UC Living Well)  
☐ Online webinars (UC Living Well)  
☐ WorkLife/Wellness Brown Bags  
☐ WorkStrong Program  
☐ UC Living Fit Forever  
☐ Integrative Medicine Program presentations  
☐ Health management and education classes (on the UCDMC campus)  
☐ UC Davis Farmers Market (Davis campus or Medical Center)  
☐ Campus Recreation and Unions group fitness and wellness classes  
☐ Health or wellness programs offered through personal health insurance plan  
☐ None of the above  
☐ Other  
☐ Decline to state  
(Please check all that apply)

Other programs you have participated in  

13. Do you have any barriers to participating in health and wellness programs at the Medical Center or Davis campus? (Please check all that apply)  
☐ Unable to attend due to work schedule  
☐ Classes are not in my language  
☐ I'm not interested in what is offered  
☐ Culture at work is not supportive  
☐ Unaware of what might be offered  
☐ Programs are not offered near my work site  
☐ Cost prohibits my participation  
☐ Unable to attend due to family obligations  
☐ I don't have any barriers  
☐ Other  
☐ Decline to state  
(Please check all that apply)  

Other barriers

14. How satisfied are you with the health and wellness programs UC Davis offers to staff and faculty?  
☐ Very satisfied  
☐ Mostly satisfied  
☐ Satisfied  
☐ Neither satisfied or dissatisfied  
☐ Dissatisfied  
☐ N/A  
☐ Decline to state

15. I feel that UC Davis supports my health and well-being.  
☐ True  
☐ False  
☐ No opinion  
☐ Decline to state

projectredcap.org  

REDCap
### Email Comments from the Staff and Faculty Needs Assessment

<table>
<thead>
<tr>
<th>Comment</th>
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<tbody>
<tr>
<td>It would be useful if the weights room of the ARC on the UC Davis campus dedicated the lunch hour, 12:00 – 1:00 to use by faculty and staff.</td>
</tr>
<tr>
<td>If there was a drop in facility that was close by and allowed for shorter commitments of time throughout the day I believe this would be well received. In addition, it would be nice if the cafeteria offered healthier menu options or if there was an incentive to eat healthier particularly for staff.</td>
</tr>
<tr>
<td>$75 gift card attractive, but can’t do the follow-up activities because he doesn’t live in Davis. If you want those who do not live in Davis to participate, you have to figure another way to include them.</td>
</tr>
<tr>
<td>A project to phase in soft walkways should be considered to prevent future health problems for students, staff and faculty.</td>
</tr>
<tr>
<td>Please consider that many workplace health and wellness programs (particularly those with incentives) actually lead to an atmosphere of “inadequacy” as opposed to a sense of inclusion.</td>
</tr>
<tr>
<td>How about a WELLNESS Program for us who are differently-abled….i.e; wheelchair bound. We’d like to be able to participate in activities especially for us!!!</td>
</tr>
<tr>
<td>I am emerita and live at some distance -- online, however, is great. I've done some UC Living well and loved the tracking of e.g. time exercising and videos. I'd love an online program on meditation.</td>
</tr>
<tr>
<td>I would love to participate in some fitness/exercise activities on campus but unless childcare or opportunities for children to participate are included, I will not be able to. Please consider working parents, especially single working parents, when planning these fitness programs for staff and faculty.</td>
</tr>
<tr>
<td>Could UCD encourage its faculty to &quot;take&quot; these classes, space-available? This would obviously be a win for the faculty (I'd certainly be willing to pay for participation). But I think students would also appreciate having faculty contact in an informal setting.</td>
</tr>
<tr>
<td>If health benefits are provided to those on campus then an equal and equitable solution needs to be offered for off campus employees, such as those with Cooperative Extension who are distributed among most counties.</td>
</tr>
<tr>
<td>Probably 90% of my worklife stress could be alleviated by improving my daily work situation. Instead, it seems to be my responsibility to do ever more to keep myself healthy despite an increasingly unhealthy workplace. The grief/bereavement area of campus wellness programs—besides ASAP, which is operating on a constantly shrinking budget-- are non-existent, as far as I know. Even the UBH benefit is difficult, if not impossible, to access in times of loss. Some support and training for us and our supervisors would help a lot. Thus, I would like to see the campus work toward healthier job conditions in addition to increasing wellness programs.</td>
</tr>
<tr>
<td>I think monetary incentives help. A decrease in health premium cost or a bonus for people who attain and keep a health weight would be a big incentive.</td>
</tr>
<tr>
<td>Put simply, I would like to vote for free access to the campus fitness facility for faculty and staff.</td>
</tr>
<tr>
<td>If you want those who do not live in Davis to participate, you have to figure another way to include them.</td>
</tr>
<tr>
<td>I work at the Alhambra Cannery. We have vending machines stocked with unhealthy snacks. How about we have our commitment to health and wellness be reflected in the items in these machines?</td>
</tr>
<tr>
<td>I am wondering if there is any type of volunteer employee/staff workgroup that is looking at health and wellness programs for UCD? If so, it is something I’m interested in being a part of. I’ve been a group fitness instructor for ten years and an employee at UCD for two and a half years...I would be interested in helping to plan some activities.</td>
</tr>
</tbody>
</table>

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81
Advocacy from the UC Davis Staff and Faculty Health and Wellness Committee for a fitness center on the Health Campus with lap swimming amidst the continued new construction and employee access to the Davis Campus Aquatics Center—and if not removing private groups’ privileges for equity’s sake—would be most welcome. Thank you for your efforts on behalf of our well-being.

I have noticed it has become increasingly difficult to remain healthy and energized since my job is so sedentary. I walk in the arboretum for 30 minutes every day and do my best to get up between appointments with students, but I still feel like I need more exercise time. I’m often rushed and sometimes have to choose between eating lunch and walking. They [Police Officers] work out for an hour before or after their shifts and flex that hour, so their workday is not extended (nor do they have to gobble up lunch before or after a workout). I think UC Davis should consider offering paid workout time.

I would love to have some kind of group dance classes closer to my home in Newcastle, perhaps in Roseville, which could accommodate some of the staff that live in that area, plus those that work at the outlying facilities. Or a hiking group would be beneficial.

However our working force % which are parents is extremely high. As all parents know this responsibility takes so much of our free time, that our own health and wellbeing is often not part of our day, I think that some of the wellness classes /time must be sponsored by our hospital.

I would like to put a word in for an on campus daycare that all staff, students, faculty... have access too. Being a new parent and knowing that your children are well taken care of is a huge support and makes a significant impact on parent’s wellbeing and peace of mind as well as productivity. I believe this should be a priority in any wellness program and institution.

There have been lunch time speakers/programs advertised on the Insider Friday Update that I have been interested in attending, but have been unable to because I can’t take an hour break in the middle of the day. It would be nice if videos of the presentation, or PowerPoint/content could be posted online for later viewing. Also, I work out at the fitness center at the UCDMC campus. I’m glad that it is there, but it seems to be primarily targeted to Med School students. I think if it was better known to employees of the hospital then it would be more utilized by them. If that were to happen there would need to be an increase in the size and amount of equipment in the facility. They also really need a squat rack. I feel like expanding or better utilizing a work out space at the med center campus would really benefit and be used by employees as it is so convenient to use before or after work. If the fitness center was better connected with the wellness programs where fitness classes, personal training or nutrition counseling advice could be offered at or in conjunction with the fitness center it would be a great fit and help employees get started and/or maintain their fitness and wellness goals. There could be discounts or free access as incentives for regular usage of the programs and facilities.

Too bad the survey had so little emphasis on what we’ve historically had to offer here, something that, due to the mediocrity and lack of understanding of the current HR management, is now contracting and losing the programs it created over the last decade. What will be left will be a shadow of a formerly highly successful program...

I want to add that showers in more of the buildings would be a wonderful way of encouraging exercise during the lunch hour. I feel like free membership at the ARC to all employees would be a great step as well.

1. Provide healthy alternatives in vending machines and get rid of soda machines (especially at the Medical Center).
2. Provide opportunities to telecommute or choose from varied flexible work hours, when feasible.
3. Provide support for peer-to-peer lunchtime learning sessions at locations (like mine) that have conference rooms available.
4. Encourage employees to organize noon-time worksite walking groups.

5. Improve the online presence of the Staff and Faculty Health and Wellness Committee

I suggest that you offer free or significantly discounted memberships to the UC Davis ARC. I would go there to exercise if it was more affordable. The current discount for University affiliates is only 15% which sucks. I think we should be offered at least 50% off.

What about supporting local gyms by partnering with them for reduced membership rates?

Provide staff with a monthly one-day pass to the ARC.

1) Some staff work outside of Davis and while they would love to try out the ARC facilities, they may prefer regular membership at a club closer to home (e.g. 24 Hour Fitness or California Family Fitness).

2) One-day passes may convince some employees to upgrade to a recurring monthly CRU membership.

3) One-day passes can serve as yet another opportunity for an employee to put in some cardio time that they may not otherwise do.

This could be a year-round promotion (once per month, which each pass to expire at the end of the month) or perhaps just a summer pilot. Summer would be especially beneficial, since temperatures heat up and ARC attendance is lower due to regular academic year classes being out.

My last position offered the incentive of a reduced gym fee if I was using the facilities 30% of the days each month. It was a nice motivation for me, and it also made me conscious of my use/frequency of the gym.

One of the things that I feel would be very helpful in terms of my health, is easier access to standing desks and glare screens for computers. I feel like a sit-only desk affects me more than any other factor, to be honest. I know I can request these things from my supervisors, but I am hesitant to bug them about it since they’re already so busy and it seems like an expensive, and possibly even selfish thing to ask (since my coworker wants these things too and is also unwilling to ask- I’m the newer one, so I feel it’d be a bit spoiled to raise my hand first). It’d be nice if there were a way to request such items without bugging our very busy supervisors.

Are there any gyms that offer UC employees the State Employee discount?

I would like to request that Sodexo only serve healthy food in the cafes and dining halls.

Honestly, it’s nice that UC cares. However, I think being a public institution, it is wrong to use public funds for monetary incentives to help us on our own well-being. I would use it if it is offered, but I am against it. It’s a personal responsibility and personal choice. However, if we have one employee per general area to plan out walk routes for before work, during lunch, or after work, that would be appropriate. The mob mentality of a workout is helpful. Anyone can go walk or workout without gym membership or equipment. We just have to personally make the commitment to do so. If UC wants to go the extra mile, it would be nice if we were offered free membership to staff and family at the ARC and swimming facilities (facilities that already exists). Or even discounted rates of $15/month or $.50 per entry, I’d go for that. It’s a rate that I can afford. The current discounted rate is still too high for me. Gym membership is a luxury item, but if at a discounted rate, which is a great incentive.

It would be wonderful if we had more lunch time classes at the Jackson building, yoga specifically. If we could do classes on work time (like a long lunch break) instead of using PTO/ or having to stay late, I would attend regularly. I cannot go to classes after work due to family obligations. We would also benefit from more team building activities, such as taking a work day to do a retreat together.
I think it quite unfortunate that the campus doesn't support faculty and staff with free access to the ARC; or free access to some other, on campus, faculty/staff specific facility; or even reduced fees for the private gyms in town. I find the ARC a very faculty-unfriendly (maybe 'adult-unfriendly') environment. From the moment you walk in, the place signals that you are tolerated, barely, if you will pay. I have quite a few stories...One is left with a choice of paying for something reluctantly provided that is free at most good universities; or paying a private gym in town, much less convenient, and feeling resentful that your university isn't taking care of this rather-standard benefit/need.

When I first took the living well heath quiz, (7 years ago) I just took a quiz and got a $100.00 gift card of my choice. Since then, I’ve taken a few more quizzes/challenges from Living well, which included tracking my exercise. I never received an incentive from the tracking of my exercise (living well challenge). We were promised a $75.00 (incentive amount went down) giftcard. The last 2 times, I participated, there were too many hoops I had to jump through, to receive the incentive, so I gave up. There is false advertising, telling the participant that all they have to do is take the challenge/quiz and they will receive a $75.00 giftcard. Also, the Living well website is too busy and difficult to navigate. It is only compatible with certain browsers and it’s difficult to find help. I am really really disappointed in the Living well program and I hope this campus considers another program other than “Living well” in the future. If Living well is the only way to go, then I as one will not participate and I’m not the only one who feels this way about it. I know my coworkers feel the same way.

I just wished there would be available programs near where I live to make it possible to attend such. I am not eligible for any wellness programs here on campus because my husband also works for the university and we have a joint insurance plan.

I was then very disappointed to learn that UC did not include Silver Sneakers in the Blue Shield PPO. I think the bottom line is Blue Shield would include the Silver Sneakers program in retiree health plans if UC asked for it. Blue Shield told me they had had several inquiries about the Silver Sneakers Program.