



SHIP Workplace Wellness: Building a Culture of Health

RESULTS FROM WELLNESS COORDINATOR SURVEY AND WORKPLACE ORGANIZATIONAL ASSESSMENTS

06/18/2019

SHIP Workplace Wellness: Building a Culture of Health

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Executive Summary

Minnesota's Statewide Health Improvement Partnership (SHIP) is a chronic disease prevention initiative active in all 87 Minnesota counties. SHIP, a collaboration between the Minnesota Department of Health and local public health, works to create healthier communities by expanding opportunities for active living, healthy eating and tobacco-free living. Because the majority of adults spend half of their waking day at work,¹ workplaces are a big part of achieving this goal.

In 2018, the Minnesota Department of Health's Office of Statewide Health Improvement Initiatives conducted an evaluation study on SHIP's Workplace Wellness Initiative to determine the impact SHIP has on employers' workplace wellness. The evaluation used two data sources for the analysis: 2018 Wellness Coordinator Survey (WCS) and the Blue Cross and Blue Shield of Minnesota's Healthy Workplaces Organizational Assessments (BCBS OA).

Key Findings

With a sample of 194 employers from the WCS and the 153 employers from the BCBS OA, this evaluation found that:

1. 92% of WCS respondents indicated that SHIP advanced their wellness efforts.
2. Employers are strengthening their wellness strategies while participating in SHIP. For example, WCS results indicate that SHIP:
 - tripled the number of employers who added healthy food options at company functions and
 - doubled the number of employers who have breastfeeding friendly rooms ($p < .001$).
3. Employers are strengthening their wellness foundational practices. For example:
 - 49% of SHIP employers reported strong leadership commitment after at least one year in SHIP compared to 19% when they started working with SHIP (BCBS OA, $p < .001$).
 - SHIP employers who reported a strong or very strong wellness committee increased by 39% after working with SHIP for 1 year (BCBS OA, $p < .0001$).
 - The number of employers reporting a complete wellness plan increased from 16 to 55 after being in SHIP for 1 year (BCBS OA, $p < .0001$).

Conclusion

The SHIP model has followed national best practices and has gathered positive results. The 2018 Wellness Coordinator Survey and BCBS Organizational Assessment affirm that implementing the best practices found in the SHIP workplace model lays the foundation for a sustainable and comprehensive workplace wellness initiative.

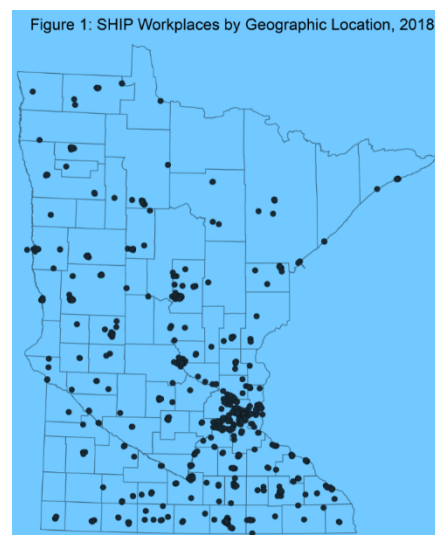
¹ American Time Use Survey Results 2017, <https://www.bls.gov/charts/american-time-use/activity-by-emp.htm>

I. Background and Purpose

A culture of health is defined as one in which individuals and their organizations are able to make healthy life choices within a larger social environment that values, provides, and promotes options that are capable of producing health and well-being for everyone regardless of background or environment. Comprehensive health promotion initiatives are built on a culture of health that supports individuals' efforts at changing lifelong health habits by putting in place policies, programs, benefits, management, and environmental practices that intentionally motivate and sustain health improvement.

Improving population health requires more than simply convincing people to take better care of themselves. It requires that the organization where individuals spend a good portion of their waking hours creates an environment where leading a healthy lifestyle is the "default" option.²

Minnesota's Statewide Health Improvement Partnership (SHIP) is a chronic disease prevention initiative active in all 87 counties in Minnesota (Figure 1). SHIP, a collaboration between the Minnesota Department of Health (MDH) and local public health, works to create healthier communities across Minnesota by expanding opportunities for active living, healthy eating and tobacco-free living. Because the majority of adults spend half of their waking day at work,³ workplaces are a big part of achieving this goal. In 2018, 827 SHIP workplace partners have made changes to promote a healthier work culture by creating workplaces that are tobacco-free and supportive of breastfeeding, healthy eating and physical activity. These changes have impacted an estimated 86,000 employees across Minnesota.



The employer and employee benefits of having a SHIP-designed workplace wellness may include improved health; decreased absenteeism; increased job satisfaction; and improved productivity, all of which can improve an employer's bottom line and make them an employer of choice.

Through SHIP, MDH provides funding to local public health departments to work with smaller-sized employers who often have fewer resources to implement wellness initiatives. SHIP workplaces employ on average 230 individuals, with nearly one-quarter having less than 40 employees (2018). SHIP workplaces are trained on wellness through a multi-employer collaborative process that provides employers with the opportunity learn from local public health staff and each other. This method of training addresses the organizational factors of workplace wellness, focuses on changes in policies, systems, and the environment and, as a result, lays the foundation for more comprehensive wellness initiatives in the future.

² Goetzel, Ron Z., et al. "Do workplace health promotion (wellness) programs work?" *Journal of Occupational and Environmental Medicine* 56.9 (2014): 927-934

³ American Time Use Survey Results 2017, <https://www.bls.gov/charts/american-time-use/activity-by-emp.htm>

In 2017-2018, MDH evaluated the impact SHIP workplace wellness has on workplaces and their employees. The questions asked through this evaluation were:

- To what extent does SHIP positively impact workplace wellness strategies?
- To what extent does SHIP inform a culture of health in Minnesota workplaces?

II. Methodology and Analysis

To answer these questions, MDH used a primary data source, the Wellness Coordinator Survey (WCS) created by MDH staff, and a secondary data source, the Blue Cross and Blue Shield of Minnesota’s Healthy Workplaces Organizational Assessments (BCBS OA). Table 1 provides a description of these two data sources.

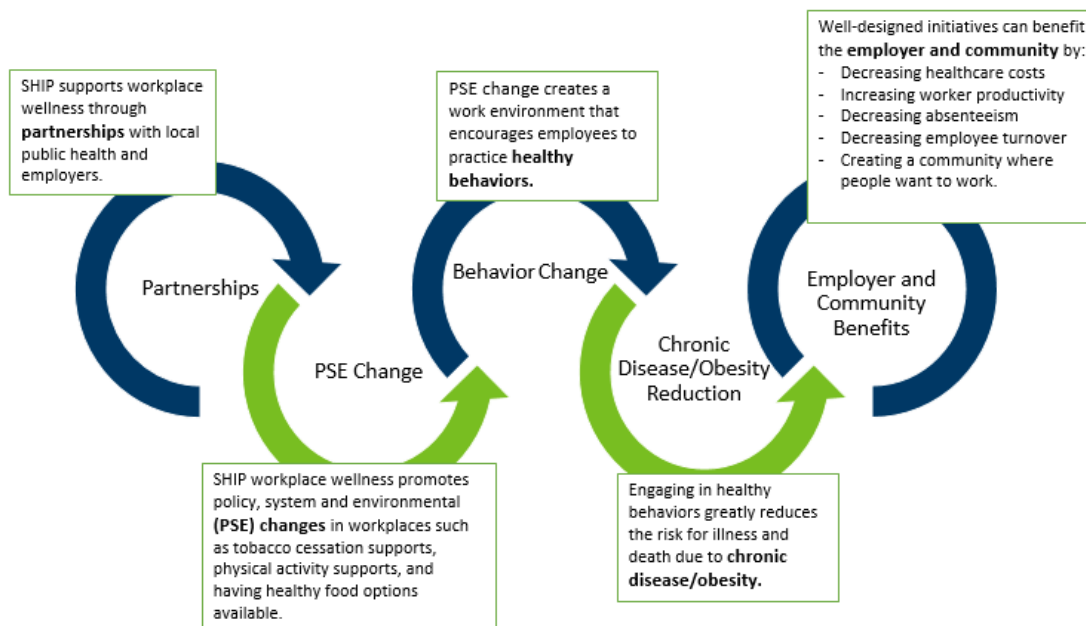
Table 1: Description of the Wellness Coordinator Survey (WCS) and the Blue Cross and Blue Shield of Minnesota’s Healthy Workplaces Organizational Assessments (BCBS OA)

	WCS	BCBS OA
Type of Data	Primary	Secondary
Description	Retrospective survey of employers who had been in SHIP for at least one year as of February 2018	Pre and post assessments taken by employers at the beginning of their SHIP training and approximately 1 year later
Dates administered	February 2018 to April 2018	March 2014 to December 2017
Topics covered	Wellness goals, strategies, leadership commitment, management support and employee behavior changes	Leadership and organizational support, goals and strategies
Number of employers	194	153
Response rate	45%	Not applicable

Where appropriate, summary statistics were calculated for closed-ended questions using SAS 9.4 for the BCBS OA and R version 3.5.0 for the WCS. Chi Square, McNemar’s or Wilcoxon signed rank tests were used to determine statistical significance at the 0.05 level.

MDH utilized a theory of change model to organize the thought process of this report. This stems from internal data sources, prevailing research literature and best practices on policy, systems and environmental change and health behavior. The theory of change suggests that by fostering partnerships at the local level and promoting changes in policies, systems and environments in the workplace, SHIP encourages employee behavior change, in turn reducing obesity and chronic disease and providing employer and community benefits (Figure 2).

Figure 2: SHIP Workplace Wellness Theory of Change



III. Results

SHIP Positively Impacts Workplace Wellness Strategies and Long-term Health Behavior Change

“I really enjoy working with SHIP, it has opened the conversation of how important wellness is in the workplace.”—Employer Participating in SHIP Workplace Wellness

Healthy living is about more than personal choices. A variety of factors influences health behaviors. SHIP workplace wellness promotes a workplace culture that supports healthy lifestyles for employees and their families through policy, systems and environmental changes (PSE) to make healthy choices more practical, easy and accessible to everyone.

Impact on PSE

The results of both the survey and assessments demonstrate SHIP’s effect on policies, systems and environments in the workplace that impact health. According to the WCS, 92% of employers indicated that their wellness efforts have advanced due to SHIP (Table 2).

Table 2: SHIP Work Has Advanced Your Wellness Efforts

	N	%
Strongly Agree	100	52%
Agree	78	40%
Undecided	14	7%
Disagree	1	1%
Strongly Disagree	0	0%

Source: 2018 Wellness Coordinator Survey

92% of respondents agreed or strongly agreed that SHIP advanced their wellness efforts.

The SHIP Workplace Wellness Initiative is composed of several PSE strategies in healthy eating, active living and tobacco use. Results from the WSC demonstrated the impact SHIP has had on wellness at these workplaces (Table 3). The number of employers implementing each strategy increased after participating in SHIP (P < .001). In fact, the number of employers who added healthy food options at company functions tripled (200% increase) and the number of employers who have breastfeeding friendly rooms more than doubled (110% increase).

Table 3: Wellness Strategies in Place at SHIP Workplaces

Strategy	Before SHIP		2018		% Change
	N	%	N	%	
Flex time to be physically active during work	59	32%	95	51%	59%*
Healthy food served at company functions	45	25%	138	74%	196%*
Healthy food options available for purchase at work (e.g. vending machines, cafeterias, snack stations)	45	24%	138	72%	200%*
Walking meetings	15	8%	55	29%	263%*
Local fitness facilities subsidies	105	59%	122	69%	17%*
Onsite fitness facilities	44	23%	73	39%	70%*
Active commuting supports (e.g. bike racks, showers)	72	39%	108	57%	46%*
Tobacco-free campus	96	51%	126	67%	31%*
Tobacco cessation supports (e.g. cessation programs)	107	58%	132	70%	21%*
Breastfeeding friendly rooms	72	39%	157	82%	110%*
Breastfeeding support (e.g. break time)	125	70%	165	89%	27%*

Source: 2018 Wellness Coordinator Survey
p value <.001

The results from the BCBS OA also demonstrated the impact that SHIP has on employers' workplace wellness. Table 4 shows the mean number of elements for each strategy at first time they completed an organizational assessment (when they started working with SHIP) to the

second time they completed an assessment that was approximately one year later. In that time frame, the mean number of elements increased for each strategy from (for a description of elements see Appendix ii). While the mean increased by less than one element for each strategy, the change in the mean number of elements was significant. These findings support the structure of the SHIP workplace wellness because the first half of the SHIP year is spent building foundational practices to support their wellness program. Thus during the first year in SHIP, employers have a short time to implement new strategies.

Table 4: Mean Number of Elements Implemented[^]

Strategy (max number of elements)	Mean	
	Before SHIP	1 Year Later
Tobacco-free environment (8)	3.8	4.4**
Breastfeeding support (3)	0.8	1.3**
Healthy eating (7)	3.4	3.7*
Physical activity (6)	2.2	2.5**

Source: BlueCross BlueShield Organizational Assessments 2014-2017

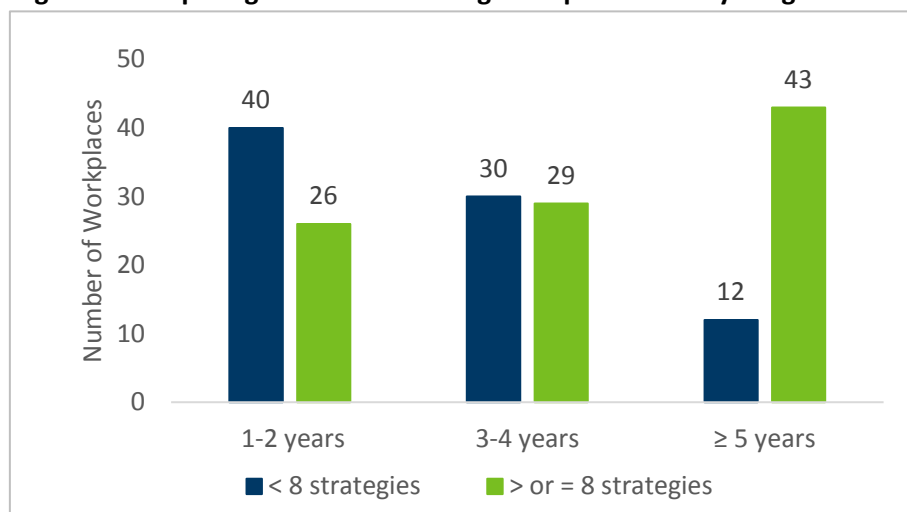
[^]Employers took the organizational assessments at the beginning of their SHIP training, then again after they completed a year of training.

*p <.05 **p <.0001

The longer an employer works with SHIP, the more wellness strategies implemented which leads to a healthier workplace culture.

The results from the WCS indicate that the longer an employer works with SHIP, the more workplace wellness strategies the employer likely to have in place. Twenty-six employers who had been in SHIP between 1 to 2 years reported having 8 or more workplace wellness strategies compared to 43 employers who have been working with SHIP for at least 5 years (Figure 3).

Figure 3: Comparing Number of Strategies Implemented by Length of Time in SHIP*



Source: 2018 Wellness Coordinator Survey, *p<.001

Impact on Observed Health Behavior

“According to our vending rep, water is now purchased more than sugary drinks.”— Employer Participating in SHIP Workplace Wellness

The goal of PSE change ultimately is to influence behavior over time. The WCS asked respondents if they observed changes in employees’ healthy behaviors since participating in the SHIP Workplace Wellness Initiative. Employers overwhelmingly reported observing positive changes in healthy eating and physical activity. Seventy-three percent of the respondents reported improvements in healthy eating among their employees and 67% observed increased physical activity among their employees (Table 5).

Table 5: Observed Changes in Employee Health Behaviors since Participating in SHIP Workplace Wellness

Behaviors	Increased		No change		Decreased	
	N	%	N	%	N	%
Healthy food and beverages consumed at work	138	73%	23	12%	1	1%
Physical activity	128	67%	33	17%	0	0%
Tobacco use	4	2%	60	32%	34	18%

Source: 2018 Wellness Coordinator Survey

SHIP Supports a Culture of Health in Minnesota Workplaces

An employer’s culture of health can maximize benefits for workplaces, employees and the whole community. According to the Centers for Disease Control and Prevention (CDC), a culture of health is a working environment where employee health and safety is valued, supported and promoted through workplace health and wellness programs, policies, benefits and environmental supports. To build a culture of health, a workplace must have commitment from all levels of the organization and establish a workplace health and wellness initiative as an integral part of regular organizational operations.

SHIP works with employers to build the foundation for a culture of health including commitment of leadership support, establishing a wellness committee and developing a wellness plan. The WCS measured the change of the strengths of leadership support, wellness committee and well plan as the employer went through the SHIP training.

Leadership Support

“We continue to work on support from management. It has improved since shifting our focus to PSE and a culture of health. We have also been exploring creative ways to reach staff that may not be able to leave their post during the day (i.e. jail staff). This has been hugely supported by management and is increasing participation in the program.”— Employer Participating in SHIP Workplace Wellness

Research indicates that leadership support of wellness initiatives is a key factor in the success of the initiative. More specifically, senior managers need to consider wellness an organizational priority in order to shift the company culture. Buy-in from direct supervisors is crucial to generate excitement and connect employees to available resources.^{4,5,6}

SHIP’s first step in developing a wellness initiative is to establish leadership support for the initiative by having leadership communicate wellness efforts and model healthy behaviors. This research shows that 75% of employers (N=142) have a more positive view of workplace wellness after a year of participation in the SHIP workplace wellness initiative. Table 6 displays an increased commitment to workplace wellness initiatives among leadership, emphasized by an additional 30 employers reporting that their leadership is completely committed to workplace wellness (P <.0001).

Table 6: Leadership Commitment to Workplace Wellness*

Leadership Commitment	N	
	Before SHIP	2018
0 - don't know	29	3
1 - not at all	9	1
2	11	1
3	18	5
4 – somewhat	52	26
5	21	39
6	16	50
7 - completely	23	53

Source: 2018 Wellness Coordinator Survey
*p <0.0001

Twice as many coordinators reported that their leadership is committed (scale 5-7) to the workplace wellness initiative after working with SHIP.

Table 7 reports on leadership support from the BCBS OA. Before SHIP, 57% of the respondents indicated their leadership communicated support, which increased to 84% after a year in the SHIP Workplace Wellness Initiative. Respondents also indicated an increase in leadership modeling healthy behaviors and ensuring active promotion. These data indicate a noticeable increase in attitude, commitment and expression of support to employees from SHIP affiliated employers.

⁴ Mattke, S., Liu, H., Caloyeras, J., Huang, C. Y., Van Busum, K. R., Khodyakov, D., & Shier, V. (2013). Workplace wellness programs study. *Rand health quarterly*, 3(2).

⁵ Zahrt, O (2018). Leadership Support and the Effectiveness of Wellness Initiatives. HERO, <https://hero-health.org/blog/leadership-support-and-the-effectiveness-of-wellness-initiatives/> accessed 10/25/2018

⁶ McCleary, K., Goetzel, R. Z., Roemer, E. C., Berko, J., Kent, K., & De La Torre, H. (2017). Employer and employee opinions about workplace health promotion (wellness) programs: Results of the 2015 Harris poll Nielsen survey. *Journal of occupational and environmental medicine*, 59(3), 256-263.

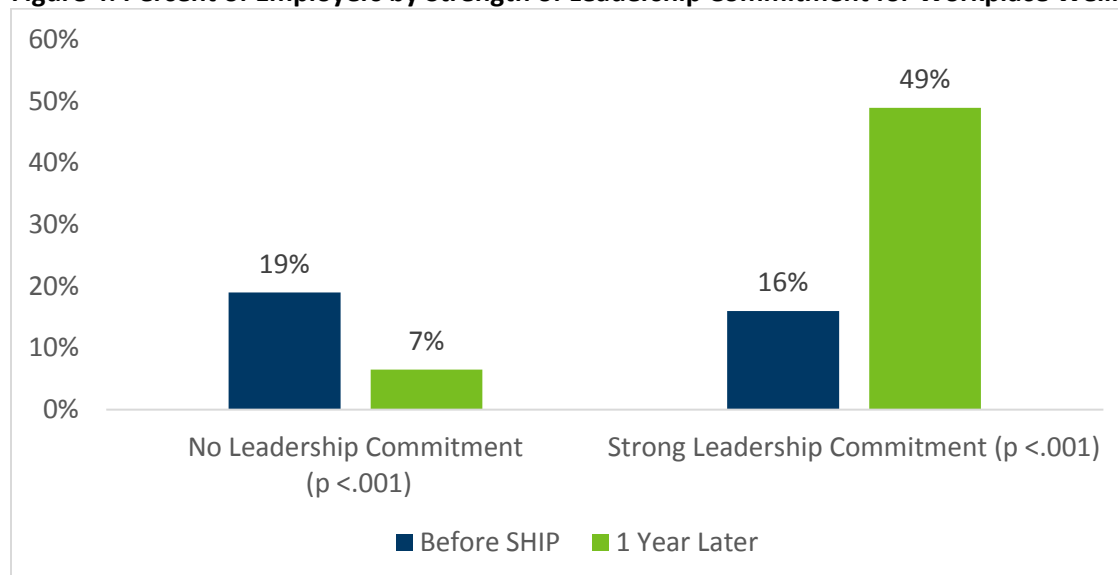
Table 7: Employers’ Actions Expressing Leadership Support[^]

Action	Before SHIP		1 Year Later	
	N	%	N	%
Leadership communicates support	87	57%	128	84%
Leadership models healthy behaviors	99	65%	128	84%
Leadership ensures active promotion	30	20%	79	52%

Source: BlueCross BlueShield Organizational Assessments 2014-2017
[^]Employers took the organizational assessments at the beginning of their SHIP training, then again after they completed a year of training.

Figure 4 and Table 8 characterize the support from workplace employers. Figure 4 emphasizes an overwhelming increase in leadership commitment due to SHIP. Sixteen percent of the respondents indicated they had strong leadership commitment (i.e. leadership communicates support, models healthy behaviors and ensures active promotion) at the beginning of their SHIP training, compared to 49% after at least one year in the SHIP Workplace Wellness Initiative.

Figure 4: Percent of Employers by Strength of Leadership Commitment for Workplace Wellness



Source: BlueCross BlueShield Organizational Assessments 2014-2017
[^]Employers took the organizational assessments at the beginning of their SHIP training, then again after they completed a year of training.

Other aspects of creating a culture of health include encouraging work life balance, supporting all employees’ wellness goals and considering employees’ health when making work decisions (Table 8). Seventy-four percent of WSC respondents indicated their workplace supports wellness goals with all employees and 70% indicated that employees are encouraged to balance work and home life. In addition, 66% of employers consider employer health when making work decisions.

Table 8: Employers' Current Description of Organizational Support of Workplace Wellness

Type of Support	N	%
Management participates in health and wellness activities	143	74%
Our workplace supports workplace wellness goals with all employees	143	74%
Employees are encouraged to balance work and home life	136	70%
Work decisions are made considering employee health	127	66%
Leaders discuss the value of improving employee health and well-being	102	53%
Workplace wellness communications are sent to employees from senior leaders and middle management	91	47%
There are positive healthy role models at work	89	46%
Leaders publicly recognize employees for healthy actions or health-related achievements	37	19%
Source: 2018 Wellness Coordinator Survey		

Quality of a Workplace Wellness Committee and Plan

“The Health and Wellness Committee has been in place (and supported) for many years, however we feel that SHIP has assisted with enhancing that level of support. Since partnering with the [SHIP] collaborative, we implemented a brand/logo, developed roles and responsibilities for committee members, improved managerial support for committee members to be on the committee, and have shifted our focus to a culture of health.” — Employer Participating in SHIP Workplace Wellness

The CDC recommends that a careful planning stage should precede any implementation of workplace health programs, policies, benefits or environmental supports. The overall initiative requires a basic infrastructure in order to administer and manage health promotion activities that can be initiated during the planning phase. The size and scope of each foundational step may be influenced by factors such as the company’s size, sector or geographic location.

The main role of a wellness committee, which consists of a peer group of employees, is to help plan, communicate, and support the organization’s workplace wellness initiative. For the purposes of this analysis, the strength of a committee was assessed by 1) a part-time or full-time wellness coordinator, 2) existence, 3) number of meetings in a year, 4) representation from all departments, 5) representation from all levels and 6) representation from management. A very strong committee would have all of the six criteria met whereas an acceptable committee had 1-2 criteria met.

Table 9 shows an increase in quality of workplace wellness committees among employers who completed a baseline assessment at the time they started with SHIP and follow-up organizational assessment approximately one year later. Table 9 highlights a trend away from

“no committee” toward a “very strong committee”; the number of employers who reported having a strong or very strong committee increased by 39% after working with SHIP for 1 year.

Table 9: Number and Percent of Employers by Strength of Workplace Wellness Committees^{^*}

Description	Points	Before SHIP		1 Year Later		% Change
		N	%	N	%	
No committee	0	23	15%	4	3%	-80%
Acceptable committee	1-2	38	25%	21	14%	-44%
Strong committee	3-5	84	55%	109	71%	29%
Very strong committee	6	8	5%	19	12%	140%

Source: BlueCross BlueShield Organizational Assessments 2014-2017
[^]Employers took the organizational assessments at the beginning of their SHIP training, then again after they completed a year of training.
 *p<0.0001

Once a committee is convened, it is often tasked with developing a workplace wellness plan. Table 10 describes the status of wellness plans when SHIP employers first took their organizational assessments and a year later. For the purposes of analysis, a plan’s level of completeness is judged on several criteria including whether an employer: 1) is incorporating workplace wellness into the organization’s business/strategic plan, 2) has a budget that allows for year-round workplace wellness efforts that are geared toward all employees, 3) has a written vision for workplace wellness, 4) has written goals related to workplace wellness, 5) measures progress on workplace wellness goals, at least annually, 6) has a name and/or logo for its workplace wellness initiative, and 7) conducts an employee needs and/or interests survey. A complete plan had at least six of the seven criteria met where as a limited plan only had 1-2 criteria met.

As seen in Table 10, 41 employers had not created a workplace wellness plan before working with SHIP; this decreased to 4 after participating in SHIP for 1 year. The number of employers reporting a complete plan increased from 16 to 55 after being in SHIP for 1 year.

Table 10: Number and Percent of Employers by Quality of Workplace Wellness Plan^{^*}

Description	Points	Before SHIP		1 Year Later		% Change
		N	%	N	%	
No plan	0	41	27%	4	3%	-89%
Limited plan	1-2	52	34%	17	11%	-68%
Sufficient plan	3-5	44	29%	77	50%	72%
Complete plan	6-7	16	10%	55	36%	260%

Source: BlueCross BlueShield Organizational Assessments 2014-2017
[^]Employers took the organizational assessments at the beginning of their SHIP training, then again after they completed a year of training
 *p<0.0001

IV. Conclusion

“We have countless stories from people telling of their personal journey and successes since implementation and today we see people walking, eating healthy, requesting more healthy options and working as a team to be a wellness centered organization. We still have work to do but it is making a difference in the lives of our employees.”
 — Employer Participating in SHIP Workplace Wellness

Analysis of the 2018 Wellness Coordinator Survey and BCBS Organizational Assessment sought to determine the SHIP impact has on workplace wellness. The analysis affirmed that SHIP has strengthened wellness foundational practices, increased the number of wellness strategies implemented and facilitated the creation of a culture of health.

Strengthening Foundational Practices

Workplace wellness is a culture-building endeavor and requires constant attention and support. SHIP supports their employer partners to build a culture of wellness by establishing and strengthening foundational practices that make healthy choices the norm in an organization.

The Wellness Coordinator Survey and BCBS Organizational Assessment results indicate that employers have the foundation to build a more sustainable comprehensive workplace wellness initiative. Through SHIP, employers have:

- strengthened their wellness plans,
- strengthened wellness committees, and
- increased leadership support.

Several national studies have been conducted to better understand the keys to creating a successful and sustainable workplace wellness initiative. While the keys to success may vary from study to study, the constants are strong leadership support and making healthy choices the norm in an organization,^{7,8,9,10} which are the cornerstones of the SHIP workplace model.

Creating a Culture of Wellness

Employers who worked with SHIP reported an increased number of workplace strategies. These strategies support a culture of wellness in the workplace by creating organizational structures and physical environments that are supportive of employee health and encourage positive lifestyle behaviors.

⁷ Mattke, S., Liu, H., Caloyeras, J., Huang, C. Y., Van Busum, K. R., Khodyakov, D., & Shier, V. (2013). Workplace Wellness Programs Study: Final Report. *Rand health quarterly*, 3(2), 7.

⁸ Stokes, G. C., Henley, N. S., & Herget, C. (2006). Creating a culture of wellness in workplaces. *NC Med J*, 67(6), 445-8.

⁹ Berry, L., Mirabito, A., & Baun, W. (2010). What's the hard return on employee wellness programs?.

¹⁰ McCleary, K., Goetzel, R. Z., Roemer, E. C., Berko, J., Kent, K., & De La Torre, H. (2017). Employer and employee opinions about workplace health promotion (wellness) programs: Results of the 2015 Harris poll Nielsen survey. *Journal of occupational and environmental medicine*, 59(3), 256-263.

WORKPLACE WELLNESS: BUILDING A CULTURE OF HEALTH

The SHIP model has followed national best practices and has gathered positive results. The 2018 Wellness Coordinator Survey and BCBS Organizational Assessment affirm that implementing the best practices found in the SHIP workplace model lays the foundation for a sustainable and comprehensive workplace wellness initiative.

Appendix i: Wellness Coordinator Survey (WCS)

Demographic Tables

WCS Table 1: Respondents by Job Position

Respondents tended to be in the HR role (25%) over other roles in the organization.

Position of Interview Respondent	N	%
Human Resources Officer	48	25%
CFO	3	2%
CEO	7	4%
Safety	6	3%
Administrative Staff	13	7%
Other	120	62%

WCS Table 2: Employers by Length of Time in SHIP

29% of employers had worked with SHIP for 5 or more years.

Years in SHIP	N	%
1 to 2 years	66	34%
3 to 4 years	59	31%
5 or more years	55	29%
Don't Know	12	6%

WCS Table 3: Size of Organization (N = Employers)

Employer size varied widely, with the average number of employees per organization was 240.

Number of Employees	N	%
Under 20	15	8%
20-49	16	8%
50-99	27	14%
100-149	36	19%
150-299	38	20%
300-999	45	24%
1000-2999	9	5%
3000 and over	5	3%

WCS Table 4: Functionality of Wellness Initiative (N = Employers)

Employers indicated the status of their initiatives improved. 40% reported being fully functional/developing before SHIP to 95% reported being fully/functional developing in 2018.

Wellness Initiative Functionality	Before SHIP		2018		% Change
	N	%	N	%	
Fully functional	33	17%	97	51%	194%
Developing	44	23%	85	44%	93%
Just starting	58	30%	5	3%	-91%
No initiative	50	26%	5	3%	-90%
Don't know	7	4%	0	0%	-100%

PSE Outcome Tables

WCS Table 5: Employers who have Implemented Wellness Strategies (N = Employers)

Most popular strategies implemented in 2018 were breast feeding support (89%), breastfeeding friendly rooms, (82%), healthy foods served (74%) and healthy food options available for purchase at work (72%).

Implemented Wellness Strategies	Before SHIP		2018		% Change	p-value
	N	%	N	%		
Flex time to be physically active during work	59	32%	95	51%	59%	<0.0001
Healthy food served at company functions	45	25%	138	74%	196%	<0.0001
Healthy food options available for purchase at work (e.g. vending machines, cafeterias, snack stations)	45	24%	138	72%	200%	<0.0001
Walking meetings	15	8%	55	29%	263%	<0.0001
Local fitness facilities subsidies	105	61%	122	69%	17%	0.0003
Onsite fitness facilities	44	23%	73	39%	70%	<0.0001
Active commuting supports (e.g. bike racks, showers)	72	39%	108	57%	46%	<0.0001
Tobacco-free campus	96	51%	126	67%	31%	<0.0001
Tobacco cessation supports (e.g. cessation programs)	107	58%	132	70%	21%	<0.0001
Breastfeeding friendly rooms	72	39%	157	82%	110%	<0.0001
Breastfeeding support (e.g. break time)	125	70%	165	89%	27%	<0.0001

WCS Table 6: Barriers to Implementing Wellness Strategies after a year in SHIP’s Workplace Wellness Initiative (N = Employers)

Coordinators indicated top barriers after a year or more of SHIP include employee time constraints (50%), staff time (34%), and budget (28%).

Barriers to Implementing Wellness Strategies	Major barrier		Minor barrier		Not a barrier		Don’t know	
	N	%	N	%	N	%	N	%
Staff time to implement wellness program	65	34%	81	42%	44	23%	3	2%
Insufficient budget for workplace activities	54	28%	76	40%	60	31%	2	1%
Lack of leadership support	13	7%	47	25%	128	68%	1	1%
Program not tied to organizational goals	7	4%	47	24%	126	65%	12	6%
Market forces (e.g. business cycles, economic downturn)	7	4%	42	22%	121	63%	22	11%
Employee turnover	9	5%	51	27%	129	67%	3	2%
Lack of employee interest	38	20%	109	57%	42	22%	2	1%
Employee time constraints	96	50%	80	42%	15	8%	2	1%

WCS Table 7: Perceived Behavior Change of Employees since Participating in the SHIP Workplace Wellness Initiative (N = Respondents)

73% of respondents indicated they observed an increase in healthy eating behaviors and 67% had seen an increase in physical activity among employees.

Behaviors	Increased		No change		Decreased		Don’t know		NA	
	N	%	N	%	N	%	N	%	N	%
Healthy food and beverages consumed at work	138	73%	23	12%	1	1%	20	11%	8	4%
Physical activity	128	67%	33	17%	0	0%	23	12%	6	3%
Tobacco use	4	2%	60	32%	34	18%	63	33%	29	15%

Leadership and Outcome Tables

WCS Table 8: Type of Leadership Support (N = Employers)

The largest percentage of coordinators affirmed that leadership shows the most support to their initiative through being a healthy role model (74%) and by participating in activities (74%).

Type of Leadership Support	2018	
	N	%
Management participates in health and wellness activities	143	74%
Work decisions are made considering employee health	89	46%
Employees are encouraged to balance work and home life	136	70%
There are positive healthy role models at work	143	74%
Leaders discuss the value of improving employee health and well-being	102	53%
Workplace wellness communications are sent to employees from senior leaders and middle management	91	47%
Our workplace supports workplace wellness goals with all employees	127	66%
Leaders publicly recognize employees for healthy actions or health-related achievements	37	19%

WCS Table 9: Importance of Wellness Goals, Before SHIP (N = Employers)

<i>Before SHIP</i>	Very important		Important		Moderately important		Slightly important		Not important		Don't know	
	N	%	N	%	N	%	N	%	N	%	N	%
Wellness Program Goals Importance												
Increasing productivity	23	33%	27	39%	10	14%	5	7%	3	4%	1	1%
Reducing health care costs	33	48%	20	29%	7	10%	6	9%	3	4%	0	0%
Creating safer employees	25	36%	26	38%	11	16%	4	6%	2	3%	1	1%
Building a culture of health	33	48%	23	33%	8	12%	3	4%	2	3%	0	0%

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WCS Table 10: Importance of Wellness Goals, 2018 (N = Employers)

2018	Very important		Important		Moderately important		Slightly important		Not important		Don't know	
	N	%	N	%	N	%	N	%	N	%	N	%
Wellness Program Goals Importance												
Increasing productivity	102	53%	62	32%	18	9%	6	3%	1	1%	2	1%
Reducing health care costs	114	59%	55	29%	12	6%	4	2%	4	2%	3	2%
Creating safer employees	101	53%	56	29%	21	11%	8	4%	2	1%	4	2%
Building a culture of health	142	74%	41	21%	8	4%	1	1%	0	0%	0	0%

WCS Table 11: Perception of Changes in Employees' Attitudes regarding Wellness since Participating in SHIP (N = Respondents)

Employees Attitudes	N	%
More positive	142	75%
More negative	0	0%
No change	47	25%

WCS Table 12: SHIP Work has Advanced Your Wellness Efforts (N = Respondents)

	N	%
Strongly Agree	100	52%
Agree	78	40%
Undecided	14	7%
Disagree	1	1%
Strongly Disagree	0	0%

WCS Table 13: Respondents' Perception of Management's Commitment to Improving Employer Health
The mean score for leadership commitment before SHIP was 3.7 and increased to 5.6 after a year in SHIP.

Leadership Commitment	Before SHIP	2018	p-value
0 - don't know	29	3	<0.0001
1 - not at all	9	1	
2	11	1	
3	18	5	
4 - somewhat	52	26	
5	21	39	
6	16	50	
7 - completely	23	53	

Appendix ii: BlueCross BlueShield of Minnesota, Healthy Worksite Tool - Organizational Assessment (BCBS OA)

Demographic Tables

BCBS OA Table 1: Age Distribution of Employees, Average Percent of Employees Before SHIP

Age Groups	Average
Under 18 years	1%
18 to 34	24%
35 to 44	22%
45 to 59	31%
60+	11%

BCBS OA Table 2: Education Level of Employees, Average Percent of Employees, Before SHIP

Educational Level	Average
Some high school	3%
High school/GED	23%
Technical/two-year degree	14%
Four-year degree	19%
Graduate/post-graduate	8%

BCBS OA Table 3: Race/Ethnicity of Employees, Average Percent of Employees, Before SHIP

Race/Ethnicity	N	%
Asian	591	2%
Black, Non-Hispanic	1,361	4%
Hispanic	725	2%
American Indian	171	0%
Native Hawaiian/PI	715	2%
White, non-Hispanic	35,640	91%

BCBS OA Table 4: Size of Employer, Average Percent of Employees, Before SHIP

Number of Employees	N	%
Under 50	22	15%
50-99	24	16%
100-499	65	43%
500-999	28	19%
1000+	12	8%

BCBS OA Table 5: Work Status, Average Percent of Employees, Before SHIP

Work Status	Average
Full-time	67%
Part-time	25%
Temporary	3%

BCBS OA Table 6: Type of Work, Average Percent of Employees, Before SHIP

Type of work	Average
Factory/line	5%
Shift	16%
Office	44%
Retail	3%
Work primarily off-site	8%
Primarily drive vehicle	5%

BCBS OA Table 7: Industry Type, Before SHIP (N = Number of Employers)

Industry	N	%
Agriculture, Forestry, Fishing and Hunting	2	1%
Retail/Wholesale Trade	9	6%
Accommodation & Food Services	1	1%
Professional, Scientific, and Technical	3	2%
Transportation, Warehousing, and Utilities	4	3%
Health Care and Social Assistance	35	23%
Finance and Insurance	5	3%
Information	1	1%
Construction	1	1%
Educational Services	34	22%
Manufacturing	13	9%
Arts, Entertainment and Recreation	1	1%
Government / Public Administration	26	16%
Other services (other than Public Administration/Government)	18	12%

Fundamental Elements Tables

BCBS OA Table 8: Leadership Commitment (N = Number of Employers)

Leadership commitment increased after one year with SHIP, with the number of leaders communicating support increasing by 47%

Type	Before SHIP		1 Year Later		% Change
	N	%	N	%	
Leadership communicates support	87	57%	128	84%	47%
Leadership models healthy behaviors	99	65%	128	84%	29%
Leadership ensures active promotion	30	20%	79	52%	163%

BCBS OA Table 9: Strength of Leadership Commitment (N = Number of Employers)

Description	Elements	Before SHIP		1 Year Later		% Change	p-value
		N	%	N	%		
Strong Leadership Commitment	3	25	16%	75	49%	200%	<0.0001
Moderate Commitment	1-2	99	65%	68	44%	-31%	<0.0001
No Leadership Commitment	0	29	19%	10	7%	-66%	0.0001

BCBS OA Table 10: Wellness Plan Elements (N = Number of Employers)

Employers were most likely to have conducted an employees needs survey (85%), created a name or logo (79%) or created a written wellness vision (74%) after working with SHIP for 1 year.

Wellness Plan Elements	Before SHIP		1 Year Later		% Change
	N	%	N	%	
The employer:					
Incorporated workplace wellness into the organization's business/strategic plan.	35	23%	85	56%	143%
Has a budget that allows for year-round workplace wellness efforts that are geared toward all employees.	50	33%	82	54%	64%
Has a written vision for workplace wellness	43	28%	113	74%	163%
Has written goals related to workplace wellness	32	21%	103	67%	222%
Measures progress on workplace wellness goals, at least annually	36	24%	83	54%	131%
Has a name and/or logo for its workplace wellness initiative	59	39%	121	79%	105%
Conducts an employee needs and/or interests survey	81	53%	130	85%	60%

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BCBS OA Table 11: Strength of Wellness Plan (N = Number of Employers)

The number of employers having a complete wellness plan increased from 16 to 55 after a year in SHIP.

Description	Elements	Before SHIP		1 Year Later		% Change	p-value
		#	%	#	%		
No plan	0	41	27%	4	3%	-89%	<0.0001
Limited plan	1-2	52	34%	17	11%	-68%	
Sufficient plan	3-5	44	29%	77	50%	72%	
Complete plan	6-7	16	10%	55	36%	260%	

BCBS OA Table 12: Characteristics of Wellness Committee (N = Number of Employers)

Elements	Before SHIP		1 Year Later		% Change
	N	%	N	%	
Full or part-time staff dedicated to wellness	7	5%	10	7%	43%
Have a wellness committee	106	69%	136	89%	28%
Meets at least quarterly	96	63%	124	81%	29%
Has representation from all departments on wellness committee	48	31%	86	56%	79%
Has representation from all levels on wellness committee	71	46%	98	64%	38%
Management is on the wellness committee	87	57%	128	84%	47%

BCBS OA Table 13: Wellness Committee by Number of Elements (N = Number of Employers)

Number of Elements	Before SHIP		1 Year Later		% Change
	N	%	N	%	
0	23	15%	4	3%	-80%
1	20	13%	7	5%	-62%
2	18	12%	14	9%	-25%
3	17	11%	20	13%	18%
4	30	20%	29	19%	-5%
5	37	24%	60	39%	63%
6	8	5%	19	12%	140%

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BCBS OA Table 14: Strength of Wellness Committee (N = Number of Employers)

The number of employers having a strong or very strong committee increased from 92 to 128 after 1 year in SHIP.

Description	Points	Before SHIP		1 Year Later		% Change	p-value
		N	%	N	%		
No committee	0	23	15%	4	3%	-80%	<0.0001
Acceptable committee	1-2	38	25%	21	14%	-44%	
Strong committee	3-5	84	55%	109	71%	29%	
Very strong committee	6-7	8	5%	19	12%	140%	

BCBS OA Table 15: Number of Mean Elements Implemented, Before SHIP and 1 Year Later

The mean number of elements increased for each strategy after employers worked with SHIP for 1 year. While the mean increased by less than one element for each strategy, the change in the mean number of elements was significant.

Strategies	Before SHIP	1 Year Later	p-value
	Mean	Mean	
Tobacco-free environment	3.8	4.4	<.001
Breastfeeding support	0.8	1.3	<.001
Healthy eating	3.4	3.7	0.0144
Physical activity	2.2	2.5	<.001

Source: BlueCross BlueShield Organizational Assessments 2014-2017

Tobacco-Free Environment and Cessation Support Tables

BCBS OA Table 16: Number of Employers who have Implemented Tobacco Wellness Strategies

Employers were most likely to provide access to tobacco quit programs (95%) and have no tobacco use in buildings included their policy or guideline (95%) after 1 year with SHIP.

Tobacco Strategies	Before SHIP*		1 Year Later**		% Change
	N	%	N	%	
Have a tobacco policy/guideline	123	80%	128	84%	4%
All employees have access to a smoking/tobacco quit program/support	96	78%	122	95%	27%
Organization provides coverage for over-the-counter quit medications (nicotine patches, gum, or lozenges) approved by the Food and Drug Administration)	50	41%	83	65%	66%
Coverage for prescription tobacco cessation medications (such as Chantix, bupropion/Wellbutrin) approved by the FDA	60	49%	92	72%	53%
No tobacco use in buildings is included in the policy/guideline	120	98%	122	95%	2%
No tobacco use on grounds, including personal vehicles OR No tobacco use on grounds, but allowed in personal vehicles is included in the policy/guideline	85	69%	87	68%	2%
No sale on company property is included in policy/guideline	86	70%	85	66%	-1%
Signage placed in inconspicuous places is included in policy/guideline	81	66%	86	67%	6%

*Denominator for Before SHIP “have a tobacco policy/guideline is 153”, number of assessments. For the remaining strategies, the denominator is 123, the number of employers with a tobacco policy/guideline.
 ** Denominator for 1 Year Later “have a tobacco policy/guideline” is 153, number of assessments. For the remaining strategies, the denominator is 128, the number of employers with a tobacco policy/guideline.

BCBS OA Table 17: Employers by Number of Tobacco Wellness Strategies

Number of Strategies	Before SHIP		1 Year Later		% Change
	N	%	N	%	
0	15	10%	12	8%	-20
1	11	7%	4	3%	-64%
2	10	7%	8	5%	-20%
3	24	16%	27	18%	13%
4	34	22%	23	15%	-32%
5	32	21%	25	16%	-22%
6	10	7%	19	12%	90%
7	17	11%	35	23%	106%

Physical Activity Tables

BCBS OA Table 18: Number of Employers who have Implemented Physical Activity Wellness Strategies*

Employers were most likely to have a basketball or athletic field, walking/biking paths, biking path, indoor/outdoor routes, bike racks, locker rooms or showers (86%) and offer fitness member/class discounts (70%) after 1 year with SHIP.

Physical Activity Strategies	Before SHIP		1 Year Later		% Change
	N	%	N	%	
<i>Have a Physical Activity policy/guideline</i>	3	2%	13	9%	333%
Organization has a fitness center	40	26%	48	31%	20%
Organization has basketball or athletic field OR walking paths and/or biking paths OR indoor or outdoor routes for physical activity OR bike racks OR locker rooms OR showers	117	76%	131	86%	12%
Organization offers fitness member discounts OR fitness class discounts	102	67%	107	70%	5%
Organization offers on-site assessments/counseling OR telephone-based support OR Web-based support	70	46%	77	50%	10%
Organization has active commuting program OR transit pass discount	6	4%	24	16%	300%
Casual dress code is included in policy/guideline	3	2%	9	6%	200%
Flexible work schedule OR Ability to work with manager to establish a schedule is included in policy/guideline	3	2%	11	7%	267%
Dedicated breaks OR Activity breaks during meetings OR Mandatory stretch time is included in policy/guideline	3	2%	7	5%	133%
Active commuting program is included in policy/guideline	3	2%	5	3%	67%
*Denominator for this table is 153, the total number of assessments.					

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BCBS OA Table 19: Employers by Number of Physical Activity Strategies

Number of Strategies	Before SHIP		1 Year Later		% Change
	N	%	N	%	
0	11	7%	5	3%	-55%
1	32	21%	30	20%	-6%
2	44	29%	31	20%	-30%
3	47	31%	53	35%	13%
4	13	9%	20	13%	54%
5	5	3%	6	4%	20%
6	1	1%	4	3%	300%
7	0	0%	1	1%	NA
8	0	0%	0	0%	NA
9	0	0%	3	2%	NA

Healthy Eating Tables

BCBS OA Table 20: Number of Employers who have Implemented Healthy Eating Wellness Strategies
Employers are most likely to have snack stations and/or vending machines that have at least half of their selections are healthy after 1 year with SHIP (49%).

Healthy Eating Strategies	Before SHIP		1 Year Later		% Change
	N	%	N	%	
<i>Have a Healthy Eating Policy/Guideline</i>	20	13%	38	25%	90%
At least 50% of food in snack stations and/or vending machines is healthy	28	18%	75	49%	168%
At least 50% of beverages in snack stations and/or vending machines is healthy	27	18%	75	49%	178%
Healthy foods in vending machines are competitively priced OR healthy beverages in vending machines are competitively priced OR cafeteria foods and beverages are competitively priced.	62	41%	69	45%	11%
Nutritional information in vending foods OR cafeteria consistently provided	60	39%	71	46%	18%
Healthy foods in vending identified by signage or stickers	12	8%	25	16%	108%
Three or more fruits offered daily in cafeteria OR three or more non-fried vegetables offered daily in cafeteria OR healthy entrée offered daily in cafeteria	45	29%	49	32%	9%
Have a farmer's market on-site OR have a community-supported agriculture (CSA) OR have a community/corporate garden	37	24%	52	34%	41%
Only healthy foods and drinks served at meetings included in policy/guideline	1	1%	6	4%	500%
Healthy foods and drinks served available at meetings included in policy/guideline	16	10%	29	19%	81%
The healthy eating policy states that snack stations contain only healthy foods OR vending has minimum percentage of healthy foods and beverages OR healthy entrée offered daily	16	10%	29	19%	81%
The healthy eating policy states that healthy foods and drinks priced at lower cost	1	1%	3	2%	200%
The healthy eating policy states that products are labeled to identify and encourage healthy selections	2	1%	7	5%	250%
The healthy eating policy includes a healthy catering booklet that guides managers/ staff when ordering healthy foods for meetings and events	3	2%	4	3%	33%
*Denominator for this table is 153, the total number of assessments.					

BCBS OA Table 21: Employers by Number of Healthy Eating Wellness Strategies

Number of Strategies	Before SHIP		1 Year Later		% Change
	N	%	N	%	
0	0	0%	0	0%	NA
1	0	0%	2	1%	NA
2	49	32%	37	24%	-24%
3	33	22%	22	14%	-33%
4	31	20%	34	22%	10%
5	22	14%	26	17%	18%
6	5	3%	14	9%	180%
7	4	3%	2	1%	-50%
8	9	6%	13	9%	44%
9	0	0%	3	2%	NA

Breastfeeding Support Tables

BCBS OA Table 22: Number of Employers who have Implemented Breastfeeding Strategies*

After 1 year with SHIP, 63% of employers have lactation rooms with locks, electrical outlet, comfortable chair, table and source of water.

Breastfeeding Strategies	Before SHIP		1 Year Later		% Change
	N	%	N	%	
<i>Have a Breastfeeding Policy/Guideline</i>	43	28%	78	51%	81%
Lactation room has a minimum of the following options: physical room that is clean and locks from the inside; contains an electrical outlet, a comfortable chair and a surface/table to place breast pump; and near a source of water.	63	41%	96	63%	52%
Expectant or returning to work mothers are notified of lactation room through FMLA or leave packet OR HR email OR manager or supervisor OR newsletter OR other	58	38%	100	65%	72%
The policy/guideline includes the existence of a mother’s room	30	20%	61	40%	103%
The policy/guideline states that employees may use break time to express milk OR employees may negotiate make-up time with managers for any extra time needed to express milk	41	27%	77	50%	88%
The policy/guideline states that lactation support is provided through human resources	23	15%	46	30%	100%
The policy/guideline states that managers are responsible to notify moms-to-be of lactation room and support	17	11%	40	26%	135%

*Denominator for this table is 153, the total number of assessments.

BCBS OA Table 23: Employers by Number of Breastfeeding Strategies

Number of Strategies	Before SHIP		Before SHIP		% Change
	N	%	N	%	
0	73	48%	32	21%	-56%
1	13	9%	15	10%	15%
2	31	20%	36	24%	16%
3	8	5%	11	7%	38%
4	12	8%	18	12%	50%
5	11	7%	18	12%	64%
6	5	3%	23	15%	360%