Ontario Hospital Association

Healthy Hospital Initiative

Promoting Health In The Healthcare Workplace

OHA Healthy Hospital Initiative

Executive Summary

Executive Summary of the OHA Healthy Hospital Initiative

<u>Goals of the OHA Healthy Hospital Initiative:</u>
1. Health care workplaces will become models of healthy organizations (and healthy people) for their communities.
2. Improvements to the health of all Ontarians by increasing the healthy influence of the health care organizations on the people and workplace environments in their community.

<u>Defining Wellness for the purposes of this initiative:</u>
Wellness = the extent to which an individual or group is able to realize aspirations and satisfy needs; and to change or cope with the environment (from the WHO definition of "health"). According to this definition, wellness is much more than the absence of illness; it is an important force in our daily lives, influenced by life circumstances, beliefs, actions, culture, and social, economic and physical environments.

<u>OHA Healthy Hospital Model:</u>
The OHA Healthy Hospital Model is based on the Institute for Work & Health's conceptual model of a healthy workplace (Lynda Robson, 1999). The model approaches wellness based on achieving balance in physical, mental, emotional, spiritual, and social aspects of life. The model represents the importance of dealing with organizational and job-level issues as well as individual level issues in order to fully enable and support a healthy workplace initiative. We have adapted the model to incorporate the special responsibilities of the health care workplace to promote health at the organizational, job, and individual levels in order to truly improve the health and well-being of the communities they serve.

<u>OHA Wellness Support Services:</u>
The OHA is committed to helping our members to improve the health of their health care organization. We have developed tools and services to support our OHA members throughout their continuous improvement efforts.

The 7 Steps to a Healthy Hospital *	OHA Support Services/Tools
1. Getting commitment to comprehensive approach to improving the health of your hospital.	• Wellness Consulting Services • Regional Wellness Workshops • OHA Wellness Research & Advocacy Efforts
2. Organizing a committee to implement your Healthy Hospital Initiative	• Wellness Consulting Services • Organizational Wellness Workshops
3. Survey your employees to determine needs and priorities	• Healthy Hospital Employee Survey (HHES) (in partnership with Workplace Health Research Unit at Brock University)
4. Plan interventions	• Wellness Idea Bank – online database of program, policy, and best practice ideas • Healthy Hospital Innovative Practices Symposium (fall) • Healthy Hospital Teleconferences (networking opportunities for those organizations who have participated in the HHES)

5. Implementation of interventions	• Coordination of collaborative efforts (i.e. negotiating for best-price arrangements for private sector services, etc.)
6. Measure impact of changes of interventions	• HHES benchmarking, • OHA Wellness Research (in partnership with the Workplace Health Research Unit at Brock University to grow the body of evidence for wellness initiatives)
7. Celebrate Successes and continuously improve interventions	• OHA Wellness Notes (electronic newsletter to share success stories)

* based on Health Canada's Workplace Health Model

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<u>Highlights of OHA Wellness Initiative Research to date (fall 2003):</u>

**Healthy Hospital Employee Survey (HHES) – Results from the Pilot Group**
In this pilot project, the group developed an employee survey that measures the health of health care workplaces at both the individual level and at the organizational level. The survey was approximately 30 minutes in length and contained health risk appraisal questions (both current lifestyle status and their readiness to change), and indicators for quality of home & work balance and employee satisfaction/engagement with their job/organization.   Nineteen hospitals (representing 20,000 employees) from across the province participated and 8,000 employees responded to the confidential survey. Each hospital received a report summarizing their organization's survey outcomes, benchmarking of their results to the pilot group averages, and actionable recommendations for them to improve. The OHA received an overall aggregate report, to identify hospital best practices and to help prioritize future activities of the OHA Wellness Initiative.

The OHA has partnered with Workplace Health Research Unit at Brock University to design, deliver, collect and analyze the HHES data in order to build the body of empirical evidence that supports the need for addressing the health of health care workplaces and their employees. Some preliminary analyses reveal the following relationships between health care employee absenteeism and the following organizational factors:

1. **Job stress as compared to job satisfaction index:**
   (based on, but not the same as the work of Shain, 2000; Karasek & Theorell, 1990)
   Health care employees who feel they have more control over their job demands, and who feel more rewarded for the efforts they make in their job report fewer days absent from work (see graph a).

Graph a: Sick Days Last year by work category, by Job Stress vs Job Satisfaction Index
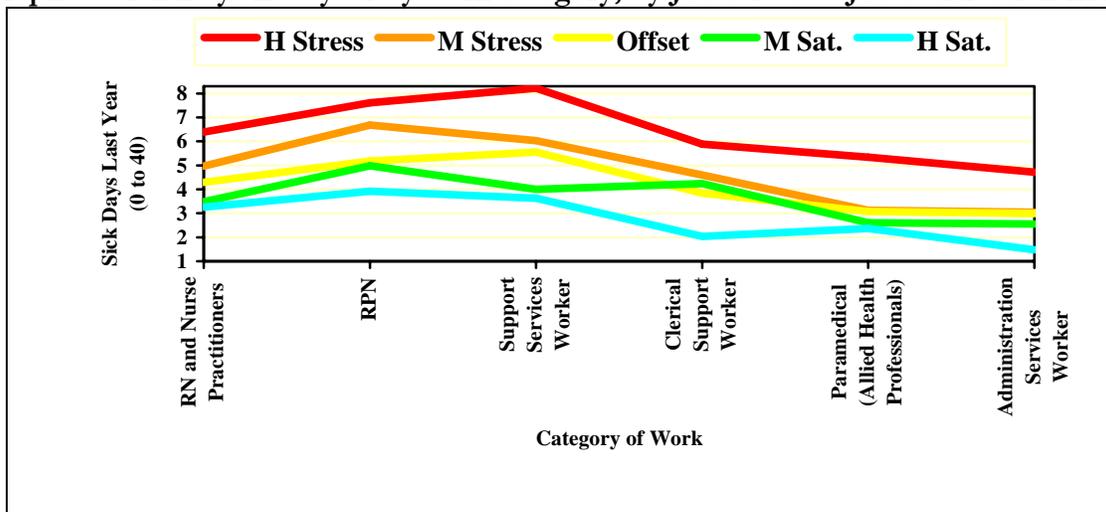

2. Trust, involvement and engagement index:

(based on, but not the same as the work of Lowe & Schellenberg, 2001)
Health care employees who report a higher level of trust in their supervisor and organization, are more satisfied with communications, and are more satisfied with their involvement in decision making report fewer days absent from work (see graph b).

Graph b: Sick Days last year by work category, by Trust/Involvement & Engagement Index
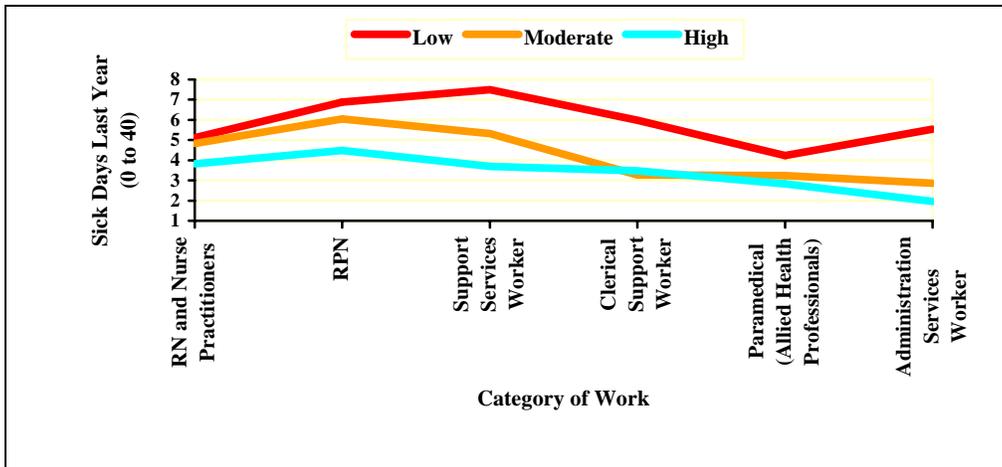
3. Healthy, Safe and Supportive Work Environment Index

(based on, but not the same as the work of Lowe & Schellenberg, 2001)
Health care employees who report a higher sense of work-life balance, a higher level of feeling safe at work, more satisfaction with their relationship with their co-workers and a overall higher perception of how healthy their organization is, report fewer days absent from work (see example: Graph c).

Graph c: Sick Days Last Year by Category of Work, by Healthy/Safe & Supportive Work Index
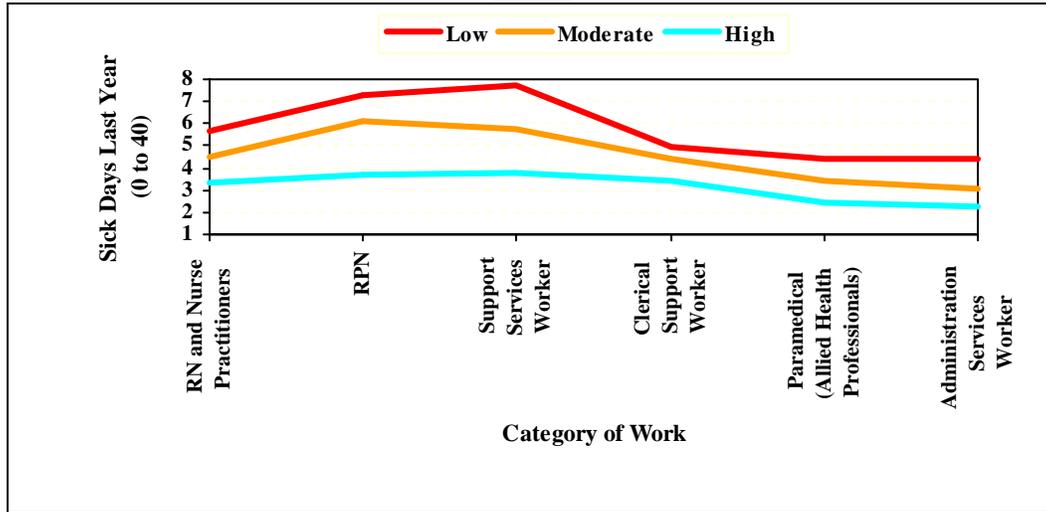
Summary:

The OHA and the Workplace Health Research Unit are committed to further explore these relationships and to share this important work in order to provide evidence-based methods for improving the health of our health care work environments.

Chapter 1

Introduction to the OHA Healthy Hospital Model

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Introduction to the OHA Healthy Hospital Model

The World Health Organization describes health "as the extent to which an individual or group is able to realize aspirations and satisfy needs; and to change or cope with the environment".

Effective workplace health programs must therefore deal not only with the physical aspects of health, but also with its emotional and social aspects. The OHA Healthy Hospital Model approaches individual health as achieving balance in physical, mental, emotional, spiritual, and social contexts. According to this definition, health is much more than the absence of illness; it is an important force in our daily lives, influenced by life circumstances, beliefs, actions, culture, and social, economic and physical environments.

It is encouraging to see that many hospitals have recognized the need to implement wellness programs for their employees in order to reduce stress, illness and injuries. These wellness initiatives may be focused on prevention, early identification of symptoms with early intervention, and the provision of benefits. These programs may be impressive at the beginning, but many risk failure if they are missing the strategic glue holding them all together. Linking your workplace wellness programs to your operational strategies with clearly aligned metrics creates this strategic glue. Workplace health research has shown that Wellness Programs that are implemented in a comprehensive manner will have a much better chance of success and sustainability.

The OHA Healthy Hospital Model has been adapted from the Institute for Work & Health's Conceptual Model of a Healthy Workplace (Robson et al, 1999). This model allows us to pull together all the programs, policies and practices that may impact employee health and happiness onto one page. We have also added a layer at the top of this model to highlight the fact that as healthcare organizations, we are special workplaces when it comes to implementing workplace wellness programs. Indeed, health care organizations should strive to become models of healthy workplaces and models of healthy people for our communities and this needs to become part of our overall hospital strategic plans.

Health Promotion

Societal Level	Workplace Level	Job Level	Individual Level	Personal Wellbeing
Broader Environment (Population Health Determinants)	Organizational Design Technology, Policies, Practices, Corporate Culture	Physical & Mental Demands	Behavioural, Physiological, Psychosocial Risk Factors	**(Physical, Mental, Emotional, Social, Spiritual)**

Home/Non-Work Demands

Wellness Programs

* Adapted from the Institute for Work & Health's Conceptual Model of a Healthy Workplace (Robson et al, 1999)

A conceptual model is a useful tool when planning wellness programs and strategies to ensure that you do not leave any important components out. For example, when planning your smoking cessation program, firstly consider the impacts that society (and the community) have on your program efforts, secondly consider your workplace policies and culture, thirdly consider how people's jobs may expose them to increased risk (i.e. second-hand smoke exposure), and finally address the individual level conditions for success to your smoking cessation program (i.e. behavioural aspects to change).

For a best-practice Healthy Hospital - Smoking Cessation Program, you should also address how you can promote smoking cessation at the workplace level (i.e. advocacy for changes to city by-laws), job level (i.e. smoking cessation counselling or referrals are part of a caregiver's tasks), and individual levels (i.e. peer support to help others quit).

4

Using the Healthy Hospital Model to Plan Comprehensive Healthy Hospital Strategies

The following sections explore the Healthy Hospital Model's components in further detail with respect to various things to think about while building a comprehensive Healthy Hospital Initiative.

    a) Societal Level Impacts
    b) Workplace Level Impacts
    c) Job Level Impacts
    d) Individual Level Impacts
    e) Hospital Health Promotion

A. Societal Level Impacts on Healthy Hospital Strategies

Well-designed wellness programs take a comprehensive approach and look to improving the well-being of its recipients by addressing as many root causes of the ill-health as possible. Comprehensive wellness programs take into consideration the social, economic, political, and physical environment of the community that the program recipients live in. For example, implementing a smoking cessation program in a community where many families earn incomes by working in the tobacco industry will need to consider these unique socio-economic factors when determining how best to approach the design of this wellness program.

When assessing your society level health determinants at this broad level, it is referred to as taking a **"Population Health Approach".** A population health approach differs from traditional medical and health care thinking in two main ways:

❑ Population health strategies address the entire range of factors that determine health. Traditional health care focuses on risks and clinical factors related to particular diseases.

❑ Population health strategies are designed to affect the entire population. Health care deals with individuals one at a time, usually individuals who already have a health problem or are at significant risk of developing one.

When designing your wellness/health promotion programs (particularly programs open to the community), consider the following population health issues and build your programs to address the identified concerns wherever possible.

❑ **Socio-economic conditions:** This is the single most important determinant of health. Many studies show that health status improves at each step up the income and social hierarchy. As well, societies that are reasonably prosperous and have an equitable distribution of wealth have the healthiest populations, regardless of how much they spend on health care.

    Things to Think About.......

- What is the socio-economic picture of your community compared to other similar communities? How does this picture mirror your organization's demographics?
- Do you have gaps in the distribution of wealth? You may need to speak to your local chamber of commerce or other local economic development committees to understand your challenges and opportunities for health promotion.

□ **Social Support Networks:** Support from families, friends and communities is associated with better health.

   Things to Think About......
   - List all the formal support networks that are available in your community. With today's web-world, virtual support networks are becoming much more common. Although the research is limited as to the effectiveness of this virtual type of support, it would be interesting to identify how people in your community meet their support needs and how this in turn can impact your health promotion programs. Perhaps you could learn more about this health determinant by locating a social services survey of your community members, or speak to individuals sponsoring community-supported websites that provide links to social support networks to see if they keep track of the traffic to those websites.
   - How many of your employees are divorced, single parents?

□ **Education:** Health status improves with the level of education. Education increases opportunities for income and job security and equips people with a sense of control over life circumstances (other key factors that influence health).

   Things to Think About.....
   - What is the educational picture of your community/organization? On average, what level of education do most people attain?
   - What are the main messages that young students are receiving in your local educational institutions regarding continuing education (and on a indirect note - regarding the importance of healthy lifestyles).
   - Are there opportunities for continuous and adult-learning?

□ **Employment and Working Conditions:** Unemployment is associated with poorer health. Those with more control over their work circumstances and fewer workplace stresses or hazards are healthier.

   Things to Think About.....
   - What is the employment picture in your community?
   - Does your community have a stable level of work opportunities?
   - How does the overall employment conditions in your community impact the level of stress that could be placed on your hospital employees? (i.e. how many of your organization's employees are the sole money-earner for their family?)

□ **Physical Environments:** Physical factors in the natural environment such as air, water and soil quality are key influences of health. Factors in the human-built environment such as housing, workplace safety, community and road design are also important influences.

   Things to Think About.....
   - How would you describe your community's overall physical environment?
   - In general, are people in your community able to meet their basic physical needs?
   - Does the physical environment (both natural and human-built) of your community impact your employees' health and well-being in a positive or negative way?

B. Workplace Level Impacts on Healthy Hospital Strategies

More and more research is proving that employee health is strongly linked to the employee's perception of control over their work demands, and sense of reward for the effort that they are putting into their work. People who feel that they are being treated fairly at work are less likely to experience heart and cardiovascular problems, will have less back pain and fewer workplace injuries than those who report high levels of job strain. (M. Shain, 1997)

When building your Healthy Hospital Initiative, it is important to consider how your organizational culture and practices will deter from or add to your efforts at improving the well-being of your employees. For example, when introducing a stress management program, if you only provide education sessions that teach employees how to relax but don't attempt to address the organizational factors that are causing them stress, then your program will have little chance for sustained success.

Consider the following organizational issues when designing your workplace wellness programs:

❑ **Organizational Design:** Workplaces that are effectively designed for optimal performance are also likely to be healthy organizations. Workplaces that are designed with fewer departmental silos and fewer levels of hierarchy are more conducive to a collaborative style of working and allow for more opportunities for teamwork. This in turn allows for a more supportive work environment, which will reduce employee stress.

Things to Think About…..
- ❑ How effective are your teams in your organization?
- ❑ Does your organizational design allow for collaboration and support to occur naturally or does it impede this?
- ❑ Does your organizational design create unnecessary bureaucracy and frustration for innovative individuals?
- ❑ Are there opportunities for improvement to your teamwork and support functions in your organization?

❑ **Healthy organizational vision, mission and goals:** Hospitals truly serious about improving health and wellness need to understand what drives these outcomes. Clear organizational strategies that are drilled down to the department, team and individual levels are considered to be operationally effective. People who clearly understand how their actions impact on organizational outcomes will be more engaged with their work and will also feel less stress.

Innovative hospitals understand that in order to achieve world-class outcomes in patient satisfaction and clinical excellence, they need to deliver excellent healthcare services in a cost-effective manner. To achieve these world-class financial and patient-care results, the hospitals need to have excellent internal business processes. Finally and most importantly, to realize these excellent internal business processes, hospitals must employ thriving healthcare professionals. Hospital Human Resources provide the base of this service model and thus are critical drivers of hospital outcomes.

An interesting business case from the for-profit sector (Sears Roebuck) illustrates this "Employee-Customer-Profit Chain" phenomenon. They found that when they could increase their employee capability index by 5%, the Sears management team could predict that 3 months down the road, their customer loyalty would increase by 1.3%. In turn, this increase in customer loyalty could predict that 3 months down the road, they would realize an increase in revenues of 0.5%. The company now rewards their managers based on 1/3 employee satisfaction leading indicators, 1/3 customer loyalty leading indicators, and 1/3 trailing financial indicators. (Rucci, et al. Harvard Business Review, 1998)

Things to Think About.....
- ❑ Do you have an effective performance management system?
- ❑ Do you take a "balanced" approach to measuring your organizational performance so that you are focusing your improvements on leading indicators? For example, instead of simply focusing on clinical outcomes or your ability to meet your operating budgets, do you also pay attention to the things that lead to those outcomes down the road (employee satisfaction, employee health, employee innovation, process improvements, etc)?
- ❑ How do you measure, track and report on these leading indicators? How do you engage your employees and reward them for achieving corporate goals?
- ❑ When implementing wellness programs for your employees, how can you fit these programs into your multi-year corporate strategic plan so that employee wellness outcomes are tracked as leading indicators?

Use of Information Technology: Healthy workplaces are ones where employees feel that they have adequate resources to do their job safely and effectively. Effective healthcare is dependent on the obtaining and utilizing the right information at the right time. Effective knowledge management strategies are supported with appropriate use of technology. Inappropriate use of information technology can also become a source of stress if the employee has little control over the quality and quantity of information that they are receiving or if they do not have the resources or knowledge of how to organize the information in an easily retrievable format.

Things to Think About....
- ❑ Do you have effective information systems? (Are they fully accessible and well-organized so that people receive the right information in a timely fashion?)
- ❑ Are all of your employees comfortable with using the information systems? Do they use the systems optimally?
- ❑ Can you reduce the stress on your employees by creating better information technology systems or by providing more training, mentoring or workshops for your IT users?

Corporate Policies and Practices: Formal practices and processes create effective workplace systems. Policies and procedures are documents that lay out these systems in a visual manner. Clear and consistent policies and procedures that are created and implemented in a fair manner will reduce the amount of uncertainty for employees and thus can reduce their stress. Human Resources practices in particular are strongly related to employee health and satisfaction. There is also a strong business case for building more effective HR practices. A recent study powerfully shows how

"superior human capital practices are a leading indicator of increased shareholder value." (Watson Wyatt Worldwide, 2001) For example, they found that HR practices that reward employees for good work and refuse to accept sub-par performance dramatically increases market value of the company by 16.5%.

Things to Think About…
❑ Are your HR policies and practices clear and applied in a consistent and fair manner?
❑ Are your HR policies and practices congruent with promoting the health and well-being of your employees?
❑ Do you have reward and recognition policies and practices in place that reward employee efforts?
❑ Does your hospital focus on continuously improving your practices and actively seek employee involvement in process redesign?

Corporate Culture: In general, workplaces that have created a culture of compassion, mutual respect and positive attitudes will be a better place to work than places that are described as "toxic energy dumps". Formal and informal efforts are needed to create this healthy culture.

> "The true measure of a healthy organization is not in its programs, but in its feel: its ability to foster both employee and customer delight, in pursuit of high performance." The Healthy Scorecard, Danielle Pratt 2001.

Things to Think About:
❑ How would you describe the health of your corporate culture?
❑ Is there a sense of corporate responsibility to become a recognized healthier workplace so that you can become a model for the workplaces in your community?
❑ What cultural issues will you need to address in order to promote your wellness programs effectively?
❑ Who can you go to in your hospital to help you create a healthier culture? (i.e. formal and informal "toxic handlers" or "change agents").
❑ Do your leaders effectively "walk the talk" when it comes to implementing cultural changes. For example, do they act in a compassionate and respectful manner in the workplace?
❑ Does your corporate culture support or detract from your wellness program efforts?

C. Job Level Impacts on Healthy Hospital Strategies

When designing your wellness programs, take into consideration how job demands will impact on your outcomes. There will likely be many opportunities to reduce physical risks of injuries and to streamline mentally cumbersome job tasks so that your employees can perform optimally. In general, healthy jobs are ones that are designed to: allow people to rotate through various tasks, to ask for assistance when their personal capacities are not strong enough to safely handle the demands of the job, to challenge them to grow and learn, to allow for a high degree of personal control, and to allow for input into redesign and continuous improvements.

Physical Demands:
- ❑ Have you identified opportunities to reduce the physical demands of any of your hospital jobs? (i.e. ergonomic assessments to identify jobs where you can reduce the amount of weight lifted, repetitive movements, awkward postures and extended reaches).
- ❑ How does the physical job environment impact on your employee's health and well-being?

Mental Demands:
- ❑ Have you identified opportunities to reduce the risks of mental overloads in your hospital jobs? (i.e. cognitive demands assessments of jobs and process redesign efforts that streamline tasks)
- ❑ How does the mental job environment impact on your employee's health and well-being?

D. Individual Level Impacts on Healthy Hospital Strategies

When designing your wellness programs you will need to fully understand your target market. Your wellness programs should meet the needs of all your employees regardless of their current level of health. You will need to address both non-modifiable factors (such as genetics and chronic diseases) and modifiable factors (lifestyle choices and habits) in your prevention and health improvement programs. Each individual has complex circumstances affecting their health outcomes (i.e. physical, mental, emotional, social, spiritual issues) that are interrelated.

Although most of us will spend more than 1/3 of our waking hours at work, we must always remember that hospital employees are also dealing with relationships and issues outside of work. A compassionate workplace does not expect their employees to be able to leave their home-life issues at the door when they arrive at the workplace. An effective wellness program will address these complex relationships in a comprehensive manner.

Things to think about:
- ❑   What are the health and wellness needs of your employees?
- ❑   What are they interested in doing to improve their own health and well-being?
- ❑   Are they ready to make positive lifestyle changes? (For example, what stage of behaviour change are they currently at?)
- ❑   What is stopping them from making improvements to their own health?

E. Hospital Health Promotion

When it comes to implementing a workplace wellness program in the health care industry, hospitals are special workplaces. We have the expertise and know-how right under our noses. It is just a matter of effectively sharing this health promotion knowledge in an integrated and effective manner. If we can achieve this integration, hospitals will become models of healthy workplaces and our health care employees will become models of healthy people for all those that we come into contact with. We have an estimated 200,000 people working in hospitals in the province of Ontario. If we can collectively make more efforts to become leaders in health promotion, think of the incredible impacts that we can have on the health and wellness of the entire provincial population!

Things to Think About:

At the Organizational level :
- ❑ Where can your hospital increase its advocacy role for health promotion in your communities (for example, advocating for increased physical activity in our local schools, advocate for increased availability and safety of parks and recreational facilities and programs in our communities, advocate for smoke-free by-laws, etc.)
- ❑ How can your hospital provide more of a leadership role for other workplaces in your community with respect to workplace wellness? For example, creating community workplace wellness coalitions, organizing workplace wellness conferences for your community, promoting what your hospital is doing for workplace wellness and offering to share/educate others on how to create these programs for themselves.

At the Job level:
- ❑ Are health promotion activities and responsibilities built into every hospital employee's job description to a certain degree?
- ❑ Does your hospital provide job training and mentoring possibilities for employees to learn more about health promotion techniques?

At the Individual level:
- ❑ Do your hospital employees feel a sense of responsibility to model healthy behaviours for others (patients, their own friends & families)?

Chapter 2

**Implementing a Strategic and Comprehensive
Healthy Hospital Initiative**

Implementing a Strategic and Comprehensive Healthy Hospital Initiative

This guide provides your health care organization with an outline of the steps required to implement a broad-based approach to workplace health using the OHA Healthy Hospital Model. The following implementation steps are based on **Health Canada's Workplace Health System** process. By following these steps, organizations have been shown to effectively improve the health and well-being of their employees and have also found that a healthier workforce contributes efficiently and effectively to achieving organizational goals. It is important to follow through each of these steps in order to achieve the desired outcomes.

> **Steps to Implementing a Broad-Based Healthy Hospital Initiative:**
> 1. **Getting Commitment to Comprehensive Approach**
> 2. Organizing a Committee to Implement the Healthy Hospital Initiative
> 3. The Survey (pre-assessment and promotion, implementation and Profile)
> 4. Plan Programs and Policies
> 5. Program Implementation
> 6. Measure Impact of Changes
> 7. Refine

Your organization's chance of success increases the more the process becomes an employee-driven initiative! Based on this, we will implement the Healthy Hospital Initiative with the following principles….

Principle 1: *Incorporate a Broad-Based Approach*. Recognize the need for a broad-based approach, which incorporates elements of an individual health risk appraisal and organizational health (employee satisfaction/engagement) indicators. Ensure that improvement initiatives are aligned with all key corporate strategies and processes.

Principle 2: *Meet the needs of all employees regardless of their current level of health.* Programs should be designed for all employees including those with serious health problems; those in good health and especially for the majority whose current lifestyle may in some way place their health at moderate risk.

Principle 3*: Recognize the needs, preferences and attitudes of different groups of participants.* Different people can have very different needs. For example, the needs of a single parent trying to cope with one administrative worker income may be different from the needs of a nurse who works shifts and rarely sees her children. Therefore, an organization may find it requires different programs to respond to the needs and preferences of different groups of employees.

Principle 4: *Recognize that an individual's lifestyle is made up of an interdependent set of health habits.* Health programs need to address a wide variety of health issues, which often impact on each other. Program design should recognize these interdependencies.

Principle 5: *Adapt to the special features of each workplace environment.* Each workplace (and hospital site) has its own structures, operating procedures and its own unique culture. Healthy Hospital programs must be able to adapt to the special features of each workplace. The programs must also be designed in a way that enables employees to take greater responsibility for their health through building supportive environments.

Principle 6: *Hospitals have immense expertise in-house.* The Healthy Hospital Initiative needs to tap into this internal expertise and promote knowledge-sharing between organizations to build collaborative initiatives across the province.

Stage 1: Getting Commitment to Implementing a Broad-Based Wellness Initiative

Until one is committed, there is hesitancy, the chance to draw back, always ineffectiveness. Concerning all acts
of initiative (and creation) there is one elementary truth, the ignorance of which kills countless ideas and
splendid plans: that the moment one definitely commits oneself, then Providence moves too.
Whatever you can do, or dream you can, begin it.
Boldness has genius, power, and magic in it.
~ W.H. Murray, The Scottish Himalayan Expedition

Steps to Implementing a Broad-Based Healthy Hospital Initiative:
1. **Getting Commitment to Comprehensive Approach**
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Successful wellness programs will depend on the organization's commitment to the full implementation process. It is also essential that management be prepared to:
- Respond to the major issues identified in the Needs Assessment;
- Address all avenues of influence (at the organizational level, job level and individual level).
- Make available sufficient resources, human, financial and material, taking into account the organization's current fiscal environment.

Key players in the organization will need to be briefed on the process before they are in a position to commit to the development and implementation of a broad-based healthy hospital initiative. Key players include senior management, middle management, union representatives and employees.

Consideration also needs to be given to providing a multi-year commitment to the project and devoting appropriate resources. Yearly government budget cycles and CEO terms which are often shorter than 3 years present challenges to the implementation of any initiative that requires multi-year commitments in order to realize the benefits that have been promised at the outset of the implementation. One key method to ensuring a consistent level of commitment is to tie your Healthy Hospital Initiative into your hospital's multi-year strategic operating directions. If your hospital outlines it's strategic plans with Balanced Scorecard metrics, ensure that you have Healthy workplace indicators built into your scorecards at every level.

Building Your Hospital's Business Case for Wellness

- **Step 1: Gather your direct costs** (illness, injury, absenteeism costs) and **indirect costs** (replacement labour, employee turnover costs, etc) and identify trends that can be impacted by wellness interventions:
  - Short Term Disability days and total costs,
  - Long Term Disability days and total costs,
  - WSIB injury rates, days, and total costs,
  - Employee Turnover rates, and total costs (including retraining costs, hiring & recruitment costs, etc)

❑ **Step 2: Consider the trends in costs of ill-health**

- Identify trends in occurrences and costs over the past few years. Are the trends increasing or decreasing? To give a (very) rough estimate of what you can expect for the next year, take an average yearly percentage change over the past (for as many years as you have data).

- For a more accurate picture of your costing trends, you can attempt to predict costs based on changes in the age of your employees, key organizational events (such as lay-offs, restructuring, mergers, hiring blitzes), etc. but you will likely need to enlist the help of an enlightened research analyst.

❑ **Step 3: Consider the costs of doing nothing**

= Total of illness & injury costs + expected change in costs *(total costs * % average yearly change in costs in past)*

❑ **Step 4: Consider the costs of implementing a multi-year (i.e. 3 year) comprehensive healthy hospital initiative**

As you will see in the upcoming materials, the implementation of a healthy hospital initiative does not necessarily mean that you need to invest a huge amount of capital in order to achieve success. However, you will need to be prepared to invest a huge amount of time and energy to the cause. With a workplace wellness program as with most things, you get what you pay for. While a number of these initiatives are often developed and implemented by a committed volunteer force, it is recommended to capture the value of their volunteered time and resources to ensure sustainability of the programs.

cost of wellness committee meetings over 3 years (consider length of time, hourly wage rates, number of employees on committee)

+

cost of employee surveys/needs assessments (estimated $2.25 per survey and $1,000 per final report)

+

cost of promotion of wellness programs and activities(depends on your size and distribution channels established at your hospital)

+

cost of programs delivered (depends on programs, includes staff/facilitator wages, space available, program products, level of corporate sponsorship for covering cost of programs versus employees paying on a cost-recovery basis)

= Total costs of Healthy Hospital Initiative over 3 years

❑ **Step 5: Consider the benefits of implementing a multi-year (3 year) comprehensive healthy hospital initiative**

This is difficult to estimate given each hospital has particular circumstances which will affect the outcomes of the initiative. However, you will need to make your best estimate of the benefits you can expect from the introduction of new wellness programs. For this estimation, you can use data from research studies or past outcomes of your own programs. Numerous research studies have shown the returns on investment for workplace wellness program to range from $3.40 to $6.00 returned for every dollar invested. (reference: Health Canada's Business Case for Active Living). These various studies have been shown to return benefits by reducing employee turnover costs, increasing productivity gains, decreasing medical costs, and decreasing absenteeism costs.

For example,

- BC Hydro employees enrolled in a work-sponsored fitness program had a turnover rate of 3.5% compared with the company average of 10.3%;
- The Bank of America conducted a health promotion program for their retirees at a cost of $30 per person and reduced their insurance claims by an average of $164 US per year per person, while the control group's insurance claims increased by $15.
- Municipal employees in Toronto missed 3.35 fewer days in the first six months of their "Metro fit" fitness programs than employees not enrolled in the program.

If using this data above, you will first need to estimate the number of employees that you predict will participate in your programs. You can make this prediction based on past participation rates at your hospital for similar programs and based on your planned incentive and promotional programs that you aim to use to attract participation. A safe estimate may be 20-30% of your employee population (but of course you will aim for 100% participation!).

Stage 2: Establishing the Committee to Implement the Healthy Hospital Initiative

Any committee that is the slightest use is composed of people who are too busy to want to sit on it for a second longer than they have to.
Katharine Whitehorn *(b. 1926), British journalist.*

A committee is a group that keeps minutes and loses hours.
Milton Berle

Steps to Implementing a Broad-Based Healthy Hospital Initiative:
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2. **Organizing a Committee to Implement the Healthy Hospital Initiative**
3. The Survey (pre-assessment and promotion, implementation and Profile)
4. Plan Programs and Policies
5. Program Implementation
6. Measure Impact of Changes
7. Refine

The Healthy Hospital Committee will be responsible for generating ideas, creating direction and planning program strategies. Their main role is to coordinate the organization's health promotion initiatives for hospital employees. A second very important role of the Committee is to involve other employees as volunteers. Most importantly, the Committee serves as the communication link with employees: allowing employees to have input into the process as well as keeping employees informed of progress and developments.

Committee Membership

In order to ensure the committee members have the required expertise and authority to carry out the tasks, ensure that Committee membership reflects the organization. Take into account all job levels of the organization and demographic features. Representatives from management and union (or employee groups) should be included on the Committee. It should include workers representing key roles within the organization (e.g., management, supervisors, secretaries, line workers, etc to include positions related to health, such as Occupational Health Nurse, Employee Assistance Program Coordinator, Health and Safety Representative, Human Resource Manager, Community Health Promotion Coordinator, etc. The organization may also want to include someone from the communication or development and training departments.

Participation on the Committee should be voluntary. Volunteers should be encouraged by senior management and by their immediate supervisors. The best form of encouragement is assurance that senior management fully supports the program.

To ensure fresh ideas are being generated, it is important to:

- ❑ Involve a dynamic group of employees.
- ❑ Involve at least five people but limit to about ten. Coordinating meeting dates and times for more than ten people is often an onerous task. However, many multi-sited hospitals may want to have smaller committees from each site and a larger corporate committee that meet on less frequent basis.
- ❑ Change Committee members from time to time.

Building effective team processes:

In order to build a Healthy Hospital Committee that is performing effectively, it is important to set the stage with a healthy team structure. Healthy teams understand and manage key team processes such as communication, influence, task and maintenance functions, decision-making, conflict, atmosphere, and emotional issues. A healthy team works through these team processes in a continuous learning environment. Hospitals that have committee members travelling from other sites should consider using teleconference and email communication strategies in order to increase effectiveness of meeting times, and perhaps face-to-face meetings should be scheduled for longer periods of time where you expect to get more accomplished at once.

As with any committee, it is important that everyone gets involved and participates in the best way they can. You may wish to strike some sub-committee groups that have more specific program responsibilities (such as communications & promotions, active living, nutrition, metrics, fundraising, etc).

How to Run Smart Meetings:

- ❑ Recognize that diversity in thinking styles around the table is an extremely positive thing (and recognize that we all in fact think very differently from each other). Draw everyone into the discussion, as his or her input is highly valued.
- ❑ When running an effective meeting, it is important to know when to use each different type of thinking style i.e. brainstorming, gathering details and making a decision and formulating action plans.
- ❑ Have a clear agenda with timelines attached to each item. Ensure that the agenda contains time for each style of thinking (not just reporting on details – as most meetings are). For example, make sure that you leave time at the end of each meeting (or at the end of each issue) for a clear decision, wrap-up and decisive action plans.
- ❑ Come to the meetings prepared. Respect that everyone else is as busy as you are, ensure that your time together is valuable.
- ❑ Have some fun; learn from each other and this process.

Committee Responsibilities

In order for the committee to perform effectively, they need appropriate organizational direction, information and resources. At the onset, the Committee should describe their overall mission and where it fits in with the organization's vision, mission and goals. This will help them to stay focused

on their tasks and to ensure that the committee remains functional on a multi-year basis. The committee should publish their terms of reference and plans for the year for all employees to review and comment on.

Overall, the Committee will be responsible for a number of tasks as the Healthy Hospital Initiative is put in place. These include:
- ❑ Coordinating and promoting the needs assessment;
- ❑ Reviewing the results of the needs assessment;
- ❑ Preparing the Healthy Hospital Implementation Plan
- ❑ Developing, implementing and evaluating program activities;
- ❑ Communicating with management, union representatives and employees throughout the process; and most importantly,
- ❑ Encouraging employee involvement
- ❑ Evaluating the Initiative's outcomes from time to time.

Reporting on progress

The Committee will meet more or less often depending on the stage of the process and the scope of the program being implemented. Members can count on a meeting every two weeks during the busiest stages. Minutes of meetings should be taken to keep a record on the Committee's progress. Minutes should include decisions and actions taken. Reports of Committee meetings should also include upcoming action items with persons responsible for tasks and target completion dates.

Communication with employees

Communication is critical to the successful development and implementation of workplace health programs. Throughout all stages, the Committee is responsible for keeping employees informed about workplace wellness program activity. **How?**
- ❑ Communication through senior management and supervisors will encourage participation of all employees.
- ❑ In the initial stages of the process, communication may start through payroll attachments, an announcement letter or a Company memo.
- ❑ You could post these written communiqués on a central bulletin board that is consistently updated.
- ❑ A Hospital web page dedicated to the Healthy Hospital Initiative could be a great central depository of information for employees (and perhaps potential employees).
- ❑ Face-to-face dialogue is the most valuable and credible communication tool.

The Committee should also keep senior management and union leaders informed of progress and of forthcoming activities. Distributing a copy of Committee meeting minutes is one way of keeping senior management and union leaders up-to-date and reporting on your successes along the way is key to maintaining momentum.

Committee Commitment

The Healthy Hospital Committee must be committed to creativity and full participation. You must have clear goals and a well-laid out path to reach these goals. Sometimes it may be difficult to maintain workplace health promotion as a priority, given what may appear more pressing issues (e.g., budget planning, recruiting, etc.). This is why it is important for the committee to have a senior management representative that can help to ensure the goals of the committee are aligned with the overall strategic direction of the hospital. The Committee members should also establish and then "stick to" a minimum number of meetings in the year.

A strong and committed chairperson for the Committee is essential. It is important that all members (including management and union representatives) work together in a non-confrontational manner towards creating a healthier workplace. Therefore it is the responsibility of the chairperson to champion the work of this committee, to facilitate productive meetings and to periodically remind Committee members of their role and purpose.

Committee First Steps:

- ❑ **Outline your Healthy Hospital Committee's vision, mission, values and overall goals. Ensure these are strategically linked with your hospital's overall vision and mission. Document your committee's strategic plan and revisit it frequently to ensure that you are staying on course throughout the year.**

Stage 3: The Survey   (Pre-assessment & promotion, implementation, and profile analysis)

Your assumptions are your windows on the world. Scrub them off every once in a while, or the light won't come in.
~ Isaac Asimov:

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An employee survey is an important step in helping your Committee prioritize its activities. If your hospital has done a survey within the past 2 years, revisit this data to see if it offers you enough information about where to begin your program development. Often, different groups within the hospital will survey employees for their own purposes but do not share the results with other groups or committees. This can be a major source of frustration for employees who feel that they are telling their organization over-and-over again how they feel, but do not see the results. In particular, speak with other groups (i.e. any groups or committees associated with Quality (of services and/or work-life), Organizational Development, Human Resources, Labour Relations) and coordinate any employee survey deliveries together with them.

To encourage participation in Wellness programs, the Committee must uncover the issues that are important to employees. To achieve maximum participation, employees themselves must participate in identifying and setting their own health goals and priorities. During the Needs Assessment stage, the Healthy Hospital Committee prepares an overview of the organization's workforce, decides on the appropriate employee survey tool to use, promotes the survey to obtain maximum participation and ensures that the survey is administered properly.

The OHA in partnership with Brock University's Workplace Health Unit has developed the OHA Healthy Hospital Employee Survey that addresses employee health, satisfaction and quality of work-life balance in a single comprehensive tool. Since research has shown that similar workplace conditions lead to all three of these desired outcomes, we created a single tool to address all components (and to reduce the number of times that you need to have your employees fill out surveys). This tool has been piloted in the Healthy Hospital Pilot Group Initiative (2002-2003). For more information on this Initiative, see appendix A. Also see appendix D for information on the OHA Healthy Hospital Employee Survey.

Survey: Pre-Assessment & Promotion

Establishing a point of reference before the needs assessment process begins will also provide useful information with which to compare future findings. A workforce overview of the organization gives the committee a picture of the organization as it stood before implementation of the program. This

in turn allows the committee to properly promote the survey. As well, these data enable the committee to compare future findings in the "Review of Progress" stage.   You may be able to obtain this information from your OHA Absenteeism Survey annual submissions, OHA Labour Market Survey submissions, payroll data system, and other HR and OHS databases.

The workforce overview might include the following descriptive information:
A) About the organization:

Organizational Chart	Location and number of worksites
Departments/Divisions	Job Classifications
Type of work	Shift Schedules
Accident/Injury rates	Turnover rate
Absenteeism rates	Long Term Disability rates
Grievances/disciplinary actions	Employee Assistance Utilization rates
Policies currently in place	

B) About the workforce:
Total number of employees including a breakdown by:

Gender	Age
Education	Language
Ethnic groups	Years of service
Number of dependants	

See Appendix B for the OHA Healthy Hospital Pre-Survey Organizational Scan

If proper and sufficient orientation is done in advance of distributing the survey, the survey should send a powerful message to employees that management, labour and the Healthy Hospital Committee are concerned about the needs and preferences of all employees and are committed to taking action. You may need to overcome resistance by some employees who have had past experiences with surveys where their feedback was not acted upon or even reported back to them. It is important to address this experience and to communicate how your committee and senior management is committed to the entire process and will communicate frequently throughout.

The greater the participation in the completion of the survey, the more accurate and complete the picture of employee needs. To ensure results will be as useful as possible, at least 50% of the employees should complete the survey. In addition, a response rate of at least 50% from all occupational groups, sites, and departments is recommended to ensure they are appropriately represented. This should be a target goal for your Healthy Hospital Committee.

To get the best response rates, employees must be properly oriented and prepared for the survey. In order to plan your promotional strategies, it is a good idea to get a comprehensive picture of your "target market" and build your promotional strategies in ways that will get the employees to "buy" the idea of filling in this survey.

Keys to Enhancing Survey Participation:

1. Create a Sense of Importance

The success of the Survey is dependent upon how important it is perceived to be by the participants. The initial announcement about the survey and its intended purpose should come from the highest level of management - the CEO or another senior executive officer. Management and union representatives must also show visible commitment and support for the project.

2. Promotion of Survey

Experience has shown that when the committee explains and promotes the survey before distributing it to employees, a much greater response rate results. If your organization has a public relations, marketing or communications section, then by all means, use it to develop a promotional strategy. It is a good idea to have a person with expertise in promotion on your committee. Completion of the survey MUST be voluntary. Communication strategies should be informative, convincing and persuasive but not overly so. Soft sell as opposed to hard sell should be the order of the day.

Begin promoting the survey well in advance of the delivery date. As you get closer to the date, ramping up promotional strategies will help to create some more excitement for participation in the survey.

3. Wherever possible use existing means of communication

A company memo can contain information on the survey process. A newsletter or bulletin could include interviews with key people from management, union and the committee about the importance of each employee's input, and reinforce management and union commitment to action and support of the program. Pay envelope inserts or union mailings are also ways to promote the survey.

4. Guarantee of Confidentiality

Due to the personal nature of the information, employees must feel confident their anonymity is respected and protected. It is natural that many employees will have concerns about the personal nature of information they are to provide through the survey. They will be particularly concerned about the questions related to stress at work, stress at home, and drug and alcohol use. To ensure participation in the survey, employees must be confident that their anonymity will be respected and protected. Tell them how this will be accomplished.
- Self-sealed envelopes
- Aggregate data reports (will not report on groups that are so small that individuals can be separated out).
- An outside company compiling the data

See Appendix C for Healthy Hospital Employee Survey Promotional Materials

B. Survey Implementation:

Distribution of the survey should be accompanied by a letter, which states the purpose of the survey (i.e. what the data will be used for), provides instructions on the deadline, indicates whether or not company time has been allocated to complete it and reinforces the confidentiality of the information.

1. Suggested Methods of distribution:

❑ Hand-to-hand distribution. Using employee volunteers that travel to the hospital departments to deliver the surveys and promote the importance of their individual participation. This method will likely be the most effective (but the most time consuming). You will need to ensure you have volunteers to cover every shift and to reach every department.

❑ Setting up information centers in staff lounges, lobby or cafeterias to hand out surveys to staff as they pass by.

❑ Mass Mailings to employees' homes. This should be done in conjunction with an information line available to answer employees' questions and to promote survey to increase response rates. Note that privacy legislation requires that if you wish to use an outside mailing company to mail the surveys to your employees, you will need to have obtained individual consent from your employees that outlines their permission for you to share their address information with the outside company. Therefore, it is suggested that if you choose this option for distribution, that the functions are performed in-house by staff with access authority.

❑ Consider options around the use of emailing or web-based application systems for distribution of the survey.

2. Timing:

For maximum response, ensure the time and place for completing the survey is convenient for the employee. A week before Christmas, budget time or the height of vacation season would be bad times to distribute the survey. Planning a time for employees to complete the survey during the workday will encourage greater participation. If the survey is not being completed at a specific time during work hours, employees should be allowed up to 7-10 days to complete the survey. Reminders may be necessary during that period. Where available, electronic mail is a good way to send due-date reminders.

3. Give special attention to "hard-to-reach" groups

It is important to identify and address groups of people whose participation in the survey cannot be met through the normal means. These groups may include employees who are off-site, seasonal or absent on short-term or long-term disability. Special attention may be required for employees who are typically left out of workplace programs. These "hard-to-reach" employees include socially or culturally isolated employees who may have literacy or language problems that prevent them from

participating in the process. Alternative ways of collecting information should be explored in advance, and should include methods that are confidential and non-threatening.

C. Survey Results – Analyzing your profile

An outside firm should tabulate the results of the survey in order to keep the employee information confidential. Results should be presented in a report that contains information on how your employees currently perceive their satisfaction with their work-life, their health, and their ability to balance their work and home lives. It should also provide the employee's suggestions on what they consider the most important drivers of these outcomes and how to improve on these issues. This valuable information will drive your Healthy Hospital Initiatives by helping to identify priorities and will give a sense of the steps needed to take to address these priorities.

The Committee must act on these results in a timely fashion!
This means reporting the results of the survey back to the employees in a meaningful manner and promoting what you are going to do to address their stated concerns. If you do not act on these results, you risk losing any sort of momentum that you gained by promoting the survey to the employees and you will likely need to put extra effort into regaining their trust and respect for your committee's work.

The report will profile the results from each of the survey sections and will also cross correlate the different survey scales to determine the issues that are most related to the desired outcomes (health, satisfaction and balance). For each indicator, the hospital will know the average score for all groups. For the purposes of becoming a world-class organization, we will also need to know how many employees felt that the hospital was exemplary for each scale. These "very-satisfied" results should be tracked over time and we should set our goals on achieving more of these "top-box" scores in following years because this signifies the number of truly engaged, healthy and delighted employees that we have.

The reports will also break down the results by each employee group (job category and hospital program category) provided that the group size is larger than 7 employees so that confidentiality remains intact. This will give the hospitals some clear directions as to which organizational and job level interventions are priorities and will help to customize your wellness programs as much as possible. It is important to note that if the response rates for each group are not representative (i.e. if you did not achieve your 50% response rate for each group), then you may need to go back to those certain groups to validate the results of the survey for these people. For example, you could hold focus groups with these employees to find out how the corporate results sit with them. Do they have anything to add? For example, any other ideas on how can you best implement your wellness programs for them. You will also want to identify any barriers that they had to responding to the original survey in the first place and work to remove these for the next time around.

Communicating the Results

Employees will be anxious to hear about the results of the survey. Once the committee has reviewed the results, there must be a follow-up communication to all employees. This follow-up could take the form of a newsletter, employee meetings, special issue bulletin, or some other medium appropriate to your organization.

You first communiqué should highlight the results of the survey, and the key priorities that have come out of it. You should also communicate your committee's next steps (i.e. formulating specific healthy hospital goals and objectives and specific plans to achieve these goals) and timeframes. It is also important to gather employee feedback during these communication sessions to ensure that they understand how they are driving your wellness initiatives and that their feedback and suggestions are highly valued.

Sidebar Notes:
Best Practice Survey Promotion Ideas from Renfrew Victoria Hospital: The Leader Approach
Renfrew scored the highest overall response rate of the OHA Healthy Hospital Pilot Group (95% of their 245 employees). Renfrew Victoria had done an employee satisfaction survey about 2 years ago (with a 33% response rate). The organization had acted on the results and Julia felt that this meant the employees would be more likely to participate this time around. The first survey was delivered with pay stubs and this low response rate meant they needed to try a different way of distribution this second time around. They decided to take a Leader Approach.

The VP of Corporate Services (Julia) had many formal discussions back in the fall with a number of committees to gather support. There were many posters throughout the hospital to build awareness. Through the Occupational Health & Safety Committee, the Human Resource Committee and the Workplace Wellness Committee, 40 people were delegated as leaders for distribution and follow-up, meaning each leader had about 5 people. The leaders were partnered with staff they would see on a regular basis. Nominal prizes were awarded including an early-bird draw (5 prizes at $70 each), free meal in the cafeteria for promotion, the cafeteria was also used to post daily response rate updates from Brock. A cover letter signed by the CEO and Brock was attached to the survey, and each outer envelope was personally labelled so that they knew which employees had been hand-delivered their surveys by their leaders. The labels were pealed off by the employees and then used as ballots for the draws.

Stage 4: Planning Programs

Develop an infallible technique and then place yourself at the mercy of inspiration.
~ From a Zen Maxim

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Now with a comprehensive profile of what employees' needs are, the worksite committee has the tools to draw up an effective long-term strategy for addressing workplace wellness issues. Going the long-term route provides a realistic framework for tackling large as well as small issues. When going through this planning process, start with the big picture first then move in to more specific program issues as they arise.

Planning Step 1: Revisit your overall Wellness Strategy

❑ Revisit your Healthy Hospital Committee's strategic plan to ensure that any subsequent programs that you develop are leading you to your desired outcomes.

Planning Step 2: Setting Your Healthy Hospital Goals based on results from the employee survey.

❑ **Begin by first identifying areas where your results profile highlights low performance ratings matched with high importance ratings.** For example, if your employees report that they strongly disagree with the statement "I feel that I am protected from harassment and violence at work" and they also report that this issue is very important for them in determining the quality of their work-life. Then, this is likely a priority area for your committee to focus your attention.

❑ **Note your current outcomes for these areas for improvement, and set standards for comparison**. The OHA Healthy Hospital Employee Survey has been standardized across the province so that you can benchmark your hospital results against other similar hospitals. These benchmarks will identify the aggregate averages plus the hospital best practice results.

❑ **Set realistic but exciting goals for these priority areas for improvement.** In order to attract commitment to improvement and to create excitement, you should set and promote appropriate goals that the corporation should aim for. Start with one or two goals that can

be quickly realized (i.e. "low-hanging fruit") so that you can start the ball rolling and then gather the momentum needed for the bigger goals.

❑ **Set measurable goals.** Do you have the systems in place to track your outcome measures? For example, if one of your goals is to increase the number of new participants in a wellness program, do you have the tools to easily keep track of participants, identify if they are "new", and report back on the numbers in a quick and accurate manner?

❑ **Outline the steps involved to get to these goals.** Celebrate the milestones along the way to achieving the final goals. Outline how you will know that you have reached these milestones. (For example, participation rates in a program reaching a certain level, training completed, etc)

❑ **Outline the timeframes for these milestones and goals.**

Planning Step 3: Create a Brand Image for your Healthy Hospital Committee.

❑ Develop a theme (logo, catchy phrase, etc) that can be threaded throughout the process over the long and short term. This will help employees to identify that new wellness initiatives, policies, or education sessions, etc are a result of their feedback on the survey.

Planning Step 4: Identify current resources available to assist with your programs

❑ Internal resources – tap into the expertise in your own back-yard (i.e. dietician, physiotherapist, social worker, chaplain depending on programs that you are developing)
❑ External resources – internet searches, OHA Wellness Idea Bank, sharing ideas and resources with other organizational contacts.
❑ Financial resources – has there been a set budget for your programs? If not, do you need to develop a business case to secure financing from senior management, or will you aim to create a program that is financially self-sustaining?
❑ Equipment, space, materials as required – do you have these available internally or can you set up formal relationships with outside sources. (For example, corporate rates at local gyms)

Planning Step 5: Plan Healthy Hospital Program specifics

❑ Given the survey profile information and your available resources, plan what the actual programs will look like. How will you deliver the programs in order to meet the employee's needs? Consider things such as:

   o Should they be delivered in an individual manner or in group settings?
   o What is the best time of day to deliver the programs? – before work, during work, after work, day shift, night shift, etc).
   o Location of program if applicable, (figure out how best to bring your programs to the people.)

- o Length of program (duration of each session, total program length if multi-sessions required),
- o Who are your target participants? (entire corporation or select group of individuals)
- o How many sessions will you need to handle all your target participants?
- o How will you promote to ensure maximum participation (remember to include your committee logo, etc)
- o Brainstorm on how can you fit these wellness programs into other existing corporate programs or processes whenever possible.   (For example, for active living at work initiatives – how about having mini-activity sessions happen during employee orientation sessions or committee group meetings?)
- o What policies do you need to create or change to ensure that the program is sustainable and will create a cultural transformation?
- o Generate some contingency plans – think through applicable "What-if" scenarios. For example, what if it rains? What if the budget is cut? What if the speaker backs out at the last minute? What if we build it and no one comes?
- o How can we make this program fun and inspirational?

- ❑ Document your program plans with key deliverable targets and dates highlighted.

- ❑ See Appendix E for a sample from the OHA Wellness Idea Bank – Program Ideas

Stage 5 Program Implementation

Even if you are on the right track, you will get run over if you just sit there.
~ Mark Twain

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Keys to a successful Wellness program implementation

- Continuously refer back to your planning schedule and try to stay on track, but be flexible and respond to changes if necessary. (Remember those contingency plans).
- Involve as many employees, teams, departments as possible.
- Create a sense of "We're all in this together – trying to achieve our Healthy Hospital Goals!"
- Walk-the-talk. The Healthy Hospital Committee and senior management needs to take a leadership role in the programs they are trying to build for their hospitals.
- Reward and recognize excellent individual and team efforts along the way.
- Provide frequent updates to the committee on how well the program implementation is coming along.
- Set a launch date and build excitement up to it.
- Promote through every available channel.
- Give presentations on a quarterly or semi-annual basis to senior management, employee groups, etc to highlight what you have accomplished so far and what your next steps are.
- Live and learn – discuss and document any lessons learned from each program implementation so that you will avoid making the same mistakes the next time around.
- Have fun and be creative! The implementation of these programs will likely take lots of time and energy of committee members and other volunteers, so you might as well get back some positive energy in the process.
- Share your ideas with other hospitals in the province so that we can build innovative programs more effectively and efficiently. (Visit www.oha.com/wellness for links to the OHA Wellness Idea Bank).

Stage 6 Measuring Impact of Changes

You manage what you measure

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In order for your Healthy Hospital Initiative to be a recognized success, you need to take the time to set up exceptional metric systems. Often programs that are geared towards improving the health of your employees or your work environment are seen to be "soft" and sadly, are likely to be one of the first programs on the chopping block when budget crunches come around. To avoid this, you need to provide as much hard data as you can.

Research has told you that comprehensive wellness programs will decrease absenteeism, injuries and illnesses, and that your employees will be more satisfied and engaged with their work. Now it is time to see if this research can be replicated in your workplace environment. As you progress, you will learn how to analyze your metrics in order to better predict your future outcomes (like Sears did with their profit-chain work as discussed in the OHA Healthy Hospital Model section).

Sidebar Note: The OHA and Brock University's Workplace Health Research Unit will continue to perform analyses on the aggregate Healthy Hospital Employee Survey Data of all hospitals that join in the provincial database in order to measure the impacts of the OHA Healthy Hospital Initiative from the provincial perspective. For example: Some preliminary analyses reveal that health care employees who feel they have more control over their job demands, and who feel more rewarded for the efforts they make in their job, report fewer days absent from work compared to employees who reported low demand/control and low effort/reward. Differences ranged from 2-5 days depending on the health care worker job type, or where they worked in the hospital. These findings were quite consistent across each of the participating hospitals, so the relationships appear to hold whether the hospital is large, small, rural, urban, single site, or multi-site.

Balanced Scorecard Tool for the Healthy Hospital Initiative:
The Balanced Scorecard tool provides an excellent mechanism to focus your Healthy Hospital Initiative performance metrics. It also easily allows you see how to strategically link your metrics fit into the bigger corporate strategies. In order for Healthy Hospital Committee members to work in a healthy environment, they need to see how their individual contributions can make an impact at the bigger picture level. This will help to keep your committee members engaged in the lengthy wellness process!

As the name implies, the Balanced Scorecard achieves a balance between lag indicators and leading indicators. It also balances 4 main objectives - financial metrics (i.e. are we operating on-budget) with customer service metrics (our customers are our hospital employees), internal process metrics & learning and growth metrics. This tool will help us to align our energies in the same direction and will be a learning tool, as everyone can understand where we are going and how our individual and team performance contributes to overall strategic improvements of the committee.

How to Build Your Healthy Hospital Committee Balanced Scorecard:

❑ **Step 1: Revisit your Committee's vision, mission and goals.**

❑ **Step 2: Draft a visioning statement on how you want to attain your objectives through each of the scorecard sections.**
For example:
1. **Customer:** We want our hospital employees to achieve optimal levels of personal wellness and our hospital environment to be healthy.
2. **Optimal Internal Processes:** We want our committee to operate effectively and efficiently so that we can quickly transform our hospital into a healthy place to work.
3. **Learning & Growth:** We want our committee to operate as a healthy team and to continuously learn about health and wellness.
4. **Financial:** We want our healthy hospital initiative to be financially sustainable.

❑ **Step 3: Then discuss what the committee needs at this time in order to achieve each of these 4 themes.**

Some general examples:
- Improved communication effectiveness
- Improved effectiveness of committee
- Improved promotion of Healthy Hospital initiatives (both to our employees and to Corporate leaders to achieve stronger support).
- Increased number and quality of wellness programs
- Focus on completion of projects and improved ability to manage many simultaneous projects
- Improved response to customer needs.
- Improved overall impression of our committee and its work to our customers (hospital employees)
- Increased amount of recognition from corporation for rewarding healthy behaviours.
- Personal and professional growth of committee members

❑ **Step 4: Organize these immediate needs under the appropriate strategic theme and then we discuss how you would be able to measure your performance in these areas.** Note the following advice about designing metrics:

> **Metrics:**
> You should have a mix of lag and lead indicators. *Lag Indicators* are the desired outcomes (ones that we generally have focused on in the past). They measure things such as sick time and injury occurrences. We need to balance these "traditional" measures with *Lead indicators* by identifying the factors that drive these outcomes. For example, in order to stop these injuries and sick days from occurring in the first place, we should also measure our wellness program outcomes.
>
> You should choose **SMART** Metrics:
>   **S**pecific (direct measures of what you want to measure).
>   **M**easurable (you can collect the data in an accurate & complete way)
>   **A**ctionable (easy to understand - clear direction for improvement)
>   **R**elevant (don't measure things that aren't important)
>   **T**imely (you can get the data when you need it).

❑ **Step 5: Assign responsibility for collecting data and reporting on each metric.**

Sample Healthy Hospital Committee Balanced Scorecard:

Wellness Initiative Goals:	Measures (leading and outcome indicators)	How Tracked	Who Responsible
Financial:			
1. Wellness Program and Committee that Operates Efficiently	1a. Committee Budget Variance	% overage/ underage	Chair of committee
Wellness Outcomes for our program "Customers":			
2. Increased awareness of our Hospital Wellness Initiative	2a. % of employees who reported "yes" to the random polling question of "Are you aware of the Hospital Employee Wellness Initiative?"	Random poll of employees done on a 30-minute blitz in one day.	Wellness Committee
3. Increased awareness of and participation in our hospital "Physical Activity at Work program"	3a. % of employees who reported "yes" to the random polling question of "Are you aware of the Hospital Physical Activity at Work Program?"	Random poll of employees done on a 30-minute blitz in one day.	Wellness Committee
	3b. Total hours of activity reported by hospital employees.	Hours of activity employees reported on their tracking sheet and submitted to committee.	Individual assigned for compiling P.A. program data
	3c. # of participants in the physical activity program / total # employees	# employees submitting activity tracking sheets/ total # employees	Individual assigned for compiling P.A. program data
Internal Committee Processes			
4. Create and develop an efficient and effective on-line wellness program tracking system that is driven by employee data input.	4a. cost to capture wellness program data and report back to committee	$ cost (= labour time +tracking tool costs)	Sub-committee assigned to data capture improvement task.
5. Improve Employee Feedback Systems	5a. # of employee suggestions received for Wellness program improvements	# wellness program suggestions received in Hospital Employee Suggestion Box	Sub-committee assigned to Wellness program communications and promotion.
Learning and Growth for Wellness Committee			
6. Improve networking with other hospitals.	6a. # of quality ideas that our committee has submitted to the OHA Wellness Idea Bank	# suggestions submitted on a quarterly basis.	Sub-committee assigned to Wellness communications and promotion.

Stage 7 Refining Programs

I have not failed 10,000 times. I have successfully found 10,000 ways that don't work.
~ Thomas Edison

Steps to Implementing a Broad-Based Healthy Hospital Initiative:
1. Getting Commitment to Comprehensive Approach
2. Organizing a Committee to Implement the Healthy Hospital Initiative
3. The Survey (Pre-assessment and promotion, Implementation and Profile)
4. Plan Programs and Policies
5. Program Implementation
6. Measure Impact of Changes
7. **Refine**

The last phase of the Healthy Hospital Implementation Steps is the ongoing task of ensuring that your wellness programming is effective and remains relevant. If you are finding that you are not achieving the desired results (as is evident in your metrics), then you may need to revisit the program plans. Brainstorm with your committee, hold focus group sessions with employees, do mini-surveys, etc. to find out how you can refine the program for increased success.

Don't give up! For many of your Wellness programs, you are trying to impact and/or change human behaviour. This type of transformation often takes time and requires a wide variety of approaches.

Chapter 3

Improving Organizational Health

Healthy Hospital Innovative Practices

Following the analysis of the HHES results at each individual hospital involved in the survey pilot group, the results were added to the OHA HHES benchmarking database so that the group can explore best practices.   The OHA facilitates this ongoing knowledge exchange between hospitals by holding regular teleconferences and symposiums to discuss key issues that were identified across the pilot group. Hospitals that scored the highest in the relevant survey indicators are asked to share their approaches to dealing with those particular issues in their own settings. Included in this report are notes from some of the discussions that have occurred to date regarding organizational health indicators and individual health indicators (chapter 4).

1. Improving Employee Satisfaction with Communication:

HHES Indicator: Organizational Health Section Question - I am satisfied with communications in this organization. (Strongly Disagree to Strongly Agree)

HHES Results
Satisfaction with Communication is one of the lowest scores and one of the largest gaps. Respondents also indicated that it is the third most important factor in determining their overall quality of work life.

Why is effective communication important?
> Creating and sustaining a culture of open and transparent communication is essential to building organizational trust. Organizations must regularly and specifically communicate its business conditions, operations, and plans with all levels of the organization. Senior managers, in particular, have a responsibility to regularly and widely communicate to all employees. Employees must feel free and able to express their views on organizational issues without worry of reprisal from either supervisors or colleagues.

Possible Actions for Improvement:
- Work to develop and implement an overall organizational communication plan.
- Regularly evaluate and work to improve organizational communications.
- Improve formal and informal communications from Senior Management to employees.
- Increase the amount and quality of information delivered to employees on a regular basis.
- Utilize numerous methods of delivery to enhance communication and particularly ensure that all employee locations receive information.
- Create and support a system for all employees to express their views on organizational issues.
- Consider management training in this area, particularly as it relates to effective methods for disseminating information.
- Consider building in accountability measures to ensure that all managers incorporate employee communication into their teams.

- Consider employee training in this area – work to enhance individual employee communication skills and abilities.
- Consider and adjust all communication for language and literacy differences.
- Ensure that internal communications tasks are linked closely with the Human Resources department (i.e. have internal communications report through the HR department).

2. Improving Employee Satisfaction with Supervisor/Manager Leadership

HHES Indicator: Organizational Health Section – Satisfaction with Supervisor

HHES Results
Managers and supervisors are the key builders of strong employment relationships. Strategic leaders will effectively address work environment, job design, health and well-being issues identified by their employees in order to create a high quality work environment. A Healthy Hospital provides leadership support for its managers and supervisors and in return they are held accountable for addressing key employment relationship issues in a positive manner.

The manner in which managers and supervisors conduct themselves in the workplace will have large effects on their employee's perception of the organization as a whole. Managers and supervisors are key communication vehicles and they are key providers of formal and informal reward and recognition for their employees. Hospital employees report that a supportive work environment is ranked as a key issue that their hospitals need to improve in order to advance their quality of work-life.

Possible Actions for Improvement
- Provide leadership development opportunities for supervisors/managers. Include training on key issues identified in the HHES survey results (i.e. communication, rewarding and recognizing your employees, creating a supportive work environment, continuous quality improvement process design, etc.)
- Provide mentorship opportunities for new supervisors/managers.
- Provide stress management skills training to your supervisors/managers as they are among the highest stressed job category.
- Provide organizational support for managers and supervisors to build their strategic plan for their department that is in line with the organization's vision/mission/strategic plan. Department level balanced scorecards that create manager/supervisor accountability for ensuring all clinical/financial/operational/change management (human resources) aspects are addressed in a systemic manner.

3. Improving Employee Satisfaction with their Physical Environment & Physical Safety

HHES Indicator: Organizational Health Section – Satisfaction with physical environment, Feeling physically safe at work

HHES Results

Satisfaction with the physical environment is a key predictor of job satisfaction and overall healthy workplace indicators. Feeling physically safe at work is a key predictor of overall health workplace and the number of sick days taken last year.

Why is a safe physical environment important?
- Musculoskeletal injuries account for approximately 80% of health care sector WSIB injuries and approximately 34% of Long Term Disability claims.
- An aging and mostly female workforce particularly requires a work environment that controls ergonomic risks (particularly strength requirements).
- With increased general societal stress coupled with increased consumer expectations of the health care industry, frustration levels in hospital environments are notably increasing. One of the most basic human needs is the perception of personal safety. Health care employees cannot perform as effectively when there is fear for their own safety.

Possible Actions for Improvement:
- Implement and promote an effective Safety and Accountability System (SAS) that has a large educational component centred around responsibilities.
- Encourage reporting of unsafe situations
- Provide ongoing education on safety and injury prevention
- Combine your SAS with hospital Security functions to effectively deal with violence in the workplace.
- Provide training for front-line staff on managing abuse (deal with violence, verbal abuse, women's safety, children's safety, theft protection, etc.). Also aim to create more awareness for an increased safety culture at home.
- Conduct regular safety and security audits for each department
- Provide Emergency Planning education for all employees
- Have a buddy system in place for employees (i.e. walking to cars, working alone, etc.) and a Hospital Watch program to alert any suspicious activities to the security department.
- Ensure that your security personal are trained to deal with violence and have a post-secondary education in law enforcement.
- Provide mechanical lifting equipment for all beds where non-ambulatory patients may be located.
- Implement an effective preventative maintenance program for equipment (i.e. beds, wheelchairs, stretchers, lifts, etc.)

4. Improving Employee Satisfaction with Reward & Recognition For Teams & Individuals

HHES Indicator: Organizational Health Section – Satisfaction with recognition and reward I receive in this organization, Agreement that the organization recognizes and rewards groups/teams that work well together.

HHES Results
Satisfaction with Recognition and Reward at the Team level is one of the lowest scores and largest gaps. Satisfaction with Personal Recognition and Reward is also one of the lowest scores and is a key predictor of Organizational Satisfaction.

Why is reward and recognition for teams and individuals important?
Creating an environment where employees feel that their work is valued is important to promote spiritual and emotional well being.

Possible Actions for Improvement:
- Consider strategies to encourage formal and informal feedback and praise
- Consider increased management training in this area, particularly as it relates to enhancing communication skills around recognizing employee performance
- Evaluate effectiveness of existing recognition and reward programs, particularly as they relate to individual recognition, but also to team/group recognition
- Evaluate effectiveness of existing informal and formal feedback processes. Enhance organizational ability to respond to and/or act on feedback provided
- Evaluate and/or develop performance appraisal systems. Ensure that management training is provided so that performance appraisals are delivered consistently across organizations
- Create management accountabilities for the successful and consistent implementation of performance appraisal programs and activities
- Ensure that there are links made between individual and team performance and the performance of the whole organization

5. Improving Employee Satisfaction with Training & Career Development

HHES Indicator: Organizational Health Section – Satisfaction with Training Opportunities, Satisfaction with Career Development Opportunities

HHES Results
Often when budget constraints hit hard, formal training budgets are often cut or eliminated. It is important to note that Career Development falls among the bottom ten scores is a key predictor of job satisfaction and intentions to remain. Although training did not fall out as a key predictor of these same indicators, it is likely that on-going learning whether with formal training programs or informally (i.e. through mentorship programs) is a key component of helping people to further develop their careers.

Why is training and development important?
For optimal performance, organizations must ensure that training and development plans are well designed, consistently implemented, and aligned with their strategic direction – at both the management and non-management levels. All managers and supervisors should be extensively trained on both technical and human resource management competencies. In addition to a job training program, organizations must provide more comprehensive general management education, training and career development opportunities. Further, the development and promotion of non-management employees must be optimized to meet their personal and overall organizational goals.

Possible Actions for Improvement
- Ensure adequate resources are supplied for training and development programs
- Make employee training and development an accountability for all leaders and managers

- Ensure that training and development programs are regularly evaluated and continuously improved
- Evaluate the availability of training and development programs for employees and managers
- Consult with employees and managers to identify the types of training that are lacking and work to provide increased opportunities in these areas
- Design and implement succession planning initiatives
- Develop career maps with skill, training and experience requirements for every job
- Provide multiple training opportunities to employees including job-related training and employee development training (i.e. conflict resolution, time management, etc.)
- Support continuing education for employees
- Develop a systematic way to identify high potential employees from all levels
- Provide opportunities for career laddering with both a technical and management development stream
- Help employees set personal career goals during yearly performance appraisals and ensure training is available to help reach those goals
- Ensure that existing non-management employees are adequately prepared for promotion to appropriate supervisor/management positions

6. Improving Employee Satisfaction With Trust, Fairness & Respect in the Organization

HHES Indicators: Organizational Health Section- Trust of organization, trust of supervisor, feeling as though they are treated fairly in the organization, feeling as through they are treated with respect in this organization.

HHES Results

Organizational Trust is one of the lowest scores and largest gaps and is a key predictor of Organizational Satisfaction and respondents' feeling that their organization is a healthy place to work.

Respect, while not among the lowest scoring, is one of the largest gaps. Respect is identified by respondents as the most important factor for their quality of work life and is a key predictor of Organizational Satisfaction, Intentions to Remain and Healthy Workplace.

Fairness is identified by respondents as the second most important factor for their quality of work life. Fairness is also a key predictor for Job Satisfaction.

Why is this important?

There are several related items that measure the overall quality of the relationship between employees and employers. Research indicates that strong employment relationships, built on trust, respect and fairness are related to improved quality of work life and organizational performance. An individual's sense of organizational trust and loyalty rests on the perception that his/her employer, most often experienced as one's own supervisor, takes his or her best interests into account.

Creating and sustaining an organizational culture based on trust, respect and fairness requires a fundamentally new approach to the people side of the organization – one that treats employees as

assets, rather than as costs that need to be controlled. While it is difficult to maintain these types of positive employment relationships in rapidly changing, often destabilized, work environments, organizations must begin to renegotiate and reestablish trust with their employees.

Possible Actions for Improvement:
- Written vision, mission and values statements of the organization that acknowledge the value of employees must be clarly and consistently communicated by senior management
- Ensure your organization has a strategic human resources plan that is supported by specific employee health and well being indicators
- Build employee participation into organizational planning at all levels
- Maintain or create cultures that expect and reinforce appropriate levels of respect
- Implement training and incentives for organizations or groups achieving positive employee health and well being outcomes
- Ensure that all managers/supervisors follow corporate policies and treat employees equitably
- Establish formal recognition systems/programs that are based on employee ratings
- Provide managers with the skills they need to manage people (e.g. communication skills, giving and receiving feedback, conflict resolution, time management, project planning)
- Provide managers with the tools they need to manage people (e.g. policies, referral sources to assist employees, etc)
- People management must be valued as an important part of a managers' job and not something extra to be done. Ensure their workload allows time for them to be supportive
- Provide incentives to focus on the people part of the job (e.g. measurement and accountability, 360 degree feedback, rewards focused on recognition of managers with good people skills, promotions linked to performance on the "people part" of the job).
- Have clear and stringent policies to protect employees from all forms of harassment, discrimination and violence
- Ensure that conflict between individuals and groups in the organizations is resolved quickly and effectively, so that it does not recur. Deal quickly with issues such as incivility, hostility, anger, rumour mongering, etc.

Chapter 4

Improving Individual Health

Healthy Hospital Innovative Practices

1. Improving Employee Physical Activity

HHES Indicator: Individual Health Section – frequency & regularity of moderate physical activity regularity, stages of change indicator

HHES Results
A great deal of the risk in the respondent group could be reduced through changes in attitudes and behaviour related to physical activity:
- Approximately 30% are high risk for lack of physical activity and 45.1% of those at high & medium risk are in the preparation or action stage of change
- 32.6% are high risk for high body mass index/weight

Why is workplace physical activity important?
There are several advantages to workplace health promotion programs. They have the potential to reach large numbers as people typically spend almost one-third of their waking hours at work. These programs can be convenient and inexpensive for employees, thus increasing the opportunities for participation. Additionally, the workplace has built-in social support mechanisms that can increase the success of difficult behaviour changes such as exercising regularly or losing weight.

Physical activity improves mental health, helps manage stress, and is important for the health of muscles, bones and joints. In the workplace, increasing employee fitness levels has been associated with increased productivity, reduced absenteeism and reduced health care costs.

Possible Actions for Improvement:
- For greatest return on investment, offer initiatives targeted to those individuals who are at high risk and high readiness to change (based on results of aggregated health risk appraisal results).
- Work to move employees along the continuum of behaviour change.
- Measure and celebrate behaviour changes as well as subsequent health outcomes.
- Target program promotions to those groups (i.e. departments, locations) with higher risks will help to ensure high participation and a more efficient use of resources.
- Research and promote community resources and programs
- Offer individual risk identification and counseling for high risk employees to plan individualized physical activity programs
- Provide space onsite for health promotion programs, support groups, resources
- Offer subsidized fitness club memberships or provide access to fitness facilities and/or equipment on-site to reduce cost barriers for employees to become more physically active
- Provide showers and other amenities such as bike racks, walking trails, etc to make it easier t o be more active every day
- Hold social events that incorporate physical activities

- Conduct motivational campaigns to provide incentives to participate
- Ensure that work load and work schedule allows for the time required to participate in physical activity, even in short breaks (i.e. 15 minute blocks, 3 times per day).

2. Improving Employee Nutrition (Healthy Eating)

HHES Indicator: Individual Health Section: Nutrition (Daily servings of dairy, fruit, vegetables; whole grains; limit fats)

HHES Results
A great deal of the risk in the respondent group could be reduced through changes in attitudes and behaviour related to eating behaviours:
- 17.7% are high risk for poor quality of diet
- 48.9% of those at high/medium risk are in the preparation or maintenance stage of change

Why is healthy eating at work important?
Good nutrition is a key factor in leading a healthy lifestyle and reducing chronic illnesses. There are several advantages to workplace health promotion programs. They have the potential to reach large numbers as people typically spend almost one-third of their waking hours at work. These programs can be convenient and inexpensive for employees, thus increasing the opportunities for participation. Additionally, the workplace has built-in social support mechanisms that can increase the success of difficult behaviour changes such as eating a healthy diet or losing weight. Furthermore, the same health and well being factors that help to improve individual health status can also contribute to positive organizational outcomes such as reduced health care expenditures, increased productivity and increased organizational performance.

Possible Actions for Improvement:
- Ensure healthy food options are available at work in cafeteria and vending machines
- Provide incentives for healthy eating such as reduced prices for healthy food in cafeteria
- Offer healthy food options at staff meetings
- Ensure employees are provided with sufficient time and facilities for food storage and preparation
- Offer initiatives targeted to those individuals who are at high risk and high readiness to change (based on results of aggregated health risk appraisal results). This strategy may provide the greatest value, as these individuals are clearly at significant risk for future health problems plus they are ready to change their behaviour to reduce this risk.
- Make individual nutritional counseling for high risk employees
- Research and promote community resources and programs
- Provide nutrition education opportunities
- Provide opportunities for ongoing social support e.g. recipe exchanges, cooking clubs, etc.

3. Improving Stress Management

HHES Indicators: Individual Health Section – Stress at and outside work, Stress Symptoms, Feeling Blue. Organizational Health Section – Work life Balance (Job not stressful on personal life, Personal life not stressful on job), Workplace Stressors (Amount of work, Job control, Involvement in decision making)

HHES Results
Organizations have a significant opportunity to reduce both employee stress levels and the negative effects of overwhelming or poorly managed stress. This can be done by modifying the organization's climate, culture or policies so that demands are reduced, or by increasing employees' ability to manage their own stress more successfully. An approach to stress management that includes activities at both the organizational and individual level can result in improvements in employee health status and well-being, employee morale, organizational health costs and organizational effectiveness and performance.

Possible Actions for Improvement
- Work to reduce workplace and job level stressors. The HHES can identify key areas where the largest gaps between the employee's expectations of what their job should offer them and what currently exists at your organization. By focusing on these areas with the largest gaps, you will be able to address key stressors.
- Work to increase employee's sense of control over their job demands.
- Work to increase employee's perception of reward for the efforts that they make.
- Provide managers with education and training to recognize and deal with the signs and symptoms of stress, in both their employees and themselves.
- Provide safe mechanisms for employees experiencing workplace stressors to provide input into improving workplace conditions.
- Provide opportunities for employees to debrief from stressful situations and experiences.
- Implement and promote a comprehensive Employee Assistance Program (EAP).
- Provide stress management skills training to your employees based on stage of change interventions.
  - Education and awareness campaigns to increase awareness of stress and stress management
  - Research and promote community resources and programs such as the Canadian Mental Health Association
  - Provide stress, depression awareness and screening/self assessment materials
  - Provide individual counseling for high risk employees
  - Provide stress management educational and skill building opportunities in the workplace
  - Provide ongoing group education and support programs that encourage continued coping skill development and provide continued workplace support for these skills.

HEALTHY HOSPITAL INITIATIVE

APPENDICES

Healthy Hospitals
   OHA's New Wellness Initiative

By Melissa Barton

This winter, OHA's Disability Claims Management Services (DCMS) introduced a new Wellness Consulting service to help hospitals effectively improve their workplace environments and to help them steer their own employees towards the highest levels of personal wellness. The ultimate vision is that communities will look to their local hospitals as models of healthy workplaces and healthy employees.

It is evident that many hospitals are interested in creating a healthier work environment for their employees. "When workers are happy it benefits the hospital, it benefits the patients and it benefits the employees," says Elizabeth Vosburgh, Director of Human Resources for the Northumberland Health Care Corporation.

At the start of this new service, interviews were held with over 40 hospitals across the province to gather information on their current wellness programs and to determine what they need to implement a broad-based healthy hospital initiative. It was discovered that there was no shortage of good ideas, but that existing programs were often disjointed. The majority stated that they felt they had senior management and board-level commitment to implement a comprehensive healthy workplace program, however, the main barriers to implementation were cost, resources and knowledge of best practices.

As a result of this feedback, OHA's DCMS group teamed up with OHA's Hospital Human Resource Policy and Research Unit to sponsor a Healthy Hospital Pilot Group Initiative. The initiative has been positively received by the participants, who represent a cross-section of Ontario's hospitals. "This is a good way for hospitals to access wellness services and see what's available out there, particularly those hospitals who may not have access to existing services or resources," says Marian Timmermans, Wellness Coordinator at Lakeridge Health. "It's also great to have a neutral third-party running this initiative."

In June 2002, representatives from the 20 pilot hospitals from across the province met to learn more about OHA's Healthy Hospital Initiative. The pilot group's first task is to choose a standardized employee survey, which will measure employee health risk indicators, employee satisfaction and home/work-life balance indicators in a single tool. This survey will drive their workplace wellness strategies and ultimately allow them to benchmark with other hospitals. By developing a common process for implementing the employee survey and programs, hospitals can achieve better economies of scale and more effective results.

The survey will be delivered in late September to the pilot group's employees. The group will then meet again to discuss the results of the surveys and identify priorities for program implementations at both the hospital and provincial levels. This will allow hospitals to network with each other, share ideas and expand on further innovations. It will also allow hospitals to share the development costs and increase economies of scale.

"The research and results from the survey should provide information about programs that will work," says Ann Beaton, Director of Risk, Safety and Security at Joseph Brant Memorial Hospital. "We're thrilled to be part of this initiative. It's great that hospitals are all coming together to address these issues."

Vosburgh agrees. "This is an important initiative and we're very excited about it. I hope that we can improve the programs that we currently have and that we will become even more of an employer of choice because of our wellness initiative."

The outcomes of this Healthy Hospital Pilot Group will be shared with the rest of the province as the project unfolds. There are opportunities for all hospitals to provide feedback to this process either by contacting

Melissa Barton, OHA Wellness Consultant, at mbarton@oha.com or their regional representatives on the pilot group:

Region 1 – Timmins & District, Atikokan, MICS Group, Dryden Regional, Espanola
Region 2 – Northumberland, Renfrew, Deep River & District, Peterborough Regional
Region 3 – Lakeridge Health, Sunnybrook & Women's, Southlake, Bloorview MacMillan
Region 4 – Niagara Health System, Royal Victoria, Joseph Brant, Hotel Dieu St. Catharines
Region 5 – Hanover & District, South-Bruce Grey, St. Thomas-Elgin & District

"All hospitals are facing the same challenges of recruiting and retaining employees, as they are our number one asset. We must look at what employees really need, not just what we think they need," says Timmermans. "Leadership, the culture of the environment and how valued you feel as a person, not just an employee – these are important considerations for hospitals when looking at how to keep the people you have happy."

Melissa Barton BSc., MBA is a Wellness Consultant at the Ontario Hospital Association.

Pre-Survey Organizational Scan

Thank you for taking the time to complete this pre-survey organizational scan. This scan will help:
1. *Your Hospital Committee:*
    o understand your target market better and promote the survey and programs to your employees more effectively.
    o provide useful information with which to compare future organizational outcomes.
2. *The OHA Wellness Initiative:*
    o establish a point of reference before the employee survey and wellness program implementation process begins. This will be used to determine the overall effectiveness of this provincial initiative.
3. *The Survey Vendor:*
    o determine how you would like the data reported (i.e. reporting results by department) and how we can compare aggregate data across the different organizations.

Please provide the following supporting documents

a) **Organizational chart:**

b) **Organization Vision/Mission/Strategic Goals:**

c) **Human Resources Strategic Goals:**

Please provide the following information (for survey analysis purposes):

d) **Number of location/sites:** _____

e) **If more than one location/site, list site names:** _____

f) **Total Number of Employees:**
    o **Total # Full-time Equivalents (FTEs)** _____
    o **Full -Time**   _____
    o **Part -Time**   _____
    o **Casual**   _____

g) **Total # of Males**   _____

h) **Total # of Females**   _____

i) **Years of service - # of employees at the following years:**

less than 1 year _____   1-3 years _____   4-10 years _____   over 10 years _____

j) **Number of employees in the following employee groups (at the time of the survey delivery)**

	# employees
Nurse (RN only below level of supervisor,mgr)	_____
Registered Practical Nurse (RPN)	_____
Service (health care aides, PSW, housekeeping, maintenance, nutrition, etc)	_____
Paramedical (professional & technical staff in labs, diagnostic imaging, PT, OT, etc)	_____
Office/Clerical	_____
Supervisor/Manager/	_____
Senior Administration	_____

Baseline Organizational Outcomes:

1. **From OHA Absence Survey (as reported on most recent fiscal year-end report):**
   - Short Term Disability Rate (Average Number of Sick Days/Year/Eligible Employee) _____
   - Long Term Disability Rate (# of employees who have accessed LTD in the past year) _____

2. **From WSIB** (obtain from HCHSA benchmarking tool visit www.hchsa.on.ca/members/bench.html)
   - WSIB lost time injury rate/FTE _____

3. **Adapted from OHA Labour Market Survey (as reported on most recent fiscal year-end report)**
Please indicate which of the following retention initiatives/programs you are currently utilizing within your organization.

INCENTIVES/PROGRAMS	YES	Eligibility	
		All staff	Or Specific Employee Groups (please list)
Education and Training			
Formal bursaries/scholarships program	✓		*Only RPNs*
Formal bursaries/scholarships program	☐	☐	_____
Full tuition reimbursement	☐	☐	_____
Paid time off to take training	☐	☐	_____
Access to in-house skills training	☐	☐	_____
Access to out-sourced courses (on-site and off-site)	☐	☐	_____
Formal orientation	☐	☐	_____
Formal pre-ceptorship/mentoring program	☐	☐	_____
Work-Life Balance			
Child Care Services (referral, onsite, subsidies)	☐	☐	_____
Elder Care Services (referral, onsite programs, subsidies, personal leaves)	☐	☐	_____
Flexible working hours	☐	☐	_____
Job sharing	☐	☐	_____
Self scheduling	☐	☐	_____
Supportive Work Environment			
Harassment policy and programs	☐	☐	_____
Staff recognition programs	☐	☐	_____
Staff councils/committees (e.g. Quality, Wellness)	☐	☐	_____
24 hour cafeteria	☐	☐	_____
Other			
(Please specify): _____	☐	☐	_____

4. Other Recruitment and Retention Information

    a) Recruitment Costs: $ _____

                Definition: the amount of money expended from April 1, 2001 to March 31, 2002 for
                recruitment expenditures (job fairs/career days, advertising, direct recruitment incentives -
                relocation, transfer allowance, referral incentives- and recruitment agency costs, etc.)

    b) Total Number of Vacancies as of Last Fiscal Year-End: _____

    c) Retention (Calculation of Employee Turnover Rates)

	Employee Turnover Rates	Full-time Head-Count	Part-time Head-count	Casual Head-count	Total
a)	Total # Positions April 1 (start of most recent fiscal year)				
b)	Total # Positions March 31 (end of most recent fiscal year)				
c)	Total # Employees hired between Apr. 1 and Mar. 31				
d)	# Employee Separations between Apr.1, and Mar 31, 2002. (employees leaving your organization including resignations and terminations)				
e)	**Calculation of Employee Turnover Rate:** $= d / [(a + b)/2]$				

5. Grievance Activity:
- o Total Number of grievances filed (last fiscal year) _____
- o Top 3 reasons for Grievance Activity:
  - 1. _____
  - 2. _____
  - 3. _____

General Information:

Communication Methods to disseminate information to your employees.

    (please check all available methods)

Hospital Intranet ☐   Email ☐   Hospital Newsletter ☐

Bulletin Board ☐   Mailings ☐   Regular Staff Forums ☐

Other (please list) _____

If applicable, please note the last time you delivered an organization-wide employee survey?
    (year, month) _____

If the previous survey was delivered within the past 2 years, answer the following questions:

    a) <u>What did this survey address ?</u>

       ☐ Staff Satisfaction
       ☐ Employee Health Risk
       ☐ Work-Life Balance
       ☐ Quality Work Environments
       ☐ Other (please describe) _____

    b) <u>What was the employee response rate to the survey? (Choose one)</u>

       ☐ Less than 25% response
       ☐ 26-50% response
       ☐ 51-75% response
       ☐ Greater than 75% response

    c) <u>How would you describe the organizations' response to the results of the survey?</u>
    <u>(Choose one)</u>

       ☐ Did not communicate results or follow-up with any action plans.
       ☐ Communicated the results and action plans have been slowly developed.
       ☐ Communicated the results, action plans developed in a timely manner, involved
           employees in participative teams to drive processes.

    d) <u>What were the key recommendations for action from this survey?</u>

       a. _____
       b. _____
       c. _____

Current Wellness Initiatives (also from the OHA Absence Survey)

SECTION A. OVERALL HEALTHY HOSPITAL INDICATORS

1. Do you have a hospital vision and/or mission statement that acknowledges the value of healthy and engaged employees within the organization?   Yes ☐   No ☐

2. Do you have a formal employee "well-being" policy and strategic plan in place, which is linked with the organization's overall operational strategies/objectives? Yes ☐   No ☐

SECTION B. CURRENT WELLNESS PROGRAMS

Please answer the following questions based on the current program activities that you have in place. When asked to estimate the number of participants or costs over the past year, use fiscal year data (March 31 to April 1). If you do not collect quantitative data on your wellness programs, please try to provide your best estimation of the numbers.

1. Smoking Cessation Programs

Does your hospital offer a smoking cessation program for your employees? Yes ☐   No ☐

IF YES, please answer the following questions:

a) Please indicate the degree to which you offer a smoking cessation program to your employees.

☐	☐	☐
Basic Awareness	**Comprehensive Education**	**Individual Counseling**
(posters, bulletin board lunch & learns)	(Group Training, Organizational improvement processes encouraging smoking cessation)	(Personal Plan Development)

b) How many participants did you have in your smoking cessation programs last year? _____

c) How many participants have quit as a result of this program and have continued to quit for longer than 3 months? _____

d) Do you have a smoke-free work environment & policy?   Yes ☐   No ☐

e) Do you have an employee smoking cessation strategy and plan?   Yes ☐   No ☐

f) Do your benefits plans provide support for smoking cessation aids? Yes ☐   No ☐

g) How much would you estimate that your organization spent on smoking cessation programs and aids for your employees last year? $ _____

2. Active Living Programs

Does your hospital offer an Active Living (fitness) program for your employees? Yes ☐   No ☐

IF YES, please answer the following questions:

a) Please indicate the degree to which you offer an Active Living Program to your employees. (choose one level)

☐	☐	☐
Basic Awareness	**Comprehensive Group Program**	**Individual Counseling**
(posters, bulletin board lunch & learns)	(Includes Basic Awareness plus training & organizational improvement processes which encourage employee fitness)	(Includes Comprehensive Group Program plus personal plan development)

b) Do you have an on-site active living space or fitness center ?   Yes ☐   No ☐
   If yes, please indicate what is offered
   ☐   Facility is managed by professional staff
   ☐   Shower facilities & lockers for employees
   ☐   Exercise programs (indicate average price charged per class $_____
   ☐   Relaxation/meditation/stretching mats and space
   ☐   Outdoor walking/jogging trails/routes
   ☐   Other (please list): _____

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c) How many participants did you have in your active living programs last year? _____

d) Do you offer employees subsidies/preferred rates at outside local fitness facilities? Yes ☐   No ☐

e) How much would you estimate that your organization spent on active living/fitness programs for your employees last year? $ _____

3. <u>Stress Management Programs</u>

Does your hospital offer a Stress Management program for your employees? Yes ☐   No ☐

IF YES, please answer the following questions:
a) Please indicate the degree to which you offer a Stress Management Program to your employees.

☐	☐	☐
Basic Awareness	**Comprehensive Group Program**	**Individual Counseling**
(posters, bulletin board lunch & learns)	(Includes Basic Awareness plus training & organizational improvement processes which encourage employee resiliency)	(Includes Comprehensive Group Program plus personal plan development)

b) Do you offer an Employee Assistance Program (EAP)?   Yes ☐   No ☐

c) Your EAP provider is (please check the most appropriate response)….
   ☐   Internal
   ☐   External & Completely Confidential (Self-Referred)
   ☐   External but must be referred through Employee Health

   If you use an External EAP Provider, please indicate the company that you use: _____

d) What were your hospital's EAP utilization rates last year? _____ (users/total # eligible employees)

e) What were your total EAP costs last year? $ _____

4. <u>Healthy Eating Programs</u>

Does your hospital offer a Healthy Eating program for your employees? Yes ☐   No ☐

IF YES, please answer the following questions:
a) Please indicate the degree to which you offer a Healthy Eating Program to your employees.

☐	☐	☐
Basic Awareness	**Comprehensive Group Program**	**Individual Counseling**
(posters, bulletin board lunch & learns)	(Includes Basic Awareness plus Formal Group Training, Cafeteria Healthy Eating Campaign)	(Includes Comprehensive Group Program plus personal plan development with Dietician/Nutritionist)

5. <u>Other Wellness Programs</u>

a) Massage Therapy   Yes ☐   No ☐
- Cost to employee per minute of massage: $ _____ /min
- Cost to hospital per minute of employee massage: $ _____ /min
- Number of participants: _____

b) Ergonomics Program   Yes ☐   No ☐

c) Wellness Resource Library   Yes ☐   No ☐

d) Back Care Education   Yes ☐   No ☐

e) Organized Recreation/Sports   Yes ☐   No ☐

f) Health Screening (Blood Pressure, cholesterol, etc)   Yes ☐   No ☐

g) Others (please list):

<u>**Appendix C:**</u> **Employee Survey Promotional Materials**

<u>**Promotional Kit for OHA Healthy Hospital Initiative**</u>

The following are ideas to get the employee's excited about filling out their survey. The goals are to create excitement and awareness of what their feedback will be used for, to increase response rates for survey and to introduce the overall Healthy Hospital Initiative to them. You may need to reinforce why this survey is different from other ones the employees may have done in the past (and may have had poor feedback on); and need to create a sense of importance for this provincially standardized survey. Make this effort to fill out the survey fun and worth their time.

Ideas for Promotion:
- Posters/Flyers (see attached examples)

- Templates for newsletters (see attached examples):

- Letter to unions and professional groups asking for their support: (see attached example)

- Power point presentations at meetings: for staff, for management, for unions (5-10 minutes)

- Electronic reminders (draft emails)

- Survey Drop Boxes

- Ideas for incentives – draw prizes, events

- Local Media Releases

- Cards

- Buttons, hats, pens for wellness committee members who are handing out surveys.

- Employee Response Thermometers

Imagine Your Ideal Workplace Environment....

What does it look, sound and feel like?

Does it make you feel healthier and more fulfilled by working there?

[Our hospital - or insert name] is committed to improving our workplace environment. To begin this journey, your feedback is needed to help your Wellness Committee design and implement effective initiatives.

The Healthy Hospital Employee Survey

(insert Dates)

It's your chance to have a say in our Staff Wellness Initiatives!

Contact _____ at Ext. _____ for more information.

Sample Articles for Employee Newsletters, email bulletins, etc.

Introducing Our New Healthy Hospital Initiative!

A healthier workplace and healthier employees…these are the goals of our new Healthy Hospital Initiative. Since most of us spend more than 1/3 of our waking lives at work. It makes sense to choose to do whatever we can to make the most of our lives at work. The World Health Organization describes health "as the extent to which an individual or group is able to realize aspirations and satisfy needs; and to change or cope with the environment". We believe then that an effective workplace wellness program needs to deal not only with the physical aspects of health, but also with its emotional and social aspects.

[Insert quote from CEO, something that shows how commitment to following through]. The first step to implementing a successful workplace wellness initiative is to ensure that we have senior level commitment to developing and acting upon a comprehensive strategy to improve the health of our organization and our employees. It is clear that we have succeeded in this first step!

The second step is to organize a committee who will be responsible for gathering input from all employees and for implementing programs to address the needs that have been identified. We have succeeded in this second step as well! Here's the list of your committee members, please feel free to contact any one of them if you wish to share any thoughts or ideas. We will also be looking for anyone interested in helping out with program implementations. [insert list of committee members]

We are now at our third step on this journey towards improved organizational health. Now we need everyone's input into answering the basic questions of what do we need to do in order to create a healthier workplace and what are our priorities. The most effective way for the committee to gather this information is by having every employee fill out a survey. The survey that we will use has been developed by the Ontario Hospital Association and will also be delivered to various other hospitals across the province so that we can learn from other's experiences as well. It is the first survey to comprehensively address our health, our satisfaction with our jobs and our ability to balance our work lives with our home lives. It should give us some great ideas of where we can improve our lives and will help us to decide on which programs to focus our attention on first.

Your wellness committee members and/or your manager will hand you your survey during the week of October 21st. After you fill it out, you can either return it to the Healthy Hospital Survey Drop Box Location (in the Employee Health or Human Resources office) or you can simply put it in the mail as the return postage has already been paid. If you have completed your survey, you qualify to win our "Thanks For Your Wellness Ideas" draw prizes (obtain your ballot from the Survey Drop Box Location).

Thank you for taking the time to participate in this survey, we truly look forward to hearing your ideas on how we can make our work lives healthier!

Sample Letter to accompany employee survey:

Dear Employee:

You have been hearing and seeing a lot lately about the new Healthy Hospital Initiative and our plans to introduce a variety of wellness programs into our hospital. Enclosed is your copy of the Healthy Hospital Employee Survey, which asks you a number of questions about your work environment, your health needs and habits, your work-life balance and most importantly, any ideas you may have about how we can improve your working life.

Participation in this survey is voluntary but we would really appreciate your feedback. The more employees we can get to respond to this survey, the more we will understand the needs of our entire employee population and we will be able to implement the most appropriate and effective health promotion and workplace improvement programs possible.

Our CEO, the senior management staff, and your union leaders are committed to the success of this initiative and your Wellness Committee has been given the time and responsibility to plan and implement programs that will address the needs that you identify as priorities during this survey process.

The results will be kept strictly confidential, as a neutral outside company (Brock University's Workplace Health Unit) will group together your individual responses with at least 7 other surveys from a similar employee group or program. Please do not write your name anywhere on the survey. When you have completed it, please seal it in the pre-addressed envelope enclosed and either drop it in one of the "Healthy Hospital Survey Drop Boxes" located in Employee Health and Human Resources offices, or you can drop it in a regular mail box. No postage is required as it has been pre-paid.

The Survey Drop Boxes will be collected on November 1st and sent on to Brock University's Workplace Health Unit. They will tabulate the results for us and send us a report that highlights our main opportunities for improvements. Our hospital's results will also be shared with the OHA to identify provincial-wide best practices and opportunities where we can share program costs with other hospitals across the province.

Once we have received our report, the Wellness Committee will develop a comprehensive program plan to address your identified needs. We will continue to communicate throughout the program planning and implementation stages. We welcome any continued input or involvement from you as we work together to improve our own health and the health of our organization.

We would like to take this opportunity to thank you for taking the time to participate in this important survey.

Sincerely,

Healthy Hospital Employee Survey
(©HHES)

Creating high quality organizations and supporting employees to improve their own health and well-being is more important than ever before.

The Ontario Hospital Association (OHA), in partnership with Brock University's Workplace Health Research Unit (WHRU) developed the Healthy Hospital Employee Survey (©HHES) to collect information from health care employees in three key areas:

Organizational Health – quality of work life and key organizational outcomes

Employee Well-Being – health conditions, risk behaviours and readiness to change

Employee Opinion – overall wellness culture and interest to participate in improvement efforts

The ©HHES allows your organization to set priorities and address issues related to the quality of the work environment and individual employee health attitudes and practices.

Survey Features

- Includes the ability to underline benchmark to other health care organizations that have used the ©HHES

- Delivered via web-based technology and/or in a pen and paper version

- Takes about 30 minutes to complete

- Includes a section for employees to provide comments and make recommendations for change

- Allows for internal benchmarking between sites, departments, work groups, job types, etc.

- Includes measures of perceived importance of each issue to the respondent's quality of work life

- Includes a unique, anonymous identifier which allows for the valid tracking of change over time

- Can be customized to meet your organization's culture, language and structure

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The ©HHES Report

➢ A clear and easy to understand report highlights results in colour coded charts and graphs

➢ Celebrates strengths and isolates potential areas of concern and their underlying causes through a focused analysis on the feedback information

➢ Provides evidence-based recommendations for action

➢ Report may be customized to include sections for specific group comparison analyses

➢ Internal benchmarking can be provided on sub-groups within an organization, sub-group comparisons with the organization as a whole, and by successive ©HHES surveys

➢ Comparisons can be provided against "best practices" in the ©HHES database

➢ Anonymous linking is provided to ensure proper benchmarking from year to year

How can information from the ©HHES be used?

Management and employees in your organization can work together to utilize the results to:

☑ Achieve higher levels of employee satisfaction, productivity and health

☑ Clearly identify your organization's greatest areas of strength and greatest opportunities for improvement

☑ Identify a contrast between the 'current' and the 'desired' outcomes

☑ Focus attention and resources on what needs to be done first

☑ Encourage creative solutions through strategic decision-making and action-planning

☑ Track the effectiveness of actions that you have taken

☑ Plan strategically and evaluate outcomes

☑ Implement as measures in a truly "Balanced Scorecard" approach

☑ Identify your best practices that you can share with other health care organizations

To get more information about the ©HHES, contact:
Workplace Health Research Unit
Brock University
Tel: 1-800-726-4082
Web: www.whru.ca
Email: wellness@brocku.ca

Smoking Cessation Programs

A 2001 survey of Ontario Hospitals' employee health programs showed that 37% of 89 survey participants are currently offering smoking cessation programs to their employees, and 16% are planning to introduce a smoking cessation program in the future.

The costs of smoking to our personal health are well known. A report from the Ministry of Health notes that in Ontario, smoking claims 33 lives every day. (Ref: Tobacco – Sounding the Alarm. Health Canada, 1996). The report also notes that smoking costs the province almost 4 billion dollars each year in health care expenditures and lost economic output. The costs of smoking in the workplace provide added incentives for our budget-conscious hospitals to provide environments that encourage and support our health care workers to quit. Ultimately, if hospitals are to become centers of health promotion, they need to take a leadership role in the cessation of smoking.

Some Research to support workplace smoking cessation programs:
1. Smokers are more prone to low back pain than are non-smokers when they are doing work that involves heavy lifting (such as patient care). Ref: Erikson et al, 1999.
2. Smokers average two to three more days of absenteeism per year than non-smokers. Ref: Bertera, 1991.
3. Adult heavy smokers use the health care system at least 50% more than non-smokers. Workplaces pay for most of the extra cost through their disability and extended health benefit premiums. Ref: Fielding, 1982.
4. The annual cost per smoking employee compared to a similar non-smoking employee was $2,565 (based on 1995 dollars). This figure was based on $230 for increased absenteeism, $2175 decreased productivity, $75 for higher life insurance premiums and $85 for construction and maintenance costs of smoking areas. Ref: Conference Board of Canada, 1997.

If you need more evidence of the importance of offering a supportive environment for your hospital employees to quit smoking, then please browse through the websites listed in the information resources of this handout.

If your hospital is ready to accept the challenge of creating a healthier hospital (with healthier hospital employees), and you have senior management commitment to follow-through with the program implementation, then read on….

<div align="center">**HOW TO BUILD YOUR HOSPITAL'S SMOKING CESSATION PROGRAM:**</div>

1. Gather your baseline smoker profile:

From your hospital's employee health risk survey (i.e. Individual Health Section of the OHA Healthy Hospital Employee Survey) or pre-employment health screen data, compile a health profile of your employees. Find out how many employees currently smoke, how much they smoke and how many are contemplating quitting. In 1995 the Ontario Tobacco Research Unit found that 22% of medicine and health professionals in Ontario smoke daily (compared to the overall adult population rate of 25%). How does your workplace compare to this Ontario statistic?

Note the demographics of your hospital's smokers. For example, given that a majority of health care workers are female, you may consider taking a woman-centred approach when designing your health promotion programs. Research has shown that factors often associated with high smoking prevalence include "low

income, lone-parent status, low levels of education, isolation, lack of social support, dual responsibilities of work and family, family violence, stress and low self-esteem…. Though social disadvantage affects men's smoking as well, the specific experiences of disadvantage often differ by gender (e.g. women are more likely to be low-income single parents or informal care-givers)." *(Ref: Health Canada, Women and tobacco: Lessons Learned from the Tobacco Demand Reduction Strategy, 1999)* This reference also speaks to the need to understand the multiple factors that may be barriers to your employees quitting. This will help you to design a program that deals with smoking in a broader context.

Also note the broader environment in your community and your workplace culture. Do these environments support or distract from a workplace smoking cessation program? What other programs are being offered in your healthcare facility or community?

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2. Design a Multi-Year Program Plan:

Based on your evidence, design a multi-year plan to address this health risk. Quitting smoking is a difficult decision to make and an even more difficult thing to accomplish for the long term. Five out of every 6 of Canada's current smokers have attempted to quit for at least one week at some point in their lives. The most successful programs realize that quitting is a lengthy process, which will likely include multiple relapses. This is why it is important to ensure that this smoking cessation plan fits into your comprehensive multi-year healthy workplace plan and successes along the path to becoming totally smoke-free should be recognized.

Building your program strategies around *Health Canada's Stages of Behaviour Change Smoking Cessation Model* is recommended. The following table shows how you might target program interventions based on employees' reported stages of behaviour changes.

Stage of Change	Behaviour Change Characteristics	Suggested Program Interventions
Stage 1	Not thinking about quitting	Smoke Free Work Environment Policy
Stage 2	Thinking about quitting and deciding to quit	Education/Awareness Campaign to increase awareness of risks associated with smoking
Stage 3	Getting ready to quit	Smoking cessation programs – onsite support programs and/or benefit programs covering aides, outside programs
Stage 4	Quitting	Consider offering cessation incentives
Stage 5	Staying quit	Ensure you address individual needs to sustain efforts

Get together a team (council, committee) of employees who are interested in providing input into the planning of your smoking cessation program and then, together work through the following steps…

Planning Step 1: **Set reasonable smoking cessation program goals**. It is generally accepted that approximately 10 to 20% of smoking cessation program participants will successfully quit for more than 1 year. You may also want to set your goals on leading indicators such as the percentage of your smoking employees that are moving through the stages of behaviour change on their way to quitting. If your health risk appraisal (i.e. HHES) reports on the stages of change that your survey respondents are in, this gives you a good idea of where you might begin your programs and how to set your program goals. With this type of information from your survey, you could set targets based on the number of people moving towards a lower risk category. Finally, define the time it will take to achieve these goals.

Planning Step 2: **Workplace Smoking Policy.**

Ensure that your workplace smoking policy is aligned with your corporate vision and goals and that your hospital's culture can support this policy. To what extent is your hospital capable of restricting smoking? Are you going to completely ban smoking on the premises or allow for a designated smoking area, or allow smoking outside? The maximum level of smoking permitted at a hospital is outlined in the **Ontario Tobacco Control Act, 1994…**

> *…where smoking is prohibited in all hospitals except in special areas designated for smoking (as long as you are not a children's hospital). This Act also states that smoking can be permitted outside but only at a distance of at least 9 metres from any entrance. Exceptions to this Act are also offered for Aboriginal hospital residents to use tobacco for cultural or spiritual purposes. MOH inspectors can fine individual offenders (up to $5,000 for repeat offences), and hospitals (up to $75,000) for failing to ensure that your designated smoking areas meet the Tobacco Control Regulations.*

Generally speaking, workplace smoking policies that ban smoking on the premises are considered a reasonable and legitimate business interest and have been upheld in a wide number of arbitrations. It has also been upheld that employees have no right to require the hospital to permit them to smoke while at work. However, employers wishing to completely ban employee smoking also have to consider whether tough anti-smoking rules discriminate against heavy smokers, and if so, what forms of accommodation will be required.

In summary, when creating your hospital smoking policy, consider the following points:
- Ideally, if hospitals are truly to become Centers of Health Promotion, we need to encourage a smoke-free environment. However, it must be recognized that each hospital may face different degrees of change to get to this healthy state. Perhaps you need to consider a policy that will remove designated smoking areas over time.
- What will you do to support your employees and patients to either quit smoking or cope with their withdrawal symptoms while in the hospital?
- It is important that your policy be applied equally to all persons in the hospital (staff, patients, visitors, physicians).
- Ensure that the team that is creating this policy is well represented to ensure a successful implementation and compliance with collective agreement provisions and applicable legislation.

> **Innovative Practices Links (visit www.oha.com/wellness - click on Knowledge Exchange (password required)**
> - Hospital Smoking Policy – Atikokan General Hospital

Planning Step 3: Comprehensive program needs analysis

In this planning stage, work through the enclosed models to ensure that you are providing a comprehensive approach for optimal success.

- OHA Healthy Hospital Model – smoking cessation program planning logic
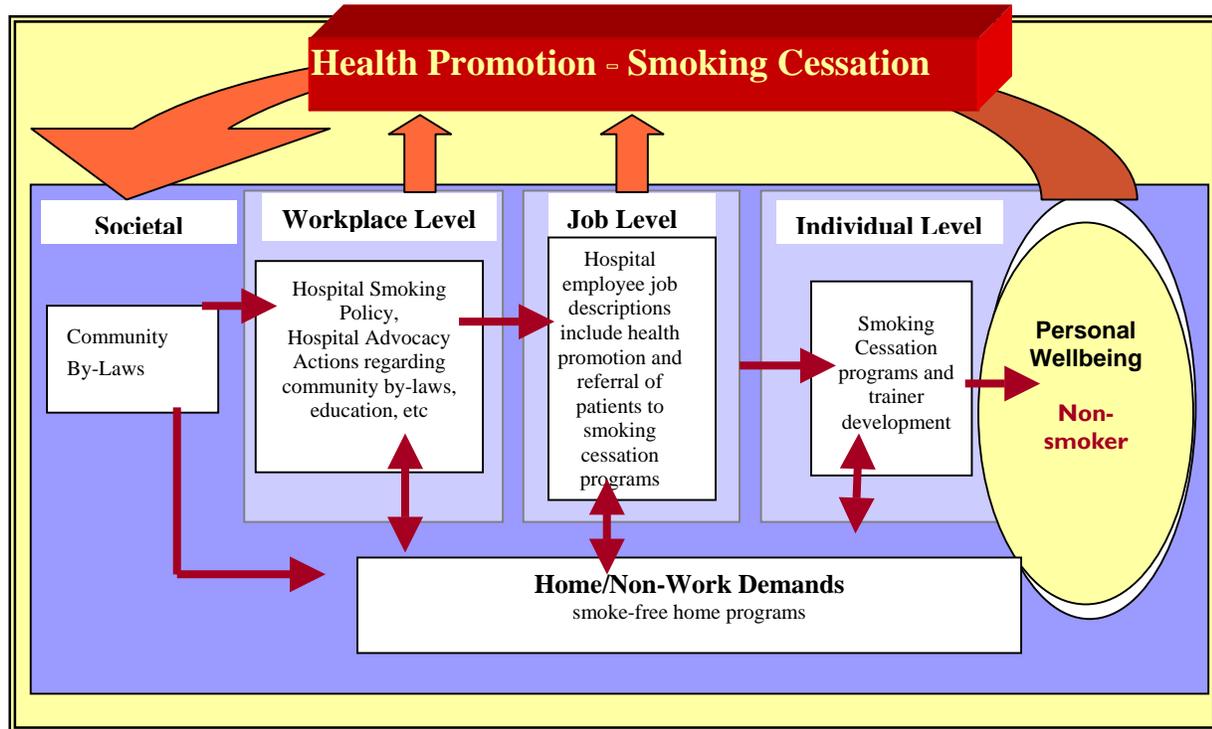
Planning Step 4: Decide who will be held accountable for the various program tasks.

Who will champion the program for your hospital? Who will deliver and manage the program? Will you use an outside company or internal resources to deliver the smoking cessation program to your employees? Will you also provide smoking cessation programs to your patients and your community? It is a good idea to have a Senior Management Champion who will regularly update the Senior Management Team on the progress and needs of the smoking cessation program. This champion will also offer visible leadership and support for staff to believe in this important health promotion program.

Innovative Practices Links (visit www.oha.com/wellness)
- Smoking Cessation Program Plans

3. Smoking Cessation Program Resources:

After you have assessed where your hospital is starting from and where you want to go over the next few years, collect further information on resources that are available to help assist with the implementation of your plan. There are many places you can go to for free (or relatively inexpensive) promotional and educational materials and knowledgeable people to help with the support functions required to make your smoking cessation programs more successful.

Internal Hospital Resources:
- Respiratory Therapists, Mental Health Professionals (Behavioural Therapists, etc), Cancer Centre Professionals, Ambulatory Care and Community Health Units, Health Promotion Specialists, EAP providers, Occupational Health Nurse/Physician, Human Resources/Benefits Specialists, and many others. You may also want to include peers who have successfully quit in the past and are interested in sharing their experience or offering support to their peers.

External Resources:
- **Local Public Health Units** have resources & materials available to help you get started or to provide some additional incentives to your existing smoking cessation programs. They are often the point of distribution for a number of government funded health promotion initiatives (such as Heart Health) and are a good place to start. You may be able to obtain some funds for community group activities that encourage healthy living activities.
    Website: www.gov.on.ca/health/english/contact/phu/phuloc_mn.html

- Some years, the **Ministry of Health & Long Term Care** may fund a **Quit Smoking Contest** (usually kicked off in the month of February). This contest is run out of the Public Health Units and offers prizes for employees who have taken on the challenge to quit smoking. The one-year follow-up from the year 2000 contest showed a quit rate of 31% or nearly 4,000 people. Free brochures, posters, informational packages and contest sign-up sheets can be obtained.

- **Health Canada** typically fund tobacco enforcement activities and transfer other funds to the provincial-level for their prevention activities. Some prevention information, the *National Strategy On Tobacco* can be found at their website. This site also contains useful costing formulas for building your business case.
    Website: www.hc-sc.gc.ca/main/hppb/tobaccoreduction
    Also: www.hc-sc.gc.ca/hppb/cessation/index.html

- **Cancer Care Ontario & Canadian Cancer Society** has an excellent *One Step at a Time* self-help program for smokers and the people who care about them. They also have a *Smokers' Helpline (1-877-513-5333)*. **Website:** http://66.59.133.166/tobacco/index.html

- **Ontario Lung Association: Website: www.sk.lung.ca/smoking/**

- **The National Clearinghouse on Tobacco and Health (NCTH)** is a central source of information with a collection of pertinent documents on issues related to tobacco. **Website:** www.ncth.ca/NCTHweb.nsf

- **The Program Training and Consultation Centre (PTCC)** provides expert advice, technical support and training workshops to assist communities in implementing effective tobacco use reduction programs. www.ptcc.on.ca

- **World Health Organization (WHO)** has information on international best practice strategies for tobacco reduction. http://tobacco.who.int/index.cfm

- **Employees' Family Physicians and other health care providers**

- **For-Profit Smoking Cessation Program providers:**
  - **AMS – Addiction Management Systems Inc. Tel: (416) 927-0370**
  - **Arizona Cessation Training & Evaluation Program: www.tepp.org/actev/index.html**

- **Local city/town councils, Community Health Centres, restaurants that are smoke free**: in return for some promotional activities through your hospital smoking cessation program, they could offer prizes which could be awarded as incentives to joining or changing their behaviours.

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4. Building Momentum

When polled confidentially, a number of employees may identify a need for a smoking cessation program, but when it comes time to join the program, no one shows up. Sound familiar? You may be able to overcome this challenge by understanding your target market better. By identifying which stage of quitting your smokers are at, you can gear your promotions to appeal to them. Check out Health Canada's online "Getting Smoke-Free: An Information Kit for Community Organizations working with women" for some useful intervention ideas for each stage of change.
Website: www.hc-sc.gc.ca/hppb/cessation/resources/professional/getting_smoke_free/toc.html

The use of participatory adult education principles when designing and promoting your smoking cessation programs is more likely to be seen as acceptable and relevant than a "top-down" approach. This is particularly true for women participants where shaming and blaming strategies decrease self-esteem and will not encourage women to participate.

Key smoking cessation marketing dates:
- **World No Tobacco Day: May 31st (every year).**
- **National Non-Smoking Week: Jan 18-24, 2004 (Weedless Wednesday on 21st)**

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5. Maintaining Momentum

Getting smokers to take the first step to joining a smoking cessation program is only the first step. Since we have recognized that smoking cessation is a lengthy process, we need to ensure that we build our programs to deal with the longer term challenges to remaining smoke free. The relapses that many smokers experience during their quitting process should be considered an important part of the learning process (as they can use the knowledge and skills gained by these attempts and relapses to finally succeed).

Effective ways of helping women of all ages to quit smoking: (Health Canada)
1. Include strategies to build confidence in making changes and to cope with withdrawal.
2. Apply the Stages of Change model (which can increase the confidence and skills of women who are in the process of quitting smoking).
3. Recognition of multiple definitions of success is important.

Ongoing Support: Group Social Support versus Individual Counselling:
Smoking cessation programs should offer both types of support if possible. Group support can take on a number of forms. For example, group programs led by peers with previous smoking experience appear to be

especially valuable. Such groups allow participants to benefit from others' experiences, share support and practical solutions and build support networks.

The most successful cessation programs recognize that individual smokers have to move through their own personal stages of quitting on their own and therefore, your support programs need to be delivered in a personalized manner. These individuals could tap into personalized programs through self-help services or through one-on-one counselling sessions. It is widely recognized that even a brief intervention by any health professional significantly increases the cessation rate and the smoker's likelihood of quitting increases with the message being delivered from a number of health care professionals from a variety of disciplines. Therefore, the more our health-care community can work together in providing assistance to our staff and patients to quit smoking, the more successful we will be.

6. Advanced Programs – Healthy Hospital Centre of Excellence

Hospitals that have been able to transform themselves into a recognized centre of excellence with respect to smoking prevention and cessation are encouraged to share their successful journey with others. A Healthy Hospital Centre of Smoking Cessation Excellence will be one where…

- No smoking occurs on the entire hospital property,
- Other workplaces in the community come to learn how to implement successful smoking prevention and cessation programs for their employees and their families.
- Patients and their families in the community come to learn about how to quit smoking (or how to help support their friends or family members when quitting).
- Smoking prevention and cessation education opportunities are explored with local schools or youth organizations.
- Hospital and community smoking cessation and prevention efforts are recognized and celebrated.

7. Share how well you are doing:

If your hospital participates in a smoking cessation initiative, we ask that you track the number of employees who have signed up and the number that have quit as a result. A summary of your program details would also be a great thing to note and pass onto the rest of your health promotion peers. This information will be valuable when looking for ways to further improve employee wellness initiatives and will form the basis for provincial data on various smoking cessation initiatives.