A Case Study of the Development, Implementation, and Evaluation of a University Employee Wellness Program

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The problem is rising annual health care costs, and the challenge for higher education institutions to implement, support, and evaluate a comprehensive worksite wellness program.

Why is this a Problem?

- Although 50% of health care expenditures have been documented to be lifestyle related, organizations are still taking a reactive approach to the problem. (Clark, 2008)

- 6.9% of employers offer all components of a comprehensive worksite wellness program. (Linnan et al., 2008)

- There is a lack of data supporting worksite wellness program implementation and health–related policies. (Brownson, Haire-Joshu, & Luke, 2006; Khubchandani & Jordan, 2009; Meyer, Schlecht, & Sherman, 2010)
Ecological Model for Health Promotion

(www.acha.org/HealthyCampus/implement.cfm)
Purpose of the Study

The purpose of this study is to explore the extent to which a worksite wellness policy directs the implementation, evaluation, and university support of a comprehensive and sustainable worksite wellness program.
Definition of Terms

- Comprehensive Worksite Wellness Program
  - Incorporates all of the 5 key elements outlined in *Healthy People 2010*
    - Health education
    - Links to related employee services
    - Supportive physical and social environments for health improvement
    - Integration of health promotion into the organization’s culture
    - Employee screenings with adequate treatment and follow up
      (Linnan et al., 2008)

- Worksite Wellness Program
  - Organized program in a worksite
  - Intended to assist employees and their families in making voluntary behavior changes
  - Includes: reduce health and injury risks, improve health consumer skills, enhance individual productivity and well-being
    (Wellness Councils of America, 2006)
Methodology: Qualitative Case Study
How does a university develop and implement policies and procedures, support, and conduct evaluation to sustain an effective comprehensive worksite (employee) wellness program?
Subquestions

1. What guiding factors led to the worksite wellness policy development and implementation?

2. How was the comprehensive worksite wellness program implemented at the university?

3. How is the comprehensive worksite wellness program evaluated?
The selected university met the following criteria:

- Based in the United States
- Classified as a 4-year, public institution according to the Carnegie classification system
- A developed and implemented worksite wellness policy
- A comprehensive worksite wellness program
- Willing to participate in the study
Wellness University

- Public, residential university located in the Southeast
- Large institution with over 15,000 students
- Over 2,000 employees

Research participants:
- Research and Assessment
- Human Resources
- Office of the Provost
- Office of the Chancellor
- Student Affairs
- State Office

Employee Status at University
- Administrators, Non-teaching faculty, Staff
- Ranged from 8 months to 33 years
### Qualitative Methodology: Case Study

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<td>• Faculty &amp; Staff</td>
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<th>Observation</th>
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<td>• Worksite Wellness Program Areas</td>
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Methodology: Data Collection

- Document Analysis
  - Worksite Wellness Policy
  - Strategic Plan
  - Mid-year Program Report
  - Worksite Wellness Website
  - Wellness Profile (screening instrument)

- Observation
  - Campus Recreation Center
  - Employee Fitness Class (1 hour)
Methodology: Data Collection

- Personal Interviews
  - Target participants
    - Campus administrators ($n=7$)
    - Benefits personnel ($n=1$)
  - Purposeful sampling and snowball sampling
Methodology: Data Collection

- Focus Groups
  - Target participants
    - Group 1: Worksite Wellness Leadership Team \((n=8)\)
    - Group 2: Policy Implementation Committee \((n=3)\)
    - Group 3: Current University Faculty & Staff \((n=5)\)
    - Group 4: Current University Faculty & Staff \((n=5)\)
    - Group 5: Current University Faculty & Staff \((n=6)\)
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Results: RQ 1

RQ 1
• What guiding factors led to the worksite wellness policy development and implementation?

Analysis
• Worksite Wellness Policy Document
• Focus Groups
• Interviews

Themes
• State Worksite Wellness Policy
• Campus Support
RQ 1: State Worksite Wellness Policy

Policy Development & Implementation
- All state agencies
- “Modify work environments and policies” – Policy document
- “An attempt to stem the bleeding” as the state systems was losing “several hundred million dollars” – Leadership Team
- 4 initiatives (a) nutrition, (b) physical activity, (c) tobacco use cessation, (d) stress management

State Health Plan
- Self-insured
- Coverage for over 500,000 employees
- 2008 health plan report noted a decrease in healthy plan members over the past decade
- Disconnect between state offerings and intended outcomes from universities
- Lack of access to university-specific health data
RQ 1: Campus Support

Resources
- Human Resources
- Financial Resources

Support
- State
  - “State support is waning” – Leadership Team
- Administration
  - Video from Chancellor
  - Incorporated into the Strategic Plan
  - Advisory Board appointed by Chancellor
Results: RQ 2

RQ 2
- How was the comprehensive worksite wellness program implemented at the university?

Analysis
- University worksite wellness website
- University strategic plan
- Focus Groups
- Interviews
- Observation

Themes
- Implementation of Worksite Wellness Programs
- Campus Support
RQ 2:
Implementation of Worksite Wellness Programs

Employee Wellness Programs
- Comprehensive Worksite Wellness Program (Linnan et al., 2008)
- Health education
- Links to related employee services
- Supportive physical/social environment for health improvement
- Integration of health promotion into organizational culture
- Employee screenings with adequate treatment and follow-up

Resources
- Human Resources: Leadership Team
- Financial Resources: Grants & University Funding
- Campus Space: Recreation Center

Communication
- Strategies include: Webpage, Facebook, Flyers, Campus e-newsletter
- Need for unified branding
- Discussed need for one location for all wellness resources

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RQ 2: Campus Support

**Stakeholder Support**
- Wellness Partnerships
- Administration Support
- Supervisor Support
- Faculty & Staff Support

**Visibility of University Support**
- “…leadership by example” – F/S #2
- Behind the scenes support rather than visible
- “We have got to get the Chancellor more visible” – Leadership Team

**Culture of Health & Wellness**
- Guided by the strategic plan
- Organizational factors of influence per the Ecological Model for Health Promotion
- Currently: More individual level interventions versus environmental/policy approaches – Leadership Team
### Results: RQ 3

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<th>RQ 3</th>
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<td>- How is the comprehensive worksite wellness program evaluated?</td>
<td>- Worksite Wellness Policy</td>
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RQ 3: Evaluation

Program Outcomes

- Policy Guideline: Measurable wellness program objectives
- Primarily participation numbers
- Lack of data from the state
- “Less ability to see immediate results on reductions than some other models” – Susan
- Use of wellness profile to collect university-specific data
- Employee morale/sense of belonging

Decision-Making

- Outcomes from surveys used for designing workshops, information sessions, structural changes.
- Need to make case to administration program can have a measurable effect (e.g. pilot program)
- Communicate studies that document the benefits of worksite wellness.
- Wellness profile now reaching ‘critical mass’ – Leadership Team
Summary of Findings

- *Disconnect* between *state worksite wellness policy* and *university worksite wellness programs*
- *Limited resources* for the worksite wellness program
- Employees have a *general awareness* of the worksite wellness programs
- Perceived administrator support, but the *support is not visible*
- *Inability to retrieve university–specific health care data* is a barrier to program evaluation
Conclusions

- Lack of support for worksite wellness programs from the state and supervisors

- University support for worksite wellness programs is not visible

- Environmental/organizational-level strategies have not yet been fully implemented

- Lack of university health care data
Limitations and Delimitations

Limitations

- Availability and willingness to participate: administrators, wellness personnel, faculty, staff, and benefits personnel
- Availability of documents
- Locations accessible for observation
- Researcher bias and subjectivity
  - Member check

Delimitations

- University criteria
- Interviews/focus groups will be limited to administrators, faculty, staff, wellness leadership team, worksite wellness policy implementation committee, and benefits personnel.
Implications

- More support is necessary from the state in terms of policy support, more defined guidelines, and follow-up.
- Supervisor support needs to be more consistent throughout campus.
- There is a need for more visible support from the university/administration.
- Environmental/organizational-level strategies need to be implemented to support individual level strategies.
- University-specific health care data are necessary to determine program outcomes in terms of health care expenditures and employee health status.
Additional Information

- Christie Stewart, Ph.D.
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- Full dissertation available on ProQuest (Dissertations & Theses):

  A case study of the development, implementation, and evaluation of a university employee wellness program
Questions