Hospital Wellness Toolkit
A Component of the Caring for the Caregiver Initiative

MASSACHUSETTS Health & Hospital ASSOCIATION
Introduction

Many hospitals, health systems, and physician practices currently have what can be termed generally as “wellness” programs – that is, initiatives that attempt to create a healthier and happier workforce that will, in turn, help healthcare workers be better able to handle the stresses of their jobs and provide improved care to the patients they serve. Other facilities may be on the path to developing such programs or are hoping to revitalize the wellness programs they already have in place.

Such programs have taken on increased importance with the arrival of the COVID-19 pandemic that has placed unprecedented challenges on caregivers.

There is a wealth of information already existing from employer groups, state agencies from across the U.S., and from other sources to assist hospitals with their wellness programs.

However, the healthcare community faces some unique challenges in creating such programs. The enormous stress of healthcare jobs resulting from life-and-death situations, the tight margins and declining reimbursements that many hospitals face, and the long-standing hierarchical culture of the medical community all conspire to make implementing wellness programs difficult.

This hospital wellness toolkit provides the essential six steps for creating a wellness program and shows how these six steps apply to three sectors of the healthcare environment, or:

INDIVIDUALS, TEAMS, and LEADERSHIP.

While wellness programs often focus on solely improving participants’ health or mental wellbeing, this toolkit is designed to help hospitals and health systems develop programs that encompass four core pillars of the Caring for the Caregiver initiative. That is:

- Workplace Safety
- Employee Wellbeing
- Employee Engagement
- Workforce Development and Deployment of Staff

By keeping in mind the four core elements of Caring for the Caregiver when designing programs or processes of work, the success of each individual component is more assured. That is, a worker can feel praised for their efforts and receive regular recognition for their efforts, but if they don’t feel safe at work the overall benefit of the wellness program will fall short. Similarly, if an employer offers incentives to help a worker’s physical health, but still fails to reach out to offer praise and recognition, workplaces may not improve.

And an overriding theme of a healthcare-focused wellness toolkit is the great importance of leading the effort from the top down, or ensuring that the leadership of the hospital “walks the walk”, is seen as caring, and creates a “culture” of wellbeing throughout an organization.

Although this toolkit was developed with information specifically from and for hospitals, other healthcare organizations across the continuum can likely adopt many of its recommendations.
The Business Case for Wellness Programs

Approximately 26% of Massachusetts hospitals have negative operating margins, and 52% of them have operating margins that are less than 3%. Wall Street bond rating agencies generally agree that maintaining a 3% margin is necessary to be considered financially “healthy” and to support capital reinvestment. Thirty-six percent of Massachusetts hospitals have declining operating margins. (All the figures are from Fiscal Year 2019.) Wages and salary of the workers hospitals employ account for approximately two-thirds of a typical hospital’s expenses.

As discussed in the 2018 Press Ganey Nursing Special Report, high levels of nurse turnover lead to:

- decreases in the quality of patient care;
- increased stress levels;
- burnout; and
- increased costs for health systems.

Health systems then pay recruitment and replacement costs for nurses and receive lower reimbursement rates for decreased quality of care. The average cost of turnover for a bedside RN is $52,100 and ranges from $40,300 to $64,000, costing the average hospital $4.4 million – $6.9 million.¹

The national average RN turnover rate in 2018 was 17.2%, up 0.4% year-over-year, and the Northeast is the region with the second-highest turnover rate.²

In a 2016 survey of more than 17,000 physicians, conducted by the Physicians Foundation, 54% of doctors surveyed rated their morale as somewhat or very negative, and 49% of them said they either often or always felt burned out. Nearly half of all surveyed physicians would no longer recommend medicine to their own children as a career, and a third would not choose medicine again for themselves.³

The Physicians Foundation study by the research firm Merritt Hawkins found, “This ongoing situation represents a problem not just for physicians, but for their organizations. Research shows that physicians who reported experiencing signs of burnout are more than 3 times as likely to say they are going to leave their organizations within 3 years — 20% as opposed to 9% of physicians who aren’t experiencing burnout. Given that healthcare system spends an average of over $250,000 to recruit and onboard each new physician, this represents a substantial risk to the organization, in both financial and cultural terms.”

Dealing with turnover of all employees – not just caregivers – is expensive, which makes the business case for wellness programs even more compelling.

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¹ 2019 National Health Care Retention & RN Staffing Report, NSI Nursing Solutions, Inc., January 2019
² Ibid
I. Get Leadership Support

In today’s healthcare environment, with declining reimbursements, tight margins and more, healthcare leaders are often first and foremost concerned with keeping the facility’s doors open. Leaders are rightly concerned with the return on investment in wellness programs.

Data exists about how wellness programs can improve employee health, healthcare cost control, and productivity, while reducing absenteeism. But other studies show it’s not always about saving money. Companies committed to nurturing a culture of well-being consider broader motivations, including low turnover rates, attraction of top candidates, job satisfaction, and recruitment/retention of workers.

According to the Centers for Disease Control and Prevention (CDC), “Preventable chronic conditions are a major contributor to the costs of insurance premiums and employee medical claims, which are at an all-time high and continue to rise. Employers also pay a high price in terms of lost productivity from employee illness.” The CDC notes:

- Four of the 10 most costly health conditions for US employers—angina pectoris (chest pain), high blood pressure, diabetes, and heart attack—are related to heart disease and stroke.
- Work-related stress is the leading workplace health problem and a major occupational health risk, ranking above physical inactivity and obesity.
- Productivity losses from missed work cost employers $225.8 billion, or $1,685 per employee, each year.
- Full-time workers who are overweight or obese and have other chronic health problems miss about 450 million more days of work each year than healthy workers. The result is an estimated cost of more than $153 billion in lost productivity each year.
- A 1% annual reduction in the level of four health risks—weight, blood pressure, glucose, and cholesterol—has been shown to save $83 to $103 annually in medical costs per person.

CDC: https://www.cdc.gov/chronicdisease/resources/publications/aag/workplace-health.htm

While some recent studies have attempted to show that the ROI on wellness programs – both in terms of worker health and productivity – may not be as great as once thought, other studies stress the **oftentimes ineffable benefits** of making workers happier, more resilient, and joyful. Better workplaces can also help management/union relations.

**RESOURCES**

How Leaders Can Influence a Wellness Program

Once a facility’s leaders – CEOs, CNOs, CFOs, CMOs, HR, Board of Trustees, among others – decide to fund and endorse a wellness program, it is equally important to show that the leaders (especially the CEO) are behind the initiative.

While the leader doesn’t have to possess the ideal BMI, or practice yoga or mindfulness exercises, he or she does have to set an example for the institution. Examples of this include:

- completing an annual health assessment,
- receiving an annual physical, and
- participating in wellness events scheduled throughout the year.

Leaders can ask their managers to get on board with the wellness programs; they can stay more connected with their workers through rounds, or just plain listening to concerns. According to the Wellness Council of America, “CEOs who communicate the wellness message clearly and frequently have more effective wellness initiatives.”

Another key element of a successful leader in healthcare wellness programs is to continually transmit to managers and frontline workers recognition for positive actions and, equally as important, condemnation of toxic elements in the workplace. Is a renowned and important, but oftentimes abusive, staff member given preferential treatment because of who he or she is? Do staff members feel that person is protected because of his or her stature within the organization? It’s up to CEOs in many instances to stress the positive culture of an organization to let all workers know the CEO “has their backs” when it comes to toxicity in the workplace. (The same holds true for all levels of an organization: directors must hold managers accountable; managers must hold those who work under them to the same standards, etc.)

In the landmark report from the Lucian Leape Institute, entitled "Through the Eyes of the Workforce: Creating Joy, Meaning, and Safer Health Care" the authors quote the former CEO of ALCOA who advised that each person in the workforce should be able to answer affirmatively to three questions each day:

- Am I treated with dignity and respect by everyone?
- Do I have what I need so I can make a contribution that gives meaning to my life?
- Am I recognized and thanked for what I do?

In healthcare, much attention is focused on “mental health parity,” defined as ensuring that behavioral healthcare is provided (and reimbursed) at the same level as physical healthcare. Good healthcare leaders recognize that the mental wellbeing of their workforce is as important as ensuring that everyone is healthy, fit, with low cholesterol, or a good body mass index. Good leaders empower their wellness programs to offer timeouts, counseling, and even inquiries to workers about how they’re feeling. This is especially important after workers are involved in an adverse event. Giving people time to heal – that is, time off – is important, as is ensuring those affected have support from others.

RESOURCES

- WELCOA (Wellness Council of America) https://www.welcoa.org/
II. Create a Wellness Committee

You’ve convinced your CEO (or CFO and other leaders) that a wellness program can be beneficial in lowering healthcare claims, improving health, reducing absenteeism, etc., and you get the go-ahead to create a program. What follows are a few things to keep in mind when putting a team together that will plan, implement, and assess a program. (And note the concept of “team” here: while smaller organizations may feel it is OK or necessary to have one person, say the HR Director, handle all wellness activities, that’s a recipe for disaster, according to many studies.)

The size of the committee will depend on the size of the facility. There is no ideal number but one group suggests a committee of from 5 to 8 people for companies with 300 or fewer employees; 8 to 12 for those with 300 to 1,000 workers; and 12+ for those with more than 1,000 workers. The committee should include members from senior management, managers, and front-line staff. It should probably not be led by a senior executive as this may inhibit the free flow of information and ideas; but it should be run by someone who is well organized, can run a good meeting, etc.

Healthcare-specific Wellness Committees

• Because many wellness programs involve the collection and assessment of biometric data, it is best to have someone from the clinical staff on board.

• Since many wellness programs may involve dedicated spaces for, say, yoga or meditation rooms, or they may involve the increased use of patient lifting mechanisms to ensure worker safety, a representative from the facilities staff may be a good idea.

• A union representative may be needed.

• A human resources representative is often included in wellness committees.

• Social services or a behavioral health representative is important as many wellness programs focus on improving the mental health of employees.

• As the largest number of employees is often related to nursing, having representatives from this group is important.

• A physician on the team may be important

• Add diversity to the team. Include people from different functional areas, age groups, experience levels, and fitness levels. The committee should not just be comprised of young, super-fit individuals.

• Include people from all or most physical areas of an organization that is comprised of multi facilities.

• Many organizations write worksite wellness responsibilities into a worker’s job description. That is, if you are thinking of expanding your HR department, it may be a good time to ensure that that department has a presence on wellness initiatives going forward by declaring that such activities are part of the person’s job.

• While it is important to create a committee of many diverse interests, it is also important to populate with some people who can get things done. That is, do they have “power” in the company to effectuate change?
Once the team is created, publicize its membership in employee newsletters, e-mails, staff meetings, and town halls so workers know who to approach with concerns or ideas.

And because a core part of the Caring for the Caregiver wellness program is to express gratitude and recognition to workers, ensure that the wellness committee members who have signed on to plan, promote, and help run company-wide programs are thanked for their efforts.

- Meet at least bi-monthly.
- Revitalize the committee when needed.
- Stick to a strict agenda during committee meetings.

Remember: the ultimate goal of the committee and the wellness initiative is to help INDIVIDUALS, TEAMS, and LEADERSHIP all evolve physically and mentally to create better workplaces. The Wellness Committee is a TEAM, which means it is a good place to begin putting concepts of fairness, respect, and sharing into practice!

**RESOURCES**

- Sample letter seeking volunteers for wellness committee on following page
Sample Letter

Join Our Worksite Wellness Committee

Dear [Employee]:

[Company] is creating [or expanding] a worksite wellness program, and we’re seeking your help. Such programs that have been implemented in companies throughout the U.S. have been shown to improve employee health and morale, reduce absenteeism and employee turnover, and lower healthcare costs.

We are looking for a team of leaders to help our organization create, implement, and evaluate such a worksite wellness program. I think creating programs that may cover such topics as exercise, mental wellbeing, stress reduction, diet, and more could really benefit all of us at [company].

If you’re interested in participating on the Wellness Committee, please let me know by [date].

I think your support of this program will make it a real success and I look forward to discussing the details of it with you soon.

Sincerely,

(Name)
III. ASSESS THE CURRENT SITUATION

This is the step where you begin to collect the data about your organizations and workforce that will assist you during the next step where you create the programs and initiatives that you will offer your workforce.

There are many resources to help you conduct your assessment.

A. Organizational Analysis

CDC WORKSITE SCORECARD

The CDC Worksite Health ScoreCard is a tool designed to help employers assess whether they have implemented evidence-based health promotion interventions or strategies in their worksites to improve the health and wellbeing of their employees.

The ScoreCard has 154 questions that assess how evidence-based health promotion strategies are implemented at a worksite. These strategies include lifestyle counseling services, environmental supports, policies, health plan benefits, and other worksite programs shown to be effective in preventing disease and promoting health and wellbeing. Employers can use the ScoreCard to assess how a comprehensive health promotion and disease prevention program is offered to their employees, to help identify program gaps, and to set priorities for the following health topics:

- Background/Worksite Demographics/Community Engagement (17 required questions; 3 optional questions).
- Organizational Supports (25 questions).
- Tobacco Use (8 questions).
- High Blood Pressure (6 questions).
- High Cholesterol (5 questions).
- Physical Activity (10 questions).
- Weight Management (4 questions).
- Nutrition (14 questions).
- Heart Attack and Stroke (12 questions).
- Prediabetes and Diabetes (6 questions).
- Depression (7 questions).
- Stress Management (7 questions).
- Alcohol and Other Substance Use (6 questions).
- Sleep and Fatigue (6 questions).
- Musculoskeletal Disorders (7 questions).
- Occupational Health and Safety (9 questions).
- Vaccine-Preventable Diseases (7 questions).
- Maternal Health and Lactation Support (7 questions).
- Cancer (8 questions).

VIEW THE SCORECARD HERE:

https://www.cdc.gov/workplacehealthpromotion/initiatives/healthscorecard/index.html
WELLNESS COUNCIL OF AMERICA

WELCOA suggests that companies performing an assessment investigate:

- Organizational data such as healthcare claims and demographics
- Employee health data from health risk appraisals and health screenings
- Physical environment data (workstations, cafeteria setup, etc.)
- Employee data relating to absenteeism, disability claims, workers comp

WELCOA explains the specifics of these data elements and how to collect them here: https://www.welcoa.org/resources/resource-topics/benchmark-3-toolkit/

THE NATIONAL INSTITUTE FOR OCCUPATIONAL SAFETY AND HEALTH (NIOSH)

This site serves as a guide for practitioners for creating or expanding organizational cultures of safety, health, and wellbeing. Resources on this site provide information on how to create policies, programs, and practices on the organizational and environmental level that protect and promote worker safety, health, and wellbeing. https://www.cdc.gov/niosh/twh/letsgetstarted.html

HERO SCORECARD

The HERO Scorecard is designed to help organizations learn about best practices for promoting workplace health and wellbeing, and to discover opportunities to improve and measure progress over time. https://hero-health.org/hero-scorecard/

B. Employee Input and Survey

Conduct an employee survey to assess what your workers want and to get an initial idea of their current health and habits. Make the survey as easy as possible to fill out and submit to ensure a high return rate. Some experts suggest that companies with fewer than 500 employees survey everyone; those with more can survey a representative sample. Surveys must be anonymous. Prepare to present results to hospital leadership.

The Nevada Wellness Council toolkit (a very good resource!)

http://nevadawellness.org/wp-content/uploads/2013/07/5619-Front_Cover-toolkit-C1R41.pdf suggests questions relating to:

- Current physical activity
- What time of day do you get your activity?
- Fruit and vegetable consumption
- Thoughts about fatty foods
- Whole grain questions
- Tobacco use
- Anxiety
- Depression

Also consider questions relating to safety and culture. That is: “Do you feel safe at work?” “Do you feel your peers and managers respect your work and efforts?”

Also ask open-ended questions relating to: “What do you want us to provide you?”
C. Health Risk Assessment (HRA)

While an employee survey provides some broad-brush data on the health status of employees and their thoughts about the programs they would like to see initiated in the workplace, a Health Risk Assessment (HRA) is a more in-depth data collection tool.

An HRA requires an investment because the data collected is not anonymous to the entity collecting it. That is, an HRA collects data about a specific individual and then provides that person with counseling and suggestions about how to improve their diet, physical health, or other elements that are surveyed. There are many vendors that conduct HRAs. (Some large healthcare systems may have the resources – clinical teams and analysts – to perform this service in-house.) **A role of the wellness committee is to survey vendors, their costs and services, and to make a case for hiring one to hospital leadership.**

While individuals benefit from HRAs, the Wellness Committee at the hospital can receive data in aggregate form from the vendor, which they can use in crafting initiatives going forward.

Biometric screening, such as blood pressure readings and blood analysis of cholesterol, etc., may be part of an HRA. But hospitals may want collect this data through regular employee health fairs or other events. Again, this data, in aggregate form, is a resource that the wellness committee can use.

**RESOURCES**


Hospitals may also be able to request a medical claims analysis from their insurance company. This data contains information on healthcare claims, workers comp, disability claims, and pharmaceutical costs. Is a large percentage of your workforce taking statins to control cholesterol? If so, a dietary wellness program, coupled with an analysis of the hospital cafeteria, may be a prime topic for the wellness committee to address.

**Perhaps the most important take-away from this discussion about assessments (in whatever form they may take) is to plan to repeat the assessments at some point in the future – say, after one year – to assess if the programs you initiate in the next sections are working.** The Wellness Committee can determine the schedule for testing and re-testing.

**RESOURCES**

IV. Goals, Objectives, Planning

Once the Wellness Committee is armed with the data, the decision now becomes: “What do we want to achieve?”

One way to think about this part of the process as it relates to healthcare is to divide strategies into tiers – those that will support the INDIVIDUAL and those that will support caregiving TEAMS. Again, as at the beginning of this toolkit, it will be important that LEADERSHIP support for the initiatives is achieved and that the leaders of the organization stress the importance of, and commitment to, whatever is chosen.

In healthcare, stressed out INDIVIDUALS can become more resilient through mindfulness, meditation, yoga, journaling, improved exercise, and more. There are many resources available that describes these programs in depth. However, please note, that no amount of resilience can withstand a toxic environment. The Lucian Leape Institute’s “Through the Eyes of the Workforce” paper says toxicity does not have to be outright abuse of a worker, but can rather take the form of “much more common, often pervasive, subtle instances of humiliating and dismissive behavior, put-downs, and humor at the expense of a colleague that erode confidence and self-esteem. The result is demeaning and non-team-promoting behavior.” Remarks such as “When did you become a doctor?” … “How could you not know this” are examples of what the Institute considers toxic.

TEAM support initiatives include Schwartz Center Rounds, Team STEPPS, and de-briefings and discussions after adverse events.

- Schwartz Center for Compassionate Healthcare Rounds
  [https://www.theschwartzcenter.org/programs/schwartz-rounds](https://www.theschwartzcenter.org/programs/schwartz-rounds)
- Team STEPPS – Team Strategies & Tools to Enhance Patient Performance & Patient Safety
  [https://www.ahrq.gov/teamstepps/index.html](https://www.ahrq.gov/teamstepps/index.html)

If employee surveys and HRAs show worker interest or the prevalence of risk factors (high blood pressure, obesity, alcohol/smoking use) in the population, then the Wellness Committee can tailor interventions in these areas.

Interventions may require either individual participation (walking clubs, etc.), organizational changes (creation of an exercise room or quiet room for destressing), or policy changes (availability of flex time, break times during the day, policies that promote breast feeding during the day, or provision of onsite Employee Assistance Programs).

A good plan will contain:

- Recruitment strategies to encourage people to participate.
- Publicizing/communicating the program to workers.
- A start and end date
- A goal (reduce obesity by X% over a period of time, for example)
- Budget
- Divvying up of responsibilities to show who and how the plan will be carried out.

Determine if you have the resources to offer INCENTIVES to workers for either participating or reaching specific goals. These include gift cards, merchandise such as tee shirts, cash.
V. Implementation

You’ve reviewed your assessments, identified potential priorities, and checked the employee survey to see if what you are thinking of doing meshes well with what employees want.

Then you determine importance, cost, time, effort, and the reach of the initiative among the employee population. Also look back to your initial assessment to see what the hospital already offers in the area you are targeting to help you determine if you are supplementing an existing program or creating something from scratch.

Now you can choose your program(s) and put it in place.

All of your programming should involve the creation of a supportive social and physical environment where healthy decisions are the norm. From Nevada’s Worksite Wellness Toolkit:

“Changing the environment and changing policy is crucial to affecting change in most health habits. Policies create the opportunity for widespread behavioral change because they change the existing “rules,” which can have a powerful effect on employee behavior and habits. Environmental changes, both physical and cultural, provide options or opportunities to adopt healthier habits and can result in widespread change.

“Company policies and changes in the work environment will affect or influence the behavior of all of your employees, which may also lead to changes outside of work. In many cases, policy and environmental changes make it easier to make the better health choice. Here are some examples:

**Formal written policies:**

- Guidelines for ordering food for company events
- No smoking on company property
- Company cost-sharing for health club memberships

**Environmental changes or cues:**

- Outdoor bike racks
- Labeling or highlighting healthy food choices
- Areas for relaxation and stress reduction (quiet rooms)"
Here are examples of programs for various focus areas:

**PHYSICAL ACTIVITY:**
- Offer exercise breaks during the workday
- Walking clubs
- Signs to “Take the Stairs”
- Bicycle racks
- On-site gardening
- Discounts at fitness centers

**NUTRITION**
- Motivational signs to encourage healthy eating
- Change vending machine options
- Non-tap-water availability
- Access to a dietician as part of benefit package
- Competitive pricing to make healthy options affordable

**BREASTFEEDING FRIENDLY WORKPLACE**

**STRESS MANAGEMENT**
- Encourage use of EAP
- Work design
- Family-friendly sick time, childcare, eldercare policies
- Train managers to recognize how stress manifests itself in healthcare workers

**RESOURCES**
- Sample letter announcing an initiative on the following page
Sample Letter

Dear (Employees):

As you may know, [company] has started a worksite wellness program that we are calling [name]. We created [name] because we’re concerned about the health and wellbeing of our employees and their family members, as well as our concern about escalating healthcare costs.

Based on the feedback we received from those that filled out the Employee Wellness Survey in [date] as well as the information we have received from a system-wide Health Risk Assessment (HRA), your [Name] Wellness Committee has decided to undertake the following beginning on [starting date]:

- Announce programs(s).

Our new wellness program is designed to help provide a healthful work environment and to support the adoption of healthy habits by employees who want to improve their own health and wellness levels.

The staff person who has been given responsibility for developing and managing this new program is (Name of Wellness Coordinator). She/He will be working with the [Name] Wellness Committee to make sure the program addresses your needs. The members of the [Name] Wellness Committee are listed below. Feel free to contact any of them with any concerns, questions, or suggestions you may have. In coming months, we hope to expand the list of resources we can offer you to make our work environment more healthful.

Along with the rest of the executive team, I am personally excited about this new program, and I am very pleased that our organization is embarking on this new direction. Please join with me in supporting this new program effort. Good health is an extremely valuable asset to all of us and I look forward to seeing you at one of the upcoming program events.

Sincerely,

(Name)

President and CEO
VI. Assess IT/Benchmarking

Evaluation helps track progress, shows if you are meeting the goals you set, and can help secure continued funding from leadership.

Things to measure include:

- Worker participation in the initiatives you create.
- Satisfaction of participants. (Do a needs assessment survey after each initiative.)
- Risk reduction. That is, the things you discovered during a health assessment (% of workers who are obese, and how that percentage changed after an initiative).
- Physical environment and corporate culture.
- Productivity (absenteeism, turnover, morale).
- ROI – this is a harder to quantify one but you may learn things like changes in healthcare costs, workers comp claims, disability claims, productivity.

Working with food services, you may be able to track what cafeteria items are chosen the most.

Using your Health Risk Assessment (HRA) data, you can track how risk levels changed for a population – that is, what percentage of workers moved out of high-risk areas for alcohol use (drinks per week), or high blood pressure, or body weight.

Working with your insurer and human resources, you may be able to track pharmacy costs, average sick days and more.

Use the data to not only improve programs but to abandon ideas that are not working or that are not popular.

RESOURCES

- The CDC Worksite Health ScoreCard (ScoreCard) – A tool designed to help employers assess whether they have implemented evidence-based health promotion interventions or strategies in their worksites to improve the health and wellbeing of their employees. [https://www.cdc.gov/workplacehealthpromotion/initiatives/healthscorecard/index.html](https://www.cdc.gov/workplacehealthpromotion/initiatives/healthscorecard/index.html)

- CDC’s Gateway to Health Communication – Keeping abreast of the latest communication science research can help you identify new approaches. These sources can help your campaign and health communication achieve maximum impact, and to evaluate their success. [https://www.cdc.gov/healthcommunication/research/index.html#eval](https://www.cdc.gov/healthcommunication/research/index.html#eval)

- The Behavioral Risk Factor Surveillance System (BRFSS) – The nation’s premier system of health-related telephone surveys that collect state data about U.S. residents regarding their health-related risk behaviors, chronic health conditions, and use of preventive services. [https://www.cdc.gov/brfss/](https://www.cdc.gov/brfss/)
Appendix

List of Valuable Resources to Help Create, Implement, and Track a Wellness Program

• CDC’s Workplace Health Promotion: https://www.cdc.gov/workplacehealthpromotion/index.html

• The Worksite Wellness Council of Massachusetts (WWCMA) is the first non-profit in the Commonwealth representing health promotion professionals and business leaders dedicated to promoting worksite wellness programs across the state. https://wwcma.org/

• Tufts Health Plan – Momentum+. The Tufts program encourages behavior changes that help reduce risk factors for chronic disease, and may result in greater workplace engagement, productivity, and potential savings for you, the employer. https://tuftshealthplan.com/employer/programs-reporting/wellness

• Blue Cross Blue Shield of Massachusetts – Worksite Wellness Program Kits https://www.bluecrossma.com/blue-ig/health-and-wellness/worksite-wellness-program-kits.html

• WELCOA – Wellness Council of America. https://www.welcoa.org/


• Five Ways to Wellbeing at Work TOOLKIT -- Mental Health Foundation and Health Promotion Agency (New Zealand). A focus on mental wellbeing. https://www.mentalhealth.org.nz/assets/5-ways-toolkit/Five-Ways-to-Wellbeing-at-Worknew.pdf
