



Better Every Day.

Well-Being Data Update

December 14, 2017

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Well-Being Score Research

In 2014, we selected the Well-Being Assessment based on the extensive research that demonstrated that higher well-being scores were associated with

- Lower costs
- Higher performance
- Lower absenteeism

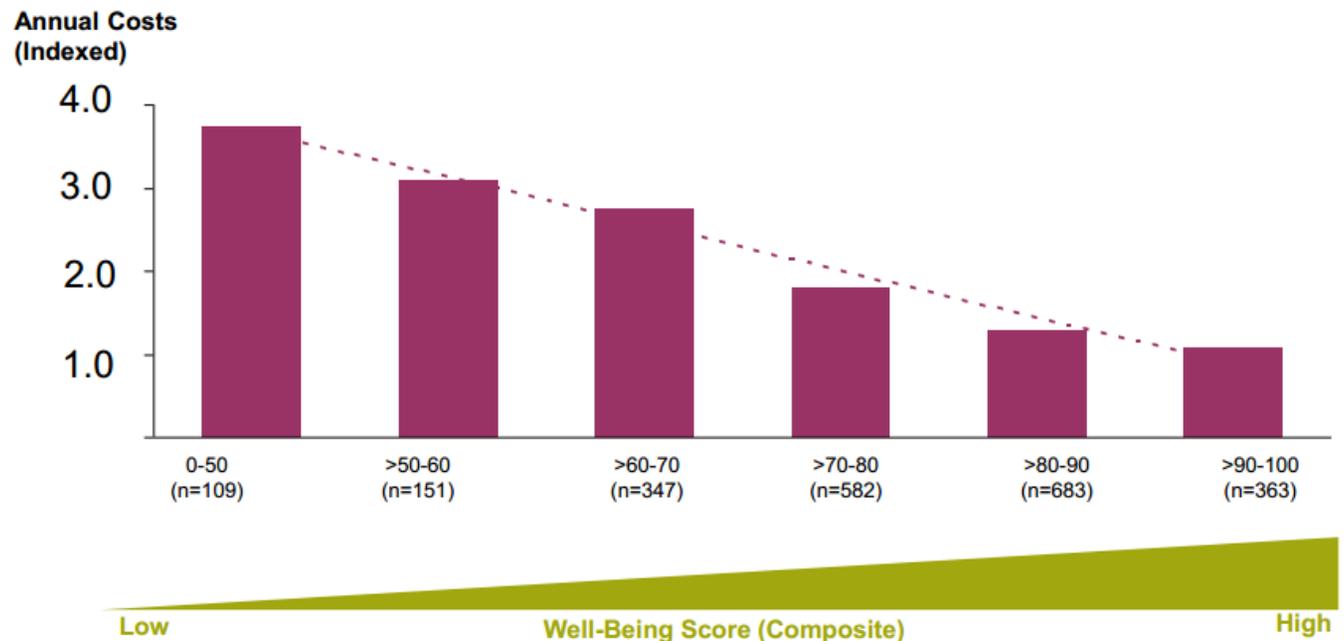


Well-Being Score Research

Well-Being Scores are directly related to healthcare costs:

- ER visits
- Hospital admissions
- Bed days
- Pharmaceutical costs
- Medical costs
- Disability days
- Disability costs

ANNUAL MEDICAL AND RX CLAIMS COST | Low:High Well-Being = ~3.5x more cost



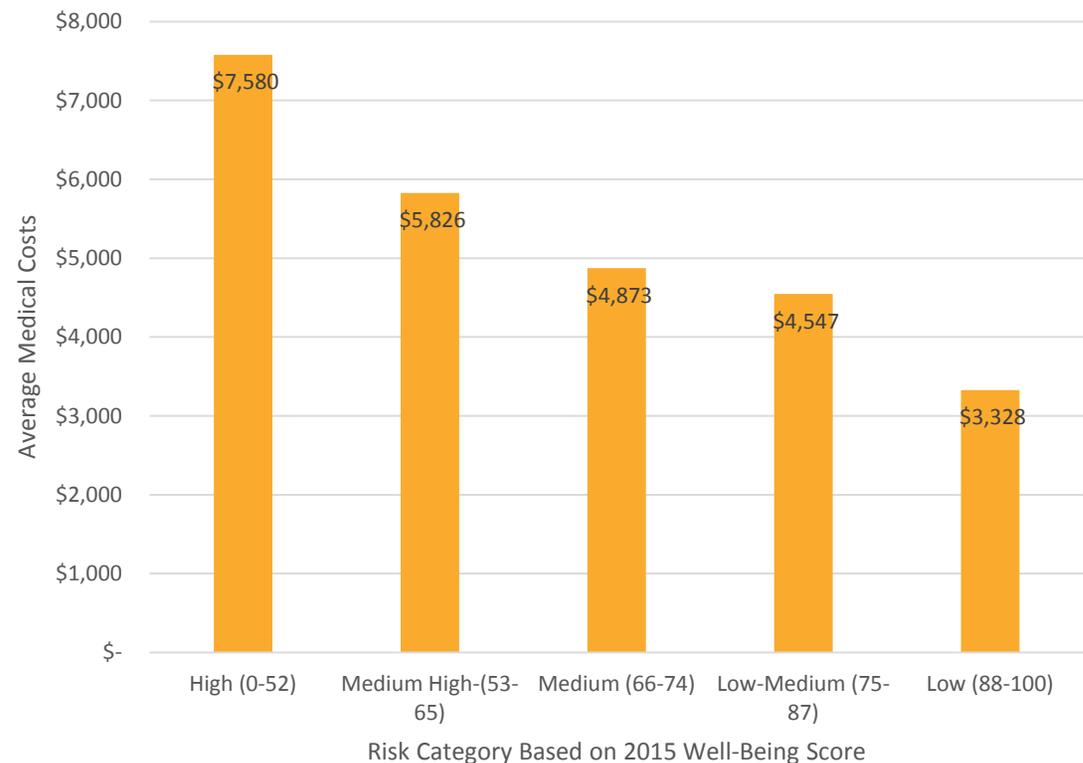
Source: Wellmark Data, Healthways Center for Health Research Analysis (n=2,235)

Our Employees: Well-Being Score & Medical Costs

2015

- As well-being scores increase, average medical scores decrease
- The highest well-being scores average costs were 2 times less (\$4,252 less) than the lowest well-being scores.

2015 Average Medical Costs Based on 2015 Well-Being Assessment Scores



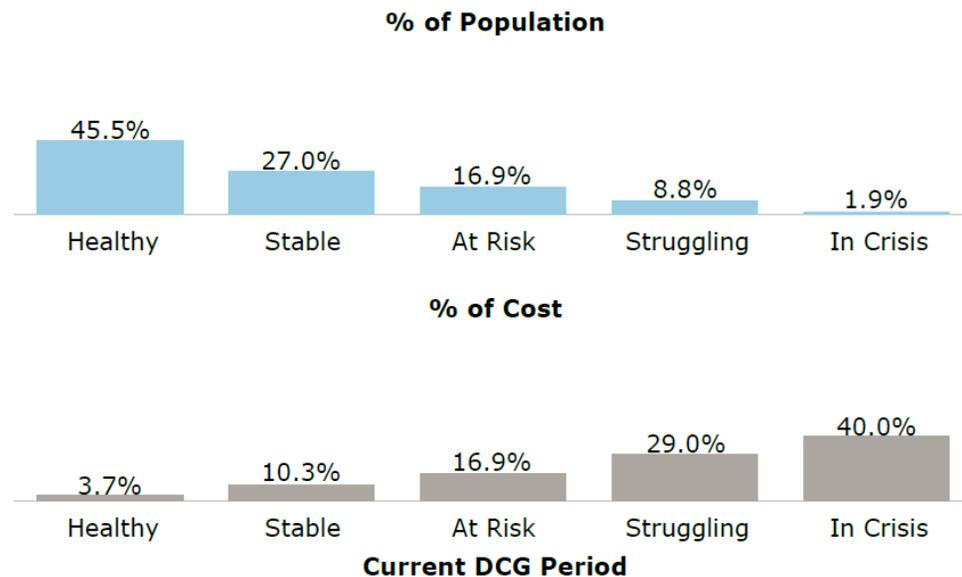
Well-Being and Medical Costs

72.5% of our population is healthy or stable. They account for 14% of costs.

Keeping the majority of our population in the healthy and stable categories will support cost control.

1.9% of our members are in crisis and they account for 40% of costs. Well-being services are not likely to reduce the costs in this group.

Risk Band Profiles

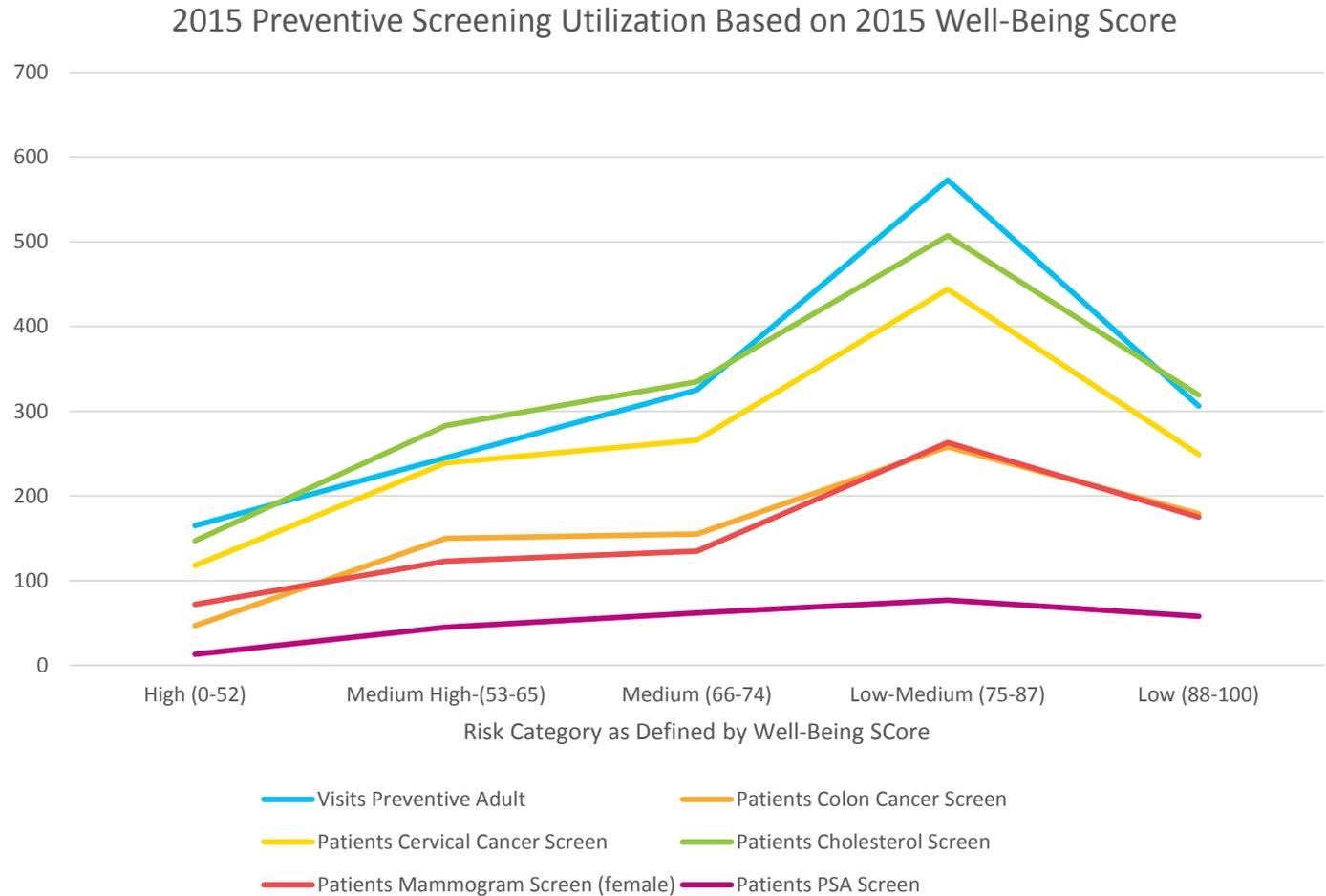


- 1) The healthiest 45.5% of the population accounts for 3.7% of the total cost.
- 2) The least healthy 1.9% of the population accounts for 40.0% of the total cost.

These data come from the Express dashboard. It is based on the active/early retiree population data from Jan.-Dec 2016.

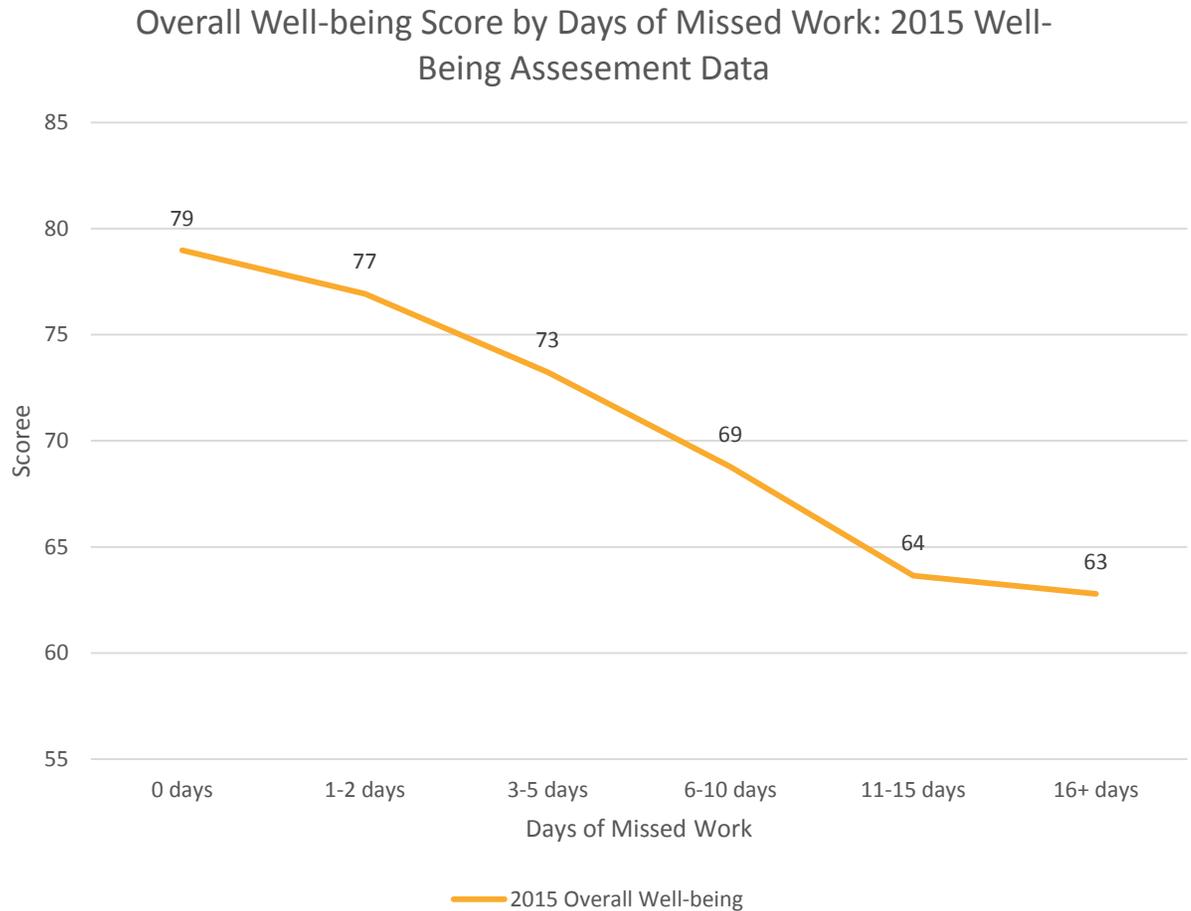
Our Employees: Well-Being Score & Preventive Care Utilization

Employees with WBA scores between 75 and 87 were the most consistent about their preventive health care visits.



Our Employees: Well-Being Score & Absenteeism

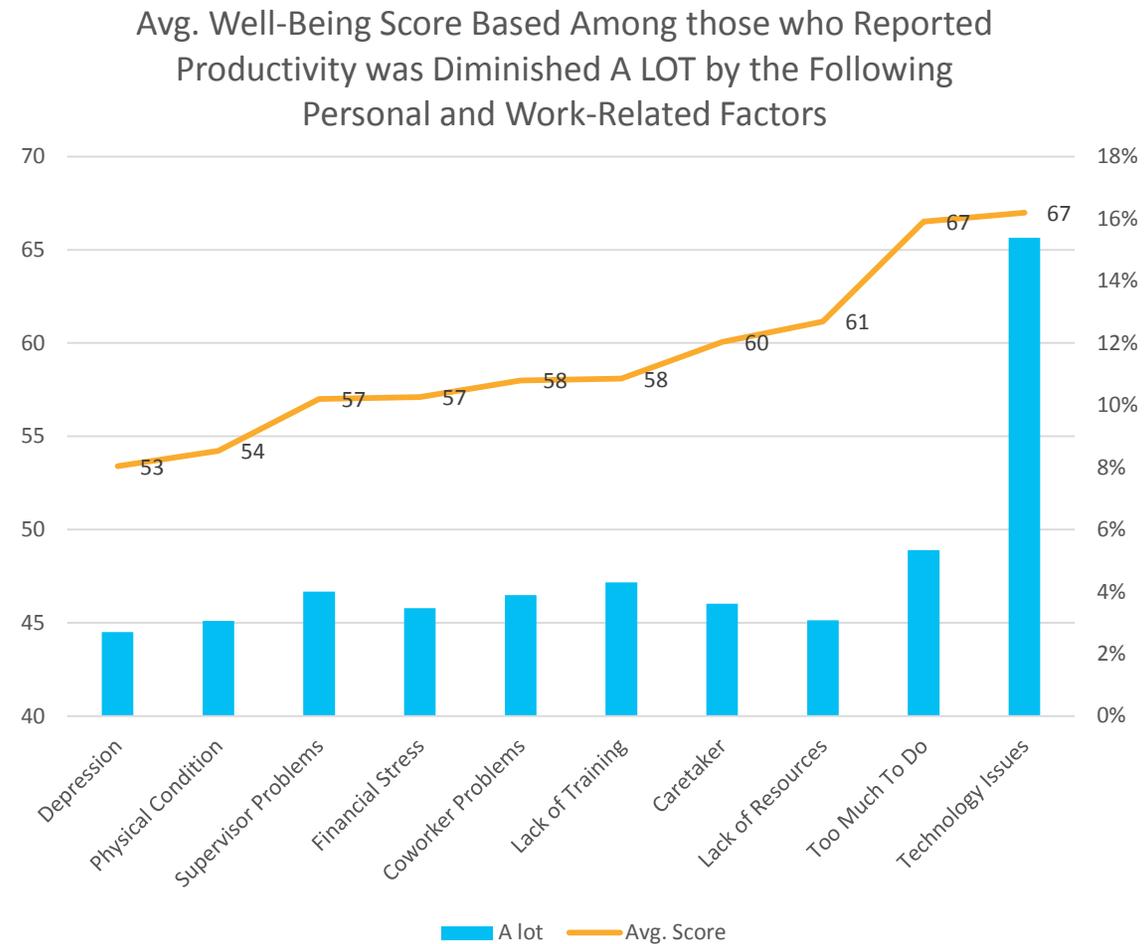
As well-being scores decrease, the number of self-reported missed work days increases



Our Employees: Well-Being Score & Performance

People who report productivity challenges related to personal or work factors have lower average well-being scores

Those with personal or interpersonal factors that are impacting their productivity have the lowest well-being scores

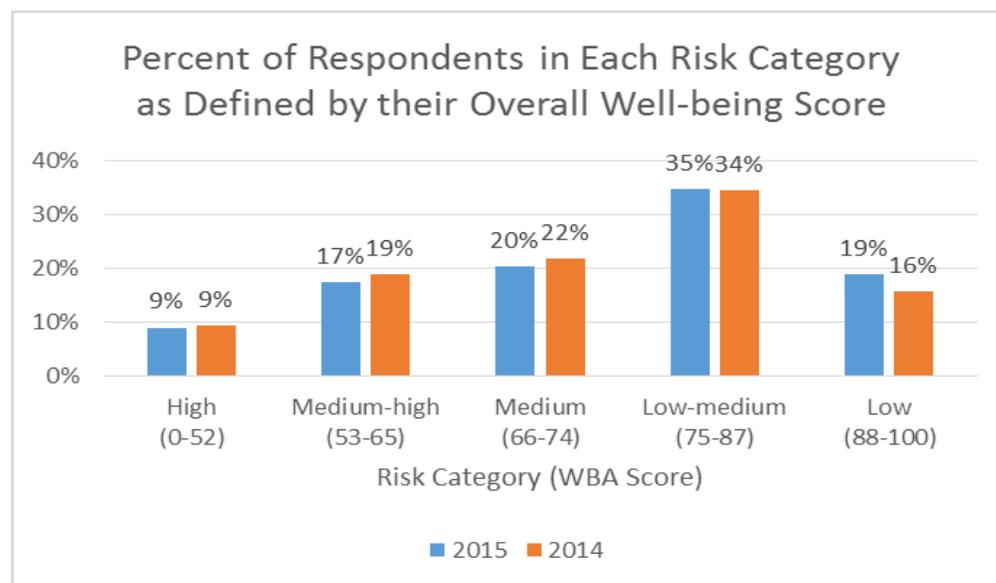


Our Employees: More Employees Score 75+

75 has been established as a single cutpoint when looking at well-being score.

- Scoring below 75 is associated with 2 or more of the following: high health care cost, ER visits, disability days, absenteeism, presenteeism, low performance
- Between 2014 and 2015, 4% more employees scored 75 or higher.

Furthermore, researchers have classified those who score 88-100 low-risk, 75-88 low-medium risk, 66-75 medium risk, 53-66 medium-high risk, and 0-53 high risk.



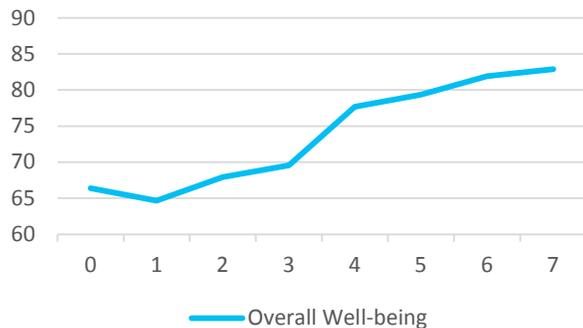
Classification of Individual Well-Being Scores for the Determination of Adverse Health and Productivity Outcomes in Employee Populations

Yuyan Shi, Lindsay E. Sears, Carter R. Coberley, and James E. Pope. Population Health Management. April 2013, 16(2): 90-98. <https://doi.org/10.1089/pop.2012.0039>

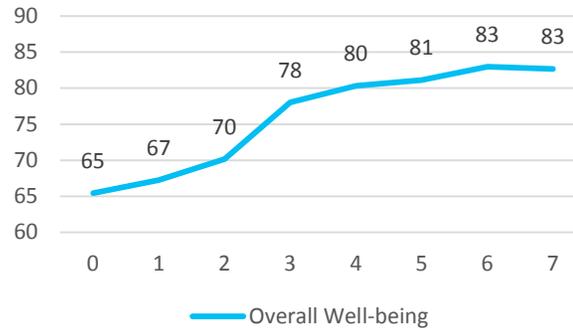
Factors Associated with Well-Being

Healthy Eating: 47% eat 5 servings less than 4 days/week

Average Well-Being Score Based on the Number of Days Eat 5 Servings of Fruits and Vegetables: 2015 WBA Data



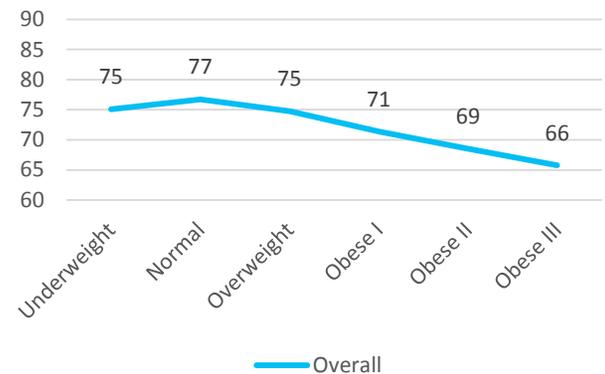
Average Well-Being Score Based on the Number of Days Exercise for 30 Minutes: 2015 WBA Data



Physical Activity: 46% exercise less than 3 days/week

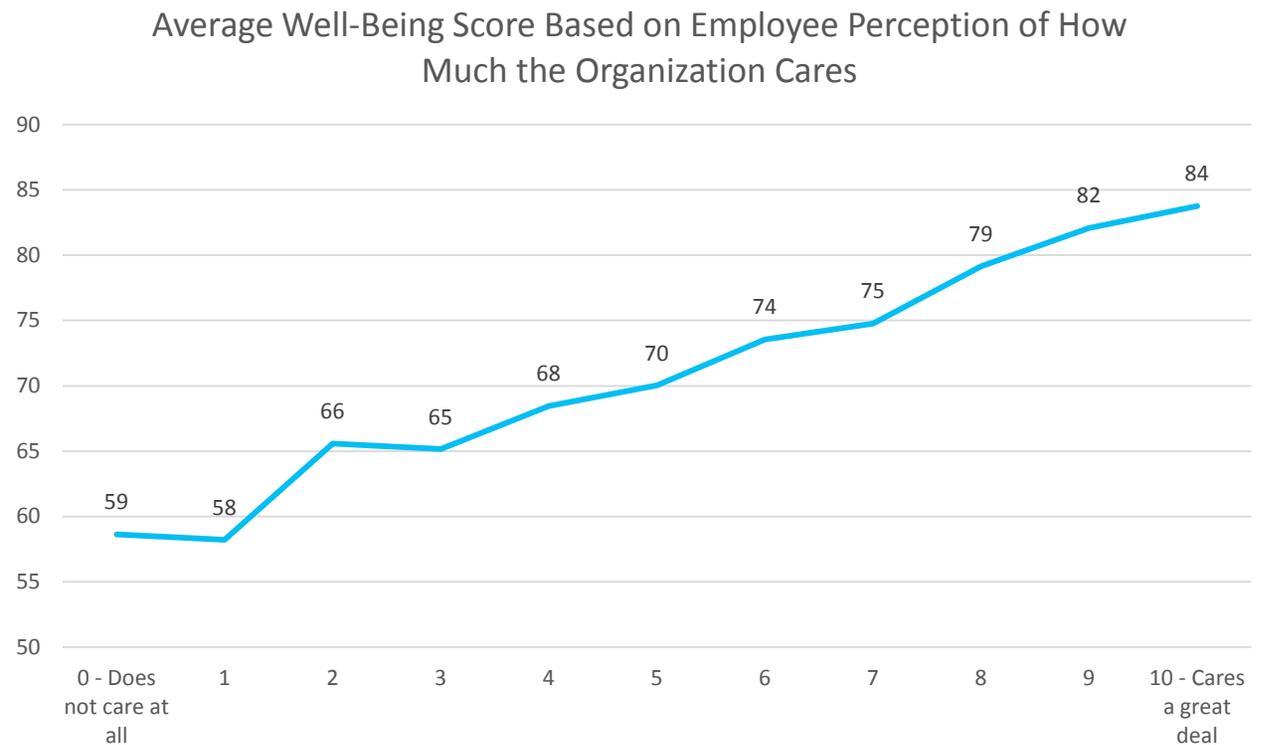
Weight: 22% are obese, 34% are overweight

Average Well-Being Score Based on Weight (BMI) Category: 2015 WBA Data



Factors Associated with Well-Being

Organization
Commitment: 37%
feel the organization
cares 0-6/10



Focus on Employee Well-Being

Factors Associated with Higher Well-Being

Weight Management
Physical Activity
Healthy Eating
Emotional Well-Being

Organization Cares

Well-Being
(Measured by Well-Being Assessment score out of 100)

Outcomes Associated with Higher Well-Being

Productivity
Absenteeism
Presenteeism
Performance

Costs
Higher Preventive Screening Rates
Medical/Hospital Costs
Workers Compensation

Well-Being Mission



Better Every Day.

The HSS Well-Being mission is to help our members (employees, retirees, and family members) **feel, live, and be Better Every Day**. We encourage and facilitate well-being by raising awareness, providing programs, services and tools and striving to create a supportive workplace culture.

When we focus on well-being...

Today we feel immediate benefits, like more energy and more happiness. We are more engaged and productive at work and home.

Tomorrow the daily benefits accumulate to better our health by helping us avoid chronic conditions and injury.

In the future, the quality of our life in retirement is improved.

Supporting Factors Associated with Higher Well-Being Scores

Factor	2017 Program/Service
Weight Management	Healthy Weight Program Diabetes Prevention Program Research Study Maintain, Don't Gain Campaign
Physical Activity	Play Your Way Campaign 30-Day Challenge Group Exercise
Healthy Eating	Eat Better, Feel Better Campaign Colorful Choices Challenge
Emotional Well-Being	EAP Counseling We're Here for You Campaign Making Work Work Training Series RECHARGE Campaign
Organization Caring about Well-Being	Better Every Day Campaign Champion and Department Lead Program Well-Being@Work Awards & Spotlights Well-Being@Work Grants & Onsite Activities



Better Every Day.

Diabetes Prevention Program Research Study: Results

September 2015-July 2017

Diabetes Prevention Program Research Study

Study Question

- Which of two DPP-based lifestyle interventions (one worksite-based, one online) results in greater weight loss, attainment of the physical activity goal, and participant engagement?

Diabetes Prevention Program (DPP) Original Research

1. Intensive lifestyle intervention – decreased risk T2D by 58% (after 3 years) and 34% (after 10 years) compared to placebo
2. Metformin – decreased risk by 31% (after 3 years) and 18% (after 10 years) compared to placebo

<http://www.nejm.org/doi/full/10.1056/NEJMoa012512>

<http://care.diabetesjournals.org/content/35/4/723.full.pdf+html>

http://c.ymcdn.com/sites/www.chronicdisease.org/resource/resmgr/NDPP/Effectiveness_DPP_2012.pdf

Participation and Engagement

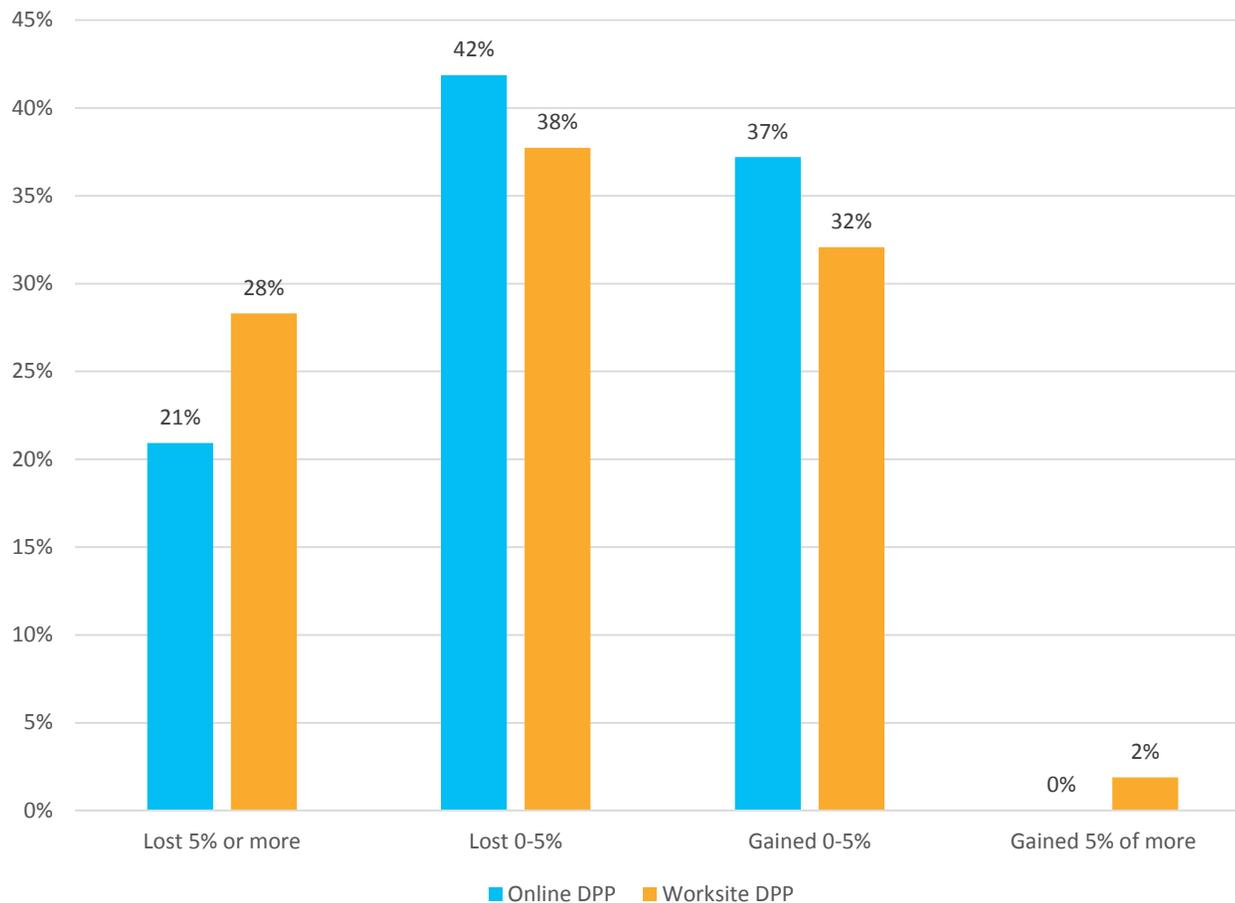
- 158 study participants recruited and randomized into two arms:
 - Online DPP – 80
 - Worksite DPP – 78
- Participants with 12 month measurements
 - Online DPP – 43 (54%)
 - Worksite DPP – 54 (69%)

Locations

- One South Van Ness
- DPW Cesar Chavez Yard
- Laguna Honda Hospital
- Main Library
- HSS Wellness Center
- 525 Golden Gate
- 1650 Mission

Outcomes: Percentage of Weight Lost

Percent weight loss at 12 months



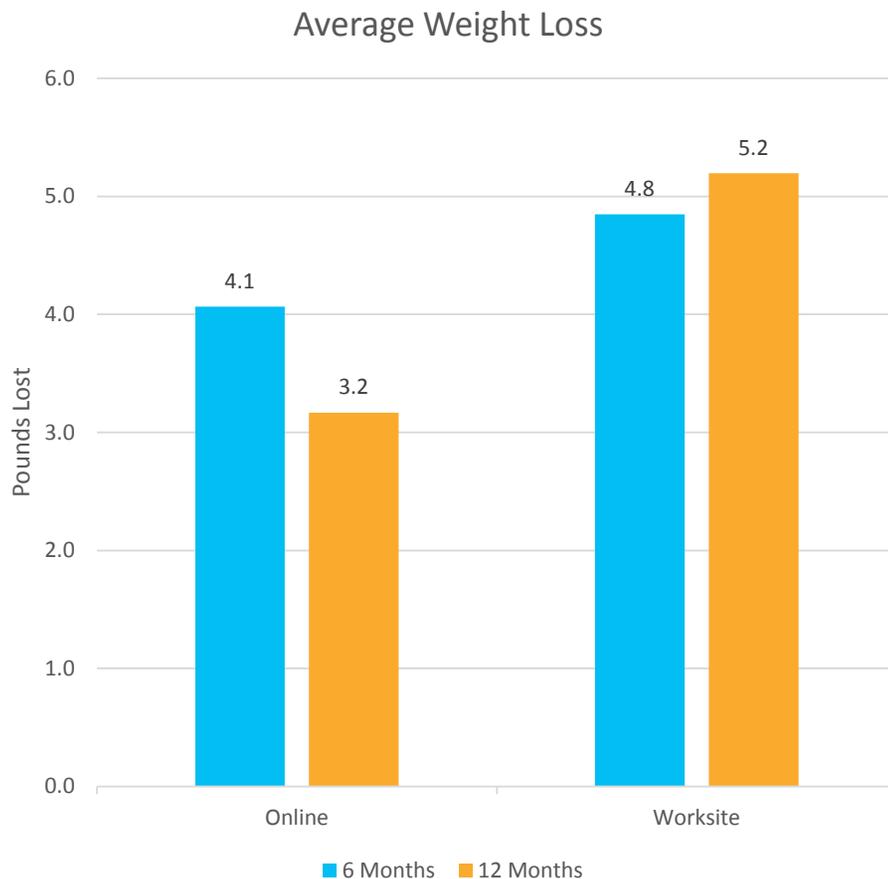
Average percentage of weight lost at 12 months

- Online DPP -1.9%
- Worksite DPP - 2.9%

Percentage of those who lost weight

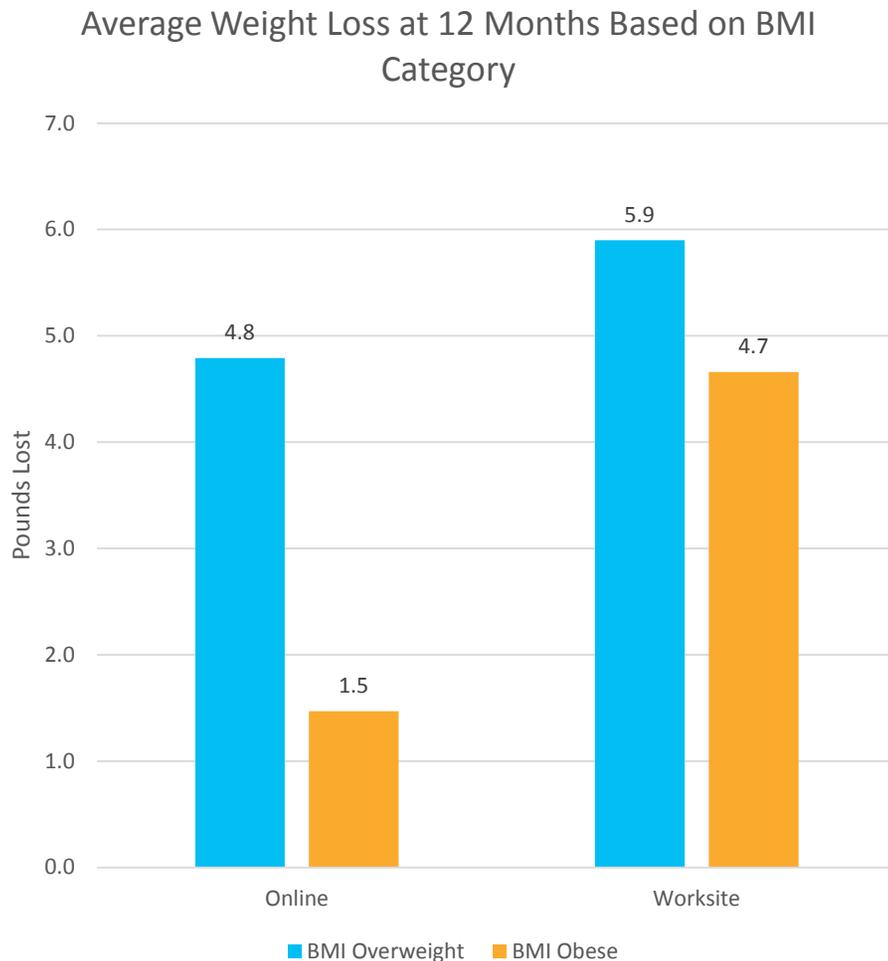
- Online DPP – 63%
- Worksite DPP – 66%

Outcomes: Maintaining Weight Loss



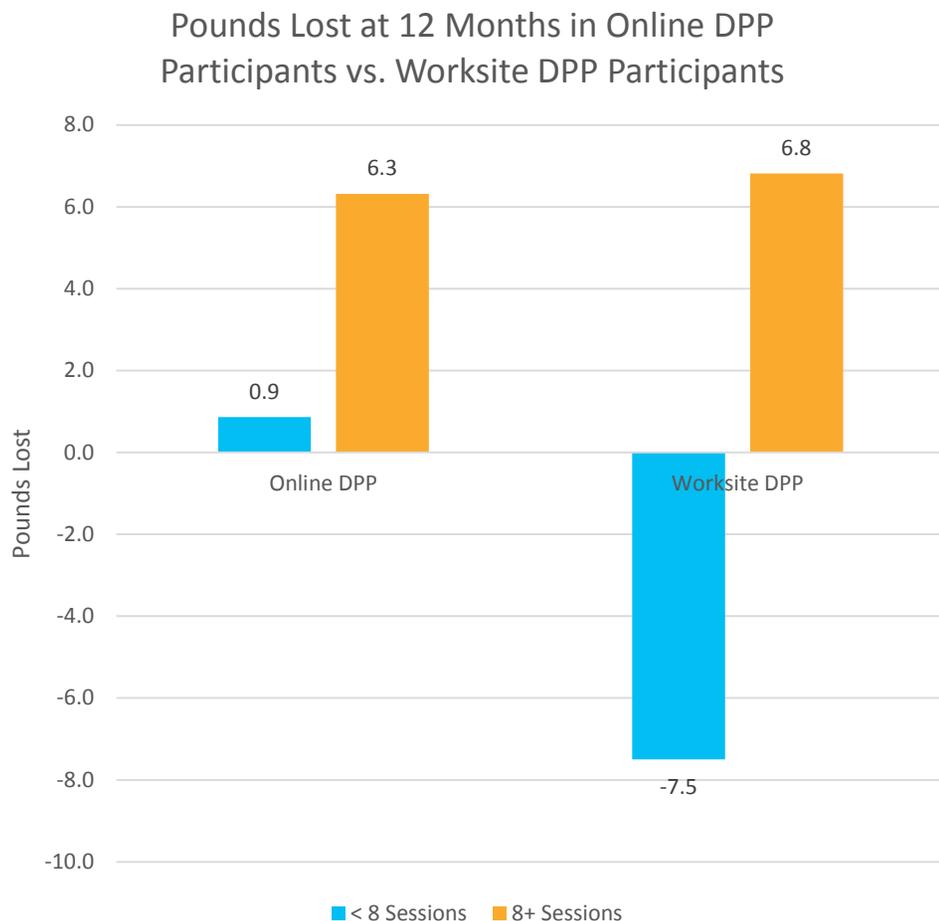
- DPP is a year-long program with weekly/biweekly meetings for the first 6 months and monthly meetings for the rest of the year
- At 6 months
 - Online DPP – 4.1 lb. loss
 - Worksite DPP – 4.8 lb. loss
- At 12 months
 - Online DPP – 3.2 lb. loss
 - Regained .9 lbs
 - Worksite DPP – 5.2 lb. loss
 - Lost additional .4 lbs

Outcomes: Weight Loss in Overweight vs. Obese Participants



- Weight loss was greater in those who were overweight compared to those who were obese
 - Online DPP – Overweight participants lost 3.3 more lbs than obese participants
 - Worksite DPP – Overweight participants lost 1.2 more lbs than obese participants
- Weight loss was much greater in the obese individuals in the Worksite DPP
 - Online DPP – 1.5 lb. loss in obese participants
 - Worksite DPP – 4.7 lb. loss in obese participants

Outcomes: Greater Engagement = Greater Weight Loss



- The Worksite DPP was more effective in engaging participants
 - Online DPP = 32% (26/80)
 - Worksite DPP = 74% (58/78)
- Engaged participants lost more weight
 - Online DPP = 5.4 lbs more
 - Worksite DPP = 14.1 lbs more
- Weight loss among engaged participants was similar in both groups
- Among, unengaged participants, weight gain was greater for the Worksite DPP group

Engagement Lessons: Program Features Related to Engagement

Helpful Features

- Lifestyle Coach – 42% more Worksite participants reported the coach to be very helpful
- Tracking Food Intake – 22% more Worksite participants reported tracking to be very helpful
- Content – 17% more Worksite participants reported the content to be very helpful

Barriers to Participation

- Format – 33% more Online participants reported the format as a barrier
- Lost Interest – 30% more Online participants reported losing interest
- Poor Resources – 16% more Online participants reported the resources as a barrier

Engagement Lessons: Program Features Related to Engagement

“I had tried online classes and didn’t find that it provided the real-time feedback I needed. The coach was awesome! I found that it helped me to show up even when I gained back weight or decreased my physical activity. A few regulars would send email messages to coordinate walks or meals on our regular meeting day. Those were good and encouraged peer support. We had the best discussions in class and I got a lot of useful tools that I still use today. The fact that the meetings were in my building helped tremendously, too. I hope that this sort of program can be made available as a regular program for CCSF staff.”

Engagement Lessons: Worksite Programs

Participants reported be more likely to participate because the program was offered

By the employer

- Online DPP 86%
- Worksite DPP 83%

At no cost

- Online DPP 96%
- Worksite DPP 89%

Implications

- In-person programs are an important component of an effective well-being program
- No-cost, worksite-based programs are an important component of an effective well-being program
- Promotion of well-being resources (regardless of who is providing them) by the employer promotes engagement

Listen to Eva's story here:

<http://myhss.org/well-being/stories.html>



Better Every Day.

Eva Atijera-Taylor
Executive Secretary

“I actually lost 23 pounds with the Diabetes Prevention program.”

myhss.org/well-being

SAN FRANCISCO
HEALTH SERVICE SYSTEM