

Presentation Title	Place in Schedule
Policy Matters for Total Worker Health	Concurrent Session 1.4 <i>Day 2 – Wednesday</i> <i>May 9<sup>th</sup>, 2018</i> <i>1:00 – 2:15pm</i>
Description of Presentation	Presenter Name(s) And Credentials
<p>Abstract 1: Literature Review of Policy Implications from findings of the Center for Work, Health and Wellbeing            Authors: Maria Andree Lopez Gomez, Emily Sparer, Glorian Sorensen, Greg Wagner</p> <p>a) Background: The Harvard T.H. Chan Center for Work, Health and Wellbeing (Center), a NIOSHfunded Total Worker Health (TWH)® Center for Excellence, has been conducting research on integrated approaches to worksite health and safety since 2007. In 2016, the Center formed a Policy Working Group (PWG). One aim of the PWG is to examine and strategically communicate policy implications of the Center’s research at multiple levels. The PWG is conducting an in-depth review of the Center’s body of work.</p> <p>b) Methods: The goals of this review are: 1) to explore the policy implications of the Center’s research as a case example of the policy ramifications for TWH approaches; 2) to inform the research community about these policy implications; and, 3) to identify future areas of research based on the work thus far.</p> <p>We have reviewed the Center’s publications, including findings, conclusions or recommendations that could guide workplace policies and practices to improve worker health, safety and wellbeing. Two PWG members independently reviewed each publication and extracted a set of themes related to policy implications, including policies explicitly/implicitly discussed, level at which policy could be implemented (organizational or public), potential policy implications from reviewers if not mentioned, generalizability, key limitations and scientific gaps. Reviewers additionally requested that authors of each paper review the suggested policy implications and scientific gaps, and expand and/or corroborate the reviewers’ interpretations. Following this detailed review, the two reviewers merged common themes to identify a set</p>	Gregory Wagner, MD <i>Harvard T.H Chan School of Public Health</i>
	Nico Pronk, PhD <i>HealthPartners Institute, HealthPartners, and Harvard University</i>
	Dean Hashimoto, MD, JD, MOH <i>Partners HealthCare System</i>
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	Anna Yankelev, BS, MPH(c), MBA (c)

of organizational policies, related evidence supporting these policies, and the implications of these organizational-level policies on public policy.

c) Results: To date, we have systematically reviewed 45 publications that covered the Center's work and affiliated projects from 2011 to 2017. This review is ongoing, with plans to expand this review to include Center presentations and other written materials, as well as affiliated projects (e.g. pilot studies) and publications in various pre-publication stages. We have identified the following themes that relate to policy recommendations: flexible work arrangements, injury reporting procedures, elimination of violence/harassment, integrated interventions, leadership support, the importance of inclusion of work environment factors in the design of interventions, and the importance of including worker and manager perceptions in the evaluation of interventions.

Additionally, we identified several scientific gaps that we have categorized as methodological (e.g. lack of longitudinal data, need for greater variety in study samples) and substantial (e.g. need for a public policy discussion)

d) Implications: This review process can serve as a model for other research groups who seek to examine the TWH® policy implications of their own work and identify future areas of focus. By reviewing our research to date, we have identified common themes and related policy recommendations, along with some important scientific gaps for future research.

Abstract 2: Evaluation of Unit-Based Organizational Policies Within an Academic Health Care System

Author: Dean Hashimoto

The Harvard School of Public Health and the Partners HealthCare System have collaborated since 2007 to establish an integrated workplace data base. It includes more than 14,000 patient care workers at two hospitals. It not only includes traditional sources of occupational health data (such as HR, payroll, workers' compensation, OSHA, public health reportables, etc.), but also data sources such as survey data (including self-assessment of psychosocial work environment, organizational policies and practices,

health behaviors, proximal health outcomes), worker healthcare utilization (from the employer selfinsured health plan) and patient outcomes (patient incident reports). The data base can identify the longitudinal impact of the healthcare organizational policies and its psychosocial environment on outcomes important to worker health and safety, the health care enterprise, and patient safety.

This research effort is an academic/industry research partnership with joint priority-setting by the Harvard and Partners investigators. The database is housed on the Partners network, given the necessity of a high degree of confidentiality associated with the financial and health data sources. More than 30 peerreviewed

manuscripts have been published. Examples include: (1) An evaluation of safe patient handling and mobilization program based on survey and injury data associated with a policy implementation that was aimed at both improving patient outcomes and increasing workplace safety; (2) A study of workplace bullying and mental health expenditures using survey and health care expenditure data; and (3) A study of health plan expenditures (non-workers' compensation) after a workplace injury.

This academic/industry research partnership with an integrated Total Worker Health data base represents an opportunity to evaluate unit-based organizational policies within a complex health care system. This approach allows for the novel evaluation of the impact of organizational policies on worker safety and health; the psychosocial work environment on downstream costs; as well as the relationships between workers' compensation and employee health plan utilization and spending.

Abstract 3: The Role of Research in Evidence-Based Policy for Health and Well-Being: Total Worker Health-Related Research in a Broader Context

Author: Nico Pronk, Ph.D.

HealthPartners is the nation's largest not-for-profit, member-governed integrated health system headquartered in Minneapolis, Minnesota. Its mission is "to improve health and well-being in partnership

with our members, patients and community.” The HealthPartners vision reads: “Health as it could be, affordability as it must be, through relationships built on trust.” The mission (why we are here) and the vision (where we are heading) statements are important in setting strategic direction for the organization and support decisions about methods by which plans and actions are implemented. Some of those plans and actions are shaped in the form of policies.

According to the World Health Organization (WHO) health policy refers to decisions, plans, and actions that are undertaken to achieve specific health care goals within a society. An explicit health policy can achieve several things:

- It defines a vision for the future which in turn helps to establish targets and points of reference for the short and medium term.
- It outlines priorities and the expected roles of different groups.
- It builds consensus and informs people.

The County Health Rankings has created a framework that has informed HealthPartners’ thinking about population health improvement. This model explicitly recognizes the role of policies in creating health outcomes. Yet, in order to make decisions about which policies to implement or what outcomes to choose, evidence of effective interventions is paramount. Therefore, the role of research is critical to effective policy shaping and making. Furthermore, policy may cross various sectors such as care delivery, insurance, prevention, and service functions and, additionally, may support both health system as well as public health goals.

This presentation will address questions and provide examples of how focused efforts around organizational policies relevant to Total Worker Health (TWH) may be placed in a broader context that reflects the interests, goals, and responsibilities of health systems, employers, and community.

Specifically, examples of the evidence-base generated to support policy-related initiatives related to prevention priorities and informed decision-making will be highlighted in the context of applications that

consider impact on workers and business, and are applicable to the TWH agenda. Another contextual consideration is the role of TWH in the performance of a Learning Health Care System (LHS). A learning healthcare system (LHS), defined by the IOM in 2013 as “one in which science and informatics, patient/clinician partnerships, incentives, and culture are aligned to achieve continuous and real-time improvement in both the effectiveness and efficiency of care,” may represent a key transformation needed to improve the U.S. healthcare delivery system. Integration of a TWH policy agenda into the design of LHS could positively influence and support the goals, interests, and broader policy considerations of the health systems, employers/purchasers, and providers as well as further the interests of patients/members/employees and their families.

Abstract 4: Bridging research and implementation: Early findings from an action research initiative focused on structural change

Author: Christina Welter, DrPH, MPH; Anna Yankelev, MPH, MBA

Precarious work is a complex problem, interacting with multiple social determinants of health including poverty, racism, classism, sexism, etc. Addressing such complexity in a sustainable manner requires a systems perspective to foster “integrated public health programs that consider the complex interplay between work-related and non-work-related factors, that integrate health protection with health promotion and that are delivered at multiple levels to improve health for low-income workers.”

There is an emerging call for interventions and approaches that address healthy work both within and outside the workplace. Such interventions must also address the complexity of current trends that have contributed to the rise of precarious work, including globalization, automation, the outsourcing of low and mid-wage jobs, and the rise of the “gig” economy and contracted labor. Policy, systems, and environmental (PSE) change initiatives represent one such approach, and have been increasingly called

to address complex challenges that have myriad causes at multiple levels in the system.

Little is known about policy and systems approaches to promote healthy work, and there is limited effort to promote health within the context of precarious employment. The University of Illinois at Chicago School of Public Health (UIC SPH) was awarded a grant from NIOSH to fund a Total Worker Health Center of Excellence entitled the Center for Healthy Work (CHW). The Healthy Communities Through Healthy Work Initiative (HCHW), a part of the CHW's Outreach Core, is undertaking a multi-phased action research approach to address the drivers of healthy work and to facilitate a culture of healthy work specific to precarious employment using policy and systems strategies together with local, regional, and national partners. Our diverse partners include agencies in the public health and labor sectors, government entities, and community, research, advocacy, and policy organizations.

The goals of the first action research phases of the HCHW initiative are to: 1) assess our partners' definitions and perceptions of precarious versus healthy work alongside the perceived barriers and facilitators to achieving healthy work; 2) to understand what structural initiatives are underway within our partners' organizations that may facilitate the pathway from precarious work to healthy work; and 3) to expand interventions that facilitate a positive pathway toward healthy work in sustainable ways using PSE approaches.

In this presentation, HCHW will report on the process and findings from the action research process, including data collected from over 50 key informant interviews with partners in multiple sectors and systems levels, and results from conducting a systems initiative mapping process with partners. HCHW will report on key structural interventions including policy and systems approaches identified and/or underway to address pathways to facilitate healthy work within the context of precarious work.