<table>
<thead>
<tr>
<th>Presentation Title</th>
<th>Place in Schedule</th>
</tr>
</thead>
</table>
| Using a Case Studies Approach to Examine Total Worker Health® in Small Enterprises | Concurrent Session 4.5  
Day 3 – Thursday  
May 10th, 2018  
1:15 – 2:30pm |

<table>
<thead>
<tr>
<th>Description of Presentation</th>
<th>Presenter Name(s) And Credentials</th>
</tr>
</thead>
</table>
| Symposium Abstract:  
Diane S. Rohlman  
Small employers have fewer resources, are more financially precarious, and have higher rates of occupational injury and illness compared to larger enterprises. Interventions that address the promotion of health and well-being in addition to traditional occupational safety and health hazards, a Total Worker Health® (TWH) approach, may be effective in reducing injuries and preventing illness. However, the panel report from the National Institutes of Health Pathways to Prevention Workshop entitled “What’s work got to do with it?” recognized there were limited studies among small enterprises and identified this as a priority area.  
Research from the Healthier Workforce Center of the Midwest examined the implementation of safety and health programs in small businesses and mapped them to elements of TWH. Industry sector affected whether the emphasis was on health protection or health promotion and enterprise size impacted the availability and integration of resources. Safety is often required by law to be in place, however, programs promoting health and well-being tended to be more recent and were adopted after safety programs had been implemented. Return on investment (ROI), value on investment (VOI), and low-cost strategies were identified by all employers to be key considerations for adoption. Integration was exhibited by combined or joint safety and health committee meetings and the utilization of health data to develop programming addressing safety or safety data to address health needs.  
However, this integration was likely not occurring due to strategic efforts to integrate programming, but rather due to features of small enterprises. Very small employers are often integrated de facto due to the limited number of employees; one employee may have multiple responsibilities. The Center for Health, Work & Environment at the Colorado School of Public Health has recently | Diane S. Rohlman, PhD  
Healthier Workforce  
Center/University of Iowa  
Lisa Henning, BA  
Nebraska Safety Council  
Heather Vanover, PMP, CHCM  
Nebraska Safety Council  
Janalee Thompson, MS  
Center for Health, Work & Environment  
Kaylee Rivera, MPH  
Center for Health, Work & Environment |
added to this body of knowledge, taking a mixed methods approach to triangulate on the question of how small business leaders in different industries prioritize safety, health and well-being. Structured interviews with 20 small business leaders indicate that these businesses often lack a formalized health, safety and wellness program beyond offering basic health care benefits and workers’ compensation coverage.

The aim of this symposium is to utilize a case studies approach to explore and characterize health and safety practices, policies and programs in small enterprises from a TWH perspective. Case studies allow an in-depth view within a natural context and allow us to explore 'how', 'what' and 'why' TWH is implemented in small enterprises. For example, how is TWH implemented, what gaps exist in its delivery and why one approach was chosen over another. Practitioners from three organizations, the Nebraska Safety Council/WorkWell, SAIF Corporation, and the Colorado Health Links™ program will discuss how TWH programs, practices, and policies are implemented in small enterprises, discuss the role of organizational culture and leadership support, program design and implementation, and evaluation.

The Small Business Case for Total Worker Health: Two Examples

Lisa Henning and Heather Vanover

According to the Bureau of Labor Statistics, nearly 71% of Nebraska’s workforce is employed at an organization with fewer than 500 people, with 52% employing fewer than 100 people. Traditionally, programs focusing on employee safety and wellness have been reserved for larger organizations due to lack of resources and knowledge of how to properly administer a quality program. More than 50 years ago, Nebraska Safety Council was established to address the needs of all sized businesses. In 2013, WorkWell, an established worksite wellness council, merged with the Nebraska Safety Council. With pilot funding from the Healthier Workforce Center, the Council began working with employers to develop integrated health protection and health promotion programs and in 2015 became a NIOSH Total Worker Health ® Affiliate – the only Total Worker Health (TWH) Affiliate in Nebraska. Today more than 600 businesses are members of the Nebraska Safety Council and receive expert advice and resources to address the needs
of their populations. Two case studies demonstrate that Total Worker Health ® can be a part of any size organization. Company A, is a small enterprise in the recycling industry with 18 employees. Following an onsite fatality, management worked closely with the Nebraska Safety Council to review, update, add, and improve their written safety programs, provide training on numerous safety and health topics to ALL employees. In addition, they have implemented an audit program focused on hazard identification and mitigation to prevent potential safety incidents from occurring. Company A is also starting a multi-dimensional wellness program providing additional paid time off for areas such as exam compliance, physical activity, volunteering, recycling at home, and investing in the 401K program. Other components include health coaching and healthier options offered in vending machines. Management shows strong leadership for this program by demonstrating by example and visibly participating in all program offerings.

Company B manufactures natural gas tanks and has 80 employees. Following leadership changes in 2014, the organization implemented a change in culture to embed safety and wellness in core functions of the organization. A health contingent premium incentive and health coaching is used to address poor health outcomes. Company B believes “keeping people safe and healthy enhances the ability to embrace our growing wellness culture.” Initiatives during the past two years include a dermatitis reduction campaign, workplace violence, dynamic stretching, job rotation, and a focused return to work program. Outcomes include reduction of dermatitis incidents from thirty cases in 2012, two in 2016, and zero in 2017. (Note that Company B was part of a larger organization in 2010 so data are skewed.) Additional outcomes include an 18% reduction in Metabolic Syndrome, a 3% reduction in depression, 4% reduction in anxiety (PHQ-4), a return on risk in production of $83,065, as well as over 97% retention rate.

These examples demonstrate how and why these two organizations implemented TWH interventions and discuss outcomes from these programs.

Promoting Health and Safety in Small Businesses: One Case at a Time
Sabrina Freewynn
SAIF is Oregon's not-for-profit, state-chartered workers' compensation insurance company. We are the market leader, issuing more than half of the policies in Oregon and providing coverage to more than 600,000 workers. Our vision is to be an industry innovator that makes Oregon the safest and healthiest place to work. We exist to serve and protect the Oregon workforce, meeting the needs of workers and employers and strengthening Oregon's economy. SAIF is a NIOSH Total Worker Health® affiliate—the first workers' compensation organization in the country to hold this status.

SAIF's safety management consultants provide direct consultation to a wide variety of businesses on ways to advance safety and health in their organizations. To do so effectively, SAIF has developed a message strategy that frames health as a safety issue and encourages the use of familiar tools—hazard identification and control methods—to identify and implement employer supports for healthful behaviors. One element of the message framework is storytelling.

This presentation will give the messaging frame as we would deliver it to a policyholder. It starts with describing how behavior is shaped by the places we live, work, learn, and play. Employers are then encouraged to think of their own health goals and consider what at their worksite makes reaching that health goal easier and harder. Approach these things as you would safety hazards putting buffers in place between you and the behavior you don’t want or removing barriers to the behaviors you do want.

The message frame includes sharing stories from other businesses to demonstrate that a TWH approach is possible across a wide range of industries and regardless of business size. To demonstrate, the presenter will share stories from a small manufacturing company that invests deeply in creating a sense of connection among staff, a short-haul trucking company that changed wage and hour policies, a restaurant that improved safety with marriage counseling, and a construction company that engaged employees to find a solution for hydration and nutrition challenges.

Using Mixed Methods to Explore “TWH Leadership”
Janalee Thompson
As the Total Worker Health® framework gains research and practice support, it is important to study the role of organizational leadership. Unfortunately, organizational leadership research has usually focused on either health promoting leadership or safety
leadership, specifically in large companies. Leadership theories fall short of integrating both health protection and health promotion into practice. The influence of health and safety leadership in small enterprises is especially important albeit understudied. Qualitative semi-structured interviews were conducted with 20 small business senior leaders (CEO, Vice President) in agriculture, service sector, manufacturing, construction, mining, sanitary services, retail and finance industries. The goal of the interviews was to gain a deeper understanding of if and how senior leaders use leadership skills to influence TWH. The questions reflected common leadership theories (e.g., transformational leadership): organizational mission and vision, organizational culture, whether and how they lead by example, strategies for employee advancement, and whether and how they give feedback and recognition. Common interview themes included the acknowledgement of leader participation in health, wellness and safety initiatives, corporate social responsibility, walking the talk, and developing personal connections with workers in order to achieve personal and professional goals.

“There’s a lot of companies that do a lot of great things and events, but you don’t often see the upper-level management going to be in the nitty-gritty and participate in some of that stuff.” – Interviewed Leader

“The success of the project depends on people being able to contribute based on their skills and experiences and I think that being healthy is a fundamental component of that.” – Interviewed Leader

“I think it’s important from a personal perspective not only for ourselves, but also for our employees and that they conduct themselves in a safe manner so that they return to their families safely and be healthy and be able to provide for their families.” – Interviewed Construction Industry Leader

Results indicated that small businesses usually lack a formalized health, safety and wellness program beyond organizational health benefits and workers’ compensation insurance. Though there were differences between industry perspectives on safety and wellness, when asked broadly about health, safety and wellness, leaders from high-risk industries such as construction and mining, usually mentioned safety in some capacity, whereas low risk industries such as finance and the service sector focused
primarily on wellbeing and rarely mentioned safety. These interviews indicate that leaders value the health and safety of their employees, but perceive that they lack resources in time and manpower to develop a successful, formalized health, safety and wellness program. We will discuss ongoing research incorporating worker interviews in order to compare leader actions to worker perceptions of leader TWH behaviors and practices.

Health Links: Case Studies

Kaylee Rivera

In 2013, the Center for Health, Work & Environment at the Colorado School of Public Health launched Health Links™, a Total Worker Health initiative that works with businesses to help them assess their health and safety practices and develop actionable, evidence-based solutions to foster a culture of health and safety in their workplace. To accomplish this, the Health Links team works with local small businesses in the following ways to:

- Help organizations identify areas for improvement in their workplace health and safety policies and programs using an online evidence-based assessment.
- Certify qualifying organizations as Healthy Businesses, helping them recruit and retain top talent and gain prestige in their community.
- Match organizations with a trained Health Links advisor who offers one-on-one onsite coaching and support to design actionable, evidence-based goals.
- Connect businesses to one another and to local resources to help them meet their goals.

We will present case studies from two of the more than 400 small businesses that have completed Health Links Assessment and advising in the past three years in Colorado, Florida and Oregon. These cases studies will include:

Case Study A: A ski resort condominium rental company that takes an integrated approach to health and safety. Examples include health benefits, paid time off, standing desks, commuter passes, ski passes, weekly “safety bingo” to reinforce and incent safe work practices. Their approach relies on worker voice, seeking feedback on both health and safety, and incremental steps. “Just stay creative and your program will evolve.”

Case Study B: A County Government that has prioritized quality of life for its employees, investing in safety and health. This county sought to help keep costs down by fostering a culture of safety and health that “comprehensively” focuses on policies,
practices, culture, programs, and education to contribute to a positive work environment. They are applying TWH strategies to address top causes of both medical and workers’ compensation claims, through programs including facilitated stretching, mindfulness classes, ergonomic work areas, biometric screenings, and health and safety policies.

We will discuss the value that small businesses find in this program, including external evaluation, help with business outcomes, tailored advice and support, and recognition both inside their organization and in their communities.