Worker Well-being and High Performance Workplaces

Two Sides of the Same Coin

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Presented May 9, 2018 at the 2nd International Symposium to Advance Total Worker Health
What we’ll cover

1. Worker Well-being
2. High Performance Workplace
3. Systems Perspective
4. Implications for Research & Practice
1. Worker Well-being
The Work/Health Relationship

The Corporate Wellness Industry

Employers’ Roles in Promoting Worker Health

Job Retention

Safety & Job Demands Affect Productivity

Insurance & ACA

Gaming Hospital Inspections In England

Medicare Advantage

Projected Coding Intensity Could Increase Medicare Spending By $30 Billion

Richard Kronick

Special Issue sponsored by Integrated Benefits Institute, Sedgwick, UnitedHealth Group, with additional support from Pfizer and Pinnacol Assurance for policy briefings in Washington DC and San Francisco, CA, February 2017.

For over two decades, the Integrated Benefits Institute has supported the development of research and evidence in the health and productivity management field. IBI’s unwavering focus on the connection between employee health and business value led to our co-sponsorship of a special issue of Health Affairs, which aims to raise the visibility of the business value of health. The research featured in the issue addresses five cross-cutting themes that have important implications for the policy and practice of workforce health and performance improvement.

One such theme addresses the ways in which organizational culture and climate can have a direct and measurable impact on whether or not efforts to improve health and performance outcomes succeed.

Many of the studies featured in the Health Affairs issue illustrate how the physical and emotional hazards in a workplace, in addition to the relations between employers and managers, can affect health and work-related outcomes. An analysis featured in the issue defines workplace culture as “the shared beliefs and values underlying an employer’s programs, policies and actions and the priority it places on health and safety” (McCleary, 2016, p. 210). The commentary cited examples operating at all levels of an organization, such as:

- Peers encouraging each other to quit smoking,
- Leadership emphasizing the importance of making and meeting health goals.

Employment and work conditions can improve or harm both the physical and mental health of employees. This is true when considering obvious examples of workplace hazards, such as
Workforce Health, Safety & Job Demands Influence Employee Productivity

Study Questions
Are absenteeism and presenteeism associated with
- employee health
- workplace safety
- physical and cognitive job demands
- the interaction between these three elements?

Source:
CONNECTING

Workplace Culture of Health

Employee Workplace Outcomes

Operational and Business Outcomes

2. High Performance Workplace
What Leads to High Performance?

Improving Workforce Performance in a Changing Work Climate

The Impact of Health on Job Performance and Productivity

Work Climate
- Safety
- Respect and Trust
- Variety and Learning
- Workload

Job Context
- Occupation
- Full or Part-time
- Team Member Reliance

Management Context
- Assessment of Employee Absence
- Assessment of Employee Performance
- Manager Response (e.g. use of overtime, staff replacement, doing nothing, etc.)

Employee Health
- General Health (mental and physical)
  - Chronic Health Conditions
  - Symptoms (mental and physical)

Employee Characteristics
- Age
- Sex
- Income
- Education
- Marital Status
- Number of Children

Attendance, Job Performance, Absence
- Attendance (expected and actual hours)
- Absence (health-related and other)

Work Limitations Questionnaire (WLQ)
Health and Work Performance Questionnaire (HPQ)
Stanford Presenteeism Scale (SPS)

Operational Impact and Business Costs
- Did Not Hit Output Targets
- Reduced Customer Satisfaction
- Reduced Information Flow
- Missed Deadlines
- Revenue Loss
- Lower Quality Products or Services
- Waste Resources
- Disrupt Business-Critical Systems

Work climate exacerbates the effect of health symptoms on absence and performance

3. Systems Perspective
Possible Causal Pathways Between Health, Work and Well-being

+/-: Beneficial or Harmful Effects

Figure 1 from *Is Work Good for Your Health and Well-being?*, Waddell & Burton, 2006, p.2
“We believe that work can be a source of wellbeing, fulfillment and safety if we intentionally design it to help us thrive as human beings.”

- Habits at Work
A context design company based in Chicago, IL

Source:
Academy for Systems Change
4. Implications for Research & Practice
“High-deductible health plans are often just risk/cost shifting to employees with the likelihood that employees will become less compliant with evidence-based care”

- Richard Feifer, MD


Bridging Clinical Perspectives with Real World Work Outcomes

Part of the series, Patient-Centered Outcomes Research (PCOR) Dissemination at Work: How Employers Use Evidence to Make Employee Health Investment Decisions, was partially funded through a Patient-Centered Outcomes Research Institute (PCORI) Eugene Washington PCORI Engagement Award (#2970-CWHP).
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Conditions/Symptoms: Diabetes, Depression, Cancer, Pain, Multimorbidity.
Resources

Evidence
Searchable by Audience and Conditions

Feature will adapt to latest evidence and point to a variety of sources

Changing the Healthcare Delivery Model: A Community Health Worker/Mobile Chronic Care Team Strategy

Diabetes

Diabetes is a complicated disease that can cause heart attack, stroke, kidney failure, and eye problems. Patients with diabetes need to monitor their blood sugar, follow a diabetic diet, exercise regularly, take multiple medications, and get regular checkups of their blood pressure, cholesterol, eyes, and feet. To assist with organizing these tasks, a community health worker, attached to a patient’s clinic, can help patients understand the care of their diabetes and keep patients in contact with their doctors...

Read more at PCORI.ORG

Does Daily Self-Monitoring of Blood Sugar Levels Improve Blood Sugar Control and Quality of Life for Patients with Type 2 Diabetes Who Do Not Use Insulin?

Diabetes

For the nearly 75% of patients living with type 2 diabetes (T2DM) who do not use insulin, decisions regarding self-monitoring of blood glucose (SMBG) is unclear. SMBG testing is a resource-intensive activity without firmly established patient benefits. While SMBG holds great promise for sparking favorable behavioral change, the potential for no benefit or even patient harm must be acknowledged. Possible negative effects on patient quality of life must be more closely examined along with the speculative benefits of SMBG in non-insulin-dependent diabetes.
Credits

This presentation uses a free resource developed by Slides Carnival
Special thanks to all the people who made and released the presentation template

Any Questions?
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