A Learning Collaboration to Deliver Onsite Health Promotion for Hospital Staff

Mary Val Palumbo DNP, APRN, GNP-BC
University of Vermont
University of Vermont Medical Center
Burlington, Vermont, USA
Acknowledgements

- Evelyn Sikorski, CSW, CEAP, Manager/Employee Wellness
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Objectives

1. The learner will be able to discuss evidence based interventions for health promotion for hospital employees.

2. The learner will be able to describe a collaboration between a graduate nursing program and an employee health team to deliver unit based health promotion.

3. The learner will be able to identify means of measuring health promotion impact and return on investment.
Background

When exposed to work related stressors, nurses employing ineffective coping strategies, coupled with poor self-care, are at risk for developing stress symptoms, health related problems, burnout, and turnover.

Conceptual framework: Health Promotion Model (Pender, Murdaugh & Parsons 2005)
Background

Young nurses balancing work and home responsibilities are particularly vulnerable to poorer emotional health\(^1\).

The physical work of nurses is dangerous and is highly ranked for work related injury\(^2\).

Older nurses’ workplace injuries are the main cause of their early exit from the workforce\(^3\).
Background

With the relationship of work stress and musculoskeletal injury to absenteeism and turnover well documented\textsuperscript{4,5}, the financial case for nurse health promotion is sound; but what are the most effective methods and how should outcomes be measured?
Evidence based health promotion (Review)

Worksite Health Promotion Programs with Environmental Changes
A Systematic Review  

Luuk H. Engbers, MSc, Mireille N.M. van Poppel, PhD, Marijke J.M. Chin A Paw, PhD, Willem van Mechelen, MD, PhD

13 studies were analyzed (11 RCTs, all at multicenter studies with n = 250-28,000). Evidence exists that WHPPs can influence dietary intake. More controlled studies with higher methodologic quality needed.
Evidence based health promotion (Meta-Analysis)


Vicki S. Conn, PhD, RN, FAAN, Adam R. Hafdahl, PhD, Pamela S. Cooper, PhD, Lori M. Brown, MS, Sally L. Lusk, PhD, RN, FAAN, FAAOHN

138 reports with total n= 38,231. Significant positive effects were observed for physical activity behavior, fitness, lipids, anthropometric measures, work attendance and job stress.
Evidence based health promotion (Meta-Analysis)

18 studies described 21 interventions, the overall effect of a WHPP was small. Effectiveness was larger in a younger population, in interventions with weekly contacts and in studies with control groups receiving no health promotion.
Evidence based health promotion

Mixed results of the cost effectiveness/outcomes of employee health promotions have been documented.

Therefore in 2011, a quality improvement project was designed to evaluate a 6 month initiative of unit-based psycho-educational interventions offered in collaboration with Employee Wellness and the nurse practitioner student service learning project.
Methods

It was hypothesized that this wellness protocol would demonstrate a unit level decrease in:

1. aggregate unscheduled time off
2. worker compensation claims
3. safety related injuries

Satisfaction with the wellness program offered on the unit would be demonstrated.
Methods

Unit based intervention delivered to one hospital medical unit with 80 employees including:

1. an educational posters including nutrition, stress management, relaxation techniques, safe patient handling and movement strategies
2. physical activity promotion
3. incentives for participation and behavior change (average $35/unit employee).
Methods - Student involvement

Nurse practitioner students received training in Motivational Interviewing and were instructed to use this during the health coaching session.

The nurse practitioner students were responsible:

- Presenting the weekly health topics on a bulletin board,
- Biometric screening was made available on the unit and management worked to free up staff to attend these sessions.
- Health coaching was provided by and S.M.A.R.T. (specific, measureable, attainable, realistic and timely) goal setting.
Methods

A comparison of aggregate organizational and subjective participant data in intervention year data (FY 11) with pre-intervention data (FY 10) including: unscheduled time off, worker compensation utilization, safety information obtained from the Human Resource, and participant satisfaction.
Results- 2011

- Participation increased in the Wellness Program - “Know Your Numbers” from 0 participants in FY10 to 60 out of 77 employees participating in Biometric Screening in FY11 (0% to 78%).

- Worker compensation utilization - short term disability claims decreased to 0.

- There was no significant change in patient handling incident reports and safety related injuries.
Results - 2011

- Savings were calculated by using 75% of the difference in unscheduled hours off between the mean of the previous three years and period of the intervention. Average hourly rate of pay including fringe ($48.34) was then multiplied by the unscheduled hours off = $11,409.17

- In comparison with a unit of similar size, no decrease in total unscheduled time off was shown during the same timeframe.
Results-2011

- Total cost of Wellness Program delivery = $7,664.00
- This includes:
  - Biometric screening ($15.00),
  - Wellness RN time for delivery and coordination ($45.80),
    plus incentives ($35.00) per unit employee.
- Total cost per person for the six month Wellness Program = $95.80
  - $11,409.17 (difference in unscheduled time off)
  - $7,664.00 (cost of program)
  - $3,745.17 (Return on Investment)
Total Hours of Unscheduled Time Off on Unit

- 2008: 1324 hours
- 2009: 1124 hours
- 2010: 1234 hours
- 2011: 913 hours

Jan – June of Each Year
Results - 2011

Participant satisfaction survey results (n = 48 60% response rate)

- 71% agreed that the screening and wellness coaching supported their health and wellbeing while at work;
- 65% agreed that the program had a positive impact on the unit as a whole;
- 64% agreed that their health knowledge increased;
- 45% agreed that the program improved their work productivity.
Implications

Based on the 2011 results the program was continued for the next 6 years.

Nurse practitioner students have been utilized to bring wellness education and biometric screening to employees of different hospital floors during a 6 month period each year.
Our Goal was >60 MICU employees

~We screened 68 on all shifts~

100% surveyed report they feel this offering made a positive difference

“The student helped me with realizing I had set a goal, just by talking with me about what I thought was important.”

“We appreciate Wellness coming in for the night shift”

100% surveyed hope to have this program replicated and offered again
104 Employees Completed Biometrics Screenings

Demographics

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<th>Age</th>
<th>Male</th>
<th>Female</th>
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Social Media Reach - 2017

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<td>180</td>
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The University of Vermont
Educational Boards
"The educational boards and folder provided valuable information on how we as nurses can care for ourselves best on a different focus area each week. We loved the incentives each week which made it fun and the biometric screenings were informative!"

“Overall exceptional program! Thank you for bringing this to shep 4, it was much appreciated by myself and I know my co-workers all provided nothing but great feedback. It brought up a lot of great conversations on the night shift surrounding the topic of self-care”.

“I feel very supported by UVMMC and that they care about my physical wellbeing. Thank you for bringing this program to us.”
Conclusions

This unit-based wellness program using incentives, has continued to yield high participation and satisfaction over the past six years.

This project found that bringing health promotion activities directly onto a hospital unit has been cost effective and satisfactory to the participants, as well as, nurse practitioner students.
This quality assurance project lacks the rigor and controls necessary for a research study. Since it was conducted on one hospital, replication is recommended. Further research utilizing larger samples, testing unit-based nurse health promotion activities against controls is indicated.
Questions ??

Mary Val Palumbo DNP APRN GNP-BC
University of Vermont,
Burlington
Vermont, USA
Mary.palumbo@med.uvm.edu
References

1. Palumbo, M. V., et al., Registered Nurses’ Perceptions of Health and Safety Related to Their Intention to Leave. AAOHN J, 2010; p. 95-103