

# Organizing A Local Wellness Coalition

**Sharon M. Covert, M.S.  
Wellness Council of WV**

[www.wcwg.org](http://www.wcwg.org)

[www.thenwgc.org](http://www.thenwgc.org)



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# Objectives

- Population Health & Economic Development
- Five components to a local initiative
- Tools for assessing the health/readiness of a community
- Appropriate Interventions
- Evaluation and Return on Investment



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# The Case for Prevention

- The U.S. Spends more on healthcare than any other industrialized nation
- U.S. citizens are NOT the world's healthiest
- In 2008, U.S. health costs totaled approximately \$2.2 trillion (Towers Perrin 2008 Health Care Cost Summary)



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# The Case for Prevention

- The cost of health insurance has outpaced the rate of inflation over the last twenty years...
  - “If food were health care...”
    - 1 dozen eggs = \$80.20
    - 1 pound apples = \$12.23
    - 1 pound sugar = \$13.70
    - 1 dozen oranges = \$107.90 (American Institute for Preventive Medicine, 2007)



# The Case for Prevention

- 70% of disease is preventable

(Fries, New England Journal of Medicine, 1993)

- 87.5% of health care claim costs are due to an individual's lifestyle

Indiana University-Purdue University, Fort Wayne (IPFW) Study, 2006)



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# What Else Is It Costing You?

- Obesity is associated with impairment of work productivity, impairment of routine daily activities and overall impairment.
- Obese individuals had the greatest impairment at work (11-15% of work time)

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# Unhealthy Employees Cost Us

- Poor health, (physical and/or mental), is costly to business
- Therefore, health interventions are a business venture & should be treated as such.



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# Wellness Initiatives

- They work!
  - “significant reduction in medical care costs”  
(Aldana, *The Art of Health Promotion*)
- They are cost effective!
  - Most prevention initiatives have a ROI of 1:4-1:6
- Business can no longer afford to ignore wellness!



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***“Success demands  
singleness of purpose.”***

***--Vince Lombardi***



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# The “Coalition Movement”

(Mid-American Coalition on Health Care)

- Business coalitions have been around since the 1940’s
  - Majority formed between 1990-1995 in response to steady insurance premium increases
- Coalitions exist across U.S.
- Most coalitions have 1-2 FTE’s



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# The “Coalition Movement”

(Mid-American Coalition on Health Care)

- Some good resources:
  - National Network of Wellness Councils
    - Business networking
    - Community networking
  - National Business Coalition on Health
    - Works with networks across the country such as Mid-Atlantic Business Coalition on Health, Mid-American Coalition on Health Care

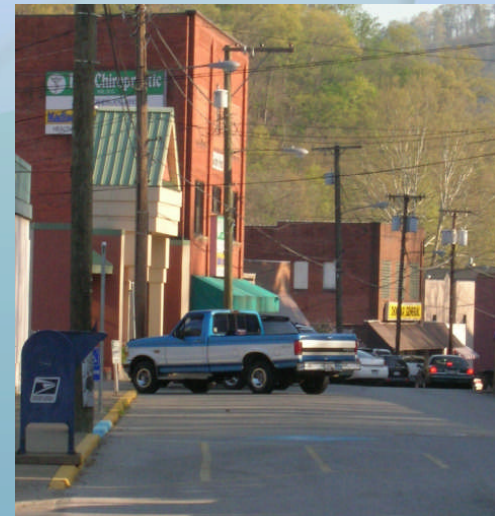


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# The “Coalition Movement”

(Mid-American Coalition on Health Care)

- Collaboration is a contact sport
  - Identify & engage all stakeholders
  - Address “tough” issues openly and candidly
  - Agree to leave agendas at the door



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# The “Coalition Movement”

(Mid-American Coalition on Health Care)

## Coalitions Work

*“Thanks to the leadership of the Coalition, the Kansas City is on the cutting edge of building true public-private partnerships to address major, community-wide public health issues—these things haven’t been done before.”*

--David Satcher, M.D., PhD, U.S. Surgeon General



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**“One of the great mistakes is to judge policies and programs by their intentions rather than their results.”**

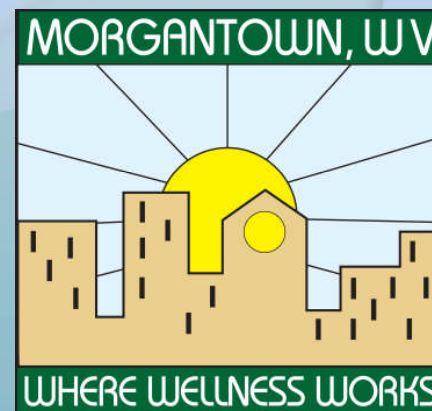
--Milton Freidman (Nobel Prize in Economics, 1976)



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# Key Components to Coalitions

- Community Leaders
  - Mayor's office, City Council, County Commission
- Employers
- Employees
- Health Care Providers
- Pharmacy
- Religious Leaders
- Service Providers, Non-Profits
- Schools
- Others?



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# 5 Steps

## • **P.A.P.E.R.**

- Prepare your community for wellness
  - Engage stakeholders (business, community leaders)
  - Identify & Organize “Team”
- Assess the health and readiness
- Plan your initiative (in writing) with SMART objectives
- Enact programming
- Review what you’ve done for effectiveness and results



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# Prepare

- Team
  - Identify “Core” Members & Constantly Recruit
  - Public & Private Sectors Represented
  - Diverse– Age, Income, Ethnic, Etc.
  - Representative of Community
  - Meet Regularly
  - Written Agenda/Minutes
  - Accountable to Community Members



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# Engaging Leadership

- The Business Case
- The Personal Case
- The Marketing Case
- The Competitive Case



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# Assess Health & Morale

- Community Assessment
  - Walkable Areas
  - Public Policies
    - Tobacco Free
    - Tobacco Free Zones
    - Public Parks, Etc.
  - Downtown Assessment
    - Main Street USA
    - Blueprint Communities



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# Assess Health & Morale

- HRA
- Needs & Interests
- Health & Human Resource Data (CDC)
- “Readiness”



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# Plan Your Initiative

- Focus on RESULTS not ACTIVITIES
- Address issues found in assessments
- Consider goals



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# Plan Your Initiative

“I not only knocked them out,  
I chose what round.”

-- Muhammad Ali



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# Plan Your Initiative

DATE	OBJECTIVE	PROGRAM	PROCESS	RESPONSIBLE PARTY	EVALUATION
January 15-20	Community Assessment	Phone Assessment/ Public Surveys	Phone Bank  Public Surveys filled out at key locations	Tom Smith Renee, ABC Consulting	# of participants  Demographic Covered  Aggregate data
February 2-20	Identify Top 5 Issues to Address	Summarize findings in phone survey and public poll	Team Meets & divides into groups	Renee, ABC Consulting Jane Doe	Top Issues Identified, Plan Broad Goals, Specific Objectives



# Enact Your Interventions

- Wants vs. Needs
- RESPECT your people, their resources & experience



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# Enact Your Interventions

- *Common Program Areas*

- Tobacco Cessation
- Physical Activity
- Nutrition
- Blood Pressure
- Alcohol/Drug Abuse
- Seatbelt Usage
- Self-Care
- Stress Management
- Personal Finances
- Immunizations
- Ergonomics



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# Enact Your Interventions

- *Uncommon Programs*
  - Farmers Market on site weekly
  - “Low Cost” healthy choices in local restaurants
  - “Healthy” pot luck community lunches
  - “Audit” vending machines in public areas
  - Blended Families
    - The problem at home is the problem at work...
  - Internet Security



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# Enact Your Interventions

- Sending the message...
  - Awareness
    - posters, flyers, mailings
  - Education
    - classes, lunch & learns, meetings
  - Behavior Change
    - nicotine replacement, walking program, “healthy” choices on site



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# Review for Results

- Evaluate Everything
  - 4-5 questions with “easy” answers
    - Focus on content & process
  - Open-ended final question
  - “Room to write”
  - Do NOT take responses personally...



# Review for Results

1. This program has met its objectives 1 2 3 4 5
2. The instructor was knowledgeable...1 2 3 4 5
3. This program will benefit me... 1 2 3 4 5
4. The environment was.... 1 2 3 4 5
5. Hand-outs & materials beneficial... 1 2 3 4 5
6. Other comments:



# Review for Results

- Revisit statistics from assessment at a pre-determined interval
  - i.e. Every 2 years, 3 years, etc.
  - Don't be afraid to change the focus to meet the results
    - Kanawha Coalition for Community Health Improvement



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# In Conclusion...

- Chronic disease costs our communities
- Five components to a local initiative
- Four strategies for engaging leadership
- Two tools for assessing the health/readiness of a community
- Key sources for evaluating outcomes



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**REV UP**  
**MADISON**

REVITALIZE ENERGIZE VISUALIZE

"IF IT'S GOING TO BE, IT HAS TO START WITH ME"

Supported by the Wellness Council of  
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Robert Wood Johnson Foundation.

**“Adversity doesn’t build  
character, it reveals it.”**

**--Vince Lombardi**



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## Contact Us...

Wellness Council of WV

75 Olde Main Plaza

St. Albans, WV 25177

(304) 722-8070

[info@wcwv.org](mailto:info@wcwv.org)

[www.wcwv.org](http://www.wcwv.org)

[www.thennwc.org](http://www.thennwc.org)

Sharon M. Covert, M.S.

Executive Director



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