

# **Workplace Best Practices for Heart Healthy Employees**

#### **Prevent Employee Heart Attacks and Strokes**

Heart disease and stroke are among the leading causes of death, are are costly.<sup>1</sup> At nearly \$555 billion each year in medical expenses and lost productivity from premature death, heart disease, stroke, and their risk factors are expensive health conditions—in fact, cardiovascular disease (CVD) is the most costly disease in the United States.<sup>2</sup>

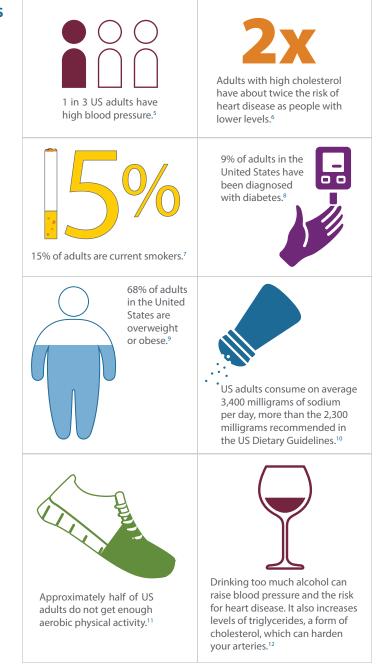
High blood pressure, high LDL cholesterol, and smoking are key risk factors for heart disease. About half of Americans (49%) have at least one of these risk factors.<sup>3</sup> Other medical conditions and lifestyle choices can increase a person's risk for CVD that includes diabetes overweight and obesity poor diet, consuming too much salt physical inactivity and excessive alcohol use.<sup>3,4</sup>

Work sites are a natural place to improve heart health. The chance of developing cardiovascular disease is 50% at age 45,<sup>2</sup> which represents a significant portion of the workforce.

#### Work Site Wellness Efforts can Address One or More Risk Factors.

Use the **Centers for Disease Control and Prevention (CDC) Workplace Health Resource Center** to see what heart disease and stroke prevention interventions might be right for you.

- 1. Assessment. What information about my employees and my work site can I use to select appropriate interventions?
- 2. Planning and Management. How will I empower and encourage my employees to participate?
- 3. Implementation. What supports do I need to put in place to make the interventions successful?
- 4. Evaluation. How will I measure whether the interventions are successful and sustainable?





National Center for Chronic Disease Prevention and Health Promotion Division of Population Health

# Policies Affect All Employees

Policies to affect heart disease and stroke outcomes of employees have the ability to help a large proportion of employees in large and small ways. Workplace policies can affect employee behaviors such as tobacco use, healthy eating, and physical activity. Examples of policies include:

- Offer health insurance. Health insurance facilitates access to timely and appropriate ambulatory care, which may be able to prevent illness, control acute episodes, or manage chronic conditions to avoid exacerbating or complicating those conditions.<sup>13</sup>
- Provide healthy foods at meetings. Workplaces can put into action policies that require or encourage healthy options to be made available at meetings and workplace celebrations.
- Allow flex time for physical activity. When appropriate, employers can implement policies that provide employees with flexible arrival or departure times to allow them to engage in physical activity before or after work.
- Pass tobacco-free policies. Explicit workplace policies that prohibit the use of all types of tobacco (e.g., cigarettes, e-cigarettes, smokeless) are effective strategies to reduce exposure to secondhand smoke, a preventable cause of significant illness and death.

In 2017, Hennepin County Minnesota updated their <u>nutrition policy</u>. It requires that 75% of vending machine food be healthy, which was an increase from 50% in the 2014 version of the policy. The policy calls for low-fat, low-sugar, and low-salt products and was intended to benefit employees and visitors to county buildings. As part of these efforts, vending machines were actually removed from some buildings found in areas where there was greater access to heathy foods. In addition, the county also instituted a guideline in which all meetings and potluck gatherings should include healthy options.



#### Environments Can Support Cardiovascular Health

Workplace environments can help create a "culture of health" in the workplace. Environmental supports to encourage healthy heart disease and stroke-related behaviors include:

- Provide blood pressure monitors. When employers
  make blood pressure monitors available onsite, they are
  providing employees with high blood pressure with the
  opportunity to monitor their health condition. Selfmonitored blood pressure can improve adherence and
  health outcomes for patients with this condition.<sup>14</sup>
- Use stairwell enhancements and point of decision prompts to encourage stair use. For workplaces with stairs, making improvements (e.g., paint, artwork) to make the stairwells more appealing, coupled with signs to encourage stair use can increase use of the stairs.<sup>15</sup>
- Provide bicycle parking. Workplaces that provide a bicycle rack for secure parking of employee bicycles make it easier for employees to commute to and from work by bicycle or to take a bicycle break during work.
- Require healthy vending options. Vending companies are able to provide healthy options in their vending machines, and will do so at the request of work sites.

# Programs Provide Opportunities for Education and Skill-Building

Programs can be a fun and educational way to engage employees in healthy behaviors. Programs to encourage healthy cardiovascular disease-related behaviors include:

- Conduct health risk appraisals (HRA) to assess for heart disease and stroke risk factors, combined with referral to a health care provider for those employees with risk factors. Assessment may help identify risk factors among employees. Referrals to health care providers can facilitate treatment.
- **Provide onsite tobacco cessation classes.** Cessation classes may help employees stop smoking.
- Provide lunch and learns, posters, brochures, and other educational materials. Local health organizations can often provide free resources and speakers.
- Organize walking groups before and after work, or during lunch and other breaks. Providing opportunities for groups to walk together makes it a social activity in addition to an opportunity for physical activity.
- Implement physical activity challenges and contests. For example, teams can challenge each other to most steps walked or most time spent being physically active.
- **Provide discounts to fitness centers and classes.** Employees may access fitness opportunities if they do not have to pay the full cost.
- **Host healthy recipe contests.** Challenge employees to create the best healthy dish.



# Make Employee Health a Priority

Businesses and employees both benefit when work site wellness becomes a priority. Although the effects of CVD and its associated risk factors—including diabetes, overweight and obesity, salt intake, and physical inactivity—can be very costly for work sites, businesses can improve employee health outcomes through programs, policies, and environmental supports that encourage healthy behaviors.

Work site health promotion does not have to cost a lot. Several of the policies, environmental supports, and programs highlighted here can be completed with little or no dedicated funding. Local organizations such as health departments, hospitals, and nonprofits will often provide speakers and educational materials for free. They are also great resources for wellness activity ideas. Finally, the Centers for Disease Control and Prevention provides online resources to support your efforts.

At <u>Worklogic HR</u> in Bakersfield, California, the wellness committee for the 44-employee workplace wanted to send a consistent message about healthy eating. So, they altered a company tradition, the annual Halloween celebration, an event which had previously focused on candy. To keep the fun and dial down the sugar, the committee hosted a potluck lunch for Halloween, inviting employees to share their favorite healthy dishes. The committee continued having healthier alternatives at meetings and employee celebrations. Human resources manager Chrystal Abbott said, "Employees are used to it now; it's the new norm." CDC's Workplace Health Resource Center is a one-stop shop for organizations to find credible tools, guides, case studies, and other resources to design, develop, implement, evaluate, and sustain workplace health promotion programs. Check it out on CDC's Workplace Health website for more resources on improving heart disease and stroke outcomes for your employees.

www.cdc.gov/whrc

### References

- Kochanek KD, Murphy SL, Xu JQ, Arias E. Mortality in the United States, 2016. NCHS Data Brief, no 293. Hyattsville, MD: National Center for Health Statistics; 2017. <u>https://</u> www.cdc.gov/nchs/data/databriefs/db293.pdf.
- <sup>2</sup> American Heart Association/American Stroke Association. *Cardiovascular Disease: A Costly Burden for America. Projections through 2035.* Washington DC: AHA/ASA;
   2015. <u>https://healthmetrics.heart.org/wp-content/</u> <u>uploads/2017/10/Cardiovascular-Disease-A-Costly-</u> <u>Burden.pdf.</u>
- <sup>3</sup> Centers for Disease Control and Prevention. Heart Disease Fact Sheet Website. <u>https://www.cdc.gov/dhdsp/data</u> <u>statistics/fact sheets/fs heart disease.htm</u>. Accessed July 20, 2018.
- Centers for Disease Control and Prevention. Sodium
   Fact Sheet Website. <u>https://www.cdc.gov/dhdsp/data</u>
   <u>statistics/fact\_sheets/fs\_sodium.htm</u>. Accessed July 20, 2018.
- <sup>5</sup> Million Hearts. Infographics Website. <u>https://</u> millionhearts.hhs.gov/news-media/media/infographics. <u>html</u>. Accessed July 20, 2018.
- <sup>6</sup> Centers for Disease Control and Prevention. Cholesterol Fact Sheet Website. <u>https://www.cdc.gov/dhdsp/data</u> <u>statistics/fact sheets/fs cholesterol.htm</u>. Accessed July 20, 2018.
- <sup>7</sup> Centers for Disease Control and Prevention. Smoking and Tobacco Use: Fast Facts and Fact Sheets Website. <u>https://www.cdc.gov/tobacco/data\_statistics/fact\_</u> <u>sheets/index.htm?s\_cid=osh-stu-home-spotlight-001.</u> Accessed July 20, 2018.
- <sup>8</sup> Centers for Disease Control and Prevention. Diagnosed Diabetes Website. <u>https://gis.cdc.gov/grasp/diabetes/</u> <u>DiabetesAtlas.html</u>. Accessed July 20, 2018.
- Centers for Disease Control and Prevention. Behavioral Risk Factor Surveillance System Prevalence and Trends Data Website. <u>https://www.cdc.gov/brfss/</u> <u>brfssprevalence/</u>. Accessed July 20, 2018.

- <sup>10</sup> United States Food and Drug Administration. Draft Guidance from Industry: Voluntary Sodium Reduction Goals: Target Mean and Upper Bound Concentrations for Sodium in Commercially Processed, Packaged, and Prepared Foods Website. <u>https://www.fda.gov/Food/GuidanceRegulation/</u> <u>GuidanceDocumentsRegulatoryInformation/</u> <u>ucm494732.htm?source=govdelivery&utm</u> <u>medium=email&utm\_source=govdelivery</u>. Accessed July 20, 2018.
- <sup>11</sup> Centers for Disease Control and Prevention. Nutrition, Physical Activity, and Obesity: Data, Trends, and Maps Website. <u>https://nccd.cdc.gov/</u> <u>dnpao\_dtm/rdPage.aspx?rdReport=DNPAO\_DTM.</u> <u>ExploreByLocation&rdRequestForwarding=Form.</u> Accessed July 20, 2018.
- <sup>12</sup> Centers for Disease Control and Prevention. Heart Disease Behavior Website. <u>https://www.cdc.gov/heartdisease/</u> <u>behavior.htm</u>. Accessed July 20, 2018.
- <sup>13</sup> Centers for Disease Control and Prevention. *Health Insurance and Access to Care.* Atlanta, GA: U.S. Department of Health and Human Services; 2017. <u>https://www.cdc.</u> <u>gov/nchs/data/factsheets/factsheet\_hiac.pdf</u>.
- <sup>14</sup> Murakami L and Rakotz M. Improving Health Outcomes: Blood Pressure. Self-measured Blood Pressure Monitoring Program: Engaging Patients in Self-measurement. 1st ed. Daniel D and Prall M, eds. Boston, MA: American Medical Association and the Johns Hopkins University School of Medicine; 2015.
- <sup>15</sup> Centers for Disease Control and Prevention. StairWELL to Better Health Website. <u>https://www.cdc.gov/</u> <u>physicalactivity/worksite-pa/toolkits/stairwell/index.</u> <u>htm.</u> Accessed July 20, 2018.

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