# \*WELCOA Member Spotlight

INSPIRATION AND BEST PRACTICES FROM ACCOMPLISHED WELCOA MEMBERS

Lisa Krieg & Katie Sarno



## LISA KRIEG

TITLE: Regional Wellness Coordinator

YEARS IN THE INDUSTRY: 10 years

**EDUCATION:** R.N., WELCOA Faculty Certified, Certified Occupational Health Nurse, Tobacco Treatment Specialist, and in the process of becoming a certified health coach.

WELCOA MEMBER SINCE: 2011

WHAT MADE YOU CHOOSE A CAREER IN HEALTH

**PROMOTION?** As an occupational health nurse, working with businesses has always been a passion of mine. Being able to build those relationships with employees has been huge. Being able to provide strategies to improve total population health is very rewarding.

WHAT IS YOUR BIGGEST DREAM FOR THE

**INDUSTRY?** For insurance companies to help streamline the process to make it easy for all employees to get their preventative screenings. Coverage differs widely from one plan to the next. Also, it would be great if wellness could happen in the broader community as well as in the business sector. Here in Allen County, we have some grant funding that has made wellness a part of the community by raising awareness and creating bike paths.



## **KATIE SARNO**

TITLE: Regional Wellness Coordinator

YEARS IN THE INDUSTRY: 1 year

**EDUCATION:** R.N., Certified Lifestyle Facilitator, and in process of becoming a certified health coach and WELCOA Faculty Member.

WELCOA MEMBER SINCE: January, 2014

WHAT MADE YOU CHOOSE A CAREER IN HEALTH PROMOTION? I started my career as an open heart nurse and that triggered me to be a part of the preventative side of it. I saw my patients smoking and knew that it shouldn't be about fixing them with surgery once they got sick but getting to them beforehand and getting them to quit. I was the nurse spending 30 minutes on discharge instructions when others were spending 10.

#### WHAT IS YOUR BIGGEST DREAM FOR THE

**INDUSTRY?** For everyone to start focusing more on prevention; for everyone to have their preventative screenings, annual physicals, for more farmers markets to provide access to healthy foods, and ultimately for employers to truly understand the value of all those things.

Read on to learn more about Lisa and Katie, and how you ~ can be featured in a WELCOA Member Spotlight.

### Lisa Krieg & Katie Sarno of the West Ohio Regional Healthcare Alliance discuss their biggest successes, the power of the operating plan, and outcomes they have experienced through increased CEO support.

Lisa Krieg and Katie Sarno are Regional Wellness Coordinators for the West Ohio Regional Healthcare Alliance (WCORHA). WCORHA is an alliance of five hospitals that serve the entire Northwest Ohio area by providing health and wellness services to local businesses. Their services include health screenings, biometric screenings, onsite health programming design, and onsite culture building. What makes the Alliance particularly unique, according to Lisa, is that they represent local hospitals and therefore have the opportunity to be in community with the companies they serve: "We really have that vested interest in our communities because often our wellness coordinators not only are involved in wellness [programming] but also help with occupational health services or Community Health Improvement Plans in our counties.

# WHAT HAVE BEEN YOUR BIGGEST PROGRAM SUCCESSES TO DATE?

Katie: I am really proud of my Group Lifestyle Balance (GLB) program I teach for diabetic prevention. I love that program. Participants have a lot of support and they have all lost at least 10% of their body weight in 20 weeks. [The program was started by the University of Pittsburgh and looks at diabetes prevention holistically by also monitoring risk factors such as metabolic syndrome and blood pressure.]

LISA: I think I probably am most proud of the way that our clients have embraced wellness; I feel proud watching the changes overall within our client base. There are lots of little success stories. We have one school system that we work with that caught an employee's stage two colon cancer because we pushed incenting for colonoscopies. This year we are putting together some strategies for some new product lines and working to streamline our process to build a team relationship with not just Katie and me, but our other wellness coordinators at our hospitals. To me that has been really huge—seeing the bigger picture.

#### WHAT IS THE ONE THING THAT IS A DIFFERENTIATOR FOR YOU WHEN GOING INTO THESE COMPANIES TO SET UP PROGRAMS?

**LISA:** I think the operating plan from WELCOA is a thing that helps me get over the hump. It is a way for me to kind of visualize the set-up of an initiative and for me to help clients visualize as well. It is not just what does that plan look like and how can we develop a short-term plan, but what does that long-term strategy for that client look like. It has been very useful for us and we have found that our clients really like [it]. Being able to provide them with that operating plan that summarizes what they have done in the past, but also helps us to plan what we will do moving forward is helpful.

#### WHAT OTHER RESOURCES WOULD YOU RECOMMEND TO FELLOW WELCOA MEMBERS?

**KATIE:** For me starting out last year, I watched those [7 Benchmark] webinars and the other ones that you could watch on demand on Absolute Advantage, and I started to learn what an operating plan was and how to best do my job. They do not teach you that in school.

## WHAT HAS WORKED BEST FOR YOU IN HEALTH PROMOTION PROGRAMMING?

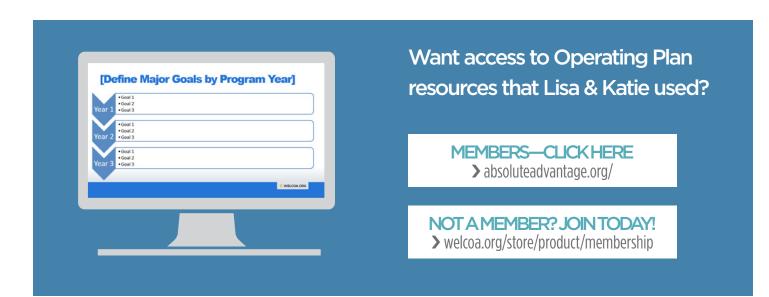
**LISA:** I think what sets us apart and what works well is that we build relationships with the client. It is all about building that relationship and that trust. And again, not everything we do is always something they are doing cartwheels over. There are times when we organize a program that is not really well liked, but I would say the best thing that we do is keep building that client relationship not just between the coordinators and the employees, but between employees and our hospital and our physicians.

KATIE: Apart from being onsite doing health coaching, coordinating specific programs, or in there for meetings with leadership, when I have extra time or am dropping by to pick something up or just in between other meetings, I can stop in to see how they are doing; people start to put your face with the wellness initiative and what they are doing to participate and you get people to start asking questions: "Well, I did not know that I could do this in the wellness program." or "What is this all about again?". Once they start to recognize that [the clinical aspects of the program] are not built through HR, I think that they trust you in a different manner like, "Oh, you are a nurse. You work with St. Rita's. Okay, you are not my employer." That kind of helps get buy-in too. The operating plan from WELCOA is a thing that helps me get over the hump. It is a way for me to kind of visualize the setup of an initiative and for me to help clients visualize as well.

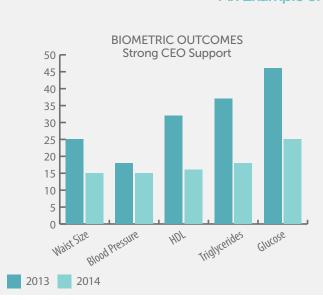
#### WHAT IS THE AVERAGE HEALTH PROMOTION PROGRAM PARTICIPATION RATE ACROSS YOUR CLIENT ORGANIZATIONS?

KATIE: At least 50%.

**LISA:** 50% is the average, but that is definitely based on the type of industry and the structure of their incentives. Companies who are doing health contingent programs have between 80-85% participation whereas those who are just doing some type of participation-based initiative are a little bit lower.



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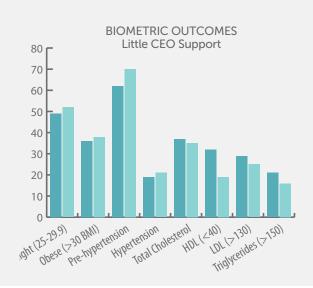


#### Two WCORHA Clients, Two Different Levels of CEO Support An Example of the Power of CEO Support

#### WHAT ARE THE MAIN BARRIERS TO PARTICIPATION THAT YOU EXPERIENCE, AND HOW HAVE YOU TRIED TO OVERCOME THEM?

**KATIE:** I find that factory workers with multiple shifts have less participation. It is not as easy for them to meet all the initiative requirements. We really try to knock down all those barriers. We come in on third shifts and try to accommodate everyone but you still do see less participation versus businesses that allot time throughout the workday for wellness.

LISA: The organizations with more leadership barriers, where your contact always has to 'get this up to management to make a decision' are more difficult and we have more challenges with those. The ones that work well for us are the ones where we have the leadership buyin of the CEO, and when the CEO is a member of the company's wellness committee. Those are the ones that experience the greatest culture change.



# WHAT IS A GOOD STRATEGY FOR ACHIEVING CEO BUY-IN FROM YOUR EXPERIENCE?

**KATIE:** Most [CEOs] are receptive to the idea, though skeptical about the financial side of programming. A lot want to try to cut back and not spend the money. We have sold several CEOs with aggregate reporting. We review aggregate data with them to get them to see where their population is, put [cost] numbers to disease risk, and then the money that is spent on wellness coordinators does not seem to be such a bad idea. **★** 

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