Attachment G - Workplace Health in America Survey Item Justification Table

Items	Reason for asking	Plans for using
Health Insurance (HI1-4)	Assess the extent of insurance coverage for employees and families, because many health promotion programs are offered through insurers.	• Examine relationship between program offerings and insurance coverage. • Assess trends in coverage since 2004 national survey.
Health Risk Assessments (HRA1. – HRA1e.)	There is strong evidence for the effectiveness of HRAs with feedback and education. This may be the only health promoting activity some employers do.	• Estimate the percentage of small, mid-sized and large employers who provide • Address Healthy People 2020 objective (ECBP-8) • Benchmark with RAND 2011 results
Comprehensive program CP1.-CP5.	All of our external experts and stakeholders recommended including these elements of a comprehensive program	• Examine trends since 2004 national survey. • Benchmark with CDC Worksite Health ScoreCard
Presence of any program- HP1	Employers who respond that they have no program will skip 72% of the survey items	• Benchmark with 2004 national survey and RAND survey
History of Health Promotion HP2 – HP6	Assess who is responsible for the program and how it structured (cross-cutting)	• Examine relationship between who is responsible and what is offered • Inform tools and resources development
History of Health Promotion HP7. – HP8.	Assess presence of organizational supports, funding, and implementation of best practices for program planning and evaluation	• Assess trends in since 2004 national survey • Inform tools and resource development • Target technical assistance
Physical Activity (HPR1.1.-HPR1.2.k.)	Lack of physical activity is a major public health issue; these items assess presence of physical activity programming and evidence-based strategies.	• Address Healthy People 2020 objective (PA-12) • Inform tools and resource development • Target technical assistance
Nutrition (HPR2.1. – HPR2.4.e.)	Poor nutrition/obesity is a major public health issue; these items assess presence of nutrition programming and evidence-based strategies.	• Address Healthy People 2020 objective (NWS-7) • Inform tools and resource development • Target technical assistance
Obesity/Weight Management (HPR3.1. – HPR3.2.)	Overweight and obesity is a major public health issue; these items assess presence of weight management programming.	• Address Healthy People 2020 objective (NWS-7) • Inform tools and resource development

		• Target technical assistance
Tobacco (HPR4.1.– HPR4.2.g.7.)	Tobacco use is the leading cause of preventable deaths in the US; these items assess presence of tobacco programming and evidence-based strategies.	• Address Healthy People 2020 objective (TU-12) • Inform tools and resource development • Target technical assistance
Excessive Alcohol Use/Drug Abuse (HPR5.1. – HPR5.1.b.)	Employee substance use issues are an increasingly common and costly problem for employers	• Inform tools and resource development • Target technical assistance • Assess trends in since 2004 national survey
Lactation Support (HPR6.1. – HPR6.	ACA mandates employer action for organizations with more than 50 employees.	• Address Healthy People 2020 objective (MICH-22) • Establish benchmarks
Musculoskeletal Disorders/Arthritis/Back Pain (HPR7.1. – 7.1.c.)	MSD/arthritis/back pain are most common causes of chronic pain, often related to work	• Inform tools and resource development • Target technical assistance • Assess trends in since 2004 national survey
Stress Management (HPR8.1. – 8.1.c.)	Employee stress is consistently one of the top three reporting health issues. Employer have the ability to change to work environment to lessen the impact	• Inform tools and resource development • Target technical assistance • Assess trends in since 2004 national survey
Sleep (HPR9.1. – HPR9.1.c.)	Employee fatigue and sleep disorders are becoming an increasingly common and costly problem for employers	• Inform tools and resource development • Target technical assistance • Establish employer benchmarks • Identify new areas of research
Health Screenings (HS1.1. – HS3.)	Assess whether screening and follow up are provided for conditions that contribute to the most productivity loss/health costs.	• Benchmark with 2004 national survey and RAND survey
Disease or Risk Management (DM1.1 – DM3.)	Assess level of disease management support for conditions that contribute to productivity loss/health costs.	• Benchmark with 2004 national survey and RAND survey • Examine trends in supervisor training and onsite clinics among different types of employers
Incentives (KP2. – KP5.h.)	Employers are keenly interested in how incentives are used	• Benchmark with RAND survey

		• Provide results for employers to benchmark their own practices
Work-Life Programming		• Examine trends since 2004 national survey • Provide results for employers to benchmark with they offer
Program Barriers (B1.1. – B1.12.)	Employers lack the knowledge, capacity, or resource to effectively implement programs. Knowing specific issues will be effective in tailoring technical assistance	• Benchmark with RAND survey • Inform tools and resources • Target technical assistance
Occupational Safety and Health (OHS1. – OHS7.3.)	Health protection efforts need to be included with health promotion efforts in this survey. Integration leads to more effective programming and response.	• Examine trends since 2004 national survey • Provide results for employers to benchmark with they offer • Establish benchmarks for employers regarding new strategies
Emerging Issues (E1. – E2.)		• Inform tool and training resources • Target technical assistance • Identify new areas of research
Workforce Demographics (WD1.1. – WD7.)	Necessary to have some background about the demographics of the employees affected by the practices of the employers in the survey	• Examine practices among employers with different workers characteristics

Supplement Survey Items

Items	Reason for asking	Plans for using
Excessive Alcohol Use/Drug Abuse (HPR5.2.a – HPR5.2.e)	Alcohol and drug abuse are significant problems, moved these evidence-based strategies to supplement because we expect lower prevalence at worksites compared to other health interventions.	• Inform tools and resource development • Target technical assistance • Assess trends in since 2004 national survey
Lactation (HPR6.2.a – e.)	ACA mandates employer action for organizations with more than 50 employees.	• Address Healthy People 2020 objective (MICH-22) • Establish benchmarks
Musculoskeletal	Existing evidence not as strong	• Inform tools and resource

Disorders/Arthritis/Back Pain (HPR7.2a., c., d., e., f.)	for these specific interventions, as for other health interventions.	• development • Target technical assistance • Assess trends in since 2004 national survey
Stress Management (HPR8.2.a.-e.)	Existing evidence not as strong for these specific interventions, as for other health interventions.	• Inform tools and resource development • Target technical assistance • Assess trends in since 2004 national survey
Sleep (HPR9.2.a. – f.)	Existing evidence not as strong for these specific interventions, as for other health interventions.	• Inform tools and resource development • Target technical assistance • Establish employer benchmarks • Identify new areas of research
Key Partners (KP1.a. – KP1.g.)	Employers lacking capacity, expertise, or resource may seek it out among organizations within their communities.	• Inform tools and resource development • Target technical assistance • Establish employer benchmarks
Employee Assistance Program offerings (WL1.1 - WL1.5.)	EAPs are common employee benefit offerings, but often are not well integrated into broader employee health and safety programs. Understanding composition of these program will provide opportunities for better links to health promotion and protection efforts.	• Inform tools and resource development • Target technical assistance for linkage and integration
Occupational Health and Safety (OSH7.1, 2, 6. And OSH8. – 8.1.c.)	Health protection efforts need to be included with health promotion efforts in this survey. Integration leads to more effective programming and response.	• Examine trends since 2004 national survey • Provide results for employers to benchmark with they offer • Establish benchmarks for employers regarding new strategies