



# Excellence in Healthcare: CHAA Award Presentation

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# Company Overview



Global Leader in  
Health Care

More than 250  
Operating Companies

In 60 Countries

Selling Products in More  
Than 175 Countries

118,000 Employees  
Worldwide

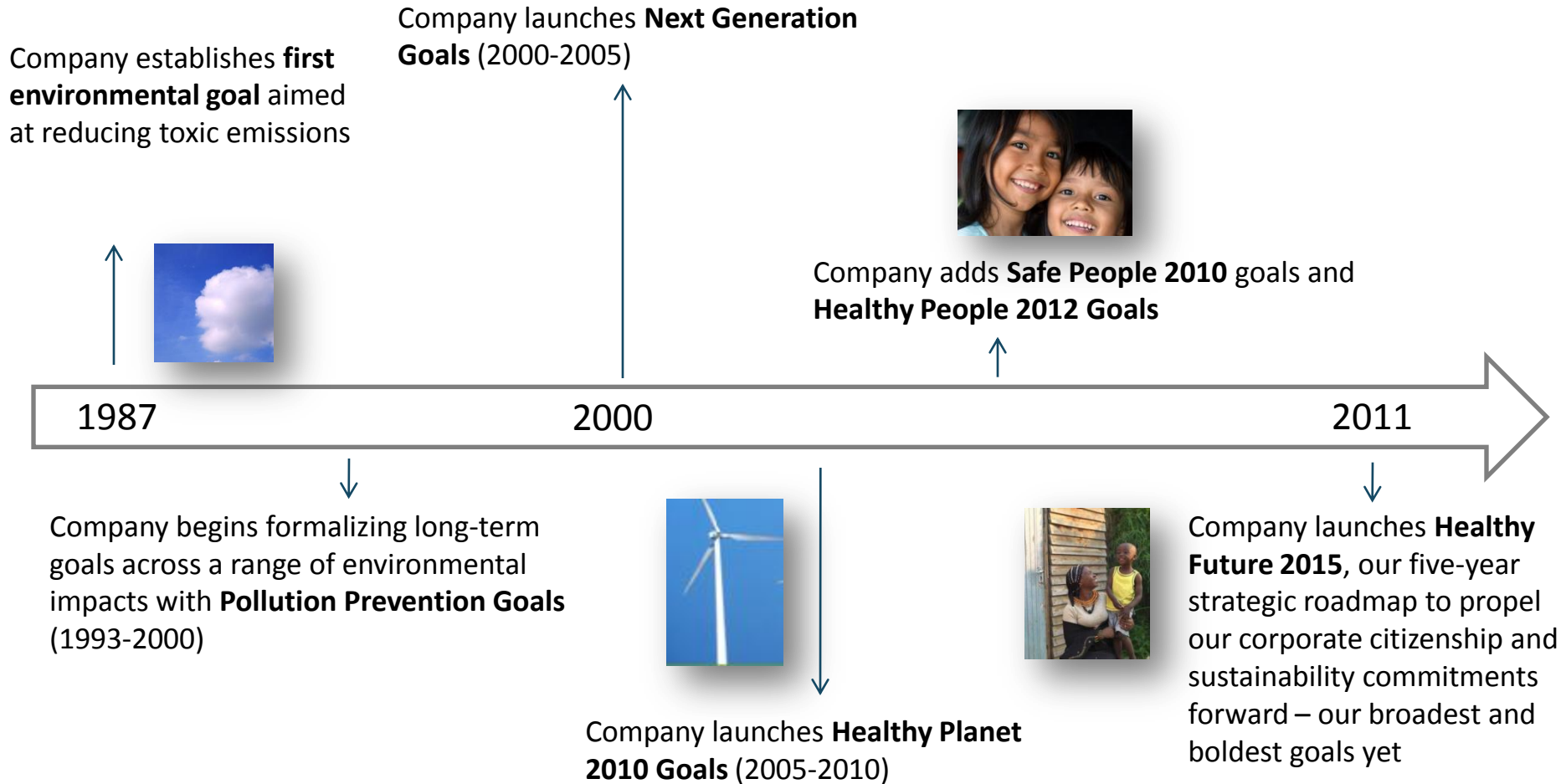
# Our Credo

Common set of values unifying a diverse business

- Created in 1943
- Drives deep commitment to ethical principles
- The Four Tenets
  - Customers
  - Employees
  - Communities
  - Stockholders



# Evolution of Our Sustainability Goals



# Healthy Future 2015: Our Strategic Priorities

- Honor our responsibility to communities by **advancing community wellness**
- Honor our responsibility to communities by **enhancing outcome measurement in philanthropy**
- **Foster the most engaged, health-conscious and safe employees** in the world
- Build on our legacy in **safeguarding the planet**
- **Partner with suppliers who embrace sustainability**
- **Advance global health** through research and development for neglected diseases and affordable access to medicines
- Commit to **enhanced transparency** and accessing the power of **external collaboration**



## **Employee Health, Safety & Engagement Goals:**

90th percentile for employee engagement

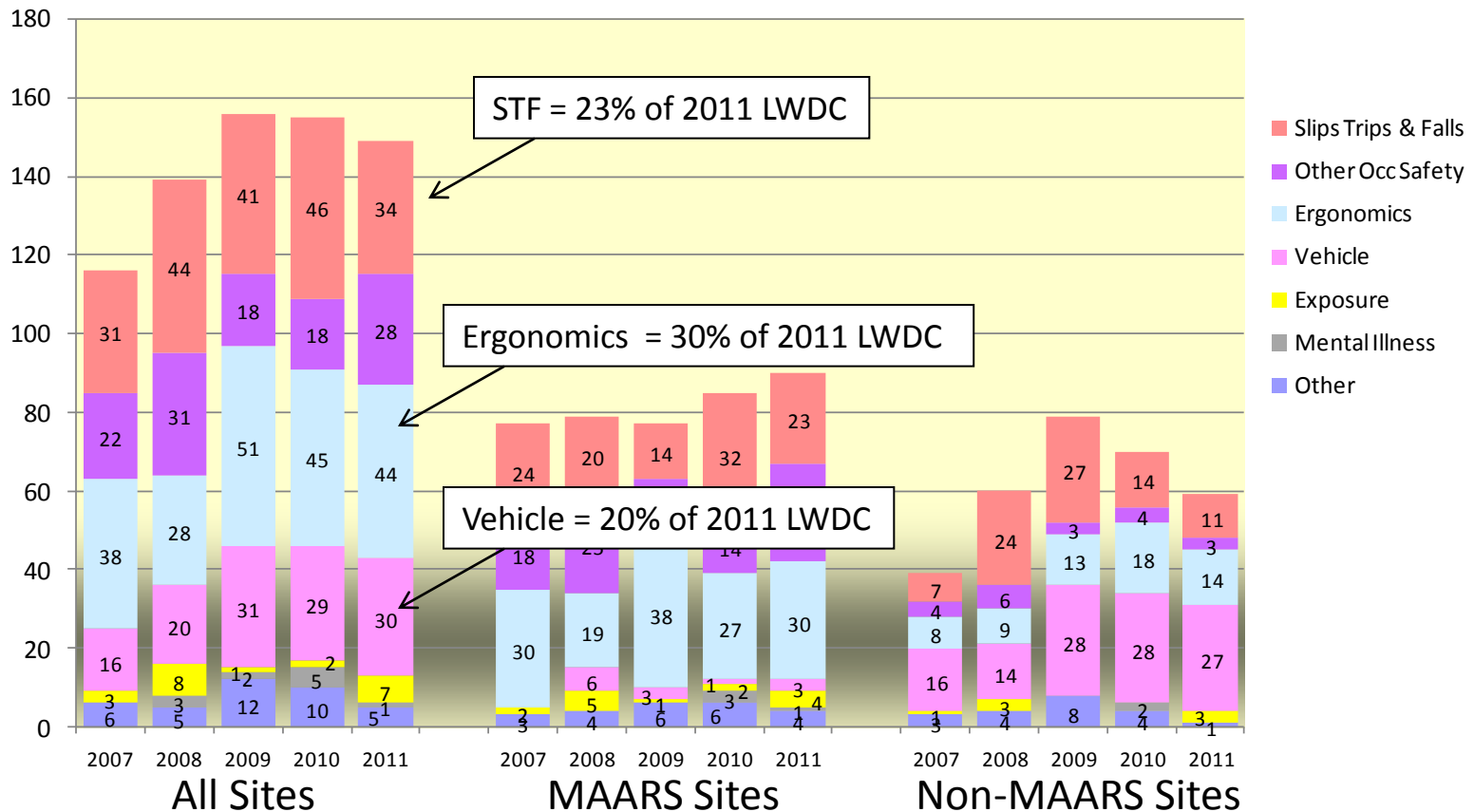
90% of employees have access to culture of health programs

80% of employees have completed a health risk profile and know their key health indicators

80% of measured population health risks are characterized as “low risk”

15% improvement in employee, contractor, and fleet safety performance

# 2007 -2011 LWDC



- Consistently **Top 3** causes of *LWDCs* and *Recordables* are:
  - Ergonomics
  - Slips Trips and Falls
  - Vehicle accidents

- ***Worldwide Ergonomics Standard***
  - Specifies the “What” of the Ergonomics Program
- ***Worldwide Ergonomics Guidelines***
  - Specifies the “How” of the Ergonomics Program
- ***Consistent References & Tools***
  - **ERGO Program**
    - Worldwide Ergonomics Initiative
    - A Medical Guide for the Health Professional
    - Engineering Training
  - **Risk Assessment Tools**
    - Ergonomics Job Analyzer (EJA), Users Guide & EJA Toolkit
    - Material Handling EJA (MH EJA)
    - Computer Workstation EJA (CW EJA)
  - **Engineering Design**
    - ERGO Engineering Design Reference Guide (SI and Metric Units)
  - **Home Office & Fleet Safety**
    - Ergonomics Guidelines for Setting Up a Home Office
    - Field Guidelines for Handling Materials Safely
  - **Incident Investigation Process**
    - Learning to Look - Ergonomics





# Fall Prevention Action Plan

## Awareness Campaign

- “Call to Action” video featuring J&J leaders
- Quarterly emphasis on the Big Four
- Fall prevention literature

## Prevention Plan

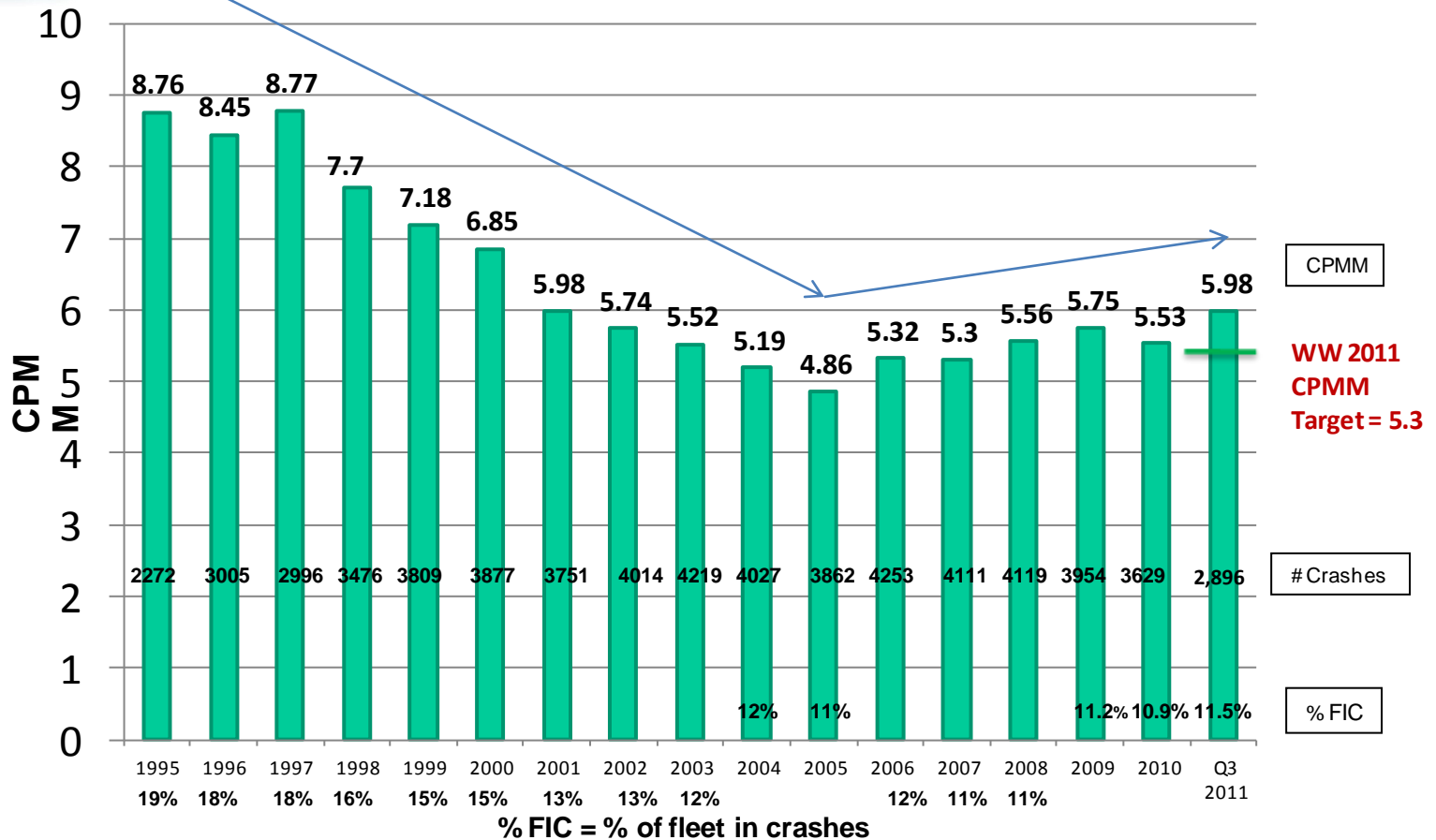
- Target Zero
- 2+ recordables/yr requires Fall Prevention action plan
- Develop and implement Fall Prevention action plan
- Update/Create Fall Prevention tools utilizing Top 10 VOC

## Emphasis Program

- Top 10 MAARS and Non-MAARS sites
- Annual Fall Prevention site assessment
- Develop & implement Fall Prevention action plan
- Required element during joint assessment
- Semi-annual progress report to EHS Council



# Crashes Per Million Miles (CPMM) 1995 – 2011 Q3 Worldwide



# SAFE Fleet Core Elements

1. Management Commitment
2. Worldwide Fleet Safety Standards
3. Training and Education
4. SAFE Fleet Teams
5. Assessment and Assurance
6. Community Outreach



# What Are We Doing To Keep People Safe?

- **SAFE Fleet Champion Engagement and Support**
  - New Consumer Champions in EMEA and NA
  - Champion Strategy Meetings
  - **Development of Strategic Framework: Responsibility, Ownership, Commitment...Consistent Language Around Expectations**
- **Formal Assessments, SAFE Fleet Regional Meetings, Sales/Service Meetings**
  - Formal Assessments
  - National Meeting Participation and Support
  - **Deep Dive Country Reviews (e.g., Mexico, Brazil)**
- **Training and Education**
  - Two-Wheeler driver training (AP)
  - **BTW enhanced curriculum (US Fleet)**

**Note: Green highlight indicates new actions.**



# What Are We Doing To Keep People Safe?

- **New Program/Process/Communication Launches**

- SAFE Fleet global training portal – resource leveraging - global
- E-safetyforall.com and E-SAFE Fleet Tips – global
- Drive Safely Work Week - global
- “The Other Driver” Module – new, global deployment
- Parking and Backing Crash Prevention (back-up camera, BTW, reinforce through communications, dashboard) – global/regional
- Virtual Risk Manager Phase 2 and 3 – US Fleet
- Post Crash Cell Phone Records Review – US Consumer Fleet
- Core Team Expansion – Ambassadors Assigned – US Consumer Fleet
- Telematics Pilot – US Fleet

- **Benchmarking**

- Annual NETS Benchmark Survey
- Vodafone, Coca Cola in India. Working on standardizing two wheeler curriculum and leveraging of resources – AP region



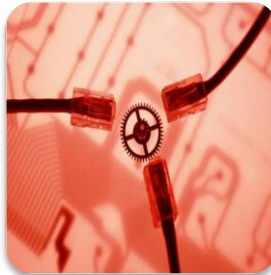
# Culture of Health Evolution

1978



**big goals**

1995



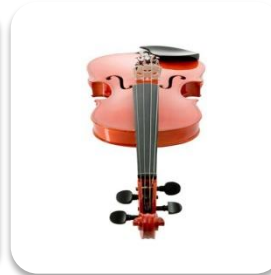
**integration**

2004



**global**

2007



**harmonization**

2008



**new business**

2015



**healthy future**

“I’m talking about prevention, specifically in the workplace. ...Johnson & Johnson has been making substantial, systematic, and effective investments in prevention for more than 30 years. We dedicate resources to prevention because, like any successful investment we’ve made, it yields steady returns.”

-Bill Weldon, CEO

# Sustaining a Global Culture of Health



**Have the healthiest, most engaged workforce for J&J - allowing for full and productive lives**



**Deliver a competitive business advantage to the J&J Family of Companies, by providing the leadership and resources that enable the well being, full engagement, and productivity of J&J employees worldwide.**

## Strategic Imperatives



- 1. Create, promote and sustain an Organizational Culture of Health**
- 2. Promote consistent, effective and compliant health programs & service delivery**
- 3. Lead in Business by Leading in Health**

## Culture of Health - Key Ingredients



**Leadership & Commitment**



**Enterprise Programs**



**Policy & Procedures**



**Marketing & Communications**



**Measurements & Outcomes**

# HR Policies & EHS Management System Framework

HR HEALTH POLICIES			
<ul style="list-style-type: none"> <li>• Drug and alcohol free workplaces</li> <li>• Health records &amp; Confidentiality</li> <li>• EAP Policy</li> <li>• HIV Policy</li> <li>• Tobacco-Free policy</li> <li>• Travel Health</li> <li>• Medical surveillance</li> <li>• Wellness policy</li> </ul>			
EHS Policy			
EHS STANDARDS			
INTEGRATED EHS	ENVIRONMENT	HEALTH	SAFETY
1. EHS Management Systems 2. Chemical Substances Management 3. Emergency Preparedness and Response 4. Contractor Management 5. Responsible External Supply Chain 6. Acquisitions and Divestitures 7. EHS by Design 8. External EHS Engagement	9. Air 10. Water and Wastewater Management 11. Waste Management 12. Tank System 13. Energy Management	14. Noise and Hearing Conservation 15. Biosafety 16. Radiation Safety 17. Employee Wellbeing 18. Occupational Health	19. Fall Prevention 20. Fire and Explosion Prevention 21. Process Safety Management 22. Machinery and Equipment Safety 23. Ergonomics 24. Hazardous Processes 25. Fleet Safety 26. Warehouses & Storage areas 27. Office EHS



# Fundamental principles of a successful solution

## Integrated Holistic Program Delivery

### Mental Health & Well-Being

Access to employee assistance professionals

24/7 telephonic counseling

Online mental health screening

HealthMedia® Digital Health Coaching programs

Resiliency/stress management training

Yoga and meditation

### Occupational Health & Disease Management

Onsite occupational health clinics

Employee health centers

Medical surveillance compliance

Value-added services (phlebotomy, pharmacy, & physical therapy)

CareConnect & Health Advocate

Medical benefit integration

### Healthy Lifestyle Programs

Health profile and biometrics

Health profile counseling

Digital Health Coaching programs

Pedometers and million-step challenges

Weight Watchers and nutritional counseling

Tobacco cessation programs (PIQ)

Energy Mgmt. & Engagement Training

### Health Education & Awareness Programs

My eHealth (tip of the day, family health guides, personal trackers)

Healthy people news

Healthy people bulletin boards

Global health observances (i.e. Move for Health, World Diabetes Day, Breast Cancer Awareness, World AIDS Day)



Global Health Services.

# Measurements

**Measure Outcome not just Effort**

## Global Health Assessment Tool (GHAT)

- Accessible via Johnson & Johnson intranet
- Reporting by all operating companies annually
- In-depth validation of stated culture of health and program elements including population risk data

Reports can be broken down by region (seen here) or

- Enterprise
- Sector
- Location

Program Offerings	% sites with FULL programs				
	AP	EMEA	LA	CA/PR	US
Worksites	82%	49%	48%	92%	97%
Workplace	50%	28%	52%	58%	78%
Health Services (EAP)	83%	27%	32%	96%	91%
Surveillance Programs	66%	30%	22%	70%	81%
Activity Opportunities	91%	30%	1%	100%	99%
Assessments	8%	16%	41%	96%	100%
Resilience & Resilience	59%	19%	18%	79%	85%
Awareness & Prevention	67%	48%	41%	96%	95%
Health Promotion Programs	37%	36%	16%	92%	98%
Healthy Eating Cafeteria	12%	29%	7%	38%	63%
Travel Health Resources	29%	48%	18%	71%	82%
Modified Work Programs	61%	35%	43%	96%	95%

2011 Worldwide Reporting- 426 locations (100%)

# Raising the bar

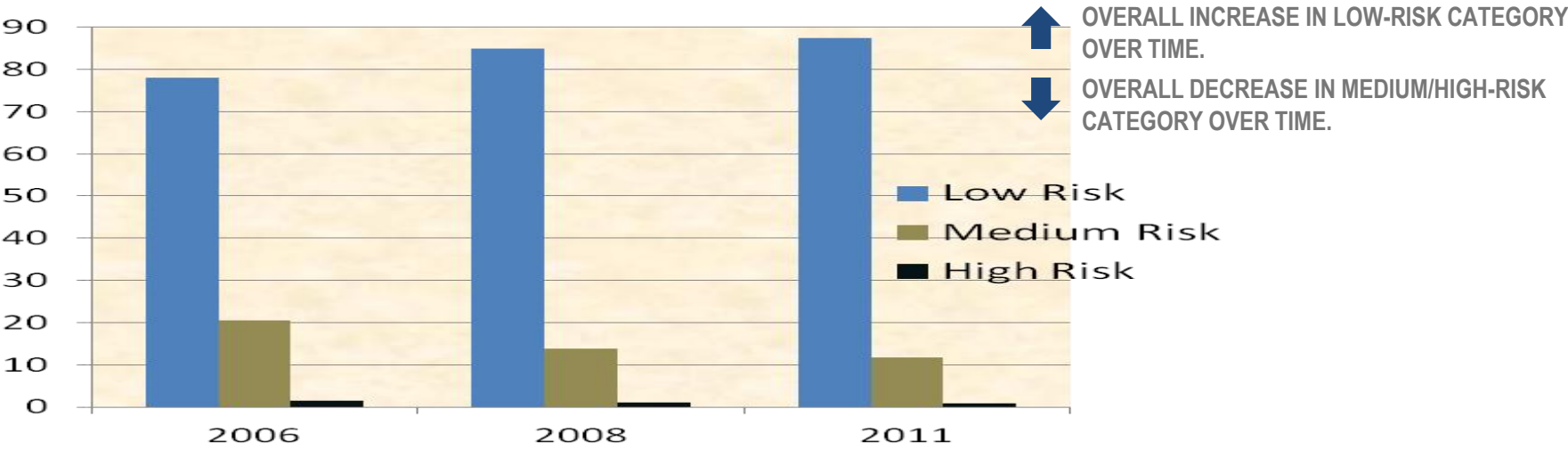
GH Goals	Enterprise	US	OUS	MFG	ADMIN
1. 75% will have > 9 Health Offerings *	53%	97%	42%	75%	42%
2. 69% or more of measured population health risks will be characterized as "low health risks"***	78%	85%	67%	77%	81%
3. 89% or more of all planned periodic medical surveillances will be completed	95%	97%	94%	94%	97%
Healthy Future 2015					
1. 90% of employees have access to "Culture of Health" programs*	34%	75%	16%	31%	37%
2. 80% of employees have completed a Health risk Assessment and know their key health indicators	38%	77%	20%	41%	33%
3. 80% of measured population health risks will be characterized as "low health risks"***	78%	85%	67%	77%	81%

\*Where programs are FULLY implemented

\*\* Low Health Risk is ≤2 Health Risks

# Impact on Population Health and Key Health Indicators

% POPULATION HEALTH RISK REDUCTION (2006 TO 2011)



High Risk Factor (in descending order by High Risk Prevalence)	Company 2011	CDC US Data	Book of Business Data (2011)
Unhealthy Eating (<5 Servings / Day)	56.6%	76.6% (2009)	62.1%
Obesity (BMI 30.0+)	20.6%	34.7% (2005-2008)	34.3%
Inactivity (<150 Moderate Minute Equivalents)	20.9%	52.7% (2009)	46.5%
Hypertension (Blood Pressure 140+/90+ mmhg)	6.4%	30.9% (2005-2008)	7.4%
Cholesterol (Total Cholesterol 240+ mg/dl)	6.2%	14.9% (2005-2008)	6.2%
Tobacco Use (Current User of Any Tobacco)	3.6%	24.8% (2008)	10.6%
Glucose (126+ Fasting)	2.5%	10.9% (2005-2008)	1.7%
Stress (Heavily or Excessively Stressed)	1.3%	3.2% (2008-2009)	1.8%

# Health Programs-

## External validation of program success & opportunities

### WELLNESS

By Rachel M. Henke, Ron Z. Goetzel, Janice McHugh, and Fik Isaac

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The People-to-People Health  
Foundation, Inc.

## Recent Experience In Health Promotion At Johnson & Johnson: Lower Health Spending, Strong Return On Investment

**Rachel M. Henke** (rachel.henke@thomsonreuters.com) is a senior research leader at Thomson Reuters, in Cambridge, Massachusetts.

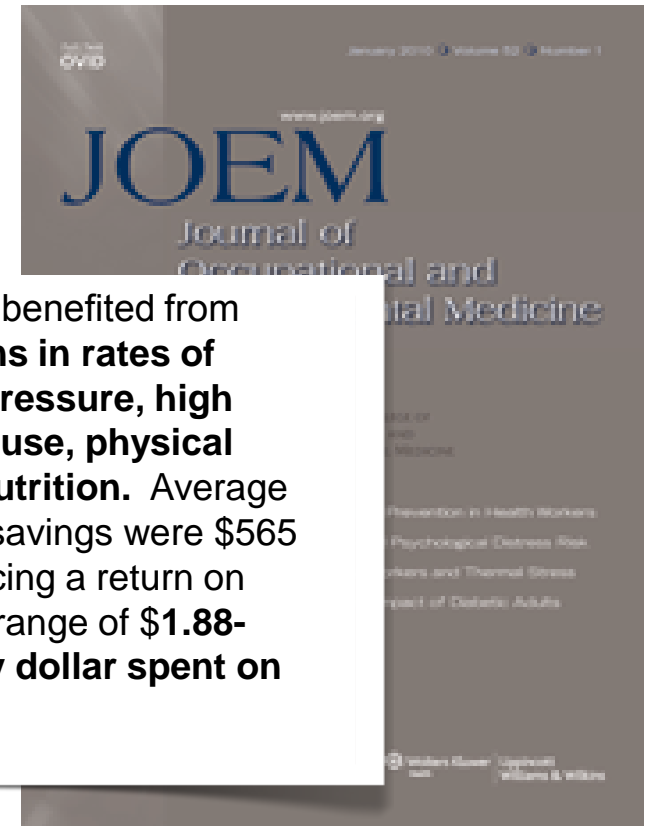
**Ron Z. Goetzel** is vice president of consulting and applied research at Thomson Reuters, in Washington, D.C. He also directs the Institute for Health and Productivity Studies at Emory University, in Atlanta, Georgia.

**Janice McHugh** is manager of integrated health services at Johnson & Johnson, in New Brunswick, New Jersey.

**Fik Isaac** is executive director of global health services at Johnson & Johnson and chief medical officer, Wellness & Prevention, Inc.—Johnson & Johnson.

**ABSTRACT** Johnson & Johnson Family of Companies initiated a worksite health promotion program in 1979. The program is still in place after more than thirty years. We evaluated the effect on employees' health risks and health care costs from 2002–08. Measured against similar large companies, Johnson & Johnson experienced average annual growth in total medical spending of 3.7 percentage points lower. Company employees benefited from meaningful reductions in rates of obesity, high blood pressure, high cholesterol, tobacco use, physical inactivity, and poor nutrition. Average annual per employee savings were \$565 in 2009 dollars, producing a return on investment equal to a range of \$1.88–\$3.92 saved for every dollar spent on the program. Because the vast majority of employees participate in the workforce, positive effects from similar programs can lead to better health and to savings for the nation as a whole.

“Company employees benefited from meaningful reductions in rates of obesity, high blood pressure, high cholesterol, tobacco use, physical inactivity and poor nutrition. Average annual per employee savings were \$565 in 2009 dollars, producing a return on investment equal to a range of \$1.88–\$3.92 saved for every dollar spent on the program.”



# Final thoughts.....

- Success springs from a **culture of health & safety**, which is built into the fabric of the business
- **Integrated** and **holistic** services deliver business results and customer satisfaction
- Use **data** to **focus** on key issues
- Set short and long term **goals**; **measure** and **track outcomes**
- **Phased** approaches and **pilots** are critical
- Increased **productivity** and **engagement** can generate significant **cost savings** and improved **performance**

*keep pushing the envelope!*





# Questions



**Find** *your* **energy.**