

# IntelliPrev™: A Primer

INTELLIGENT PREVENTION

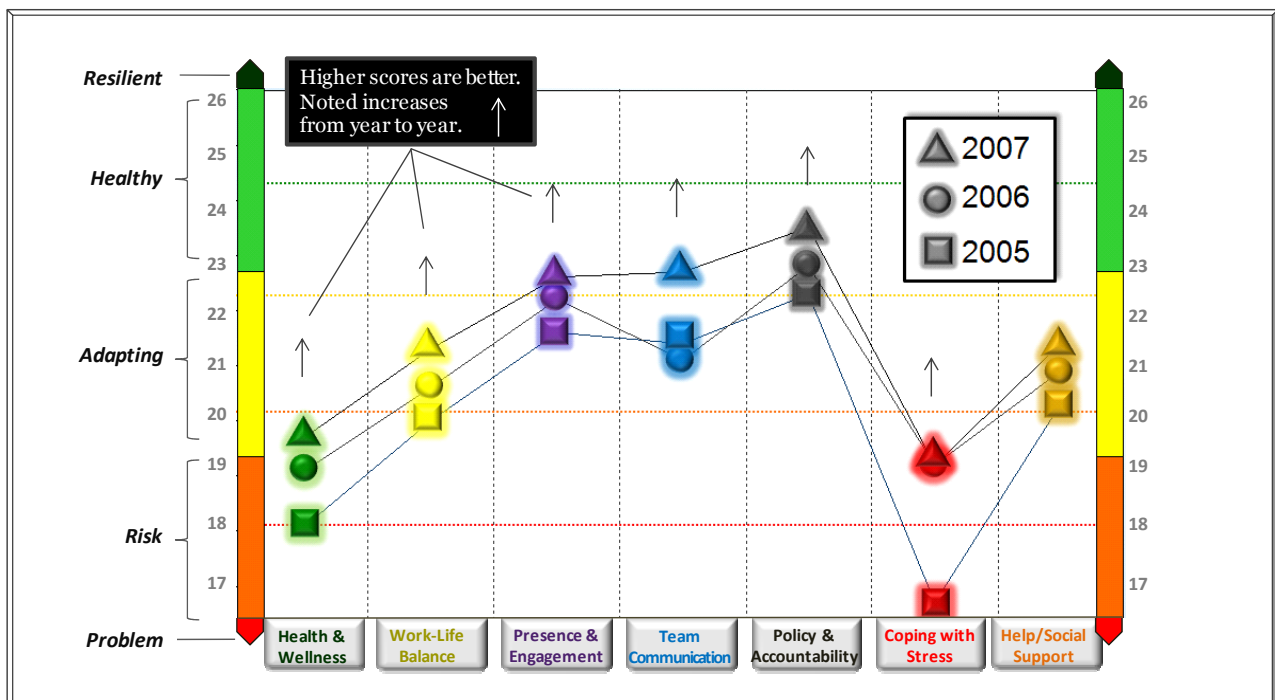
## IntelliPrev™

Support Across Diverse Professional Groups

<b>Employee Assistance</b>	<i>"IntelliPrev™ is a very "robust" program - comprehensive resources and great educational programming. IntelliPrev™ could potentially be the only program needed to address a myriad of presenting problems in the workplace"</i>	<b>-Bryan Hutchinson, United Airlines</b>
<b>Healthcare</b>	<i>"I believe the IntelliPrev™ system would be an excellent resource for companies dedicated to assisting their greatest resource, their employees, in gaining wellness in their personal and professional lives for the benefit of themselves and their employer."</i>	<b>- Amy Guardino, Director of Health Information Management</b>
<b>Worksite Wellness</b>	<i>"The IntelliPrev™ program really gives you the groundwork to provide the most efficient and appropriate wellness program for your site."</i>	<b>-Jeffery Shewan, Program Manager, MediFit</b>
<b>Human Resources</b>	<i>"IntelliPrev™ gave my HR customer and I a starting point to build a Wellness Program"</i>	<b>-Tami Calderon, Account Manager for Alliance Work Partners (EAP)</b>
<b>Prevention Programming</b>	<i>"This program – along with the consultation I received helped me make a strong financial argument for prevention. Reviewing the results of the HPC with my manager helped me to show how prevention works. Very effective."</i>	<b>-Wendy Hovey, Guthrie Hospital</b>

## Health & Productivity Climate Index:

CASE STUDY ~ Three Years in Review



## Case Study

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Organizational Wellness & Learning Systems, Inc. (OWLS) helped a medium-size municipality to conduct an employee opinion survey. The city was experiencing a good deal of change in their leadership suite, an announcement of salary cuts, and record high levels of turnover. In response, we used the **Assess** > **Design** > **Deliver** > **Evaluate** formula found in IntelliPrev™.

### **ASSESS**

OWLS used the 53 item IntelliPrev™ Health & Productivity Climate Index (HPCI) in order to assess employees' perception of health in their organization.

### **DESIGN**

The identification of “coping with stress,” and “health & wellness” as organizational risks allowed both the city's Human Resource manager and OWLS to think strategically about these issues. OWLS, the HR manager, and a newly formed city wellness committee spent a full day designing the city's new wellness program based on risks and strengths identified through the HPCI.

### **DELIVER**

OWLS guided the HR manager and wellness committee on the launch and implementation of their new program using strategies and planning guides found in IntelliPrev™. Simply announcing a new program was not going to make a successful strategy. With significant change in leadership, and low employee morale, a well-planned strategic approach was necessary. HR also met with health vendors and began to integrate health and wellness as part of a benefits platform.

### **EVALUATE**

The city continues to evaluate the success of their program by assessing their organization annually (see the 2005, 2006 and 2007 dashboard results above). They also use the annual assessments to make improvements to their wellness program, as well as address new or emerging risks. The city has also begun to utilize HR metrics, like turnover data, absenteeism, and lowered healthcare costs to make the case for their program's success.

The city's continued use of the HPCI indicates a shift in focus from disease management to prevention. With a strong start in 2005, and the early successes seen from this strategy, the city continues to assess their organization's health climate as a primary method for staying on top of health and productivity risks.

## Interview with Human Resource Director

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### **1) What information did you receive from the HPCI back in 2005? (i.e. key risk factors, stand out information?) How did it help you? (i.e. made the case for a wellness budget)**

The information helped us to confirm what we were already seeing in our employees—that we were a stressed organization. For us, having outside confirmation of this helped us to understand why we were seeing continuous double digit increases in employee health insurance premiums. The HPCI identified that we needed to take control of the stress levels in our organization by encouraging employees to be proactive in their own health. As a result we developed a wellness program. OWLS developed a planning retreat for our wellness committee in the early stages of our program; their guidance with IntelliPrev helped contribute to longer term success.

### **2) How did you use the results from the HPCI from 2005?**

We developed a wellness program comprised of employees from all areas across the organization to be a wellness champion. The employees meet at a wellness retreat and designed a comprehensive program that focused on all aspects of employee health. From an HR standpoint, we took a stronger look at how we communicate with our employees because communication was also lower than what we expected on the HPCI. With wellness champions in each department and a greater focus on employee communication we were able to focus on trying to improve employee stress.

### **3) What business outcomes have you seen since starting your wellness program?**

We have and continue to see employees that are more focused on their jobs as opposed to the stress of the political climate that comes with working for a municipality. Over the last three years our turnover has decreased. We have always had a healthy EAP utilization. That continues but there is more of an open acknowledgment amongst the employees that they are using the program and it has helped them. I think the greatest impact that the program has had is that there is now an awareness of wellness that didn't exist in the organization three years ago. We have more people walking during their lunch hour, participating in programs and generally our climate survey shows that they is an improved score in employee pride in working here. On the organizational side, data presentations from the HPC have helped improve the status of human resources in they eyes of city leadership.

### **4) How have you evaluated the success of your program?**

We have seen a ROI on the wellness program in decreased number of primary care doctor visits for the first time (this year). We also have greater participation in our programs and the HPCI indicates that our employees are more focused and healthier than they were three years ago.

## Results of NIH Clinical Trial

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### *Internet Facilitation for Adapting Prevention: An Expert-System for Human Resource Professionals*

Principal Investigator: Joel Bennett, PhD; Organizational Wellness & Learning Systems  
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This project sought to: (i) build a web-based ('expert system') program for educating human resource, workplace health, safety and EAP professionals about workplace health promotion and substance abuse prevention; (ii) test the efficacy of the program in a randomized controlled study; and (iii) refine the program based on feedback from the field trial. Following development, the web-based system was named *IntelliPrev™*, for intelligent prevention.

**Background and Procedures.** IntelliPrev™ was evaluated using a randomized control study with a posttest only survey completed by participants who either received the program (n = 108) or who were assigned to a no-program control group (n = 105).

**Sample.** Participants were recruited with collaboration from various professional associations, including the Society for Human Resource Management (SHRM), the Employee Assistance Society of North America (EASNA), the Employee Assistance Professionals Association (EAPA), the assistance of several regional health promotion organizations (e.g., the National Wellness Institute, Utah Council for Worksite Health Promotion), state-level branches of SHRM and the assistance of several corporate participants who expressed interest in our product.

**Measures.** Several self-report psychometric scales were developed following the Unified Theory of Acceptance and Use of Technology (Venkatesh et al., 2003). These included scales such as *Performance Expectancy (I have the tools I need to assess both the risks and strengths of the climate in my target worksite)* and *Intentions to Use Wellness Programs (I intend to provide a wellness program in a worksite within the next six months)*. Psychometric analyses revealed sufficient internal reliability (alphas exceed .75) for each of 13 scales.

**Results.** There were several significant differences between the experimental (IntelliPrev™) and the control groups. These are highlighted below. Compared to non-users, IntelliPrev™ participants:

1. reported greater ability to assess, design, deliver, and evaluate wellness programs
2. reported greater ease in implementing programs
3. reported more positive attitudes toward using tools and technology for wellness programs
4. reported greater orientation and understanding of evidence-based programs
5. reported greater ability to address employee substance abuse
6. showed more engagement in specific evidence-based programs that address health promotion and reduce risks for substance abuse and mental health concerns

In addition to these findings, other analyses showed that IntelliPrev™ users improved (felt more empowered in) their role as prevention advocates, especially if they had some role to play in providing programs to the workplace.

**Conclusion.** Overall, the results suggest that the program effectively translated knowledge about evidence-based programs to professionals who have a role to play in worksite program implementation. Apparently, users receive greater benefit when they devote time to e-learning and when they already play some role in health promotion.