WELLNESS PROGRAM ANNUAL REPORT
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Wellness Program Annual Report

The Cornell University Wellness Program provides employees and retirees with diverse opportunities that foster joy, balance and well-being. The Wellness Program’s four full-time, two part-time, and several group fitness instructors interact with Cornell’s staff, faculty, and retirees to promote positive lifestyle changes; our interactions focused on nutrition, fitness, and general health education. This year marked the Wellness Program’s 26th anniversary.

**Strategic Efforts**

In response to a changing environment within our employee landscape and combined with our annual and bi-annual assessment, we continually update the strategic plan. Three areas are highlighted below; see full strategic goals in Appendix E.

**Response to the Employee Survey of 2011**

This past fiscal year, the Wellness Program, in collaboration with Human Resources, developed a rebranding campaign to redefine the way that all staff and faculty identify with the program. Set to launch in September 2015, this campaign will offer solutions to the workload inconsistencies perceived by employees (including participating in wellness activities during the day) in the fall 2011 Employee Survey.

The Employee Survey asked employees about their jobs, career development, respect and fairness, leadership and direction, and life outside of Cornell. All full-time employees (excluding tenure and tenure track faculty) and all benefits eligible part-time employees were invited to complete the survey.

As a result of the survey findings, in 2013, a broad series of initiatives were approved and enacted to address workload. These included adding new change management processes, improving position evaluation request processes, increasing recognition, and more. After a year of committee work and the feedback from several supervisors and department heads, the wellness component of the 2013 proposals requesting a wellness release time policy ultimately resulted in no change to what previously existed which was a wellness guideline suggesting supervisors provide employees with up to 90 minutes of release time or flex time to support their wellness-related goals, not a policy.

In this (failed) attempt to create a release time policy that would be equally implemented amongst union, endowed, and contract college employees, some departments that previously allowed release time for wellness activities now took it away. Therefore, the Wellness Program’s rebranding campaign for 2015 looked for new ways to engage employees and departments that went beyond the fitness center mindset of a wellness program.

The campaign intentionally downplayed the membership aspect to promote the idea that “wellness” is for everyone and can be done any time of day, in a variety of locations, and in several different ways (i.e. taking a bike ride, playing tennis, choosing healthy snacks, etc). The membership still exists for people who want to use the recreation facilities such as the fitness centers, pools, and group fitness classes, however, it is less prominent on the website. The new plan officially rolls out in September of 2015 (FY16).
Highlights of the future 2015 Rebranding Campaign

- The Wellness Program will now be called Cornell University Wellness Program or Cornell Wellness depending on level of formality needed
- Mission statement: Cornell Wellness … Proudly serving staff, faculty, retirees, and spouses/partners in the areas of fitness, nutrition, and well being
- Cornell Wellness staff will be offering free Wellness Consultations in the areas of fitness, nutrition and well-being to all staff, faculty, retirees, spouses/partners (no membership needed).
- Cornell Wellness will reposition the marketing and focus on two main areas – what is offered to the individuals and what is offered to the departments.
- Cornell Wellness will be working more with departments to help them support their staff in a customized way.
- Memberships will be called Recreation Memberships instead of Wellness Memberships. Nothing else about the membership will change, just the name.
- One part time registered dietitian nutritionist was hired to meet increased demand.
- One part time fitness trainer may be hired if demand increases significantly.

Reaching off campus employees
The Wellness Program is a perk that is available to all employees. Feedback from off campus constituents identified that some employees did not feel able to take advantage of the program because their offices were far from Ithaca. The Wellness Program staff responded by formalizing relationships in the Geneva Station, Cornell Tech, ILR NYC Conference Center, and Alumni Affairs and Development North East Corridor Office. Professional staff will visit these locations twice per year to provide ongoing support for the wellness of the employees in those offices.

Data collecting and evaluation
The Wellness Program staff worked in collaboration with Benefits Services staff to start comparing health care costs between active Wellness members and the total Cornell employee population (endowed employees only). This past fiscal year, we assessed the feasibility of this project and then provided membership and participation data to add to Benefits Services. That data has been shared with Truven to compare the health care costs of active Wellness members vs. non Wellness member Cornell employees. Results will be forthcoming in FY16.

Wellness Statistics, Metrics & Evaluation

Membership Statistics

- 4,171 staff, faculty, retirees, and their spouses/partners joined as of June 30, 2015. This represented a 5.09% increase over last year.
- 2,207 members joined through the Cornell Program for Healthy Living insurance plan (see CPHL details below).
- 19 members received scholarships of 50% off which represented a 29.63% decrease over last year. (See Toni McBride Scholarship information below.)
- 2 members received memberships subsidized by Workers Compensation.
- 298 members were retirees and retiree spouses representing a 19.68% increase over last year.
- There were:
- 407 card swipes at Appel Comons Friedman Fitness Center (including 153 for classes);
- 39,946 swipes at Teagle (including 4,142 for classes);
- 31,613 swipes at Helen Newman (including 6,240 for classes);
- 5,615 swipes at Noyes (including 2,119 for classes);
- 1,464 swipes in the Ramin Room for group fitness classes.
- **79,045 total swipes for fitness centers and fitness classes.**

- Attached, please also find demographic data for the Wellness Program (Appendix A).
Cornell Program for Health Living (CPHL)
The Wellness Program completed its sixth year of collaboration with CPHL. Working with the Benefits Services and the Tompkins County Area Physicians, the plan was designed so that doctors put more emphasis on behavioral changes to decrease health risks. To support this initiative, CPHL insurance covered the cost for CPHL members who joined the Wellness Program. CPHL also offered $15 per month off of membership fees to Island Health and Fitness and the Ithaca YMCA. Last year, 2,040 CPHL members used the Wellness Program benefit; the number currently participating climbed to 2,207. This represents an 8.19% increase.

Toni McBride Scholarship
This scholarship fund continued to support a portion of 19 Wellness memberships. Requests for scholarships have been steadily decreasing the past few years due to the CHPL membership option. The scholarship fund continues to generate income; for the second year donations were not solicited.

Wellness Staff Metrics
Below is information on one-on-one appointments and group fitness classes instructed by the Wellness Program staff to assist members with meeting their wellness goals.

- Total individual contacts (one-on-ones) by staff (including 1 part time personal trainer and 1 part time nutritionist): 1,014
- Total group classes taught by staff (including Classes for Healthy Aging instructors): 844
Program Planning

Needs Assessment To Determine Program Offerings Included:

- In-person feedback from participants.
- Feedback from post-offering on-line surveys.
- Wellness & Well-being Questionnaire (highlights from 2013 tri-annual survey) (Appendix B).
- Cornell medical data from Cornell Benefit Services (Appendix C).
- Wellness Advisory Committee feedback (Appendix D).
- Wellness Strategic Goals 2013-2016 (Appendix E).
- Healthy People 2020 (Federal Government document released every 10 years) focus areas (Appendix F).

Program Evaluation

The Program was Evaluated Using:

- Feedback from surveys conducted at events and programs.
- Tracking of participation in Wellness outreach and member programming.
- Testimonials and success stories from individuals and departments.

Member Programming

Wellness members have access to the fitness centers and group fitness classes managed by the Cornell Fitness Centers. Members are also able to use the pools, Lynah ice skating rink, Lindseth climbing wall (at a discounted rate), Reis Tennis Center (at a discounted rate), Merrill Sailing Center (at a discounted rate), Robert Trent Jones Golf Course at Cornell University (at a discounted rate), privilege card services, and have the registration fee for PE classes waived through the Athletics Department. In addition, members are eligible for individual meetings with the Wellness Program’s staff and have access to the Healthy Aging Program which includes group fitness classes.

Healthy Aging Program

The Healthy Aging Program is open to any Wellness Program member, however, the offerings through this program are catered toward the older adult and retiree populations. Offerings include light to moderate intensity group fitness classes called Classes For Healthy Aging (5,080 participations), 2 falling safely workshops (24 participants), 2 senior fitness testing sessions (62 participants), Active Aging week happenings (36 participants), and a social potluck (20 participants).

Classes For Healthy Aging - These classes are appropriate for individuals who have gone through joint replacement, suffer from arthritis, experience lingering joint pain from injury, and who want to improve their balance and more. Classes embody our vision of inclusion, offer participants individualized attention to be successful, and promote an environment of camaraderie and personal success.
• **Pilates** – controlled endurance training built spinal stability, posture, and core strength. 711 participations.
• **Ripples** – exercise in shallow and deep water kept impact low while muscles and cardiovascular system were strengthened. 1,174 participations.
• **Strength Training/Barre** - resistance training class helped build bone density, reduced the risk of falling, and strengthened muscles. 1,357 participations.
• **Yoga: Stretch and Strengthen** – class participants explored body alignment and placement within each yoga posture at a slow pace. 695 participations.
• **Zumba Gold** – heart health, improved balance and coordination, and having fun were emphasized while participants moved to the Latin rhythms of Zumba. 606 participations.
• **Kripalu Yoga** – designed for every level, this class helped improve strength, flexibility, balance, breathing, and relaxation. 315 participations.
• **Yoga: Posture and Balance** – increased range of movement in all joints in the body, and focused on movements that increased balance. 324 participations.
• **Jazzercise Lite** – improved cardiovascular strength, coordination, and balance through low-impact aerobic dance. (Fall only) 167 participations.
• **Belly Dance** – balance, adding movement back into the hips and low back, and exploring your own natural movement patterns were emphasized in the class. (Fall only) 258 participations.
• **Cardio Dance** – low to moderate intensity aerobic dance performed to music. (Spring only) 49 participations.
• **Yoga Flow** - different aspects of yoga were explored in this class that included breathing, posture and alignment. (Spring only) 30 participations.

**Group Exercise Classes (not part of the Healthy Aging Program)**

• **Sports Conditioning With Tabata Protocol Class** - provided high intensity interval style workouts through running drills, plyometrics and strength training. Participants built speed, agility, and endurance. 4 classes total were offered, running once per week for 6 weeks. Approximately 11 people participated in each class.
• **Strengthen Your Core To Prevent Back Pain Class** – This core training class emphasized alleviating and/or preventing mild recurring low back pain. Participants progressed through basic movements designed to improve posture, dynamic core stability, body awareness and muscular balance as well as stability. 4 classes offered each semester. Each class had two parts. 18 total participants.
• **Women On Weights Class** – This 5 week strength training class was designed to teach enrollees the basics of strength training and navigating the weight room. Each week consisted of a specific strength training workout and guidance on proper form and lifting technique. (Spring only) 12 participants.

**Individual Meetings With Staff**

• **Medical Nutrition Therapy** (MNT), conducted by two registered dietitians, was offered to staff and students. MNT typically included a nutrition assessment and follow-up counseling for a variety of problems including but not limited to weight management, sports nutrition, cholesterol reduction, and general health. There were over 217 meetings with the registered dietitians. In addition, the Wellness Program provided a community nutrition placement site in
the fall for a dietetic internship offered through Cornell University’s Division of Nutritional Sciences.

- **Consultation and Follow-up Meetings with Personal Trainers** were encouraged. These meetings were complimentary with membership and were intended to empower the member while gently encouraging positive behaviors using coaching techniques. Four personal trainers on staff provided exercise prescriptions for those wanting to use the fitness centers, take group fitness classes, or exercise at home. A total of 841 of these individual meetings occurred between members and the Wellness Program staff this past year.

- **On-going Personal Training** continued to be a success with 9 people who requested the service. This offering was tailored to individuals who wanted the motivation and guidance of a trainer on a regular basis to help them reach their goals. A fee is charged for on-going personal training; sessions are purchased in 4 packs.

- **Physical Fitness Testing** was offered by request to Wellness members. The fitness testing included: blood pressure and resting heart rate measurement; height, weight, and percent body fat measurement; hand grip strength testing; sub maximal treadmill testing; flexibility testing; and sit-up and push-up testing. Members sometimes requested the full testing be done, but often asked if they can do only a few of the tests that interested them the most.

### Group Equipment Orientations With Staff

- **Cardio 101**, instructed by Wellness staff, this group class oriented individuals who wanted to use cardio equipment in the fitness centers such as the treadmills, bikes (recumbent & upright), rowers, ellipticals, and the AMTs. 7 participants.

- **Strength Training Machines 101** helped participants learn how to properly adjust the strength training machines in the fitness centers. People were shown at least six different pieces of equipment during these classes. 4 participants.

- **Free Weights 101** instruction provided on the use of dumbbells, Olympic bars, preacher curl bars, squat racks, collars and more. 3 participants.

### Wellness Outreach

Wellness outreach included a broad range of Wellness programming and services that were available to the entire Cornell community. This included staff, faculty, retirees, and their families. As in previous years, a special effort continued to be made to work with staff and supervisors to get to know the needs of individual work units/departments, and to provide programming for staff with less flexibility.

### Bike To Work/School Day

This event was coordinated by Cornell Transportation Services and Tompkins County Cooperative Extension. The Wellness Program helped to organize and advertise the event as well as host a food/information table located outside Helen Newman Hall. This annually recognized day was a huge success with over 450 total bikers who visited one of several Tompkins County food table locations on their way into work or school.

### Blood Pressure Machine/Screenings

Wellness staff continue to facilitate blood pressure screenings, both to groups and individuals, by
request. Additionally, an automatic blood pressure machine is accessible to all Cornell employees inside the Helen Newman Hall fitness center. The automatic machine recorded 5690 readings this past year.

**Classes – Open to the Cornell Community**

- **Vegetarian Cooking Class** – class was designed for those trying to increase and diversify their vegetarian meal repertoire. Fall and spring classes were offered. Fall – 18 participants, spring – 17 participants.
- **Gluten Free Baking For Everyone** - Yalonda Buie, trained chef, demonstrated several tasty gluten free recipes for a variety of baked goods. 30 participants.
- **Low Carb Desserts** – Wellness staff instructed people on how to create some of their favorite desserts in very low carb versions. 12 participants.
- **Eating For Your Best Self** - This in-person, 12 session small group experience helped individuals become more in tune with their personal thoughts and behaviors surrounding food. Mindfulness exercises, group discussions, strategy building and in-depth nutrition education were the focus. Fall – 14 participants, spring – 12 participants.
- **Pre-Diabetes Class** – This 16 week group class was instructed by Tompkins County Health Department staff. 8 participants.
- **Sparkling Wine Tasting** – Enologist Annemarie Morse facilitated a workshop and tasting on the finer points of sparkling wine. The event also included a food pairing component that gave people ideas for holiday entertaining. This offering was part of the social wellness series which catered to young professionals. 20 participants.
- **NYS Wine And Cheese Tasting** – Facilitated by enologist Annemarie Morse, local wines and cheeses were discussed and sampled. Part of the social wellness series. 20 participants.
- **Stress Reduction Class – Focus On Guided Relaxation** – Diane Hecht, certified meditation and stress management instructor, provided 4 sessions on techniques used to calm our minds and stop persistent worries. 20 participants.
- **Stress Reduction Class – Focus On Meditation** — Diane Hecht, certified meditation and stress management instructor, gave two 4 session workshops that focused on beginning your own personal meditation practice. 20 participants.
- **Walk To Run Class**– This class was offered to anyone who was interested in integrating running into their fitness routine. The class finale was participating in an optional 5K race in Ithaca, and a 5K route on campus was offered as an alternative. 29 participants.
- **Walk To Run – 3-4 Mile Class** – Offered as a “step 2” in the walk to run program, this class included runners who wanted to improve their endurance by consistently running three to four miles twice per week under supervised instruction. 20 participants.

**Go Go Go 150**

Wellness Program staff challenged the entire Cornell community to celebrate Cornell’s sesquicentennial through striving to reach 150 minutes of physical activity each week for six consecutive weeks. About 1,100 participants, on more than 162 teams, joined the “Go Go Go 150” challenge. This contest intentionally ended on the same day as the Charter Day celebration honoring Cornell’s 150th anniversary. It was the most participated in contest we have held to date.
Lectures, Workshops & Webinars

- **Living With COPD &/or Asthma** – registrants joined this lecture to hear about the medical causes and symptoms of COPD and asthma, respiratory medications, tobacco cessation and a smoke-free environment, nutrition tips, and more. Speakers included Cayuga Medical Center respiratory therapist Carrie Westlake and Susan Dunlop R.N. of the Tompkins County Health Department. 10 participants.

- **Diabetes Straight From The Doc** – endocrinologist, Dr. Adam Law, owner of IthacaMed, talked about diabetes and how to create a plan to manage your blood sugars. He explained how diet and medications worked together to minimize complications. 14 participants.

- **The Calming Effects Of Knitting** – During this 3-part series new knitters learned the basic stitches to make a Big Red scarf. Instructed by Donna Kuhar, a seasoned knitter who has taught knitting to young and old throughout Ithaca. 45 participants.

- **Knit2Gether Cornell** – This group grew out of the 3-part knitting series. It meets bi-weekly at different locations across Cornell’s central campus. 30 participants.

- **Women And Heart Disease Event** – Attendees learned three simple tips to prevent heart disease. February was “Go Red For Women” month created to bring attention to the incidence of women and heart disease as well as encourage healthy behaviors to avoid heart disease. Susan Dunlop, RN, from the Tompkins County Health Department, brought this informative session to Cornell as part of the American Heart Association campaign. 60 participants.

Life Coaching
Half-hour coaching sessions were offered to employees upon request. Wellness staff are trained as Intrinsic Coaches®. Throughout the year 49 people participated in the coaching sessions either in person or by telephone. That represented a 28% increase in coaching sessions over the previous year.

Massage Therapy
Ongoing chair massage appointments at the Helen Newman Hall location have been slowly decreasing over the past few years. It was decided to end this service at this location. Massage therapy is still being offered throughout the year by Matty Termotto, LMT, at several other buildings on Cornell’s central campus. Staff can also schedule massage therapy through Gannett Health services.

Run/Walk @ Work Day
With over 150 participants and four suggested routes offered, this year’s Run/Walk @Work Day was a great event. Individuals had to cover 2 miles to be entered into a prize drawing. The event was heavily marketed through social media, posters, a webpage and Facebook.

Support Group e-lists
Support group e-lists for diabetes, cancer, weight loss, weight loss surgery, Lyme disease, and fibromyalgia continued to be supported by Wellness staff. These e-lists provided an informal setting for people to share their questions, thoughts, and experiences.

Tobacco Cessation Options
Wellness staff coordinated smoking cessation offerings which included one-on-one counseling, tele-counseling, and group counseling upon request. Three people consulted on smoking cessation.
**Weight Watchers**
One chapter, led by Cornell staff, offered monthly meetings on Cornell’s campus through sponsorship by the Wellness Program.

**Work By Request**
Wellness Program staff worked to fulfill special requests from individual departments. Departments who requested special offerings are listed below.

- **SAS** Direct support staff for Office of VP Murphy - group cooking demo held at sorority house kitchen. 11 participants.
- **SAS** BSC – Exercises at your desk workshop. 5 participants.
- **Human Ecology** CHEER – stretching and progressive relaxation workshop. 10 participants.
- **Hotel School** - Health and Safety Fair – Provided blood pressure checks. 40 participants.
- **Vet College** – Stair climb event to support their step climbing contest.
- **Vet College** – Intro to Wellness Program lecture. 6 participants.
- **Vet College** – Summer salads demo. 18 participants.
- **Vet College** – Surviving a summer of construction lecture. 30 participants.
- **Vet College** - Molecular Diagnostic unit work (MSIPP, Gannett PT, Wellness). 12 participants.
- **Vet College** – Diagnostic lab - Stretches for workers who use the hoods. 15 participants.
- **Vet College** – Community Supported Agriculture (CSA) lecture. 25 participants. Resulted in new CSA pick up location convenient for employees.
- **Baker Institute** – Summer salads demo. 18 participants.
- **Baker Institute** - Intro to Wellness lecture. 6 participants.
- **Employee Winter Celebration** - Tabling and poster on how much sugar is in your beverage. 20 participants.
- **BTI** - Wellness Fair - tabling. 15 participants.
- **Gannett** – What is life coaching lecture. 2 participants.
- **Gannett** – Life coaching workshop and demo. 30 participants.
- **Gannett** – “Models” for rehabilitation videos.
- **Gannett** - Cooking demo. 4 participants.
- **Grounds** - Presentation on Heart Attacks. 30 participants.
- **EHOB** – Summer salads demo. 9 participants.
- **EHOB** – Space review for informal exercise area
- **EHOB** – CSA lecture. 20 participants. Resulted in new CSA pick up location convenient for employees.
- **PSB** – Summer salads demo. 13 participants.
- **Geneva** – Bike/Walk to work week. Last day of event. 30 participants.
- **Disability CNG** – Introduction email – what Wellness can do for you.
- **Seneca Place** – Wellness beyond the fitness center lecture. 10 participants.
- **Campus Life** – Jumpstart Your Morning cooking demo. 25 participants.

**Collaborations**

- **Athletics Department Collaborations**
  - Reis Tennis Center – discounted membership
Robert Trent Jones Cornell Golf Course – golf lessons and discounted membership
Merrill Sailing center – sailing lessons and discounted membership
Outdoor Education – Wellness rock climbing class and discounted wall pass
Cornell Lacrosse – advertised blood drive

Community Collaborations
Collaborated with Guthrie Doctors to offer Walk With A Doc program held at Barton Hall’s indoor track. 8 walks held. 5-15 participants per walk.
The Gym at East Hill Plaza and Island Health and Fitness. Continued deal for employees to be able to utilize either of the facilities at reduced cost during Cornell’s winter break period.

Professional Development/Committee Work/National Recognition
The Wellness Program valued the importance of continuing education for our staff members. Wellness core competencies include the abilities to listen, teach, coach, educate, and serve. Professional development kept our staff current on new trends, best practices and research as well as kept us connected with a network of colleagues nationwide. Below is a list of professional development completed by our staff this past fiscal year.

Beth McKinney
- Served as Lead program manager for Charter Day weekend
- Intrinsic Coaching 5 week training: Advanced Hours on application of coaching principles.
- Diversity Lectures:
  - Dumb Things Well-Intended People Say: 10 Skills to Increase Your Diversity Competence (exclusively for SAS staff)
  - Facilitating Conversations with Staff about Diversity (for supervisors within SAS)
  - HRSS & HR Community Diversity Training: Your Story/My Story
- Course/Curriculum Development
  - Teaching and Learning Methods: Getting Started with Active Learning: Ten Things to Try Tomorrow seminar
  - Junior Faculty Course Design – one day workshop
- CPR/AED/First Aid recertification

Kerry Howell
- Served as an event session manager for Charter Day weekend
- Completed 4 credits towards Associates degree in Nutrition, DTR, Central Arizona College
- CPR/AED/First Aid recertification

Ruth Merle-Doyle
- Attended Worksite Wellness Summit, Binghamton, NY, April 29, 2015
- Served as an event session manager for Charter Day weekend
- CPR/AED/First Aid recertification
Jenn Bennett

- Cornell University Supervisor Development Certification Program
- Attended Student and Academic Services Diversity Event with Guest Speaker Maura Cullen
- Cornell Staff Together Achieve Results (STAR) Event: Project Management
- American Council on Exercise Course (ACE): Size Sensitivity & Other Strategies for Overweight & Obese Clients
- International Council on Active Aging (ICAA) Webinars: Modifying Yoga for People with Osteoporosis; Practical Progressions in Group Fitness for Older Adults
## Appendix A

### Demographic Data FY 2014-2015

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Appendix B

Wellness & Well-being Questionnaire Highlights

Questionnaire was bi-annual. It is changing to tri-annual. Data below is from FY 2012-2013. More than 50% of people were very interested or somewhat interested in the following topics:

- Healthy Eating (84.7%)
- Healthy Cooking (84.6%)
- Making Your Home More Energy Efficient (73.9%)
- Retirement Planning (70.4%)
- Composting (68.4%)
- Going Green in Your Home (68.4%)
- Workspace Ergonomic Assessment Information (67.6%)
- Musculoskeletal Topics (65.1%)
- Creating a Will (65.0%)
- Environmentally Friendly Cleaning Products (64.8%)
- Volunteer Opportunities in the Community (63.7%)
- Wellbeing Opportunities in Your Community (Tompkins & surrounding counties) (63.7%)
- Environmentally Friendly Health Care Products (62.2%)
- Stress Reduction (61.7%)
- Weight Management Education (61.4%)
- Sleep Education (61.1%)
- Going Green in Your Workplace (60.9%)
- Back Pain Management (60.4%)
- Sustaining a Positive Attitude (59.5%)
- Balancing Work and Life (59.5%)
- Career Building Resources at Cornell (57.8%)
- Anxiety (56.7%)
- Flexible Work Options (53.2%)
- Heart Disease Education (52.6%)
- Accessing Health Information on the Internet (51.1%)
- Lyme Disease Education (50.7%)
- Cholesterol Education (50.7%)
- Budgeting Basics (50.3%)
Appendix C

Medical Data - Cornell Benefits Office – FY 2014-2015

Please note when comparing to previous fiscal year medical data: You will notice a big difference in the lifestyle-related spending and affected patients compared with past years. This change occurred due to a clarification from Truven Health Analytics in the correct interpretation of the lifestyle field in the reporting database.

Lifestyle Conditions: Definition and Interpretation

Research shows that people with certain lifestyle risks are statistically more likely to have certain conditions. The purpose of the lifestyle conditions dimension in the Truven Health Analytics database is to show the financial burden of the conditions in the endowed Cornell population that have an association with the one or more of the following 10 modifiable risk factors: obesity, lack of physical activity, tobacco use, alcohol use, poor nutrition practice, noncontrolled lipids, noncontrolled hypertension, excessive sun exposure, stress/anxiety/depression and unsafe sexual behavior.

One may interpret the results of this report as follows: Cornell is spending approximately $9.5 million on certain diagnoses that have been shown to be associated to some degree with at least one of the modifiable risk factors shown above.

The report is not saying that future money spent on these conditions could be prevented if only people reversed their modifiable risk factors. That perspective would assume a direct causal relationship between the risk factors and the prevalence of these conditions, and the report should not be interpreted as such. Furthermore, wellness programming should not be expected to achieve total reversal of all harmful lifestyle factors among all individuals with those factors.

Please note when comparing to previous fiscal year medical data: You will notice a big difference in the lifestyle-related spending and affected patients compared with past years. This change occurred due to a clarification from Truven Health Analytics in the correct interpretation of the lifestyle field in the reporting database.
NOTE: Total medical spending (excluding prescription drugs) on all lifestyle related conditions was $9,482,098 in CY2014, incurred by a total of 4,022 patients.
NOTE: Total medical spending (excluding prescription drugs) on all lifestyle related conditions was $9,482,098 in CY2014, incurred by a total of 4,022 patients.
Active Plans’ 20 Leading Medical Conditions With Lifestyle Implications Sorted by Number of Patients, With Medical Net Payment Listed, CY2014

<table>
<thead>
<tr>
<th>Clinical Condition</th>
<th>Patients</th>
<th>Net Pay Med</th>
<th>Net Pay Med per Pat</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lipid Metabolism Disorders</td>
<td>977</td>
<td>$210,627</td>
<td>$216</td>
</tr>
<tr>
<td>Hypertension</td>
<td>827</td>
<td>$254,451</td>
<td>$308</td>
</tr>
<tr>
<td>Bronchitis, Acute</td>
<td>489</td>
<td>$73,174</td>
<td>$150</td>
</tr>
<tr>
<td>Diabetes</td>
<td>455</td>
<td>$290,013</td>
<td>$637</td>
</tr>
<tr>
<td>Asthma</td>
<td>421</td>
<td>$149,749</td>
<td>$356</td>
</tr>
<tr>
<td>Sleep Apnea</td>
<td>367</td>
<td>$541,559</td>
<td>$1,476</td>
</tr>
<tr>
<td>Osteoarthritis</td>
<td>317</td>
<td>$1,052,106</td>
<td>$3,319</td>
</tr>
<tr>
<td>Overweight/Obese</td>
<td>258</td>
<td>$347,101</td>
<td>$1,345</td>
</tr>
<tr>
<td>COPD</td>
<td>239</td>
<td>$119,187</td>
<td>$499</td>
</tr>
<tr>
<td>Malnutrition/Nutritional Disorders</td>
<td>239</td>
<td>$44,665</td>
<td>$187</td>
</tr>
<tr>
<td>Coronary Artery Disease</td>
<td>206</td>
<td>$1,296,361</td>
<td>$6,293</td>
</tr>
<tr>
<td>Cancer - Skin</td>
<td>163</td>
<td>$827,160</td>
<td>$5,075</td>
</tr>
<tr>
<td>Pneumonia</td>
<td>145</td>
<td>$84,514</td>
<td>$583</td>
</tr>
<tr>
<td>Constipation</td>
<td>119</td>
<td>$47,629</td>
<td>$400</td>
</tr>
<tr>
<td>Oral Disease</td>
<td>115</td>
<td>$71,302</td>
<td>$620</td>
</tr>
<tr>
<td>Cancer - Breast</td>
<td>95</td>
<td>$643,836</td>
<td>$6,777</td>
</tr>
<tr>
<td>Cerebrovascular Disease</td>
<td>89</td>
<td>$657,943</td>
<td>$7,393</td>
</tr>
<tr>
<td>Osteoporosis</td>
<td>74</td>
<td>$17,336</td>
<td>$234</td>
</tr>
<tr>
<td>Venous Embolism/Thrombosis</td>
<td>71</td>
<td>$142,830</td>
<td>$2,012</td>
</tr>
<tr>
<td>Diverticular Disease</td>
<td>63</td>
<td>$181,507</td>
<td>$2,881</td>
</tr>
</tbody>
</table>

Top 20 Conditions                  | 3,832    | $7,053,052  | $1,841              |

Total Lifestyle Conditions         | 4,022    | $9,482,098  | $2,358              |

Percentage of Total Lifestyle Conditions | 95.3% | 74.4%        |

Top 20 Lifestyle as % of All Conditions | 25.5% | 10.7%        |
## Active Plans’ 20 Leading Drug Categories Sorted by Rx Net Payment, With Scripts & Number of Patients Listed, CY2014

<table>
<thead>
<tr>
<th>Therapeutic Class</th>
<th>Scripts</th>
<th>Net Pay Rx</th>
<th>Patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Antivirals, NEC</td>
<td>1,508</td>
<td>$1,381,869</td>
<td>580</td>
</tr>
<tr>
<td>Biological Response Modifiers</td>
<td>130</td>
<td>$1,200,714</td>
<td>23</td>
</tr>
<tr>
<td>Immunosuppressants, NEC</td>
<td>398</td>
<td>$1,122,883</td>
<td>69</td>
</tr>
<tr>
<td>Antidiabetic Agents, Insulins</td>
<td>946</td>
<td>$614,493</td>
<td>164</td>
</tr>
<tr>
<td>Gastrointestinal Drug Misc, NEC</td>
<td>4,653</td>
<td>$606,041</td>
<td>1,114</td>
</tr>
<tr>
<td>Molecular Targeted Therapy</td>
<td>63</td>
<td>$586,249</td>
<td>8</td>
</tr>
<tr>
<td>Adrenals &amp; Comb, NEC</td>
<td>3,570</td>
<td>$542,703</td>
<td>1,609</td>
</tr>
<tr>
<td>Stimulant, Amphetamine Type</td>
<td>2,727</td>
<td>$488,299</td>
<td>413</td>
</tr>
<tr>
<td>Psychother, Antidepressants</td>
<td>11,868</td>
<td>$477,064</td>
<td>1,885</td>
</tr>
<tr>
<td>Antihyperlipidemic Drugs, NEC</td>
<td>6,993</td>
<td>$474,329</td>
<td>1,311</td>
</tr>
<tr>
<td>Antidiabetic Agents, Misc</td>
<td>2,535</td>
<td>$370,180</td>
<td>426</td>
</tr>
<tr>
<td>Coag/Anticoag, Hemostatics</td>
<td>19</td>
<td>$323,479</td>
<td>7</td>
</tr>
<tr>
<td>Psychother, Tranq/Antipsychotic</td>
<td>917</td>
<td>$291,216</td>
<td>144</td>
</tr>
<tr>
<td>Gonadotropins, NEC</td>
<td>126</td>
<td>$280,569</td>
<td>30</td>
</tr>
<tr>
<td>Contraceptive, Oral Comb, NEC</td>
<td>6,015</td>
<td>$264,570</td>
<td>911</td>
</tr>
<tr>
<td>Phosphodiesterase Inhibitors</td>
<td>936</td>
<td>$247,242</td>
<td>319</td>
</tr>
<tr>
<td>Cardiac Drugs, NEC</td>
<td>2,388</td>
<td>$221,612</td>
<td>430</td>
</tr>
<tr>
<td>Antiinflam Agents EENT, NEC</td>
<td>2,703</td>
<td>$217,305</td>
<td>1,296</td>
</tr>
<tr>
<td>CNS Agents, Misc.</td>
<td>789</td>
<td>$216,326</td>
<td>138</td>
</tr>
<tr>
<td>Estrogens &amp; Comb, NEC</td>
<td>1,906</td>
<td>$209,781</td>
<td>421</td>
</tr>
<tr>
<td><strong>Top 20 Drug Categories</strong></td>
<td>51,190</td>
<td>$10,136,924</td>
<td>6,459</td>
</tr>
<tr>
<td><strong>Total Drug Categories</strong></td>
<td>126,197</td>
<td>$14,198,881</td>
<td>10,468</td>
</tr>
<tr>
<td><strong>Percentage of Total Drug Categories</strong></td>
<td>40.6%</td>
<td>71.4%</td>
<td>61.7%</td>
</tr>
</tbody>
</table>
Appendix D

Wellness Advisory Committee

Note: Meetings are typically held in November and May. Instead of a May meeting, we decided to try holding a meeting in August. Due to summer vacations and work responsibilities too few committee members could attend and the meeting was postponed until the Fall semester.

November 3, 2014

In attendance: Beth, LaWanda, Ruth, Chris, Andrea, Sunny, Todd, Karyn, Bruce, TJ, Jenn, Curtis, Mark, Nimat, Kerry

Agenda Topic: Member/Outreach Programming

1) Reviewed Spring 2014 offerings
2) Successful
   a. Run/walk @work day
      i. Off-shoot marketing question – was marketing successful or unsuccessful
         1. Noticed it first on social media
         2. Well publicized
         3. Saw it a lot, maybe too much in email form, social media marketing was great
   b. Classes For Healthy Aging classes
      i. Very successful. Almost over-subscribed.
   c. Suggestion – survey the “regulars” to see what keeps them participating in group fitness/programming/fitness centers
3) Continue with what you are doing, nice mix
4) Ideas for future
   a. More short duration classes
   b. Request to change name of Women’s Only swim to female-bodied only swim to bring into alignment with standards for gender/sexuality terms. Counter point made that changing the name away from Women’s Only to female-bodied only would be in conflict with Muslim beliefs. Note: more discussion needed
   c. Bike to Work – market more ways to be safer when riding to work
      i. Possible collaboration with CU Police in addition to transportation services – focus on elements of safety (blink lights, low light condition safety, rules of the road, remind people which side of the road to ride on)
   d. Market/promote alternative transportation practices
      i. Car share, walk, bike
   e. Advocate for bike lanes with new road construction
   f. Fitness wearables
      i. When to jump on band wagon
      ii. How should we do it
iii. Effective use of wearables
iv. Recommendations of devices and social platform for trading experiences
v. Giving away wearables as an incentive – reach certain number of steps, receive reward
g. Capture the first timers somehow – possibly through acknowledging/rewarding first time participation

5) Most engaged by...
   a. Longer running event (8wks) - Fitness/Weight Loss challenge
      i. Noticed generation divide – how can we make events more inclusive to all populations (specifically already healthy/fit individuals)
      ii. Maybe break out into age groups for prizes?
   b. Short event for the day (Bike To Work, Walk/Run @ Work) – excellent for involvement

6) Reaching out to underserved populations with programming – staff who track time – how to do this?
   a. Talk directly with faculty about providing flexibility/release time to their support staff
   b. Dining, building care – identified populations (stress, lack of time, less healthy food options based on lack of time)
   c. Can we package it in a different way – offer to departments as “training workshops”? – these have supervisor support
   d. Trades – 15 min training session weekly called “toolbox talks”. Wellness could use that for offering workshops
   e. Mandatory training vs. optional training – culturally acceptable to be able to attend – up to the supervisor – is it relevant to work
   f. “Green Certificates” – can Wellness Develop a “Wellness Certificate” – team certificates/work unit certificates. Make these easy to achieve changes

Agenda Topic: Flex/Release Time Topic

1) Recap on history of flex/release time for Wellness
   a. Letter from Opperman (through HR) suggesting 3h of release time for Wellness per week. In effect until 2003.
   b. Changed into Flexible Work/Wellness Agreement housed on HR website and linked to from Cornell Wellness Website. Up to discretion of supervisor. Suggests 90 minutes for Wellness per week. Advocates for flex or release time to be granted. Currently in existence but will most likely be removed soon.
   c. Cornell University Climate Survey feedback from 2yrs ago revealed unhappiness with inequality of release/flex time implementation practices for staff in regards to Wellness. The response to employee survey committee (led by Beth) proposed through the Employee Assembly to Skorton/Opperman that employees be granted 2 hr of release time bundled under personal development for Wellness participation per week.
   d. 2 hr proposal not accepted. Skorton/Opperman responded through writing that the University was not ready for this policy to be implemented yet (they received a lot of
strong negative feedback from department heads/supervisors when they shared proposal with them). They acknowledged that implementation of release/flex time varied by individual and job responsibilities/job structure and encouraged that pre-existing arrangements not be taken away and challenged supervisors to try to raise the bar and work creatively to accept flex/release requests.

e. Message went out that the 2 hr proposed release time was not approved at the University level and the outcome is that some departments have taken away the ability to request release time altogether and have limited time to flex requests only.

f. Current flexibility policy at Cornell is being re-worked and shortened from about 30 pages down to 10. Possible idea of new flexibility policy is that an employee can ask for flexibility for any reason and an employee does not need to say what the time is for (i.e. childcare, play baseball, fitness center, etc). It is up to requester of flex time to show how that person will meet the business needs and not be there during certain times. Because it is flex and not release time, a reason for requesting the time would not need to be given.

2) Plantations – previously half of employees took release time for Wellness. Plantations falls under CALS. CALS implemented a policy change that employees could no longer utilize release time for Wellness. People are not happy and supervisors are having to uphold CALS new policy. Lots of frustration.

3) Hourly employees get 30 or 42 minute lunch breaks. Possibly have programming that is shorter in duration.

4) Skorton mentioned in his last address to the staff that he encouraged volunteering at the University. How do hourly employees get the time approved for volunteering? Reward with release time?

5) Equate it to a flu shot. Less likely to get sick. Equate it to regular car maintenance. Push research.

6) Does the policy affect non-exempt staff more than exempt staff?

7) CALS policy is equal for non-exempt and exempt. Both track time.

8) For supervisors – make it easier to approve through consistency of what is requested (i.e. swim Mondays 9-10am on a consistent basis).

9) By taking release/flex time to be physically healthy, the reduced health care costs are reaped by the University. But there is a disconnect with the current model, the supervisor has to deal with ensuring work gets done and scheduling but receives no monetary benefit/incentive for having healthier employees.

10) Happy employees work harder. That is the benefit for supervisors.

11) Difficult for some staff who are exempt and work 60 hours/wk to relate to this discussion. In my world, I’m thinking sweet, let’s add up the additional 20 hours per week I work and start taking that off for Wellness time during the week. Statler Hotel staff get free meals. Different perks for different units – Statler hotel vs. school employees.

12) Scheduling challenging for supervisors when staff are sick etc.

13) You have some supervisors who do not live the “active lifestyle” who focus on this is what has to get done and this is how I need to manage people to get this done. Can say let’s try 30 min walk
for everyone at lunch but now Facilities/trades is broken up into zones so that model doesn’t allow for the 30 min walk scenario. With the new zone changes, you no longer have a pool of 12 electricians to pull from and cover time for each other; you have 2 electricians per zone, this doesn’t allow for cross-coverage for release/flex time for wellness.

14) Focus group to explore this topic?
   a. Would you as a supervisor be willing for us to meet with your group? Facilities – no. I only have 9am-4pm as my window to get the work done. Plantations – yes.
   b. Be careful of setting unreal expectations by doing focus groups. You are setting people up to think that you are listening to them and that something will change. Being a good supervisor doesn’t always mean that people get what they want. Regrettably I see a top down approach working on flex/release time to implement changes, not a bottom up approach. Bottom up approach setting employees up for disappointment.
   c. If you can navigate through lost expectations with focus group, discussions may be beneficial with employees and supervisors to find opportunities and improve the system. Make it as reasonable and flexible as possible. Currently inflexible flexible work arrangement in place (CALS).

15) What message would we want to send to the incoming President? What are peer institutes doing?
   a. Staff have been cut so much.
   b. Top down clear message needs to be sent on the importance of wellness.

16) Figuring out how to embrace the inequality of Wellness flex/release time due to the diversity of jobs and job needs at the University. Fair is not equal. Can there be equitability?

Agenda Topic: Spring Contest Ideas

1) Probably not doing the No Excuses contest this Spring
2) Most likely offering instead a physical activity based contest, possibly tied into a 150 type theme to capitalize on Cornell’s 150 celebration. Possibly 150 min per week or 150 million total minutes, etc. Should we challenge another University? Should we include students?
   a. Reach minute goal, get an entry into a pool prize drawing – not focused on one winner who accrues the most total minutes.
   b. Single high $ prize, research shows more participation
   c. Possibly challenge Ithaca College? Or another local institution.
   e. Reduce differences in contest design for people with more vs. less flexibility
   f. Is there some way to donate money? Tie into giving back to a cause or something that benefits non-exempt employees. Do a match fund raiser? Plant trees? Living legacy.
   g. Make contest 150 days long
   h. Tie in a theme of challenging students to show appreciation for staff
   i. Win 150 min with a personal trainer
   j. Promote Plantations trails
   k. Other schools that are celebrating a sesqui? Tie into or challenge them?
I. Promote Charity miles – you are a sponsored amateur athlete
   m. Tie back into Wellness Program scholarship fund or the CARE fund – money goes back to Cornell employees

Additional Comments/Feedback

1) What can be done about the locker room facilities if something is broken/malfunctioning
   a. Suggestion – signage in locker rooms saying if you notice a problem, please contact – phone number – to report the problem
Appendix E

Wellness Strategic Goals 2013-2016

In addition to day-to-day operations which serve to meet the needs of the Cornell community, the Wellness Program has outlined four long term strategic areas in which to focus more broadly over the next few years. This document was updated in 2015.

1. Best practices in promoting health and wellbeing
2. Diversity in all aspects of the program
3. Gain national/international recognition
4. Organizational Effectiveness

1. Best practices in promoting health and wellbeing
   a. Address campus wide access to flex and release time
      i. Update and promote Cornell Wellness guideline to blend with newly updated Flexibility in the workplace policy.
   b. Formalize more collaborations
      i. HR, Plantations, Transportation, Gannett, Athletics, CU Police for events such as Bike To Work Day.
      ii. HR Benefits, HR Medical Leaves, EHS for health and return to work priorities.
   c. Consult with and facilitate development of more department wellness committees.
   d. Enact new business model by revising internal procedures to reach more employees
      i. Including rebranding messages
      ii. Including creating an updated website
   e. Increase focus on distance locations (ie. NYC, Geneva, and others)

2. Diversity in all aspects of the program
   a. Healthy Aging Program
      i. Address large class sizes (reaching maximum) by offering more diverse programming.
         1. Creative classes – ie in weight room
         2. Active Aging Week, and other targeted programming
   b. Identify underserved populations, and develop programming to reach these audiences.
      i. 18-35 years, Younger Generation
      ii. 55+ years
      iii. Non-Exempt staff
      iv. Faculty
   c. Diversify communications to reach a variety of audiences
      i. Repackage programming into “department training” workshops
      ii. Complete marketing plan for underserved populations including visual and written word.

3. Gain national/international recognition
   a. Identify opportunities to speak/present at conferences, write articles, and apply for awards
      a. ACSM expo (Ruth/Kerry will propose for ACSM 2016)
b. “Fully evaluating a Program” (Jenn Bennett will present to a national conference)
c. Explore applying for the American Heart Associations’ Fit Friendly Workplace Award.

4. **Organizational Effectiveness**
   a. **Data Analysis**
      i. Evaluate effectiveness of new tracking system (ID Scan)
      ii. Develop and streamline process for Truven data analysis in collaboration with Benefits
      iii. Track Workers Comp participant meetings in meaningful way through Qualtrics
   b. **Tri-annual survey, June 2016**
      i. Include questions about facilities, social media, and method of delivery
      ii. Include questions specifically for employees in supervisor role
   c. **Go Paperless**
      i. Explore databases that store and report on client notes confidentially
      ii. Explore creating our own database in-house
      iii. Goal of making all client records electronic by June 2017
   d. **Five year benchmarking**
Appendix F

Healthy People 2020 Focus Areas

- Physical Activity
- Nutrition
- Weight Status
- Iron Deficiency
- Older Adults
- Arthritis
- Osteoporosis
- Chronic Back Conditions
- Diabetes
- Genetic Counseling
- Health
- Hypertension
- Cholesterol
- CVD/Heart/Stroke
- Smoking