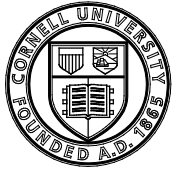


FY 2013-2014



Cornell University

**[WELLNESS PROGRAM
ANNUAL REPORT]**

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Wellness Program Annual Report

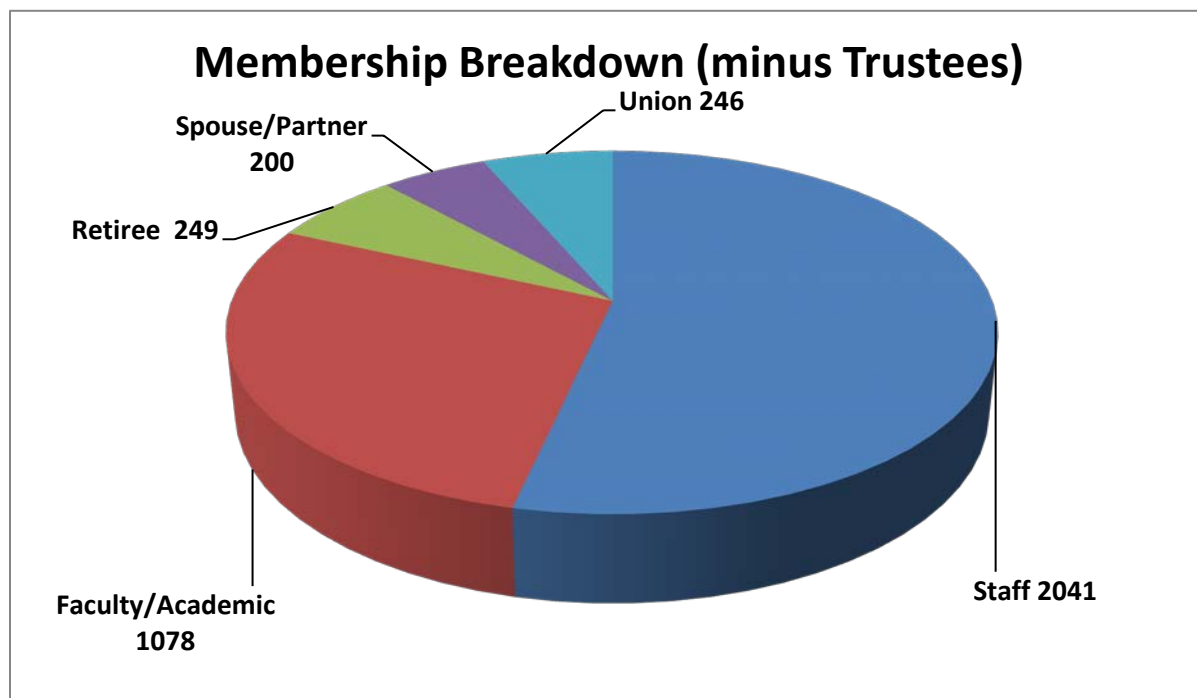
The Cornell University Wellness Program provides employees and retirees with diverse opportunities that foster joy, balance and well-being. The Wellness Program's four full-time, three part-time, and several group fitness instructors interact with Cornell's staff, faculty, and retirees to promote positive lifestyle changes; our interactions focus on nutrition, fitness, and general health education.

This year marked the Wellness Program's 25th anniversary. The entire Cornell community was invited to celebrate this milestone with a "Get Your Wellness Socks On" storytelling campaign and a live celebration that included the debut of a video montage, featuring employees who shared their positive experiences about wellness, created specifically for the event.

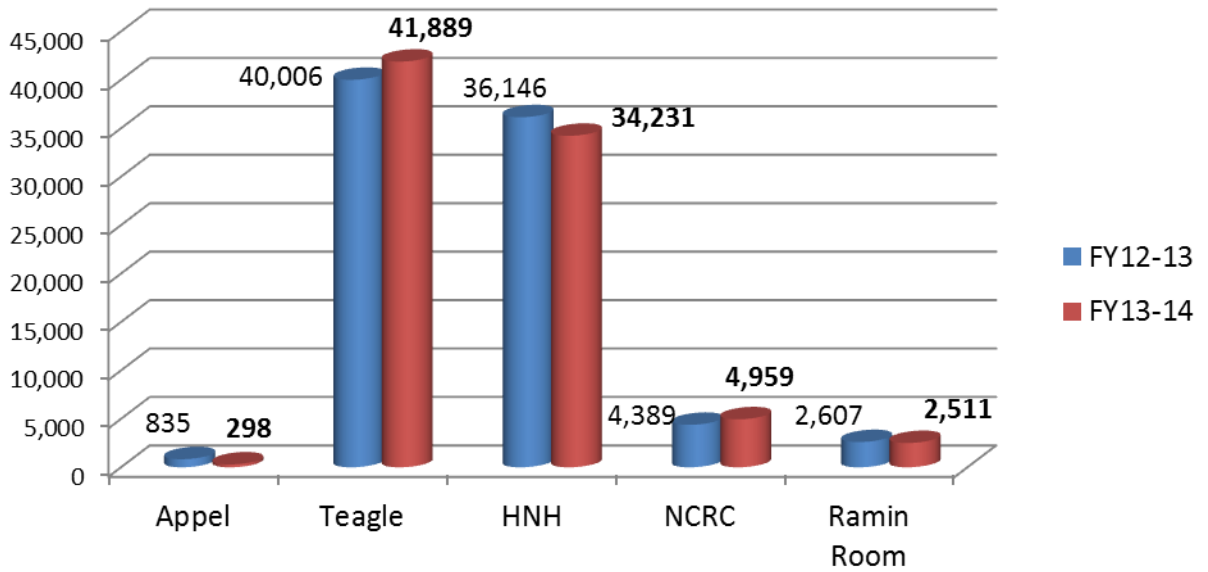
Wellness Statistics, Metrics & Evaluation

Membership Statistics

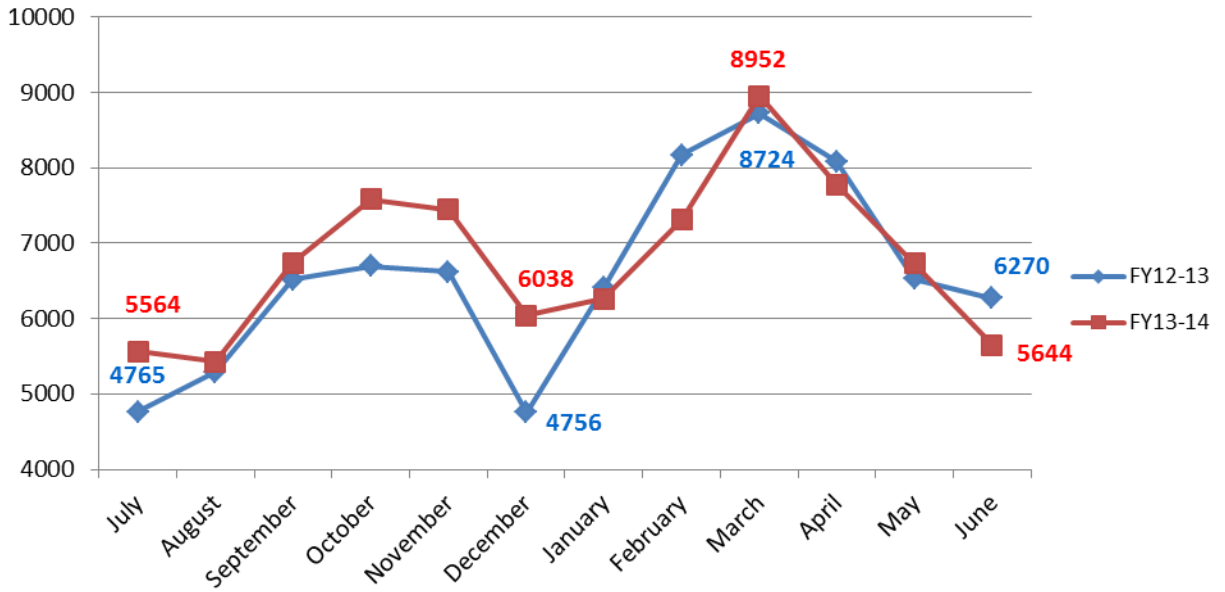
- **3,969 staff, faculty, retirees, and their spouses/partners joined as of June 30, 2014. This represented a 6.7% increase over last year.**
- **2,040 members joined through the Cornell Program for Healthy Living insurance plan (see CPHL details below.)**
- **27 members received scholarships of 50% off which represented a 12.9% decrease over last year. (See Toni McBride Scholarship information below.)**
- **249 members were retirees and retiree spouses representing a 2.0% increase over last year.**
- **There were**
 - 298 card swipes at Appel (including 106 for classes);
 - 41,889 swipes at Teagle (including 3,805 for classes);
 - 34,231 swipes at Helen Newman (including 5,491 for classes);
 - 4,959 swipes at Noyes (including 1,528 for classes);
 - 2,511 swipes in the Ramin Room for group fitness classes.
 - **83,888 total swipes for fitness centers and group fitness classes.**
- *Attached, please also find demographic data for the Wellness Program (Appendix A).*

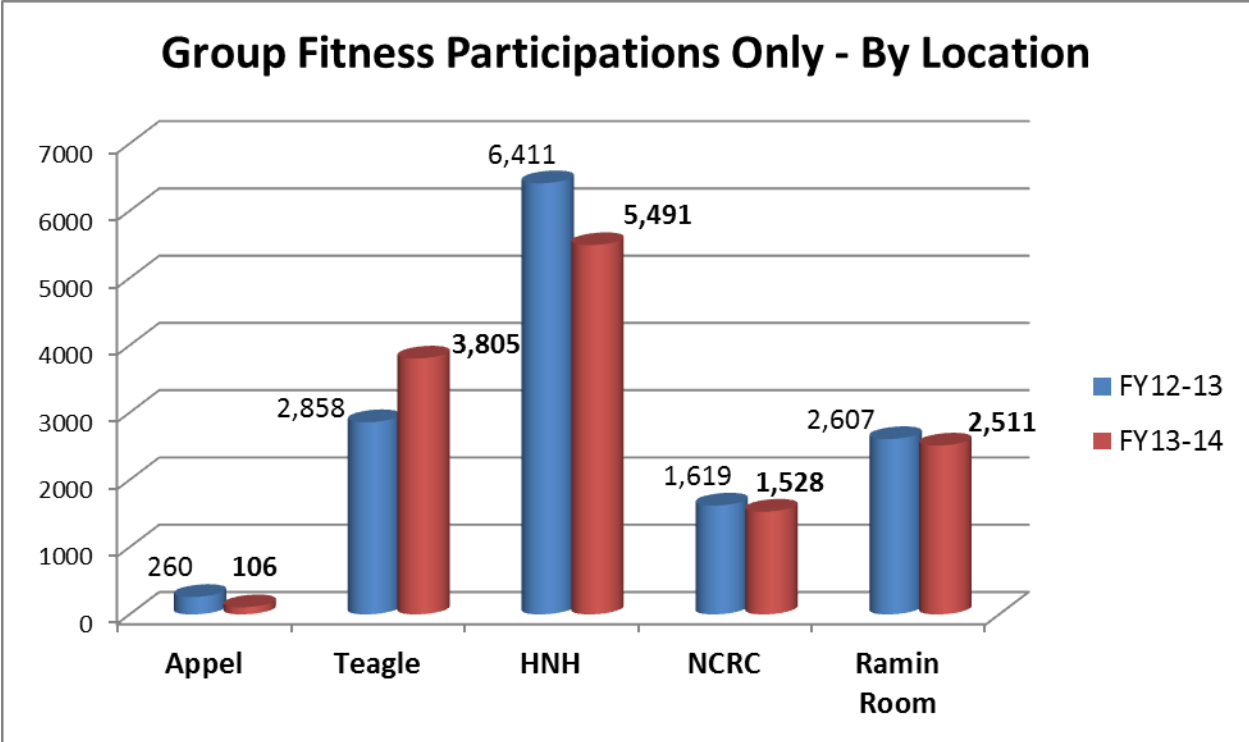


Total Participations - By Location



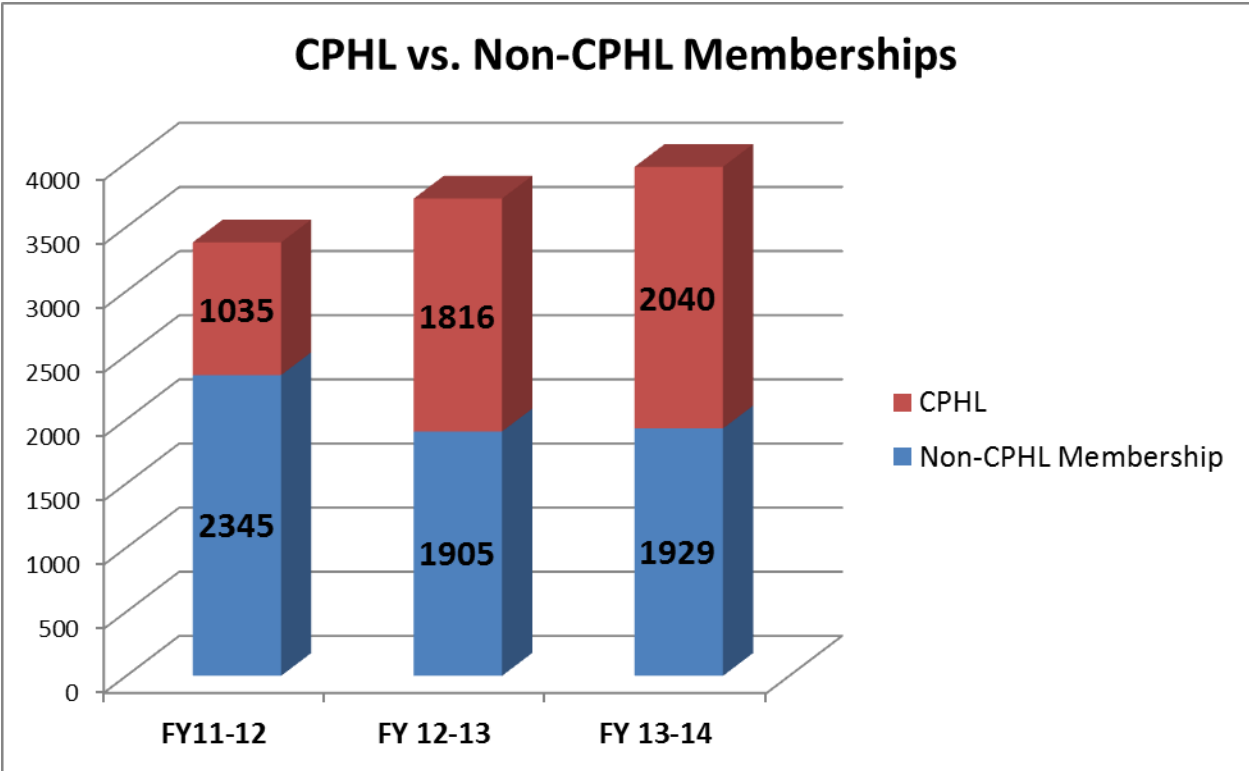
Total Card Swipes By Month





Cornell Program for Health Living (CPHL)

The Wellness Program completed its fifth year of collaboration with CPHL. Working with Cornell Benefit 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. In FY 2012-2013 the number climbed from 1035 to 1816. This represented a 75% increase in CPHL members most likely due to the elimination of the HealthNowNY endowed insurance option. **In FY 2013-2014, the number climbed again, reaching 2,040 members. This represented a 12.33% increase.**



Toni McBride Scholarship and Scholarship Fund

The Wellness Program was happy to offer assistance to those who could not afford the full annual membership fee. This scholarship fund supported a portion of 27 Wellness memberships. Over the past few years, there has been a decrease in the number of scholarships requested due to the increase in CPHL memberships. The scholarship fund continues to generate income; this year donations were not solicited.

Wellness Staff Metrics

Below is documentation of one-on-one appointments and group fitness classes conducted by the Wellness staff to assist members with meeting their wellness goals.

- Total individual contacts (one-on-ones) by staff (including 2 part time personal trainers 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 bi-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), RTJ Cornell golf course (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 (detailed below) and have access to the Healthy Aging Program which includes group fitness classes.

Classes For Healthy Aging – Open to Wellness Program Members Only

These classes are appropriate for individuals who have gone through joint replacement, suffer from arthritis, experience lingering joint pain from injury, 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.

- **Better Balance** – static balance, moving balance, and agility were emphasized. Pre and post-class balance testing was administered.
- **Jazzercise Lite** - participants improved cardiovascular strength, coordination, and balance through low-impact aerobic dance.
- **Modified Chair Yoga** – offered a variety of seated and standing positions that strengthened muscles and improved balance and flexibility. Was accessible to all fitness levels. Due to low attendance discontinued class after Fall 2013.
- **Pilates** – controlled endurance training built spinal stability, posture, and core strength.
- **Ripples** – exercise in shallow and deep water kept impact low while muscles and cardiovascular system were strengthened.
- **Strength Training** - resistance training class helped build bone density, reduced the risk of falling, and strengthened muscles.
- **Yoga: Stretch and Strengthen** – class participants explored body alignment and placement within each yoga posture at a slow pace.
- **Zumba Gold/Low Impact Zumba** – heart health, improved balance and coordination, and having fun were emphasized while participants moved to the Latin rhythms of Zumba.
- **Kripalu Yoga** – designed for every level, this class helped improve strength, flexibility, balance, breathing, and relaxation.
- **Posture, Balance and Joints** - increased range of movement in all of the joints in the body, posture and strength exercises along with static stretching and quiet meditation were focused on in this class.

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

- **Sports Conditioning Class/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 with 6 sessions each were offered.
- **Aqua Zumba Class** – moderate to high intensity water exercise done to the rhythms of Latin music. Class was held in the Teagle pool. 50 classes total.

Individual Meetings With Staff

- **Medical Nutrition Therapy (MNT)**, conducted by a registered dietitian, 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 131 meetings with a registered dietitian. 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. The 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 810 of these individual meetings occurred between members and the Wellness staff this past year.
- **On-going Personal Training** continued to be a success with 15 people who requested the service this past year. This offering was tailored to individuals that 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.
- **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. This service is requested less and less each year.

Group Equipment Orientations With Staff

- **Cardio 101**, instructed by Wellness staff, oriented individuals who wanted to use cardio equipment in the fitness centers such as the treadmills, bikes (recumbent & upright), rowers, ellipticals, and the AMTs. Approximately 15 participants total.
- **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 instructional classes. Approximately 15 participants total.
- **Free Weights 101** instruction provided on the use of dumbbells, Olympic bars, preacher curl bars, squat racks, collars and more. Approximately 10 participants total.

Senior Fitness Testing

In FY 2013-2014 group fitness testing was offered twice to members over the age of 55. This offering was marketed to individuals registered in the Classes For Healthy Aging classes and through the Wellness Weekly Update. Fifty-five people were tested. Testing involved a battery of fitness assessments sanctioned by the Senior Fitness Association and the *National Academy of Sports Medicine* (NASM) that included various strength, aerobic capacity, flexibility, and balance tests. Individual results were mailed to each participant; individuals were encouraged to set up a meeting to discuss the results and set future goals.

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.

Active Aging Week

A new offering to the community that celebrated active aging through education and activity. Sixty-eight people attended the five lectures which included Home Efficiency (CCE), Nutrition Fact or Fiction, Strong Bones, Introduction to CSAs (CCE), and Exercise While Traveling. There were an additional 289 views of these webinars.

Bike To Work Day

This event was coordinated by a group of volunteers from various parts of the Tompkins County community in conjunction with the American League of Bicyclists. The Wellness Program gladly helped to advertise the event and hosted a food/information table located outside Helen Newman Hall. This annually recognized day was a huge success with over 100 total bikers who visited either the Wellness table or the table outside of Teagle Hall.

Blood Pressure Machine

An automatic blood pressure machine was available to the Cornell community in the Helen Newman Hall fitness center. 7,236 blood pressure readings were taken this past year.

Blood Pressure Screening/Offerings

Wellness staff continued to facilitate blood pressure screenings, both to groups and individuals, by request.

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 – 20 participants, spring – 16 participants.
- **Cooking Demo: That's Vegan** – in this cooking demo Chef Kevin Spinner showed attendees how to use fresh vegetables, grains and spices, to create wonderfully flavored dishes. 25 participants.
- **New evening class: Social Food – Wine and Food – Part 1 and 2** - Chef Kevin Spinner and Enologist Annemarie Morse hosted this two part food demonstration and wine tasting class that focused on the idea of food, wine and entertaining. 24 participants.
- **New evening class: Back To Basics Cooking Classes – Roasted Vegetables and Elegant Roasted Chicken**– these two separate cooking workshops focused on maximizing your time and energy as you prepared your meals with forethought to providing exciting leftovers for the entire week with minimal extra cooking. 30 total participants.
- **New evening class: Greek Wine and Food Tasting** –Enologist Annemarie Morse provided participants with a Mediterranean influenced wine and food pairing from Greece. 18 participants.

- **Miracle Of Living Stress Free Class** – Arianna Blossom, Wellness Coach, lead this 6 week group class through conversations focused on how to let go of fear and anxiety, shifting your perception to love, and opening the door to a miraculous life. Fall and spring classes were offered. Fall - 17 participants, spring – 17 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. Fall and spring classes offered. Fall - 20 participants, spring – 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. Fall and spring classes offered. Fall - 20 participants, spring – 20 participants.
- **Walk To Run Class**– people transitioned from walking to running 3 miles during this 9 week instructor lead class. The class finale was participating in an optional 5K race. Fall and spring classes were offered. Fall - 20 participants, spring – 40 participants.

Lectures, Workshops & Webinars

- **Health Information On The Web** – Sarah Young, Cornell librarian, provided a webinar on finding reliable information on health, wellness, drugs, medicines, diet, nutrition, holistic and integrative medicine on the web. 18 in-person participants, 19 webinar views.
- **Tips And Tricks For Prenatal Exercise** – Wellness staff offered this workshop and webinar for expectant parents. 18 in-person participants, 11 webinar views.
- **Posturally Speaking: Exercises Behind The Science** – Susan Geisler and Peter Abbass, Cornell physical therapists, presented tips and tricks that helped diminish stresses and strains to your neck and upper back that resulted from work environments. 65 participants.
- **Hearing Loss: What Everyone Should Know** – Carol Bass, Audiologist, discussed hearing loss and discussed treatment options through different hearing aid technologies from simple to sophisticated. 15 participants.
- **Grocery Store Tour** – Wellness staff lead an educational and fun tour around the P&C Fresh grocery store located at East Hill Plaza. Special stops were made at the produce, deli, butcher shop, dairy, and grain product areas. 15 participants.
- **Cardiac Lecture** – Dr. Paul Stefek, CMC, discussed the importance of recognizing the signs of a heart attack and seeking treatment quickly. Held at the Vet school. 100 participants.
- **Weight Loss Success Stories** – two separate presentations by Gary Cremeens and Dave Honan. Lectures focused on their own personal experiences with weight loss, what worked and what did not. 6 participants for one, 12 for the other.
- **Self-Management Workshop –University Staff Development Day**– Wellness staff facilitated a discussion on self-management that included recognizing signs and symptoms of stress and anxiety. 18 participants.
- **Diabetes Tips And Tricks** – Wellness staff discussed realistic, everyday techniques that could be used to help manage diabetes or pre-diabetes. 22 participants.
- **Upset Stomach Issues: A Primer On Irritable Bowel** – Dr. Karen Kim, Guthrie, lead a discussion on irritable bowel syndrome that focused on providing information about IBS and learning when it's time to see a doctor. 12 webinar participants.

- **Falling Safely Workshop** - at the event, Wellness staff dispelled myths surrounding falling and gave live demonstrations of falling safely forward, to the side, and backwards. Attendees practiced falling safely on mats. 16 participants.

Life Coaching

Half-hour coaching sessions were offered to employees upon request. Wellness staff are trained as Intrinsic Coaches®. Throughout the year about 35 people participated in the coaching sessions either in person or by telephone.

Massage Therapy

Ongoing clinics were successful this year for massage therapy. Cornell community clients paid fees for chair massages offered every Thursday throughout the year by Matty Termotto, LMT. Chair massages were also offered, by request, to individual departments.

No Excuses Weight Loss Contest

This was the third running of the weight loss contest hosted by the Wellness Program. 818 faculty, staff, retirees and their spouses/partners combined to form 134 teams of 4-8 people. The participants lost a total of 4,047 pounds. 16 teams lost an average of four or more pounds per person over the eight-week duration of the contest making them eligible for prizes. In addition fifteen winners were randomly drawn from those with perfect attendance.

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.

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

Two chapters, 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.

- **Disability Colleague Network Group** – General Wellness Program offerings lecture and more specific discussion on accessibility of facilities given. 5 participants.
- **Vet School** – Todd Baker, MSIPP and Wellness staff presented a lecture on workspace ergonomics and stress reduction stretches. 30 participants.
- **Baker Institute** – Todd Baker, MSIPP and Wellness staff presented a lecture on workspace ergonomics and stress reduction stretches. 8 participants.
- **Library** – Quinoa, Kale, and What? Food demonstration. 13 participants.
- **Library** – Heathy Snacking workshop food demonstration. 24 participants.

- **Library** – Self Management lecture. 10 participants.
- **Library** – Individual coaching sessions provided. 4 participants.
- **SAS** – Wellness Beyond The Fitness Center lecture. 6 participants.
- **NYC – AA&D** – Webinar Q&A on New Year’s Resolutions. 3 participants.
- **Engineering** – Sustaining Self – Creating A Sustainable Exercise Routine lecture. 5 participants.
- **Facilities** – Sustaining Self – Creating A Sustainable Exercise Routine lecture. 3 participants.
- **Facilities - Combined Heat and Power Plant Division** – Food cooking demonstration. 15 participants.
- **Humphreys** – Meal planning workshop. 18 participants.
- **Campus Life** – Self Management lecture. 10 participants.
- **Summer Session And Continuing Education** – Self Management lecture. 28 participants.
- **Dyson School** – Cooking demo. 15 participants.
- **Office Professionals Program** – Self Management lecture. 20 participants.
- **CU Police Fitness Testing** – assisted with annual fitness testing for monetary physical fitness incentive program. And, assisted with administration of mandatory fitness tests to top applicant pool prior to job offers. 22 participants.
- **STAR Event** – Self Management lecture. 20 participants.
- **New Supervisor Orientation Program** – lead discussion on Wellness Program offerings for employees and answered questions supervisors had on release/flex requests and implementation. NSOP training occurs about 4 times per year. Typically 25 participants per training.
- **CALS** – Sun Safety Event. Wellness staff gave 15 min. intro presentation and tabled at event. 60 participants.
- **University Staff Development Day** – tabled at annual event.
- **Benefair** – tabled at annual event.
- **BTI Benefair** – tabled at annual event.
- **Vet School Benefair** – tabled at annual event.
- **Watkins Glenn Middle School** – provided food/calorie interactive workshop and physical activity interactive workshop to 7th and 8th graders for a career day event. 16 participants.

Collaborations

- **Athletics Department Collaborations**
 - Equestrian Center – advertised pony rides fund raiser
 - 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. 10-15 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 keeps our staff current on new trends, best practices and research as well as keeps 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

- Attended HERO Conference: Health Enhancement Research Organization for a summit on college wellness programs
- Chair of the Employee Survey Response Committee
- Intrinsic Coaching Advanced Training
- CPR/AED/First Aid recertification

Kerry Howell

- Attended ACSM Health and Fitness Summit in Atlanta, GA
- Presented at SHRM Regional Conference, Ithaca College
- Completed 8 credits towards Associates degree in Nutrition, DTR, Central Arizona College
- Expanded job responsibilities to include Web Specialist position for Rec Services
- CPR/AED/First Aid recertification

Ruth Merle-Doyle

- Co-chair of CARE Fund Auction
- Completed Certified Intrinsic Coaching certification
- Attended ACSM Health and Fitness Summit in Atlanta, GA
- Attended ACSM Preconference: Post-Rehab: New Opportunities in Fitness
- CPR/AED/First Aid recertification

Jenn Bennett

- Aquatic Exercise Association Water Fitness Instructor Certification
- Completed Certified Intrinsic Coaching certification
- New Supervisor Orientation Certificate Program – Cornell University
- Publication: "[The Older-Adult Population: Finding the Balance Between Fitness & Fun](#)" Featured in AKWA Magazine for Water Fitness Professionals – April/May 2014 edition
- Attended AEA Regional Conference - Binghamton, NY
- CPR/AED/First Aid instructor

Strategic Efforts

Focus on Inclusive and Accessible Fitness Options

Several projects were completed this fiscal year to increase inclusiveness and accessibility both in the fitness setting and for the community in general:

1. A partner exercise video was created by Wellness staff which demonstrated band exercises that could be done in both a sitting and standing position. One of the models in the video is in a wheelchair; in the video she partners with a model who is standing and sometimes seated.
2. The Wellness Program purchased new, accessible steps for the Helen Newman Hall pool. Previously, users needed to use the built-in stair grooves in the side of the pool. The new steps provided opportunities for people with accessibility concerns to easily get into the pool – staff, faculty, and students benefitted from this addition.
3. The Wellness Program coordinated the installation of grab bars in the men’s and women’s locker rooms in Helen Newman Hall making the showers safer and easier to access.

Creation of Informal Exercise Area Guideline

More and more departments are embracing the benefits of exercise for their employees. However, with increased workloads and less free time to travel to a fitness center, departments have started to provide fitness opportunities in their buildings and locations. The Wellness Program in collaboration with Cornell’s Risk Management Office developed a document (Appendix G) that departments can use to create safe exercise spaces. Wellness staff consulted with 3 departments (Baker Institute, Gannett Health Services, CHE Courtyard/MVR) this fiscal year regarding setting up informal exercise areas.

Response to the Employee Survey of 2011

The results of the October 2011 Employee Survey resulted in the proposal, approval and creation of many new initiatives. One of the proposals addressed the inconsistencies for employees to participate in wellness-related activities and personal development. Throughout fiscal year 2012, the Employee Survey Response Team developed and submitted a proposal to create a release time policy. President David Skorton and Vice President Mary Opperman responded to the proposal in July of 2013, this fiscal year. Ultimately, a proposal to create a policy granting release time for personal development was rejected. For original proposal and response, see Appendix H.

Revising the Wellness Program Guideline

In an effort to support employees and supervisors in navigating wellness requests, the Wellness staff in collaboration with Work/Life Services engaged in efforts to update the current “guideline” for wellness participation that resides on the Human Resources webpage. Currently, the guideline is linked to the Flexibility In The Workplace documents. Since the Flexibility In The Workplace is an actual policy (which will also be revised and updated), it would better serve the staff to make the guideline separate. A new proposed guideline will be developed and submitted for review in FY 2014-2015.

New Business Plan

The Wellness Program is currently working collaboratively with Human Resources/Benefits Office to explore options that more efficiently serve our staff, faculty, and retirees. This has been an ongoing project; plans to propose a new business model are under development and will be proposed in FY 2014-2015.

New Website Launched

As part of a Student and Academic Services (SAS) initiative, all of the Recreational Services websites were redesigned to meet the University's goal of unifying Cornell's web identity. The Wellness Program website was launched in March, 2014 with a new look.

Old website:



New website:



Website Oversight Added to Wellness Employee's Responsibility

Web communications and social media have become extremely important in representing our department. Recreational Services, as a unit of SAS, does not have a dedicated communications position and therefore asked for someone to step up into that role. Kerry Howell was ready for more challenge and was selected to take on these additional responsibilities in service to SAS. As the primary content manager and contact for the Rec Services website, which pulls what were previously 6 separate websites (Rec Services, Noyes, CFC, Intramurals, Bowling, Wellness Program) into one and manages them with a new content management system (Drupal), duties include maintaining advanced aspects of entire site, monitoring and approving content, and training users, among other duties.

Return To Work Collaborations

This project is happening in collaboration with Environmental Health and Safety, Medical Leaves, and the Wellness Program to develop a comprehensive strategy to bundle existing services regarding employees' health, safety and wellness. By developing a more cohesive organization, the employees will be able to return to work in a more timely fashion, reducing the financial burdens to potentially the employee and the university. The services will also offer a comprehensive look at work life balance by using services already available in a current disjointed fashion and make a more streamlined approach to bring people back to work after illness or injury.

Currently, the nurse case manager is selecting Workers Comp clients to meet with Wellness Program professionals to establish a relationship, help improve work/life balance, and start an exercise or nutrition program if appropriate. This fiscal year, Cornell Wellness has met with 11 employees to assist with their return to work process.

Appendix A

Demographic Data FY 2013-2014

	Wellness Program Number	Percentage %	Cornell University Number	Percentage %
American Indian/Alaskan Native	4	0.12%	25	0.23%
Asian	324	9.87%	1067	9.80%
Black or African American	121	3.68%	304	2.79%
Hispanic/Latino	69	2.10%	174	1.60%
Multi-Racial	76	2.31%	190	1.74%
Native Hawaiian/Oth Pac Island	7	0.21%	13	0.12%
Not Specified	6	0.18%	70	0.64%
White	2677	81.52%	9047	83.08%
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Endowed	2529	77.01%	7223	66.33%
Statutory	755	22.99%	3667	33.67%
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Exempt	2261	68.85%	7209	66.20%
Nonexempt	1023	31.15%	3681	33.80%
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Female	1817	55.33%	5463	50.17%
Male	1467	44.67%	5427	49.83%
Other	0	0.00%	0	0.00%
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Faculty	410	10.33%	1606	14.75%
Non-Faculty Academic	668	16.83%	2507	23.02%
Retiree	249	6.27%		
Staff	2041	51.42%	5437	49.93%
Union	246	6.20%	1340	12.30%
Spouses/Trustees	355	11.96%		

Note: Our data from HRIS indicated a new option where employees can choose multiple ethnicities as their representation. This sub-category has been titled "Multi-Racial," and has had some impact on other sub-category percentages.

Appendix B

Wellness & Well-being Questionnaire Highlights

Questionnaire is bi-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 (50.6%)
- Budgeting Basics (50.3%)

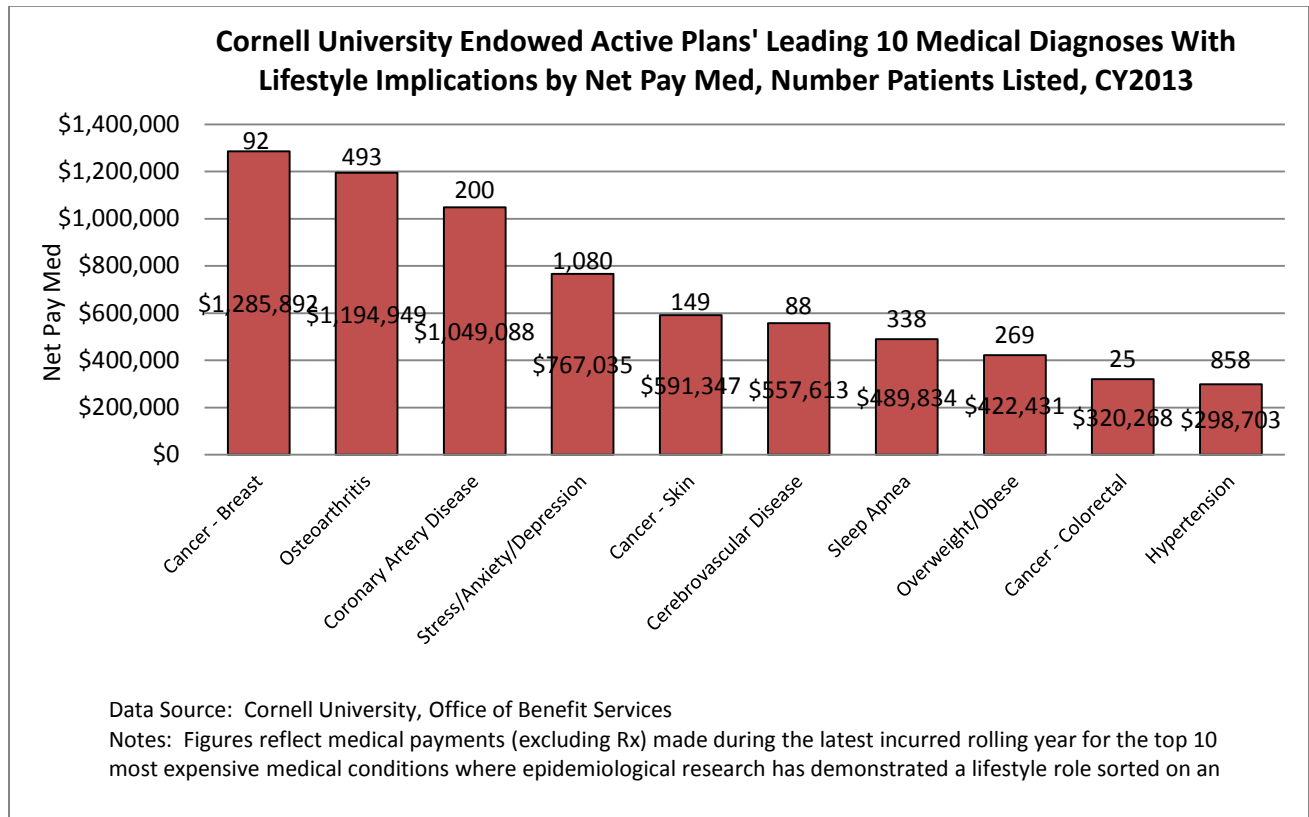
Appendix C

Medical Data - Cornell Benefits Office – FY 2013-2014

Lifestyle Conditions: Definition and Interpretation

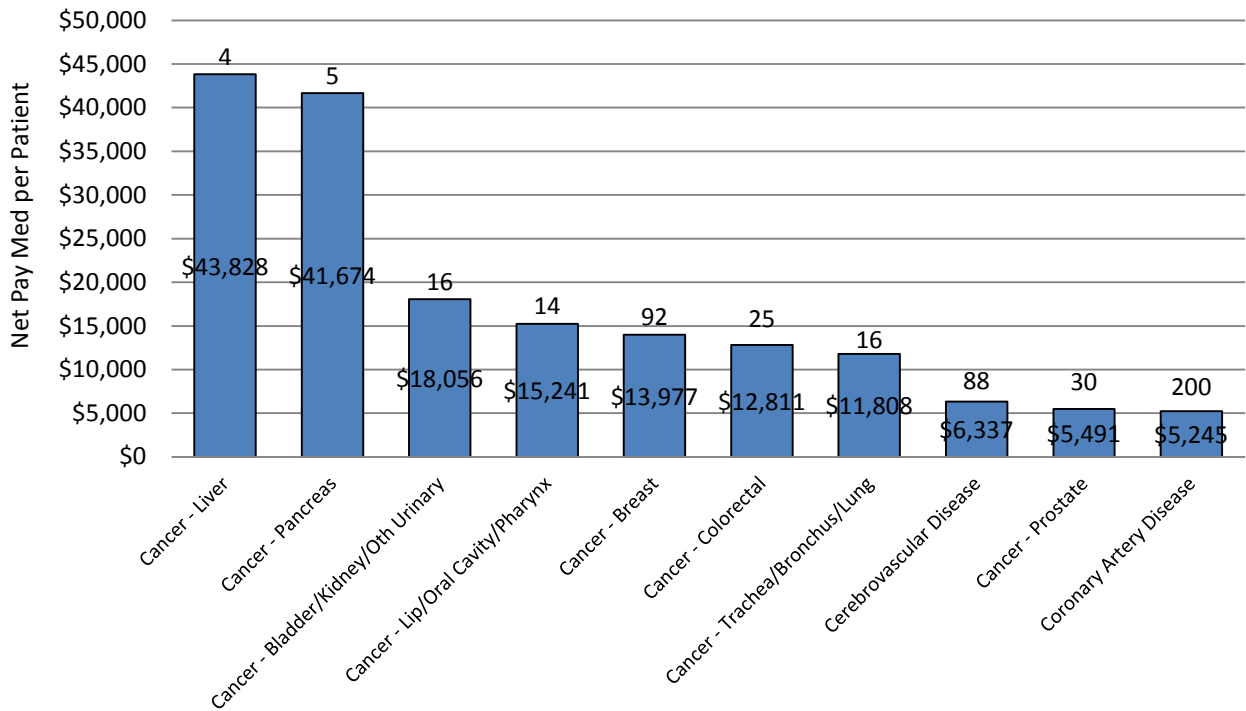
Research shows that people with certain lifestyle risks are statistically more likely to have certain conditions. The purpose of the lifestyle conditions dimension in the Truven Health Analytics database is to show the financial burden of the conditions in the endowed Cornell population that have an 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 \$49 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.



NOTE: Total medical spending (excluding prescription drugs) on all lifestyle related conditions was \$49,572,563 in CY2013, incurred by a total of 12,633 patients.

**Cornell University Endowed Active Plans' Leading 10 Medical Diagnoses
With Lifestyle Implications by Net Pay Med per Patient, Number Patients
Listed, CY2013**



Data Source: Cornell University, Office of Benefit Services

Notes: Figures reflect medical payments (excluding Rx) made during the latest incurred rolling year for the top 10 most expensive medical conditions where epidemiological research has demonstrated a lifestyle role sorted on a per patient basis incurred by members covered under the endowed active health plans. The numbers of patients associated with these conditions are also provided.

NOTE: Total medical spending (excluding prescription drugs) on all lifestyle related condions was \$49,572,563 in CY2013, incurred by a total of 12,633 patients.

**Active Plans' 20 Leading Medical Conditions With Lifestyle Implications Sorted
by Number of Patients, With Medical Net Payment Listed, CY2013**

Clinical Condition	Patients	Net Pay Med	Net Pay Med per Pat
Stress/Anxiety/Depression	1,080	\$767,035	\$710
Lipid Metabolism Disorders	1,033	\$210,089	\$203
Hypertension	858	\$298,703	\$348
Osteoarthritis	493	\$1,194,949	\$2,424
Diabetes Mellitus, Non-Insulin Depen	447	\$227,725	\$509
Bronchitis, Acute	442	\$62,822	\$142
Asthma	408	\$120,294	\$295
Sleep Apnea	338	\$489,834	\$1,449
Overweight/Obese	269	\$422,431	\$1,570
Malnutrition	247	\$39,248	\$159
COPD	213	\$63,145	\$296
Coronary Artery Disease	200	\$1,049,088	\$5,245
Sexually Transmitted Diseases	188	\$67,810	\$361
Cancer - Skin	149	\$591,347	\$3,969
Pneumonia	142	\$231,894	\$1,633
Constipation	105	\$35,258	\$336
Cancer - Breast	92	\$1,285,892	\$13,977
Cerebrovascular Disease	88	\$557,613	\$6,337
Diverticular Disease	81	\$230,118	\$2,841
Oral Disease	73	\$33,769	\$463
Top 20 Conditions		\$7,979,066	
Total Lifestyle Conditions	12,633	\$49,572,563	\$3,924
Percentage of Total Lifestyle Conditions		16.1%	
Top 20 Lifestyle as % of All Conditions		12.9%	

Active Plans' 20 Leading Drug Categories Sorted by Number of Patients, With Scripts & Rx Net Payment Listed, CY2013

Therapeutic Class	Scripts	Net Pay Rx	Patients
Antibiot, Penicillins	3,085	\$27,778	2,261
Psychother, Antidepressants	11,065	\$568,468	1,831
Analg/Antipyr, Opiate Agonists	3,675	\$128,803	1,670
Adrenals & Comb, NEC	3,265	\$502,210	1,456
Antibiot, Erythromycin&Macrolid	1,815	\$34,871	1,409
Analg/Antipyr, Nonstr/Antiinflm	2,415	\$99,267	1,305
Sympathomimetic Agents, NEC	2,091	\$144,301	1,289
Antiinflam Agents EENT, NEC	2,394	\$186,925	1,227
Antihyperlipidemic Drugs, NEC	6,375	\$478,525	1,188
Gastrointestinal Drug Misc, NEC	4,410	\$576,481	1,113
Antiinflam S/MM Agnts&Comb NEC	1,438	\$93,333	969
Contraceptive, Oral Comb, NEC	6,277	\$281,457	950
Antibiot, Cephalosporin & Rel.	1,113	\$15,667	872
ASH, Benzodiazepines	1,832	\$15,939	719
Quinolones, NEC	955	\$15,395	718
Antibiot, Tetracyclines	1,259	\$139,037	710
Cardiac, ACE Inhibitors	3,659	\$13,797	696
Thy/Antithy, Thyroid/Hormones	4,229	\$12,736	689
Antiinf S/MM, Antifungal & Comb	973	\$41,638	674
Cardiac, Beta Blockers	3,551	\$82,375	663
Top 20 Drug Categories	65,876	\$3,459,003	
Total Drug Categories	118,626	\$12,240,209	10,494
Percentage of Total Drug Categories	55.5%	28.3%	

Active Plans' 20 Leading Drug Categories Sorted by Rx Net Payment, With Scripts & Number of Patients Listed, CY2013

Therapeutic Class	Scripts	Net Pay Rx	Patients
Biological Response Modifiers	125	\$1,089,263	25
Immunosuppressants, NEC	310	\$839,874	57
Gastrointestinal Drug Misc, NEC	4,410	\$576,481	1,113
Psychother, Antidepressants	11,065	\$568,468	1,831
Antineoplastic Agents, NEC	775	\$566,889	150
Antivirals, NEC	1,377	\$550,874	546
Stimulant, Amphetamine Type	2,570	\$511,577	432
Adrenals & Comb, NEC	3,265	\$502,210	1,456
Antihyperlipidemic Drugs, NEC	6,375	\$478,525	1,188
Antidiabetic Agents, Insulins	924	\$473,244	157
Coag/Anticoag, Hemostatics	25	\$408,672	9
Gonadotropins, NEC	161	\$324,643	36
Antidiabetic Agents, Misc	2,170	\$299,288	401
Contraceptive, Oral Comb, NEC	6,277	\$281,457	950
Psychother, Tranq/Antipsychotic	932	\$274,515	176
CNS Agents, Misc.	893	\$230,930	166
Cardiac Drugs, NEC	2,079	\$218,894	395
Antiinflam Agents EENT, NEC	2,394	\$186,925	1,227
Estrogens & Comb, NEC	1,783	\$168,765	404
Phosphodiesterase Inhibitors	865	\$165,943	297
Top 20 Drug Categories	48,775	\$8,717,439	
Total Drug Categories	118,626	\$12,240,209	10,494
Percentage of Total Drug Categories	41.1%	71.2%	

Appendix D

Wellness Advisory Committee

November 22, 2013 Meeting Notes

In attendance: Jenn, Karyn, Erica, Iris, James, Annemarie, Ruth, TJ, Saba, Todd, Beth, Emily, Bruce, Ting, Kerry, Nimat, Jaime, Sunny

Notes transcribed from recorder:

Program offerings recommended by the Advisory Committee that were very successful during the Fall '13 semester

- Social Food & Wine offering – 2 part series – Chef Kevin Spinner and Wine specialist Annemarie Morse
 - Feedback – people wanted more info on wine – possibly offer solely wine education. People wanted more food info – possibly offer solely food education. May charge more in future to offset cost but want to not exclude anyone for financial reasons. Healthy eating was not the focus of this programming however Chef Spinner always weaves this message into his recipes. Focused on Social Wellbeing dimension of Wellness wheel. Focus intentionally on young professionals – evening programming. Ended up with quite a diverse population who registered for this offering.
- Grocery Store Tour – two Wellness Program RN's (Beth & Lauren) – tour of P&C Fresh
 - Feedback – Happy we offered it – feedback wasn't as good as Social Food. About 20 attendees. Gave nutrition education and sampled foods. May not offer again right away, but will consider offering again in the future.

Employee Survey Response Team (ESRT) committee and President/VP Opperman response to Wellness committee policy recommendation (2.5 hours/wk of release time for every employee for personal development)

- Summary of response – We (Skorton/Opperman) reject your proposal and acknowledge that release/flex time for participating in personal development (ex. Wellness Program) is unequally granted by supervisors throughout the University. However, we are not willing to even up the inequality by telling everyone that they cannot participate. The emphasis is on bringing those who cannot take any time up to a level of being able to take time/participate in personal development opportunities. The President said that he would help to move this position forward y talking with the Deans.
 - A pilot study of one unit is suggested by Skorton/Opperman as a follow-up, and they suggested the Director of Wellness Program meet with the Director of Benefits Department
- The Wellness Program is still actively working towards making a culture shift at Cornell
 - Presenting at New Supervisor Orientation sessions on the topic of flex/release time and ways to make it work for all employees

- A simplified flex time document is being put together – this may be an opportunity for Wellness to get involved and give feedback
- Feedback from Advisory committee
 - In survey response, they admit that staff have been cut so workload for staff is higher which is causing stress, but they are hiring hundreds of new faculty without increasing staff. This is a contradictory model for reducing staff stress. Flex/release time will help with this stress reduction. Must make doing the pilot study a priority.
 - ILR – there is research on release time and productivity, Houseconnect (researcher). This may be helpful in making a case.
 - Wellness Program should share with community ways that departments/units have made the Wellness guideline work – success stories. Share message of inequality of implementation but how departments have made it more equal.
 - Data on release time and participation/work productivity by unit. Is participation greater for employees who are allowed release/flex time vs. those who are not? Is work productivity higher in those employees who are able to take flex/release time for Wellness activities? Supervisors want to see the data, may be swayed by this information instead of being told they have to follow a mandatory policy.
 - Plantations allows its union employees to take release/flex time. There are several unions at Cornell, there may be differences dependent upon which union involved.
 - Write article for Pawprint on committee, the response, and ideas for moving forward in a positive manner (success stories).
 - Emphasis on creative ways of implementation so that all can take part equally and consistently in complex units
 - Panel for supervisors to supervisors - chat sessions, venues of communication for supervisors to share success stories and creative implementation strategies

Discussion of Wellness Program's 25th Anniversary celebration

- Two part celebration – First part - share your wellness story and get a free pair of Cornell Wellness socks (may make video montage of submissions) – Second part – all-day celebration with activities (morning, noon, evening) – possibly yoga, walk, parade, etc. for activities
- Feedback
 - Ask people to submit their department wellness success stories – this will tie in to what we were talking about above
 - Possibly receive submissions through postcards, electronically, sound bites, submit photos
 - Ways for off-campus dept's to participate, all shift workers. Maybe one activity could be an at your desk activity so everyone can participate. Encourage remote locations to come up with and videotape their Wellness messages and highlight different units.
 - Are Skorton/Opperman on board? Can he play his saxophone in the parade?
 - Can a free day pass to fitness centers on the day of the parade be arranged?

No Excuses Contest – Focus on Healthy Living – in brainstorming phase at this point – instead of weight loss contest make it a healthy initiatives contest – broaden the scope

- Feedback
 - Maybe can still have measurable outcomes (ex. baseline vs. how you feel at the end)
 - Maybe different categories/challenges so that everyone can participate
 - How will the groups be? Friends, unit, dept, free agent platform based on similar interests? Group by challenge area (ex. team sleep)?
 - Concept of “what wellness thing would you like to do more?” (ex. sleep, exercise)
 - Teams could be relay teams (use web to find people)

New Initiatives/New Programming (Return to work initiative, Swing space usage, Cultural competency)

Programming (Cholesterol, Walk With a Doc)

Open Discussion

- Communicate more through Pawprint articles
- Get a group of Doctors for panel discussion on new cholesterol recommendations
- Share learned cultural competencies with broader audience possibly through lunch lectures
- Destination walks – combination with Plantations (ex. mushroom walks, flower walks, etc.)
- Do not hold Advisory meeting on Fridays in the future between 12:45-2:15 – prayer time (Muslims)

May 28, 2014 Meeting Notes

In attendance: Saba, Sunny, Beth, Karyn, Jenn, Andrea, Todd, Annemarie, TJ, Curtis, Bruce, Nimat, Ting, Susanne, Brad, Trey, Ruth, Kerry

Notes transcribed from recorder:

Ideas were solicited from committee members on what they wanted to see the Wellness Program offer. Ideas fell into 3 categories: 1) potential programming, 2) strategic planning/concepts, 3) communication.

Potential Programming

- Training oriented group exercise classes that lead to an event such as a marathon or a bike trip
- Core class focused on back strengthening
- Intro to Wellness class for people who want healthy living
 - How to prevent disease
 - How to prevent back pain
 - Overview of what you should be thinking about if you want to have a healthier life
- Gluten free cooking or baking class
- Walk through buildings – contest? Game? 4 square?
- Destination walks

- EHOB programming
- Partner w/equestrian center to offer riding classes
- Partner w/ SPCA to encourage dog walking
- Hunting class

Strategic Planning/Concepts

- Times preferred for training classes – noon, early evening, possibly morning (but least enthusiasm)
- Staff proactively reaching out to members – staff initiates initial and/or follow-up contact
- Increase female-bodied only swim offerings – this is a diversity and health need issue (modesty – contact – religious or personal reasons)
- Run metrics by department to see how many people in each department are participating in Wellness. Promote departments that are supportive of Wellness and encourage departments with lower participation to participate
- Collect Wellness specific data – possibly include engagement, satisfaction, balance, exhaustion, physiologic markers, retention, absenteeism, presenteeism, HAP days, sick days
- Re-examine new Winter Break options. Overcrowding in HNH at 4:30PM.
- Gannett may start providing prescriptions for Wellness

Communication

- Communicate more about MSIPP and its ergonomic assessment offerings. And promote collaborative work Wellness/MSIPP does
- Re-vamp Weekly Update. Current iteration is too text heavy. Make smart phone friendly. Get feedback from Curtis and Annemarie. Possibly put topics up top in list form.
- Wellness APP?
- Advertise Plantations Trails. Six suggested trails at cornellplantations.org/trails. Promote guided walks with stewards if they occur
- Communicate short bits of health info on TV's/video boards around campus
- Include message board on website

Appendix E

Wellness Strategic Goals 2013-2016

FY13 Completed in green FY14 in red

Goal 1: To provide best practices

1. Internal processes
 - a. Tracking usage
 - i. Track usage of fitness classes by Wellness members ✓
 1. Provide data by June 15; share with CFC, too
 - ii. Track usage of Healthy Age Group participants by class ✓
 1. Report out by end of fiscal year 14
 - iii. Track usage of Shorty Classes and other classes using swipe app
 1. FY 15 priority
 - iv. Track usage of 1-1's using swipe app
 1. Set up "events" that last full fy; "pt", "nutrition"
 2. Pilot during summer
 - b. Tracking consultations
 - i. Explore software programs ✓
2. University-wide strategic collaborations
 - a. Access to flex/release time
 - i. Proceed based on president's response to proposal ✓
 - ii. Revise wellness guideline (min 90 min, include volunteering in community)
 1. In collaboration with Career/Life
 - b. Transportation collaboration
 - i. Gather information on existing initiatives ie bike initiatives
 - ii. Assist with promotion
 - c. Health initiatives work with Benefits/EHS
 - i. Proceed based on work with Benefits/EHS
 - ii. Track Workers Comp/Return to Work employees
 - iii. Explore swing space/conference room
3. Collaborate with Cornell departments and local medical providers to improve services
 - a. Provide health screenings/education for employees at work
 - i. Health Coaching Clinics for 3 underserved departments
 - ii. Mini looped educational videos
 - b. Promote wellness visits to doctor (work with Benefits)
 - i. In collaboration with Benefits ✓
 - ii. Have people bring us their report.
 - iii. Become providers of cholesterol counseling, HTN counseling?
 - iv. Possible tracking/feedback
 - v. Increase number of docs referring to Wellness.
4. Older Adults/Healthy Aging Program
 - a. Shorty classes: information and exercise based ie arthritis, osteo, chronic back, cvd, etc.
 - i. Expand Active Aging week (September) to Ithaca Community.
 - ii. How to fall workshop for June 2014
 - b. Reach lower functioning (frail and independent) in addition to the physically fit.
 - i. Expand marketing efforts for this population.

- ii. Offer more, progressive classes ie modified yoga, ripples
 - 1. Add one class in addition to modified yoga
 - iii. Work with instructors to notice people who need more assistance ✓
 - iv. Add one article to retirees CRA newsletter in fall 2013 ✓
 - c. Address large class sizes (reaching maximum)
 - i. Assess room availability, Appel ✓
 - ii. Creative classes – ie in weight room
 - iii. Social angle, potlucks ✓ Cooking class?
 - iv. Active Aging Week = September start 2014 with activities ✓ in 2013
- 5. Underserved populations
 - a. 18-35 years, Younger Generation
 - i. Grocery skills/tour – ✓
 - ii. Short duration, evenings, weekends.
 - 1. Offer 2 evening shorty classes in collaboration with wine experts
 - b. 55+ years
 - c. Non-Exempt staff Offer 2 webinars intentionally serving B through E ✓
 - d. Faculty (onboarding brochures getting used)
 - e. CNGs
 - f. Search for programming grants to increase innovative programming
 - i. Research program grant opportunities

Goal 2: Evaluate our program's effectiveness

- 1. Increase membership and participation by underserved populations
 - a. Run GoogleDocs/Qualtrics metrics from registrations for past 3 years ✓
 - b. Develop diversity goals if indicated
- 2. Surveys
 - a. Bi-annual June 2015
 - i. Include questions about facilities, social media, and method of delivery
 - ii. Include questions specifically for employees in supervisor role
 - b. Short polls on website
 - i. Find poll that can be embedded into website
 - ii. Try at least one poll (staff) by end of June, 2014
- 3. Five year benchmarking
 - a. Determine what year for benchmarking

Goal 3: Gain national/international recognition

- 1. Identify opportunities to speak/present at conferences, write articles, and apply for awards
 - a. Article for AEA ✓
 - b. ACSM expo – submit presentation
 - c. SHRM Regional

Goal 4: Continuous development and training

- 1. Cultural competency

- a. Have in-service on Islam and the Muslim faith for Wellness staff ✓
 - b. Have intern do in-service on cultural competency topic ✓
- 2. Diabetes
 - a. Staff member working towards a certification in a couple of years.
 - b. Have in-service for staff on Diabetes, mini video, too (June 2014)
- 3. Certified Inclusive Fitness Training

Goal 5: Communications Strategy to reach broad and diverse audience. Leverage multifaceted approach.

- 1. Address diversity
 - a. Photos, stories
 - b. Communicate programming directly to CNGs ✓
- 2. Modalities
 - a. In person
 - b. Videos/podcasts: 2 for fy15
 - c. Vary time of day and length of programming
 - d. Leverage social networking
 - i. Run a focus group with young adults or do an on-line poll possibly asking about twitter
- 3. Web
 - a. Calendar – to sync with phones, need more stuff for calendar.
 - b. Re-launch webinars, add them to monthly themes

Goal 6: Programming Topics Based on Needs Assessment

Diabetes, Cancer, Support groups
 Genetic testing information
 Accessing health information
 Heart attack/stroke/aspirin information/cholesterol,
 Pre/Post Natal
 No Excuses/change focus
 Grocery tour
 Volunteering
 Health fair idea – screening hearing, eyes, etc.
 Worry/Gabriel
 More webinars ie Talk with the Exercise Physiologist

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

Appendix G

Establishing An Informal Exercise Area

Informal Exercise Area Defined:

There are five formal fitness centers located on Cornell's main campus. These include centers in Helen Newman Hall, Teagle Up, Teagle Down, Appel and Noyes. These fitness centers are managed by the Cornell Fitness Centers (CFC). They are overseen by the CFC staff and are monitored by trained student staff during all open hours of operation. These fitness centers are open to all students, staff, retirees, spouses and partners.

The Cornell Wellness Program has received a considerable amount of feedback from staff that due to their job requirements and the physical location of their workplace, it is not feasible for them to take time to travel to a fitness center (15 minutes), participate in a group exercise class or exercise in a fitness center (60 minutes), shower and change (20 minutes), and travel back to work (15 minutes).

Because of this time constraint, staff are wanting exercise options in their buildings. Many have already brought in exercise and fitness equipment such as exercise DVD's, dumbbells, exercise tubing, and are using these items in their own office space or in larger open rooms such as break rooms. In an effort to help support staff's individual pursuits of health and well-being while concurrently trying to reduce the risk of personal injury/illness that is inherent when exercising, the Wellness Program staff in collaboration with the Department of Risk Management has developed this document that includes information on establishing informal exercise areas in Cornell's buildings and office spaces.

An informal exercise area is defined as an office space or open area where staff may use exercise equipment that is not managed by the Cornell Fitness Centers and has no trained staff monitoring the area. This document includes: 1) Guidelines 2) Questions 3) Level of Risk and 4) Recommendations, to provide guidance for groups or individuals who are wanting to establish informal exercise areas.

Guidelines:

- The Wellness Program must be consulted prior to establishing an informal exercise area on Cornell University owned or leased property. Contact the Wellness Program by email wellness@cornell.edu or call 607-255-3886.
- A single Point of Contact (POC) person, who resides in the building where the informal exercise area will be located, needs to be designated.
- The POC must review the Guidelines, Questions, and Recommendations provided in this document. The Questions section must be completed, and a copy must be sent to the Wellness Program at 305 Helen Newman Hall or emailed to wellness@cornell.edu
- Wellness Program staff will provide a Welcome Packet to the POC that includes laminated posters and forms that need to be posted/displayed by the POC in a highly visible area in the informal exercise area.

- Welcome Packet to POC includes:
 - Welcome statement
 - Laminated Posters
 - Wellness Program site reviewed poster w/date of review (includes info on how to schedule a fitness consult and/or web links for sample safe exercise routines). Includes prominent message that this is an unmonitored informal exercise area
 - [PAR-Q poster](#). The PAR-Q is a readiness for activity questionnaire
 - Rate of Perceived Exertion and Target Heart Rate posters
 - When to stop exercising poster
 - [Accident/Injury Report system poster w/website](#)
 - Sign-in/Sign-out sheet w/times
 - Emergency response system policies & procedures plan poster (include location of closest AED/First Aid kit, fire escape route, emergency phone, fire extinguisher) (needed? If yes, then POC provides)
 - Facility max occupancy number (needed? If yes, then POC provides)
 - Equipment cleaning guidelines (needed?)
 - OSHA poster (bloodborne pathogens, cleaning products) (needed?)
 - ADA poster (signage that indicates access points for people with physical challenges as well as certain signage that can be viewed by some individuals who have visual impairments) (needed?)
 - Forms
 - [Flexible work/wellness agreement form](#) (used if employee wants to exercise on work time)
- Wellness Program staff must perform a walk-through of the area once set-up is complete and at least once per year to visually see if guidelines/recommendations are still being followed and required posters/forms are still posted/displayed. The Wellness Program reserves the right to shut down the informal exercise area at any time.

Questions:

To be filled out by POC with assistance from Wellness Program staff:

- What is the purpose of this informal workout area?
- What equipment is desired?
- Who will purchase/provide equipment?
- What is the process for purchasing/providing equipment/equipment removal?
- What space will be used? Will this space be used for other purposes as well?
- Will the structure of the space support the weight of the equipment?
- Is the type of flooring appropriate (impact resistance & slip resistance) for intended use?
- What is the security/safety of the space?

- Sign-in/sign-out sheet w/ time-in and time-out (minimum requirement)
- Personal cell phone (minimum requirement)
- Locked door w/ key access?
- Card access? (recommended for limiting thefts and limiting use by non-Cornell affiliated persons)
- Video monitored?
- First Aid box?
- AED present or poster w/location?
- Emergency phone hard line?
- What are desired open hours of area?
- Will sound equipment be used? What type of sound system? Must be kept at a volume low enough to not disturb surrounding office spaces.
- Is the lighting sufficient?
- Is airflow sufficient? Air temp during all seasons? Humidity during all seasons?
- Are walls free from protrusions?
- Are floor elevation changes marked appropriately to minimize tripping/falls?
- Will there be enough space for participants? Is there a maximum room capacity?
- Will there be enough space for equipment & space between equipment?
- Who is responsible for the site/equipment maintenance/equipment removal?
 - Building manager or Unit/department person (need designated single point of contact)
 - Who cleans equipment? What is used to clean it? How often is it cleaned?
- Release time vs flex time vs non-work time considerations (supervisors signature needed if exercising on work time – use this [flexible work/wellness agreement form](#))
- What happens if POC leaves position, retires, etc. Who assumes responsibilities?

Level of Risk:

Level of injury risk and cardiovascular event risk by equipment desired in the informal exercise area:

Lower Risk

Strength Equipment

- Exercise band
- Exercise tubing
- Medicine balls (2-10 pounds)
- Dumbbells (2-10 pounds)
- Kettle bells (2-10 pounds)

Cardio equipment

- Low – impact cardio DVD (ex. walking)
- Low – impact flexibility DVD

- Low – impact strength training DVD (ex. abs & core)

Flexibility equipment

- Pilates or Yoga straps, blocks, blankets, pillows
- Foam roller
- Exercise mat

Moderate Risk

Strength Equipment

- Large exercise ball
- Medicine balls (11-50 pounds)
- Dumbbells (11-50 pounds)
- Kettle bells (11-50 pounds)

Higher Risk

Strength Equipment

- Dumbbells (51+ pounds)*
- Kettle bells (51 + pounds)*
- Squat racks and Olympic bars*
- Plate-loaded bars of any kind*
- Use of Plyometric apparatus (boxes, cones, benches, rope ladders)*
- Cross-Fit type apparatus (rings, sandbags, tires)*
- Variable resistance/selectorized resistance all-in-one tower*
- Variable resistance/selectorized resistance single exercise pieces of equipment (ex. leg press)*
- Stationary bicycle (upright or recumbent)*
- Elliptical*
- Rower*
- Treadmill*
- Jump rope*
- High – impact cardio DVD (ex. Tae Bo)*
- High – impact strength training DVD (ex. P90X)*

Recommendations:

For equipment categorized as Lower Risk, minimum recommendations would include:

- “Guidelines” are adhered to including laminated posters and forms are posted/displayed
- All “Questions” are answered in writing
 - With respect to answering the question “What is the security/safety of the space”? A minimum required response includes all items below:
 - Sign-in/sign-out sheet w/ time-in and time-out

- Personal cell phone for emergencies
- The time used by individual for exercising needs to be designated as Release time, Flex time or non-work time. Supervisors signature needed if using flex/release time and exercising on work time – use this form [flexible work/wellness agreement form](#))

For equipment categorized as Moderate Risk and Higher Risk, the POC needs to contact the Cornell Wellness Program. The Cornell Wellness Program will collaborate with the department of Risk Management to provide recommendations and guidelines specific to the informal exercise area and the equipment desired in that area.

Appendix H

Personal Development Proposal and Response

Personal Development Co-leads: Beth McKinney, Leslie Morris (EA)

Charge: Research and recommend a wellness policy and/or personal and professional development policy that incorporates buy-in from diverse units across the university ensuring consistency across campus.

The committee recommends that the Time Away From Work Policy 6.9 be amended to include up to 2.5 hours of paid release time per week (not to exceed 2.5 per week or 120 hours per year) for employees to pursue personal development (further defined in attached document and includes wellness activities). This time would be in addition to time provided for meal breaks, which may also be used (and/or combined with specific personal development time) for purposes of personal development.

Supplementary Option:

The committee further recommends considering an alternative option for special situations where a department absolutely cannot release an employee to pursue personal development opportunities as described above. This option could include reimbursement to employees of up to an established amount for their participation in approved personal development opportunities that they are not able to pursue during work hours. This option needs to be further researched; it is included in the recommendations because the committee received feedback from a number of supervisors who understand the value of supporting their employees in their personal development, but are concerned about the ability to provide release time.

It is further recommended that a concurrent study be implemented to track usage, survey supervisors and/or employees, collect other metrics, and determine impact. Ideally, Cornell HR professionals would determine the optimal way to do this. Ultimately, the results of this study would corroborate the business case and lead to a further positive shift, embracing personal development both on and off the Ithaca campus.

Response from David Skorton and Mary Opperman received July 13, 2014

We identify two fundamental issues behind these recommendations. The first is the interest of staff in being able to pursue wellness and other personal development opportunities during the workday in order to advance a healthy lifestyle and advance themselves. We believe it is in the university's interest to promote a healthy workplace and to encourage all of our staff to grow and learn in areas that interest them.

That said, we also recognize the other issues we heard in the staff survey about workload and stress caused in workplaces because of the reduction of staff sufficient to do necessary work. In discussing the proposed recommendations with leaders across the campus, this recommendation was met with the most concern. Leaders expressed worry over the impact of this suggestion – which effectively reduces the available hours each week by about 6%. Leaders expressed the concern that in units most impacted by reductions this new “benefit” will not be usable and may be resented as something offered but not possible to take. Moreover, others worried that if some took the benefit, which is expressed as a right, it would leave others in the department struggling with an even heavier workload. And while we

appreciate that the committee offered an alternative to “buy-out” the 2.5 hours, leaders of the most financially strapped units felt that neither of these options would be possible for them.

The second issue this recommendation points to is the very complex issue of consistency of policy and policy application. The university has permitted colleges and units to extend additional benefits in the area of wellness under the very broad guidance given in support of the Wellness Program. In some colleges and units staff provided flexibility and the opportunity to use paid time off to go to the Wellness Program, or exercise in other ways. Other units do not provide these same options. In the employee survey this difference in treatment was noted. Our challenge then, is to determine whether to require all parts of the university to conform to the standard set by some colleges and units, despite the concerns raised by leaders, or to reduce the benefit offered in those colleges/units that currently offer a more generous program in order to create consistency.

In these financially constrained times, it is our view that it is not prudent to require all leaders to take on the potential financial burden of a new 2.5 hour/week paid time off benefit. Further, it is not financially prudent to force the very departments that have staffing challenges to “buy out” of this obligation. Moreover, we are not willing to take away from colleges/units the more flexible work arrangements they have created that allow paid time off for wellness and other personal development. We recognize that in so doing we are leaving in place inconsistencies and we are not accepting the core recommendations of 1a.

Instead, we are requiring that all deans and vice presidents recommit themselves to the principles of our flex policy. This policy is intended to permit staff to work in flexible ways – including flexible hours. Staff should be able to work with their supervisor and/or HR person to knit together the priorities in their personal lives with their commitment to their jobs. We believe that when staff, supervisors and, when needed, HR, work together and plan in advance, there should be ways to accommodate for wellness plans and other personal development priorities. We recognize that not every situation can be accommodated and that not every staff member feels comfortable approaching his/her supervisor to have this discussion. However, keeping in mind the overarching goals we stated at the outset, we must strive for a climate where we talk through these issues and support staff to have these conversations. HR and the Ombudsman provide helpful services to staff who need assistance in these situations.

We do accept the recommendation that further study is needed to understand this issue, how practices impact usage of programs such as Wellness and how usage and workplace conditions impact employee health and satisfaction. Therefore, we charge the Director of the Wellness Program and the Senior Director of Benefits to develop and advance the appropriate study to better understand these issues and identify specific opportunities for improvement to programming and services.

Wellness Director’s comments: The above response was not unexpected as this is a complex and decentralized organization. However, allowing the policy suggestion to rise to this level was a milestone for the Cornell University Wellness Program. The President and Vice President acknowledged the inequities, suggested that units keep the arrangements that work, and that everyone strive to work toward individualized solutions within departments.