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Hygiene:
The Missing Link to Wellness

The **Healthy Workplace** Project*

Four Key Components

There are four key components to a workplace hygiene program. Each one is designed to reduce unplanned employee absences and presenteeism, as well as slow medical trend costs associated with minor illness. They include steps to:

1. Educate the workforce about high-risk communal areas and office hot spots for germs, as well as how to best reduce the three biggest threats (cold, flu and stomach illness). Employee communications need to include strategic awareness tools, supportive signage, e-mails and supplemental information.

Introduction

Comprehensive employee wellness programs promoted alongside a corporate culture of health offer employers the best hope of achieving sound clinical outcomes, reducing benefit costs and increasing productivity. However, there's a troubling blind spot in the worksite wellness arena. And it is costing employers an opportunity to make substantial inroads in the effort to improve employee well-being, increase productivity and bend the health care cost curve in a more meaningful way. The missing link is a hygiene-based approach that will help generate immediate results.

Minor illnesses a major concern

It is estimated that as many as 85% of employees are less productive each year because of "minor illnesses" such as the common cold, influenza and gastrointestinal conditions that spike presenteeism and absenteeism.[1] In short, minor illnesses can trigger major employee health and cost implications.

Many employee absences involve planned events such as holidays and vacations, or extended periods associated with major illnesses and chronic conditions. But the total cost of unplanned absences is thought to be twice as high as extended leaves.[2]

Nearly everyone is going to going to catch a cold, flu or stomach bugs such as gastroenteritis or diarrhea in any given year – illnesses that easily can cause absences of three to five days at a time, which can have a significant cumulative impact of lost productivity. The cost is further ratcheted up during cold and flu season, which can last up to five months and even impact medical and pharmacy claims.

Minor illnesses caused by viruses are spread through hands, sneezing and coughing. Germs also can be found on desks, door knobs and other surfaces. Another breeding ground for infectious diseases involves communal areas such as break rooms, photocopying machines, door entrances and restrooms. Although a serious nuisance in the workplace, these illnesses can be prevented. All it takes is an employee participation rate of between 25% and 40%[3] in a workplace hygiene program to break or prevent an infection cycle, according to the "herd immunity" theory based on childhood immunizations against contagious diseases such as influenza, measles and mumps.

Research suggests that anywhere from 63% to 83% of employees showed up to work sick with one of these ailments on at least one occasion within a year of being polled on this topic.[4] One-fifth of presenteeism costs are traced to respiratory infections.[5] But what's even more alarming is that presenteeism causes more aggregate productivity loss than absenteeism.[6] Also, the common cold can impair an employee's psychomotor functioning and slow response times in various tasks.[7]

2. Empower employees with greater knowledge of solutions that include hand sanitizers, anti-bacterial soap, surface disinfectants, antiviral tissue and washroom hand towels. It's also important to explain the most high-risk areas for the spread of minor illnesses: office desks, conference rooms, break rooms and common areas.

3. Engage employees in healthy habits (washing, wiping and sanitizing hands). Such efforts could include a kickoff party or team competitions that feature incentives and product giveaways to help generate interest in the program.

4. Evaluate or measure programs with the help of regularly scheduled swabbing and quarterly progress reports, as well as identify hot spots for the spread of minor illnesses: keyboards, surface areas, conference rooms and break rooms.

Understanding how germs spread

The key to success for any workplace hygiene program is to help employees understand how germs are spread and what they can do to keep from getting sick. A global consumer germ-segmentation study conducted two years ago estimates that 57% of a typical employee population describe themselves as "germ anxious."[8] They represent a key segment when it comes to championing workplace hygiene. These individuals feel a sense of pride about keeping their work space clean and germ-free. They also take comfort in having control of this effort, and as a result, feel less stressed about their surroundings.

A common culprit for spreading germs is face touching, which adults do as often as nearly 16 times an hour.[9] In addition, some germs are airborne, while others grow on surfaces, which means washing or sanitizing one's hands is not enough to break the chain of transmission and mitigate the spread of communicable diseases. What's needed is an effort to identify areas where germs are most likely to reside and wipe down those surfaces with proper cleaning products preferably every 24 to 48 hours.[10]

More than 10 million germs can be found on the average office desk.[11] A breakdown of those numbers offers a few surprising facts, which may dispel commonly held beliefs about the areas that are most prone to spreading illnesses. For example, a telephone has the most germs per square inch (25,127) compared with 20,961 on a desktop, 3,295 on a computer keyboard and 1,676 on a computer mouse.[12] On the other hand, a toilet seat has just 49 germs per square inch.[13]

How is that even possible? It's quite simple: Toilet seats are cleaned more often than other areas of the workplace, which, therefore, tend to be the most severe hot spots for germs to multiply.

The introduction of hygiene intervention in the workplace can significantly reduce the spread of a non-pathogenic bacterial virus from hands or "fomite" objects that are contaminated with infectious organisms, according to a recent controlled study.[14] Those researchers found that an employee's chance of catching a virus plummeted by as much as 80% in an office of about 80 employees (an earlier study of an office with just 15 people for a baseline comparison).[15] Their recommendation: hand sanitizers and disinfecting wipes, along with proper signage and brief instructions on their usage, to drastically reduce the occurrence and concentration of viruses.

The value of measurable outcomes

Participation rates for standard wellness programs that focus on chronic and lifestyle conditions are thought to run at less than 35% in major corporations, with just 8% or so of employees saying they're very satisfied.[16] But a hygiene-based program is likely to draw deep interest because of its relevance to all employees. Also, everyone understands the importance of keeping one's hands and surfaces clean in the workplace to prevent the spread of germs.

Pilot programs with measurable outcomes suggest that engagement could be more than 90%, with 62% of participants reporting that they're sick less often and 55% feeling more

productive as a result of improved workplace hygiene.[17] In short, hygiene is an extremely important part of any holistic employee wellness effort.

Another point to consider is that pursuing better workplace hygiene can help spark interest in traditional wellness programs and demonstrate a commitment to fostering a culture of health. Integrating better workplace hygiene with an existing wellness program will help produce stronger results considering that employees who are obese, diabetic or suffer from other chronic diseases are more predisposed to developing a minor illness.[18] But beyond the placement of posters and hand-sanitizing stations, it is necessary for employers to provide a meaningful level of employee education to evoke behavior change, as well as create an environment that enables the workforce to initiate and sustain positive health outcomes.

Hygiene program intervention is focused on reducing exposure to harmful germs that cause many minor illnesses such as cold, flu and various stomach disorders. Given the nature of this approach, an employer's progress toward better workplace hygiene can be measured almost immediately, whereas achieving standard wellness program markers obviously takes more time.

For example, smoking cessation programs can take up to two or three years for any company payback, and in many of those cases, program participants have left their employer. Tobacco is obviously one of the most highly addictive substances that can be ingested and someone who is used to smoking one or two packs of cigarettes over the course of 20 years will find it extraordinarily difficult to change their behavior overnight.

A realistic ROI

Hygiene wellness programs not only measure germ count reductions, but also the potential for a return on investment (ROI) associated with fewer employee absences, as well as lower medical claims and higher productivity on a quarterly basis. In addition, they represent a powerful way for an employer to raise morale and improve employee satisfaction by showing how much they care about employee health.

While virtually all employers that offer wellness programs are interested in reducing costs or leveraging their ROI with the help of performance guarantees, others might be more concerned about some of the softer, emotionally-driven benefits. This could include improving health outcomes and raising the level of employee engagement or satisfaction, as well as increasing their ability to retain top talent. Measuring the results of a hygiene-based approach can be tailored to either – or both – of these corporate objectives. For example, the most important metric in one organization could be an analysis of medical and pharmacy claims, as well as absenteeism and presenteeism data, whereas another could be the effect on employee satisfaction.

When measuring program interventions, the focus clearly should be on quantifying germ exposure in the workplace and how it evolves over time. As part of that pursuit, it's also important to be able to track the evolution of absenteeism and presenteeism costs, as well as medical claims cost associated with respiratory and gastrointestinal germ exposure.

Key measures include baseline utilization costs related to claims, as well as quarterly results involving subsequent surveys, and exposure to surface germs between the baseline and subsequent measures.[19] Program evaluation based on routine adenosine triphosphate, or ATP, germ count swabbing by trained hygienists is a critical part of any workplace hygiene effort in order to complete the feedback loop. Another component includes an audit reduction rate tied to a decrease in absence or claim costs. With regard to this last point, it's worth noting that a doctor's office visit may contain services related to flu symptoms, but also unrelated services – thus, a statistical calculation is made based on these variables.

There are different types of ROI methodologies. An Integrated Benefits Institute study suggests that CFOs generally support self-reported employee information when attempting to determine a reduction of absenteeism, presenteeism and medical costs traced to the cold, flu and gastrointestinal disorders.[20] But the fact is that there's a dearth of accurate and reliable measures to capture the effect of workplace hygiene interventions on employee absenteeism and presenteeism that are tied to minor illnesses.

That appears to be changing. The World Health Organization's Health and Work Performance Survey offers a more conservative assessment of these baseline costs to improve such measurement.[21] This more tempered approach seeks to avoid overstating ROI (in some cases by more than a dramatic 10:1 margin), which can serve to undercut the credibility of standard wellness programs. With ROI calculated from total savings divided by program costs, the impact of a hygiene-based approach to employee wellness with an appropriate sample size is believable relative to traditional program measures. Ease of use also is emphasized for self-reported results so that the survey isn't seen as overly intrusive on employees.

Conclusion

There's no question that a hygiene-based approach to employee wellness can help round out traditional programs, which have struggled to draw enough participants and generate realistic ROI. With minor illnesses triggering major problems in terms of both employee health and benefit costs, it behooves employers to give serious consideration to first understanding and then eradicating the spread of germs that cause communicable diseases. Such efforts will enable them to substantially improve employee well-being and bend the health care cost curve in a more meaningful way. The use of hand sanitizers, disinfecting wipes and facial tissues can show immediate measurable results, drastically reducing the occurrence and concentration of viruses. Although reliable measures that assess the cost impact of workplace hygiene interventions to curb minor illnesses are in short supply, evolving methodologies are finally producing believable ROI estimates. The time has clearly come for employers to act on this opportunity to make a substantive difference in managing workplace wellness.

Footnotes

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18 Kimberly-Clark research and audit and collective data as supplied by pilot participants

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