Diet: A New Tool in City’s Wellness Effort
Starting its new plan year in 2012, the city of Dublin, Ohio employed just about every tool in the wellness arsenal to control claims costs in its self-funded high-deductible health insurance and health savings account (HSA) program. This was the only medical plan available for two-thirds of full-time city employees—about 300 people. Beginning in 2013, all 370 employees are on the same plan.

The city contributed to employees’ HSAs using a formula that used both participation and outcomes for employees and spouses. The participation contribution was based on completion of an online health risk appraisal, on-site biometric screening, at least two educational classes and a preventive checkup with a physician.

In addition, employees and spouses could earn an outcomes contribution for meeting the city’s criteria for cholesterol, blood pressure, body mass index (BMI) and tobacco use. Participants who did not meet the criteria at the beginning of the year could still receive contributions in later months by achieving the specified biometrics then, or even by simply making progress toward their goal. As a final outcomes incentive, the city put together a team bonus contribution if employees as a group met specified BMI and tobacco use goals. This element of the program made wise use of encouragement from co-workers.

The city offered a wide range of support and classes to allow employees to meet their participation and outcomes targets. For example, the Access an Expert Program offered quarterly one-on-one counseling with experts such as an exercise physiologist, dietician, nurse, stress management counselor or pharmacist at no cost. Other options included fitness programs, commercial weight-loss groups, meditation and employee assistance program (EAP) seminars.

Yet, even with such comprehensive strategies, the city aimed to shift its wellness program from state-of-the-art to next-generation. The city had seen early success with its wellness program that began in 2006, but by 2010, the wellness programs that were in place had reached the saturation level and the city was beginning to see a climb in claims costs again. To control these
costs, the city decided to institute a consumerism strategy and move to an HSA beginning in 2011.

As part of a consumer-driven plan, the city wanted to offer additional wellness programs that could improve the health of employees and their families and save them money on prescriptions. Employees and spouses continued to suffer from preventable chronic illness, such as diabetes, obesity and high blood pressure.

Plant-Centered Eating Program Implementation

Inspiration for the next step in the city’s wellness program came from the film *Forks Over Knives*, a documentary on the healthful effects of whole food, plant-based diet choices. This movie was originally shown through the city of Dublin community-based program called *Healthy Dublin*. A City Council member, who had benefited from a similar eating plan in becoming cancer-free after stage 4 cancer diagnosis, was instrumental in supporting plant-based eating education through *Healthy Dublin*. After hearing from several employees who saw the movie, city officials decided to see if a program offering such an eating plan could be added to the range of worksite educational classes.

Several key members of management were instrumental in championing the innovative plant-centered educational program, called *Wellness 101*. Administrative Service Director Michelle Crandall, along with Mary Kay Ruwette, human resources (HR) manager, and Tracey Gee, recreational services administrator, were key in launching Wellness 101. The first step was to locate and get a proposal from a partner that could run the classes. The city selected the Wellness Forum, based in nearby Columbus.

City Manager Marsha Grigsby, who functions as the CEO, made the decision to offer the program, believing it would have a significant impact on employee health—and the city’s bottom line—by reversing disease and getting people off medications.

“We anticipated some opposition from employees, but this did not change the final decision,” Ruwette said.

How the Program Worked

Wellness 101 was voluntary, as were all components of the city’s wellness menu. However, introductory one-hour meetings to tell employees about the new plant-centered eating classes were required education as part of the city’s wellness program, *Healthy by Choice*. City officials wanted to ensure that all employees could make an informed decision about this offering. Ruwette and her staff scheduled meetings at a range of times and locations for convenient access.

Interested employees then applied for the plant-centered diet class series. Depending on their medical status, employees received either Level 1 or Level 2 intervention. To qualify for the more intensive Level 1, an employee had to meet one of the following medical criteria:

- High blood pressure (160/90 or higher)
- High cholesterol (160 mg/dl or higher)
- Obese or overweight by 20 pounds or more
- Type 1 or type 2 diabetes
- Serious gastrointestinal disorder, such as Crohn’s disease or ulcerative colitis.

Employees with high cholesterol or blood pressure that had been lowered by medication still qualified.

For the Level 1 services, medically qualified employees

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**takeaways >>**

- City officials hoped a plant-based, whole foods diet would help employees reverse disease and enable them to cut back on medications.
- As part of the wellness program, all city employees were required to attend an introductory session of the nutrition program. The program itself was voluntary.
- For eight weeks, employees learned why and how to get 90% of daily calories from whole plant foods.
- Those who completed the program experienced notable decreases in hypertension, triglycerides, elevated glucose and weight.
- Among continuing challenges are followup opportunities and getting additional employees to sign up for future sessions.
also had to agree they were willing to put forth their best effort to learn and implement the program. Each applicant needed to fill out a nine-page questionnaire, including a five-day diet journal and their thoughts on why they wanted to participate. As a final step, applicants were interviewed by phone to make sure they understood the program and were committed to working with it. Level 1 participants received biometric screenings from the city’s vendor before they started the program and the week after it was completed.

Level 2 intervention was available to any employee, regardless of meeting medical criteria, and no application process or prescreening was needed. The first class series, in February 2012, had 22 Level 1 and seven Level 2 participants, with about an even mix of men and women. Three members of the HR department, including Ruwette, signed up. All participants, both Level 1 and Level 2, were included in the same classes. Participants were not aware of each others’ status.

Wellness 101 consisted of eight classes, each an hour long and held on city time, over eight weeks. The classes combined lecture, discussion, recipes and food sampling to teach the why and how of getting 90% of daily calories from a wide range of whole plant foods. Meal and snack staples include vegetables, fruits, beans, potatoes and whole grains, with small amounts of nuts and seeds. Meat or fish are optional twice a week, and the diet is free of processed foods (including oils) and dairy.

Each participant got a workbook and DVD set and a Wellness Forum membership, allowing access to conference calls and other activities outside the worksite. There was a private coaching session between the fourth and fifth classes, and a followup call to review changes in risk factors after the eight weeks.

Outcomes and Challenges—Health Measures and Participant Satisfaction

Considering all participants, risk factor changes (see Figures 1, 2 and 3) after the eight-week class series included:

- The percentage of hypertensive participants fell from 20% to 3.7%
- The percentage of those with high triglycerides plummeted from 40% to 11%
- The percentage of those with elevated glucose decreased from 28% to 18.5%
- The average weight loss was 10.5 pounds.

Twelve participants completed the city’s general class evaluation survey. Every respondent said he or she would recommend the program to other employees. Eleven said they had changed their eating habits as a result of the classes, with only one saying the diet was “too extreme.”

“Looking at the numbers, it’s easy to be passionate about this program,” Ruwette said. “I saw a significant change in health in the majority of the group that went through the classes. Ten who finished were willing to talk to other employees about it, and it changed their lives. Never before have employees been so excited that they would talk to other employees about one of our wellness offerings.”

Dave Harding, the city’s director of human resources, was also a Wellness
101 participant. Harding observed, “I see a positive effect on the employees who participated in the program. They seem happier. The vast majority of program participants had significant biomarker improvements. People’s behavior has changed. The numbers and behavior both tell a story.”

Harding himself experienced a cholesterol drop from 200 to 135 and a blood pressure decrease from 140/90 to 128/78 and is taking only half as many meds as he started out with. His frequent headaches vanished. After an initial transition period, Harding said he enjoys his new diet and finds it easy to maintain.

Other successful employees were eager to share their stories.

- **Larry Nicol, Park and Open Space Division maintenance.** Before starting the classes, Nicol had trouble sleeping and dragged in pain all day at work. In eight weeks, his cholesterol went from 212 to 120, his LDL cholesterol from 158 to 86, and his weight from 210 to 188. “Everything I’ve learned in the program has worked. I’m having more fun with it now than anything. I like that I can eat a lot of food and get full on the program’s diet. I don’t have to write things down.”

- **Frank Phillips, sewer crew.** Phillips wanted to avoid the family fate; his parents and all his grandparents died between the ages of 50 and 70. “Health is the biggest thing for me and my wife. My triglycerides went from the 400 to 500 range to 221. I feel a lot better and have a lot more energy. It’s easier to get in the car, tie my shoes, to get through life. When...
my co-workers told me ‘Frank, you’ve lost weight,’ I was very encouraged.”

- **Mike McCaskey, police officer.** While McCaskey wanted to reduce the amount of his medications, he was not sure he would buy into a plant-based diet. He was pleased to find he was not stuck with bland food or unable to eat out. “I discussed the program with my doctor. He was receptive and pleased with the results. I can wear clothes I could not wear for the last five years, and I’m much happier. I want to be part of other police units that demand a better physical condition than I was in before.”

- **Tami Moore, administrative specialist.** Moore didn’t want to continue taking five kinds of medications but initially found making changes to be daunting. The food samples in class helped the most with this. She has reduced her medications and her digestive problems are much improved. “I definitely feel a lot better. I don’t want to put nasty junk that makes me feel bad into my body. I want to be as healthy as possible for as long as possible.”

- **Jennifer Miglietti, HR specialist.** Obesity and chronic pain were issues for Miglietti, and previous calorie-counting and portion-control diets always failed in the long run. “After three months on a plant-based diet, I’m no longer debilitated. I used to constantly have back pain. That went away without surgery on this diet. My energy is way up. Now I’m addicted to how healthy food makes me feel.”

- **Ray Harpham, architect.** Harpham saw the eight-week class series as an opportunity to get to his goal weight. He was in pain the first week he adjusted to the new diet but stuck with it and began to feel much better. “Changing diet is a piece of cake compared to quitting cigarettes. After the first class, I saw myself as a plant-based eater.”

### Next Steps

Both Ruwette and Harding agree that it is too early to assess the cost impact of Wellness 101 or establish a return on investment. The city will be closely monitoring medical and drug costs to establish whether there are net savings and, if so, what these are.

Ruwette notes the major challenge she sees is the absence of a followup program to keep graduates on track. Those who completed Wellness 101 do interact on an informal basis to trade recipes, food and restaurant finds. She would like to see a formal support component, even if just once a month, to maintain compliance with plant-centered eating. Support at home is very helpful as well, so the city wants to get spouses more involved in the classes.

Another challenge is to get more employees to sign up for later rounds of the classes. The city’s goal is to ensure culture change by having one-quarter of the population go through the program. She sees employees as both skeptical and curious when they learn more about plant-centered eating.

Ruwette has spoken with her HR colleagues in other nearby cities about Dublin’s success. She finds people want to learn more but are also afraid of pushback if they propose a plant-centered education program. Ruwette tells them, “Dublin is an early adopter. Implement a similar strategy, but be prepared to go forward with some controversy until the first group completes the program. Some people will disagree with the program and you need to be able to explain it. Look at the research. If you wonder about it, do some research on it.”

Plant-centered eating classes are a new worksite wellness tool that can have a major, immediate impact on employee disease risk factors, and potentially also on near-term claims costs. Employees for the most part catch onto new food choices fairly quickly and like their new diets. This still-developing tool is another powerful wellness idea that employers may want to explore.