

RESOURCE GUIDE

Kentucky Regional Resource Lead
Organization

Lung Cancer Prevention and
Survivorship is Good Business



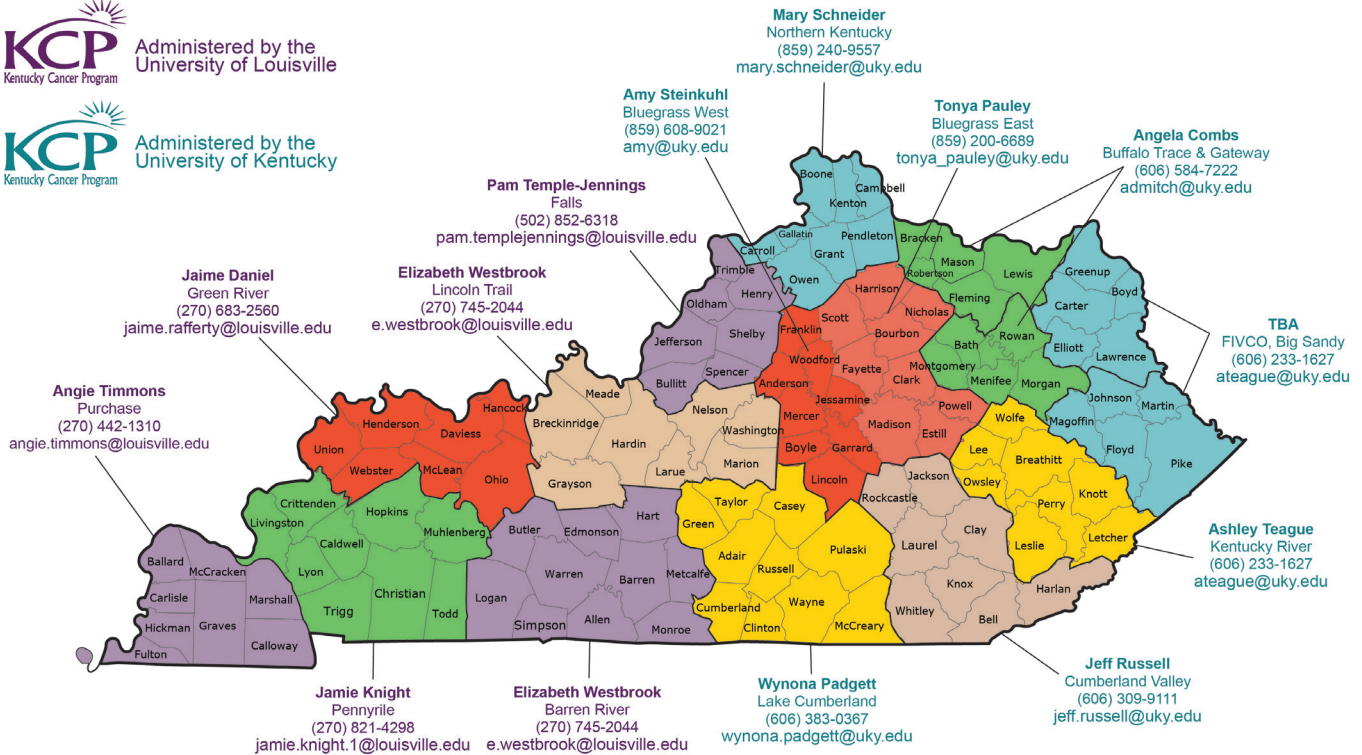
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Who We Are

The Kentucky Regional Resource Lead Organization (RRLO), developed as a result of a grant from the SelfMade Health Network, consists of five organizations collaborating to improve lung health in Kentucky. These organizations include: University of Kentucky College of Public Health, Kentucky Cancer Program (KCP) at the University of Kentucky, KCP at the University of Louisville, the Kentucky Cancer Consortium at the University of Kentucky, and BREATHE in the College of Nursing at the University of Kentucky.





Project Support

Current primary project support comes from the SelfMade Health Network Regional Resource Lead Organization: Lung Cancer Prevention, Control and Survivorship with Business and Community Engagement. Patient Advocate Foundation. CDC021419. Additional project support has included: CDC-RFA-DP18-1808: “Networking2Save”- CDC’s National Network Approach to Preventing and Controlling Tobacco-related Cancers in Special Populations (SelfMade Health Network); DP13-1314 National Networks to Reduce Cancer and Tobacco Related Disparities from the Centers for Disease Control and Prevention (Self Made Health Network); Cooperative agreement number U55/CCU421880, 1NU58DP006313, 1NU58DP007144 from the Centers for Disease Control and Prevention (Kentucky Cancer Consortium); Kentucky Cancer Program, University of Kentucky and University of Louisville; Behavioral and Community-Based Research Shared Resource(s) of the University of Kentucky Markey Cancer Center (P30CA177558); and the Markey Cancer Center Community Impact Office.

Goal

The purpose of this project was to provide training and technical assistance to blue-collar worksites across Kentucky on the development, modification, adoption, and implementation of worksite wellness policies that reduce exposure to secondhand smoke and aerosol, promote tobacco treatment, restrict use of e-cigarettes, and promote lung health through lung cancer screening and radon prevention.

Background

The Kentucky RRLO was initially funded in March 2016, and the funder recommended counties for participation. After discussion with the KY RRLO team and review of the data, the team selected eight counties in Southern Kentucky based on demographics to include in the pilot project: Casey, Clay, Christian, Jackson, McCracken, Ohio, Perry, and Warren counties. The focus was on blue-collar worksites who employ primarily men. At the time, all participating counties had a higher age-adjusted lung cancer mortality rate for males than the U.S. rate. The most common types of industries in these eight counties were: manufacturing; healthcare & social assistance; retail trade; and educational services.

The Kentucky RRLO convened focus groups and roundtable conversations from 2016 - 2018 with worksites in the eight counties and with local organization that provide health, education, or social services in the communities to assess currently available local resources, ways to reach employees, worksite understanding of the burden of lung cancer, and what resources and information are needed. The team also provided educational webinars for worksites about radon prevention, lung cancer stigma, tobacco treatment, and smoke- and tobacco-free policies. In 2018, the KY RRLO completed the first “Resource Kit” that provided ideas for implementing evidence-based activities for worksites that promote lung cancer prevention, early detection, and support survivorship. After piloting the Resource Kit in one worksite per county, the KY RRLO received feedback from community organizations and worksites that an expanded focus from male employees to all employees was needed due to equality concerns among the human resource worksite representatives. New guidelines from the funder also required a focus on smoke-free policy and tobacco treatment, so the KY RRLO revised the Resource Kit in 2019, continued relationships and expanded relationships with worksites. The team planned to expand to two additional counties and implement the new Resource Kit in March 2020.

In March 2020, the COVID-19 pandemic halted progress, as many worksites were forced to close temporarily, transition to virtual or hybrid work, and implement new safety protocols. Over the next two years, the KY RRLO assessed what worksites needed while navigating COVID-19. Based on feedback from worksites and staff, the team once again expanded the Resource Kit content to include radon and lung cancer screening and simplified the structure. The team also decided to expand this project statewide to be available to worksites who were ready for resources. Throughout the pandemic, the KY RRLO continued to provide educational webinars for worksites about COVID-19’s impact on smoking, the cost of tobacco use on businesses, and what worksites need to know about lung cancer screening. The current Resource Kit was finalized in late 2022 and implemented in 2023.

Figure 1. Kentucky RRLO project timeline

October 2016 - January 2017	Focus Group 1	Assessment of community needs and resources with health, educational, and social service organizations.
January 2017	Webinar 1	Radon in Kentucky
February - May 2017	Roundtable 1	Met with worksites to understand how employers provide health information to employees and what has worked to reach men.
May 2017	Webinar 2	Lung Cancer Stigma: Changing the Conversation Around a Lung Cancer Diagnosis
August 2017	Webinar 3	Lung Cancer Stigma Part 2: Changing the Conversation Around a Lung Cancer Diagnosis
November 2017 - February 2018	Roundtable 2	Gathered feedback from worksites on information to be included in Resource Kit.
January 2018	Webinar 4	Tobacco Treatment in Kentucky: Best Practices
March 2018	Webinar 5	Becoming a Tobacco-Free Worksite
March 2018	Revisions	Completed first draft of Resource Kit.
March - April 2018	Focus Group 2	Received feedback about Resource Kit from community organizations.
May - August 2018	Revisions	Piloted Resource Kit in one worksite per county.
October - December 2018	Roundtable 3	Shared results of piloting Resource Kit with community organizations and worksites.
2019	Revisions	Revised Resource Kit with a focus on smoke-free policy and tobacco treatment after receiving new funding with different guidelines. Based on feedback from worksites we also expanded our focus to all employees, changing language from 'mostly male worksites' to 'blue collar worksites.'
August 2019	Training	KCP staff received training on how to implement the Resource Kit with worksites and planned worksite implementation to extend to two additional counties (for a total of 10)
2019	Revisions	Created a new one-time policy survey for worksites.
March 2020		COVID-19 pandemic started in U.S.
September 2020	Webinar 6	Reducing Employee Risk: COVID-19, Tobacco Use and Smoke-free Environments
2020	Revisions	Revised pre- and post-surveys for worksites to integrate questions from the policy survey and expanded the project to be statewide.
August 2021	Roundtable 4	Assessed what worksites needed while navigating effects of COVID-19 pandemic.
2021	Revisions	Developed a focused, simplified Resource Kit on smoke-free policy and tobacco treatment, but then expanded the content to include radon education and lung cancer screening. KCP team provided feedback that the Resource Kit was too complex and needed a structure change.
April 2022	Roundtable 5	Shared Resource Kit with worksites, asked for feedback, and discussed whether they would be interested in implementing.
May 2022	Webinar 7	What Your Worksite Needs to Know About Lung Cancer Screening

Sep 2022	Revisions	Finalized current version of Resource Kit.
June 2023	Webinar 8	Employer Resources for Worksite and Family Lung Health
August 2023	Roundtable 6	Convened worksite leaders and organizations providing support to worksites for a Roundtable discussion on current worksite needs, sharing the final Resource kit and discussing ways to reach employees with lung health information. Identified preferred methods for worksites to utilize funding.

Social-Contextual Model

POPULATION CHARACTERISTICS

County-level health data and workforce statistics.

MODIFYING CONDITIONS (social context)

Factors that independently affect outcomes but that interventions are not intended to influence

Individual factors: Assessed how male employees learn about health services in focus groups and roundtables (methods and messages)

Interpersonal factors: Messages about family health resonate with employees; stigma

Organizational factors: worksite leader turnover, health insurance rates, worksite emphasis on equality (not just focusing on male employees), funding agency expectations, worksite availability (summer shut downs), organizations managing impacts of COVID-19 pandemic on worksite, worksite focused on other health issues

Neighborhood/community: local smoke-free law, availability of tobacco treatment and lung cancer screening resources, health education about radon and secondhand smoke

Societal factors: tobacco heritage, personal rights/freedom/independence, mistrust of research due to previous exploitation, COVID-19 pandemic, political climate

INTERVENTION: Designed to influence mediating mechanisms

Creating, tailoring, and providing technical assistance to implement a Resource Kit.

Organizational and policy factors

Mediating Mechanism: Worksite already focused on health and interested in doing more for their employees, complete buy-in from leadership, smoke- and tobacco-free indoor and outdoor policies, research restrictions related to worksite recruitment, competing worksite priorities, re-education of worksite leaders post-pandemic

Individual factors

Mediating Mechanisms: Worksite leader engagement, existing relationships between KCP staff and worksite leaders, trust building, worksite leaders' uncertainty about research participation, worksites do not feel equipped to discuss cancer

Social Context

Mediating Mechanisms: KCP staff living and working in communities, partnerships between KCP staff and community-based organizations, partnerships between community-based organizations and worksites, comfortability discussing health issues

OUTCOME

Building worksite capacity to address lung health among their employees and community



Promising Practices

A promising practice is an activity or approach that may lead to improved outcomes.

Worksite engagement is facilitated by:

- Building a personal relationship with worksite contact.
- The Kentucky Cancer Program's (KCP) proven reputation in the community.
- Buy-in from other community partners who are physically in the community, endorse KCP, and have relevant resources.
- Listening to worksites and providing value-based resources.
- Inviting worksite contacts to topical webinars and/or roundtable discussions.
- Worksite staff with personal connection to lung health. Some worksites with a worksite wellness program were easier to engage and other times they had competing priorities.
 - For example, one worksite had an HR representative who was part of the worksite wellness team and personally interested in quitting smoking. As a result, she was more engaged in implementing the Resource Kit.
- Existing personal relationships between KCP staff and worksite staff.

Resource Kit implementation is facilitated by:

- An internal champion at the worksite.
- Employee incentives.
- The worksite dedicating time to review each piece of the Resource Kit in detail with KCP staff.
- Community partners who can assist in providing local resources. These include inside worksite partners (HR, talent acquisitions, public safety works, nursing/health) as well as external worksite partners (local health departments, local hospitals, FQHCs, District Cancer Councils, local Chambers of Commerce, and others).
- The presence of an on-site clinic, although not all employees use the clinic, so other avenues for education should be considered.

Methods Used to Implement the Resource Kit

- The CDC's Tips from Former Smokers campaign was included as a resource that employers could use as part of their tobacco treatment education efforts. Worksites' comfortability using these materials varied due to the graphic nature and potential for increased stigma.
- Quit kits were provided to worksites to distribute to employees during lung health events. Quit kits include tools and techniques to aid in quitting tobacco including: fidget toys, stress ball, mints, stress relief information, breathing techniques, etc. KCP staff partnered with local health departments to put these materials together to ensure regional and national materials are included.
- KCP staff connected local hospitals and worksite wellness teams or on-site clinics to facilitate and promote lung cancer screening. Several KCP staff connected a lung cancer screening scheduler from the local hospital to an on-site worksite event to schedule lung cancer screening for eligible employees.
- Radon education, testing, and prevention materials were included in the Resource Kit as part of a larger strategy determined by the Kentucky Cancer Consortium. Radon was a "hook" for some worksites to become interested in the Resource Kit.



Application for Others Interested in Replicating this Work

If you are a State Cancer Prevention and Control Program or a State Tobacco Prevention and Control Program or Partner:

- Conduct a needs assessment to determine areas of your state, tribe or territory that have the greatest burden of lung cancer as well as an interest in participating in worksite-related interventions.
- Convene health and service-related partners to assess needs and opportunities for lung cancer related resources for worksites.
- Consider convening groups of worksites to allow for sharing with one another.
- One-on-one interviews with worksites are particularly helpful to tailor what is needed for the worksite.
- Provide flexibility and options for interventions.
- Allow time to build trust and develop relationships before the intervention.
- Provide education and training opportunities related to lung cancer, risk factors, screening and survivorship to health and service-related organizations as well as worksites and businesses.
- Relationships lead to all kinds of requests – so be ready!

If you are an employer (including small businesses like auto shops) or worksite with low-income/seasonal/temporary/part-time employees:

- Assess your own worksite to determine what types of interventions would be appropriate based on your employee preferences and worksite culture.
- Consider convening groups of employees to allow for sharing among one another on how to implement interventions to reduce lung cancer disparities.
- Look for opportunities to partner with health-related community organizations and services.
- Allow time to build trust and develop relationships before the intervention.
- Provide flexibility and options for interventions.
- Educate employees about lung cancer, risk factors, screening and survivorship.

Application for Others Interested in Replicating this Work

If you are a Chamber of Commerce or Small Business Association:

- Look for opportunities to partner with health-related community organizations and services.
- Consider convening groups of members to allow for sharing among one another ideas on how to implement interventions to reduce lung cancer disparities.
- Educate members about lung cancer, risk factors, screening and survivorship.

If you are a lung cancer survivor network and advocacy group:

- Look for opportunities to partner with health-related community organizations and services.
- Consider developing, implementing and evaluating resources tailored to worksites in order to address lung cancer disparities, particularly related to survivorship.
- Educate members and partners about lung cancer, risk factors, screening and survivorship.



Lessons Learned

Lessons learned include experiences and perceptions that may influence future activities.

Barriers to worksite engagement include:

- Some worksites do not have the authority to make policy changes locally.
 - A poultry/food service industry worksite is an example of an international company where policy decisions cannot be made at the local level, only enforced. One of the manufacturing companies involved in this project also makes policy at the corporate levels and enforcement varies among sites.
- Staff turnover makes it difficult to maintain relationships with worksites. Consider how to stay connected with worksites through employee changes. It is important to invest in relationships and connect at least quarterly, and more often if possible, sharing resources as they are available. If you lose that connection, community partners can be helpful in reconnecting with worksites.
- COVID-19 forced a pause in contact with worksites, and when reconnecting, KCP staff often had to re-introduce the topic.
- The project began with a focus on male employees. In 2019, based on feedback from worksites that focusing on males created an equality issue, we expanded our focus to all employees, changing language from ‘mostly male worksites’ to ‘blue-collar worksites.’

Barriers to Resource Kit implementation include:

- Health information is not available in all languages spoken by employees.
- Competing priorities like COVID-19; some worksites were not able to address lung health disparities while they were addressing urgent COVID-19 staffing and safety needs.
- Shift work, which makes it more difficult to reach all employees with in-person outreach, events, and educational opportunities.
- Transportation to lung cancer screening in rural areas.
- Employees continue smoking near entrances and in break areas. This makes it difficult for individuals trying to quit.
- Tobacco use is often viewed as a personal right. Some employees who use tobacco are afraid of losing their rights.

Lessons Learned

Barriers to Resource Kit implementation include:

- Staff turnover; manufacturing facilities in Kentucky have had difficulty finding and retaining staff, and some are concerned that telling employees they cannot use tobacco at all on campus could impact retention.
- A perception that e-cigarette use and exposure to e-cigarette aerosol is not harmful. In the future we would like to include more information in the Resource Kit on this topic.
- Insufficient resources for KCP staff to consistently travel to worksites for in-person contact.
- There is no one-size-fits-all approach, even within the same worksite, especially when there is a change in staff.

Worksites were most interested in:

- Assistance in understanding health insurance coverage for things like nicotine replacement therapy or lung cancer screening.
- Identifying local resources, like nearby Certified Tobacco Treatment Specialists and opportunities for lung cancer screening.
- Eligibility criteria for lung cancer screening using simple, concise language.
- Events that featured the Inflatable Mega Lung.
- Educational materials that can be shared with employees, both printed and electronic.
- Resources that do not require the company to spend their own money.
- Offering on-site tobacco treatment or on-site referrals to tobacco treatment and lung cancer screening opportunities.

Case Study #1

TYPE OF WORKSITE



Manufacturing

LOCATION



Bowling Green, KY;
Warren County

SMOKE-FREE POLICY STATUS



100% smoke-free
policy

ROLE OF WORKSITE LEADER



Physician's Assistant Health Director and Human
Resources Health and Wellness Coordinator

PROCESS FOR ENGAGING



In-person, email,
and phone

WORKSITE AREAS OF INTEREST FROM THE RESOURCE KIT



Tobacco
treatment



Radon
prevention



Lung cancer
screening

DEMOGRAPHICS

Male

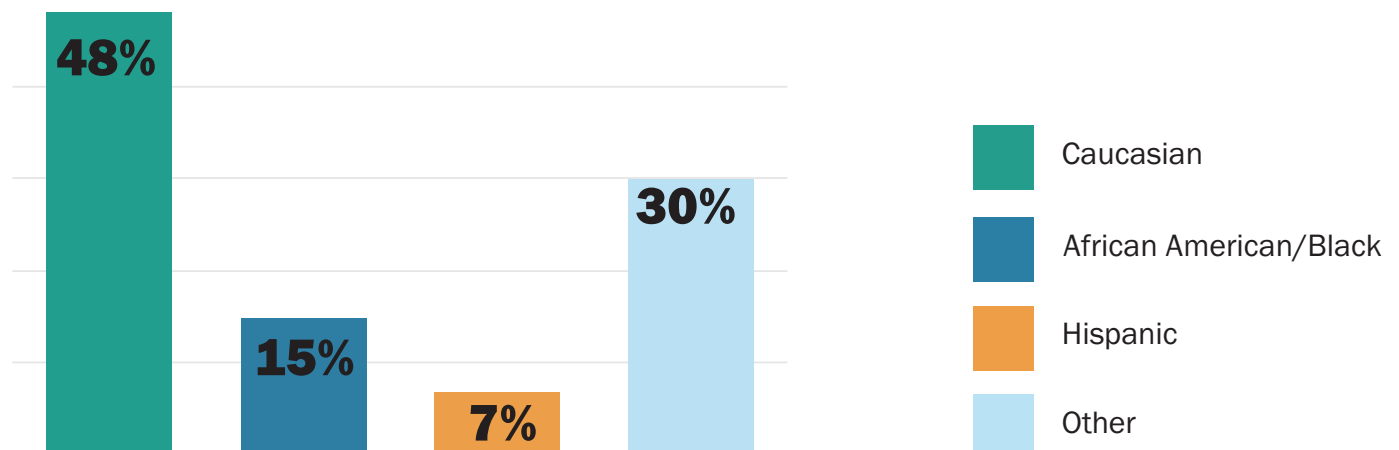
75%



500 full time employees



3 shifts



Case Study #1 Cont.

RESOURCE KIT IMPLEMENTATION

- On-site health fairs that included the Inflatable Mega Lung, radon prevention education and test kits, and other lung health resources.
- Employee health assessments during which the employer partnered with a local hospital to provide lung cancer screening for those eligible.
- Great American Smokeout events that include tobacco treatment resources.
- Lunch and Learn for employees about radon prevention.
- Dress in Blue event for colon cancer awareness.
- Posters and pop-up banners displayed on-site about lung cancer screening.
- Printed educational materials provided to employees.
- Small incentives for employee participation in lung health programs/events.

KEY BARRIERS AND CHALLENGES IN THE WORKSITE

- During the COVID-19 pandemic this worksite completely shut down and they are still struggling to locate and retain good employees since reopening. With each change in staff, we have had to restart relationship building and introduce them to the Resource Kit.
- Language and culture barriers
- Time

KEY FACILITATING FACTORS INFLUENCING IMPLEMENTATION

- Strong relationship between worksite leaders and KCP staff
- Worksite leaders interested in health
- Engaged with this worksite for six years

SUSTAINABILITY AND FUTURE PLANS

We will continue to work with the worksite to address employee health. They are highly engaged in wellness activities and open to new ideas and opportunities. We are working with them to plan an upcoming Great American Smokeout event.

Case Study #1 Cont.

Success Story

This worksite has participated in lung health initiatives with us since 2017 after attending an early Roundtable discussion we hosted. Even though the original employee contact left for another job, we were fortunate that they connected us with a new contact who took over Employee Health and Wellness in Human Resources. This Wellness Coordinator was very interested in promoting lung health and eager to use the Resource Kit. In partnership with KCP staff, the Worksite Wellness Coordinator hosted Lunch and Learns about radon prevention and distributed radon detection kits from the local and state health departments. We also

provided pop-up exhibits on lung health. Our staff worked with the Wellness Coordinator to discuss lung cancer screening and she was interested in connecting eligible employees. We connected her with a local hospital that offered lung cancer screening. The local hospital utilized some of their wellness dollars to provide free screenings for employees without billing insurance. The local hospital also provided a health clinician who performed Shared Decision Making visits related to lung cancer screening so that participants understood the potential benefits, harms and unknowns of screening prior to participation. This health clinician also provided Tobacco cessation counseling and made the appointments with their screening facility. The local news station published a story about several employees who went together to participate in lung cancer screening. This worksite received a Platinum Award (highest honor) from the Worksite Wellness Council in Louisville for its lung health initiatives, which were assessed using the Centers for Disease Control and Prevention's (CDC) Worksite Health ScoreCard, which helps organizations review their health promotion programs to find



Case Study #2

TYPE OF WORKSITE



Manufacturing

LOCATION



Warsaw, KY;
Gallatin County

ROLE OF WORKSITE LEADER



Human Resources and
Talent Acquisitions

SMOKE-FREE POLICY STATUS



None

WORKSITE AREAS OF INTEREST FROM THE RESOURCE KIT



Tobacco
treatment



Radon
prevention



Lung cancer
screening

PROCESS FOR ENGAGING



In-person, email, and phone



The HR representative left, and KCP staff worked with the local health department to connect with two new HR representatives. After three months of in-person and virtual planning meetings, they were able to launch tobacco treatment opportunities for employees.



Partnered with the local health department Health Strategist to initially engage the worksite Human Resources (HR) representative through phone and email outreach and built a relationship over four months.

DEMOGRAPHICS

Male

60%



Approximately
650 employees



4 shifts

RESOURCE KIT IMPLEMENTATION

- In May 2023, the worksite offered on-site weekly tobacco cessation classes for eight weeks during work hours between shifts. Ten employees participated.
- The worksite hosted a tobacco treatment education day.
- The worksite also hosted a Lung Health Event featuring the Inflatable Mega Lung. Lung cancer screening and radon prevention information were provided.
- Posters and pop-up banners displayed on-site about lung cancer screening

Case Study #2 Cont.

BARRIERS AND CHALLENGES IN THE WORKSITE

- Shift schedules
- Rural area
- Population unaware of nicotine addiction

KY FACILITATING FACTORS INFLUENCING IMPLEMENTATION

- All the HR representatives KCP staff worked with were passionate about improving lung health among employees. The initial HR contact was also attempting to quit tobacco use.
- There was HR support for employees participating in the tobacco treatment classes, including allowing them to use working time to participate in the class and including gift card incentives.

SUSTAINABILITY AND FUTURE PLANS

There are plans to continue to check-in with participants who completed the tobacco treatment course as well as offer future tobacco treatment classes. The worksite is also interested in offering more employee education to promote wellness.

Case Study #3

TYPE OF WORKSITE



Manufacturing

LOCATION



Bowling Green, KY;
Warren County

ROLE OF WORKSITE LEADER



Human Resources

SMOKE-FREE POLICY STATUS



100% smoke-free
policy

PROCESS FOR ENGAGING



In-person, email,
and phone

WORKSITE AREAS OF INTEREST FROM THE RESOURCE KIT



Tobacco-free
campus policy

DEMOGRAPHICS



**Approximately
1,000 employees**

RESOURCE KIT IMPLEMENTATION

This worksite enacted a tobacco-free campus policy in 2021. Previously they adhered to the city's smoke-free ordinance which prohibits smoking indoors. Their tobacco-free campus policy enhances protections by prohibiting e-cigarette and smokeless tobacco use and expanding to prohibit tobacco use in outdoor areas and company vehicles.

KEY BARRIERS AND CHALLENGES IN THE WORKSITE

The COVID-19 pandemic impacted this worksite and our work with them in several ways. During the pandemic they had to institute many new safety protocols which took emphasis away from production. Since the pandemic they have struggled to acquire and retain staff. Additionally, it is more complicated to reach employees now that some work virtually, while others work in-person.

KEY FACILITATING FACTORS INFLUENCING IMPLEMENTATION

Worksite staff attended a KY RRLO webinar about the impact of COVID-19 on lung health and how smoke- and tobacco-free environments can help improve lung health which prompted them to pursue a tobacco-free campus policy.

SUSTAINABILITY AND FUTURE PLANS

One of our former contacts retired and it has been difficult to contact the worksite since. However, they invited KCP staff to participate in an upcoming cancer prevention event in September 2022, and we are hopeful we can re-engage them.

Case Study #3

Success Story



In September 2020, the Kentucky RRLO hosted the webinar, Reducing Employee Risk: COVID-19, Tobacco Use and Smoke-free Environments. This webinar featured speakers from the Kentucky Chamber of Commerce, Kentucky Cancer Program (KCP), Kentucky Cancer Consortium, and the University of Kentucky, and focused on understanding the increased risk of COVID-19 complications from tobacco use and exposure, as well as provided tobacco treatment and smoke-free policy resources. Worksite staff participated in this webinar after receiving an invitation from KCP staff, and afterwards they reached out to express an interest in adopting a tobacco-free campus policy. KCP staff provided technical assistance and smoke-free policy resources. Worksite staff presented information from the webinar and Resource Kit to their corporate administrators who had already been considering expanding their policy. Employees were given 90 days-notice and the tobacco-free campus policy went into effect on January 1, 2021. KCP staff worked with the worksite to provide tobacco treatment resources alongside the policy implementation, and the policy was received well by employees.

Case Study #4

TYPE OF WORKSITE



Manufacturing

LOCATION



Maysville, KY;
Mason County

ROLE OF WORKSITE LEADER



Human Resources

SMOKE-FREE POLICY STATUS



Tobacco-free indoor
policy

WORKSITE AREAS OF INTEREST FROM THE RESOURCE KIT



Tobacco
Treatment



Lung Cancer
Screening



Radon
Prevention

PROCESS FOR ENGAGING



In-person, email,
phone



KCP staff invited the worksite to attend the webinar, *What Your Worksite Needs to Know About Lung Cancer Screening*, then requested an in-person meeting with the worksite to discuss their needs.

DEMOGRAPHICS

Estimated Male

60%



3 shifts



327
employees

RESOURCE KIT IMPLEMENTATION

The worksite is working with KCP staff to host a two-day lung health event for employees in three different shifts featuring resources about lung cancer screening, tobacco treatment, e-cigarette use, and radon prevention as well as information about radon prevention and testing. KCP staff is coordinating with community partners including the Federally Qualified Health Center, local health department, and Cancer Program Administrator with the local hospital to provide education and local resources. Community partners are also offering biometric screening for employees.

KEY BARRIERS AND CHALLENGES IN THE WORKSITE

- Multiple shifts make it difficult to reach all employees.
- Employees reside in both Kentucky and Ohio and availability of state-based resources differs based on employee location.

KEY FACILITATING FACTORS

Many employees are or have been nicotine dependent and meet the age and smoking criteria for lung cancer screening. There may be interest among employees in tobacco treatment resources.

SUSTAINABILITY AND FUTURE PLANS

KCP staff are hopeful to continue cancer prevention and screening education with worksite employees after implementation of lung health education is complete.

Case Study #5

TYPE OF WORKSITE



Poultry/Food Service Industry

LOCATION



Cromwell, KY;
Ohio County

ROLE OF WORKSITE LEADER



Clinical Nurse

SMOKE-FREE POLICY STATUS



100% smoke-free policy

PROCESS FOR ENGAGING



In-person, email,
and phone

WORKSITE AREAS OF INTEREST FROM THE RESOURCE KIT



Tobacco Treatment



Lung Cancer Screening

DEMOGRAPHICS

Male

70%



1,150 employees

RESOURCE KIT IMPLEMENTATION

The on-site clinic promotes tobacco treatment and lung cancer screening resources in November.

KEY BARRIERS AND CHALLENGES IN THE WORKSITE

- Staff turnover has made it difficult to stay in contact with the worksite.
- COVID-19 changed the demands and needs of the on-site clinic from proactive to reactive healthcare, due to increased workforce illness.
- The workforce demographic has changed since we started working with the worksite, and they now employ quite a few refugees who do not speak English. The language barrier and lack of resources available in their native languages make health education difficult.

KEY FACILITATING FACTORS

It is important to assess worksite needs and tailor resources to meet those needs to keep them engaged.

SUSTAINABILITY AND FUTURE PLANS

Continued collaboration and resource sharing that will further equip workforce and their families to be successful in quitting tobacco and reducing exposure to secondhand smoke and aerosol.

Case Study #6

TYPE OF WORKSITE



First Responder

LOCATION



Hazard, KY;
Perry County

ROLE OF WORKSITE LEADER



Chief

SMOKE-FREE POLICY STATUS



100% smoke-free
policy

PROCESS FOR ENGAGING



In-person, email,
and phone

WORKSITE AREAS OF INTEREST FROM THE RESOURCE KIT



Radon

DEMOGRAPHICS

Caucasian

99%

Male

85%



3, 24 hour
shifts



50
employees

RESOURCE KIT IMPLEMENTATION

The worksite was very interested in radon educational materials and KCP staff provided posters, a pop-up banner, example social media posts, and language for the weekly newsletter. KCP staff partnered with the local health department to provide free radon test kits for all worksite employees to test their homes. KCP staff also provided information about lung cancer screening and tobacco treatment.

FACILITATING FACTORS

- The worksite was already very engaged and interested in employee wellness and had systems in place to communicate regularly with employees.
- KCP staff had a personal relationship with the worksite as her father worked in the same industry. This facilitated trust.
- KCP staff had a strong relationship with the local health department which was how she was able to provide free test kits for all worksite employees.

For more information, contact:
Jennifer Redmond Knight, DrPH
Principal Investigator, KY RRLO,
University of Kentucky College of Public Health
jennifer.knight@uky.edu

Appendix

Bendix Spicer Foundation Brake Recognized For Dedication To Employee Health And Wellness

Source: aftermarketNews

By: aftermarketNews Staff

June 26, 2019

The Worksite Wellness Council of Louisville has awarded the company with the highest distinction for exceptional commitment to employee well-being.

Bendix Spicer Foundation Brake (BSFB) recently received a Platinum Award from the Worksite Wellness Council of Louisville. Left to right are Andria Keating, BSFB health and wellness coordinator; award presenter Jim Frazier, vice president of medical affairs for Norton Healthcare; and Matt Schwartz, chair of the Worksite Wellness Council of Louisville.

Bendix Spicer Foundation Brake LLC (BSFB) is committed to helping employees and families improve their health and wellness at work, at home, and in retirement. Through its efforts to continually improve its resources for employee health, BSFB recently received a Platinum Award from the Worksite Wellness Council of Louisville for exceptional commitment to employee well-being, integration of wellness into the workplace culture and exemplary leadership in managing employee benefits.

The council's annual conference, which took place last month, recognizes organizations in Kentucky that strive to create cultures of health through wellness policies and programs. Each employer is assessed according to the Centers for Disease Control and Prevention's (CDC) Worksite Health ScoreCard, which helps organizations review their health promotion programs to find gaps and prioritize the prevention of chronic conditions.

To earn a Platinum Award, the highest distinction, employers must meet stringent requirements, such as demonstrating management support, program variety and community engagement, along with reaching targeted improvement levels. The recognition is often given to previous award recipients honored earlier at the Bronze, Silver or Gold levels. Thanks to its inventive health efforts, Bendix Spicer Foundation Brake received the top award as a first-time honoree.

Appendix

Among its contributing efforts, Bendix Spicer Foundation Brake was recognized for partnering with the Kentucky Cancer Program and the University of Kentucky's Markey Cancer Center in an innovative workplace health initiative. The partnership received a grant to cover the cost of qualified employees' lung cancer screenings. In addition, the grant helped to provide educational posters, classes on screenings and radon prevention programs.

"We are proud to continue Bendix's long-standing commitment to the well-being of our employees," said Andria Keating, health and wellness coordinator at the Bowling Green facility. "The rate of lung cancer in Kentucky is one of the highest in the United States. Through our partnerships with distinguished cancer centers in the state, we hope to give our employees the resources and education they need for early detection and prevention."

In earning a Platinum Award, the company also scored with distinction on the CDC Worksite Health ScoreCard, based on the success of its well-rounded wellness efforts. Those efforts are driven by the Bendix Be Healthy program, aimed at making healthy living easier and more convenient for employees and their families by emphasizing prevention and early detection of health issues, and support of employees seeking care. Bendix Be Healthy focuses on biometric screenings, preventative screenings, health fairs, tobacco cessation, weight management, lifestyle changes, emotional well-being, and financial wellness.

The vibrant wellness program in place at the Bowling Green facility is part of an active, multifaceted, employee-focused company culture that combines opportunities to learn, grow, and participate in health and wellness, community volunteerism, and employee team-building activities.
