Letter from the Editor

May 2007

The annual Risk Summit was held in February 2007, you can read more about this in the featured article. The theme this year was “Go Team UC!” to promote the concept of teaming up to work together with the common goal of reducing the cost of risk. A key element of this goal is protecting University assets. When people talk about assets, whether at work or at home, we often think of the things that one owns, its valuable possessions, and the first thing that comes to mind is the property we own. But one of the most important University assets is its employees. Without them, the University would not be able to meet its mission of teaching, research and public service.

This issue of Risk Services Today will focus on protecting one of our most valuable assets - our employees. You can learn about:

• Roll out of the “UC Living Well” systemwide initiative. Making wellness a priority for 2007 and beyond is being conveyed throughout the University with the adoption of workplace programs designed to promote and protect the health and wellness of our employees. An example is the successful launch of the “FitWell” program at UC Los Angeles. These types of programs facilitate a healthy workplace culture, promote healthy lifestyles, and encourage healthy behavior changes.

• Spotlight on a UC Berkeley team member that shows how the team approach can work and produce results and some of the challenges to overcome. This UC Team works in collaboration with other campus departments to protect the health and safety of our employees.

• When traveling in foreign countries on University business, a helping hand is there for employees anywhere, anytime to assist with travel-related problems. Read about how this helping hand was recently put to use in a complicated situation half way around the world.

• Reducing workplace health risks to employees in a pandemic – like emergency planning, we need to have a plan in place to respond to a pandemic. What is a pandemic?

• Formation of the UC Occupational and Employee Health Advisory Coalition (UC OEHAC) with the main focus of prevention and treatment of work-related injuries and the promotion of employee health. Striving to improve the overall health and well-being of the University workforce.

“Prevention is the Key” and while the University is doing its part to initiate prevention in the workplace, it can also start with you. You can take steps to not only protect yourself, but your colleagues at work and families at home. Read the article that highlights the importance of immunizations, what they are and how they benefit you - an easy, cheap, and effective form of prevention. The article is geared towards healthcare workers, but can also be applied to the general public. “You” can make a difference.

These represent only a few of the steps the University has taken to protect and promote the safety, health and wellness of our most valuable asset, our employees. There are many more out there. We’d like to hear about what loss prevention programs and initiatives are happening throughout the University, as we are all sharing in this effort. Don’t hesitate to contact the newsletter editor and we can put the spotlight on you too!

Until the next issue,

Cindy Low, Editor,
Risk Services Today
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What Do You Get When You Combine Occupational Medicine With Employee Health?

The University of California has established a coalition whose focus is the prevention and treatment of work-related injuries and the promotion of employee health. The UC Occupational and Employee Health Advisory Coalition (UC OEHAC) is an association of Occupational Medicine and Employee Health professionals who seek to provide direction and leadership to the University in the area of occupational health, as well as in the development of an integrated approach to the physical and emotional health needs of employees. By recognizing that occupational, personal and mental health issues all impact employee effectiveness on the job, UC OEHAC strives to improve the overall health and well-being of the University workforce.

UC OEHAC is in a unique position to address both the employee’s occupational health needs and the operational concerns of the University. Their goal is to be integrative in its work by bridging the multiple independent systems that currently affect employee health. These systems include, but are not limited to: employee benefits, human resources policy, workers compensation, environment, health and safety, disability management, and UC Retirement System.

Our objective is to reflect the University’s value of its employees by improving overall health and building a quality work environment. By assisting the University, through health improvements that increase work efficiency and productivity, we can all work towards achieving the long-term goal of reduced operating and health care costs.

Some of the issues UC OEHAC would like to emphasize to employees are the services provided by the University’s occupational/employee health clinics, immunizations for healthcare workers who have a higher risk of exposure to many diseases, and the importance of influenza vaccines.

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The Office of the President, Office of Risk Services, sponsors an annual Risk Summit event that brings together UC employees from many various disciplines. Participants include Risk Management, Environment, Health & Safety, Emergency Management, Sports and Recreation, Workers’ Compensation, Occupational Health, Disability Management, General Counsel, Human Resources, just to name a few. The Risk Summit 2007 was a two and half day event attended by more than 250 people. The theme this year was “Go Team UC!” to emphasize the need to bring all the different players together and work as a team to continue striving towards the common goal of reducing the cost of risk at the University. Successful risk management is a team sport that includes many different internal and external players. Each year attendance at the Risk Summit has increased as it is being expanded to bring in other players with a key role in achieving our goal. Just like in any team sport, each player has a role, and as a team determines a winning strategy. A team player brings his/her specialized training to the playing field, utilizing his/her special skills to do what they are good at, to contribute towards a winning result. No one player can achieve the goal on their own, it takes the work of a team. It is this collaborative effort, working together as a team, working from the same game plan, this is what will produce a winning result for all.

The event provided opportunities for education and training, updates on risk management issues, introducing and sharing new ideas, creating awareness of the universal risks shared throughout the University, as well as providing the opportunity to strategize as a team on ways to reduce those risks. There’s a wealth of knowledge to be gained throughout the event. This year we added exhibition booths for some of our risk management vendors, also known as our external team players, who were available to provide information on their programs and resources – to tell us about their game strategy. The keynote speaker was Sue Enquist, Director of Major Gifts, UCLA Athletics External Relations Office. Sue knows very well about the concept of teamwork as she is the former UCLA head softball coach and winner of 11 National Championships as a player or coach for the UCLA Bruins. She has a passion for excellence and extraordinary results as was exhibited by her motivational speech on teamwork and getting the most out of your team.

There is a widely varied range of activities and programs inherent in the life of a university, managing risks in the campus environment presents unique challenges that are unlikely to face companies in the private sector. Then there are the medical centers that face a different set of unique challenges presented by the healthcare environment. Each year the “Excellence Award for Best Risk Management Practices” is presented to the campus and the medical center with the lowest overall cost of risk. The awards were received this year by the UC Santa Cruz campus and the UC San Francisco medical center. The annual “University of California President’s Award for Excellence in Environment, Health and Safety” was presented to UC Riverside. This award is measured by the overall performance in controlling the number of losses and limiting the cost of those losses. This effort reflects outstanding performance in the key areas of loss prevention and loss control.

Other recognition awards were given for specific programs based on efforts in reducing the cost of risk as follows:

**Workers’ Compensation (WC)**
- UC San Diego Campus: Best Improvement in Program/Performance
- UC San Francisco Medical Center: Best Improvement in Program/Performance
- UC Santa Cruz Campus: Best Reduction in WC Rate
- UC Davis Health System: Best Reduction in WC Rate
- Lawrence Livermore National Lab: Best WC Rate
- UC Los Angeles Medical Center: Best WC Rate

**Professional Liability**
- UC Los Angeles Medical Center: Best Improvement
- UC San Diego Medical Center: Best Performance

**General and Employment Liability**
- UC San Francisco Campus: Best Performance – General Liability
- UC Santa Barbara Campus: Best Performance – Employment Liability

**Automobile**
- UC Riverside Campus: Best Performance – Auto Liability
- UC San Diego Campus: Best Performance – Auto Physical Damage

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UC San Francisco accepts the medical center award (L to R): Chief Risk Officer, Grace Crickette; Medical Center Workers’ Compensation, Michael Coleman; Medical Center Risk Management, Tatana Schultz; Vice President, Anne Broome

UC Riverside accepts the EH&S award (L to R): EH&S Director, Joe Adams; Campus EH&S, Ross Grayson; Vice President, Anne Broome

UC Santa Cruz accepts the campus award (L to R): Chief Risk Officer, Grace Crickette; Campus Risk Management, Saladin Sale; Vice President, Anne Broome
What is a PANDEMIC and how do you prepare for it in the workplace?

PANDEMIC = a disease outbreak over a wide geographic area or worldwide. An influenza pandemic occurs when a new influenza virus emerges for which there is little or no immunity in the human population and a vaccine is not available, begins to cause serious illness and then spreads easily from person to person.

Pandemic response planning is not new to the University of California. Many UC locations began looking at how to respond to a pandemic infection during the 2002 outbreak of Severe Acute Respiratory Syndrome (SARS) in China. Departments and groups involved with this planning include emergency management, occupational health, clinical services, human resources, student affairs, and more.

The Center for Disease Control and Prevention (CDC) and the Occupational Safety and Health Administration (OSHA) have issued new guidance which recommends being proactive and doing what you can before hand to lessen the severity and impact of the pandemic. In alliance, the Office of Risk Services has formed a Pandemic Response Planning Workgroup to discuss and share information about pandemic response planning efforts, as well as to develop a systemwide approach and strategy to pandemic planning. An essential first step has been to gather information about the existing pandemic response planning throughout the University. Emergency managers at the campuses and medical centers responded to an informational survey issued by the workgroup. Their responses are being compiled and will be important in determining what steps the University should take next.

A pandemic would have widespread effects on both the campus and the surrounding community. An effective response would require reaching out to stakeholders both inside and outside the University, such as coordination with other emergency response agencies, local health agencies, state and federal agencies, and other public and private entities within the community.

Employee risks of exposure to influenza in the workplace during a pandemic will vary from person to person. The level of risk depends in part on whether or not jobs require close proximity to people potentially infected with the virus, or whether they are required to have either repeated or extended contact with known or suspected sources of the virus such as co-workers, the general public, patients, and students.

General recommendations to prepare for a pandemic in the workplace include:

- Develop a disaster plan.
- Prepare and plan for the ability to function with a reduced workforce.
- Work with vendors to ensure delivery of supplies and services to continue necessary operations.
- Identify essential operations and people – cross train to ensure critical functions can continue.
- Develop a sick leave policy that does not penalize sick employees, thereby encouraging employees who have influenza-related symptoms to stay home so that they do not infect other employees.
- Plan for downsizing, but anticipate potential surges in services.
- Encourage employees to wash their hands frequently with soap and water or with hand sanitizer; avoid touching nose, mouth, and eyes; and cover their coughs and sneezes.
- Provide access to infection control supplies. Stockpile soap, hand sanitizer, tissue, other personal protective equipment, and office cleaning supplies.
- Regularly clean telephones, computers and other workplace surfaces and equipment. Discourage use of other employees’ telephones, offices, work tools, and equipment.
- Avoid close contact with co-workers, vendors and visitors. Restrict or eliminate visitors to the workplace. Minimize situations where groups of people are crowded together, such as meetings and conferences.
- Organize and identify a central focal point to serve as a communication source to employees and provide up-to-date public health communications.
- Provide training, education and informational material, including general hygiene practices (disinfecting hands/surfaces and covering the cough) and use of personal protective equipment (surgical masks and gloves in healthcare), to help maintain a healthy environment.

Employers are responsible for providing a safe and healthy workplace and these general recommendations allow employers to better protect their employees and lessen the impact of a pandemic. While the above recommendations focus mainly on protecting employees, there are other aspects to pandemic response planning at the University which involve the potential closure of our campuses and cessation of campus and student activities. On one hand we have to prepare for campus closures, but on the other hand we have medical facilities that must remain in operation and continue delivery of healthcare services. The University’s pandemic response planning must also look at ways to lessen the impact on society and the economy in order to continue its mission of teaching, research and public service during a pandemic.

More information on the University’s pandemic response planning is available on the Pandemic Response Planning Workgroup at http://www.ucop.edu/riskmgt/pandemic.html

You will find a library of website resources and information which is updated with additional material on an on-going basis.
Spotlight On Team Member: Mike Imazumi

Interview conducted by Team Captain, Kevin Confetti, UC’s Manager of Workers’ Compensation

Mike plays a key role in the management of the Workers’ Compensation program at UC Berkeley (UCB). He is a graduate of UCB and has been involved in the field of Workers’ Compensation for the past 20 years. He began his career down this path as a private vocational rehabilitation counselor. Mike also worked for a major public utility and then several insurance carriers in their claims department. In 2001, he came to the University working as a Disability Analyst at UC San Francisco. Since 2004 he has been in his current position as Manager of the Disability Management Services program at UC Berkeley.

The Disability Management Services team is comprised of two Vocational Rehabilitation Counselors, one Return-to-Work/Data Analyst, two Workers’ Compensation Benefit Specialists, and one Administrative Assistant. Disability Management Services works in collaboration with many other campus departments including Environment, Health & Safety, (EH&S), Human Resources (HR), Recreational Sports, Risk Management, Occupational Health, Education Abroad Program, Ergonomics, Health & Wellness, and many others.

How would you describe UCB’s philosophy in handling Workers’ Compensation claims?

We take a three-pronged approach... prevent injury... prevent disability... manage disability. First and foremost, our goal is to prevent injuries from occurring by fostering a safe and healthy workplace. When injuries do occur, we want to prevent disability by providing timely and appropriate medical treatment, benefits, and transitional work. Then, when necessary, we manage disability through reasonable accommodation and the Interactive Process.

In your opinion, what are currently the biggest challenges facing Workers’ Compensation Managers?

With each passing reform, Workers’ Compensation is becoming more and more entwined with State and Federal disability laws, which requires another level of compliance monitoring. Now, Workers’ Compensation Managers not only need to be experts in Workers’ Compensation, but also in disability laws such as FEHA and ADA. As Workers’ Compensation benefits lessen, our exposure to other liabilities increase. To add to this complexity, deadlines and timeframes between these two systems do not mesh leading to other pitfalls.

Another challenge facing some Workers’ Compensation Managers is that, those of us who are not trained in Risk Management, are having to quickly learn about safety and prevention in order to help administer the Be Smart About Safety programs at our locations. With my claims background, most of my experience had to do with post-injury, not prevention. But, with the assistance of my expert campus partners, especially EH&S and University Health Services, I feel I am up to this challenge.

What are the unique challenges at UC Berkeley?

As one of the largest campuses in the system, just the sheer size and composition of UCB can be daunting. With over 30,000 students, 20,000 employees, and several hundred different departments, UCB is like a small city composed of a wide array of individuals from health care workers to food service workers, from police officers to Nobel Prize winners, from custodians to child care workers, and from administrative staff to researchers. In addition, with all these separate departments, we also have approximately 1,500 supervisors who need to be kept informed of Workers’ Compensation changes and reforms. And, with supervisor turnover, this has become more of a challenge.

What have you done to address these challenges?

We take every opportunity to train and educate whenever and wherever possible. In addition to our own formal training courses, we are part of several HR courses, including health and safety for new supervisors. We also provide “road show” training by providing tailor-made training for departments. In addition, in some larger departments, we participate in monthly status meetings to review disability cases. Basically, we try to be visible and accessible to employees and departments so that they do not hesitate to ask for our assistance when needed.

In your opinion, was the latest round of Workers’ Compensation reforms effective?

Overall, the latest reforms have been successful in that they have clearly lowered the frequency and severity of claims. Reforms, such as utilization review, new permanent disability ratings (AMA guides), temporary disability and physical therapy caps, and permanent disability apportionment have had a positive impact on Workers’ Compensation costs. In addition, the requirement to provide initial medical treatment (up to $10,000) on a delayed case has been a benefit to injured employees.

What changes would you like to see in the California Workers’ Compensation system?

Rather than implement another set of changes, I would like to give the current reforms more time to see their impact. For example, as I understand, there is a push to reform permanent disability rating and utilization review again. From my vantage point, the system appears to be working, so why change it again. On the other hand, some areas could be “tweaked” for better clarification such as, apportionment, voucher notice eligibility, and the +/-15% swing criteria.

UC Berkeley’s Workers’ Compensation program successfully went from a deficit of approximately $5.4 million in 2003 to a $13.1 surplus in 2006, what do you attribute this turnaround to?

It is difficult to pinpoint the precise reasons for this improvement because it is not “one” thing that we do, it is “everything” that we do. But, we do know that much of this improvement is due to the collaborative work of my team with other campus units, such as EH&S, Occupational continued on page 5

Some of UC Berkeley’s health and safety team members: Back row (L to R): Mike Imazumi, Fran Snicha, Mark Freiberg, Arthur Fogelman, Devin Wicks. Front row: Jocelyn Dorsey, Barbara Potting, Diane Liu
Health, Human Resources, Recreational Sports, Ergonomics, Worksite Wellness, Risk Management, Office of the President Risk Services and Sedgwick CMS. Reasons for this improvement include:

- Implementation of incident reporting
- Improved assessment of claim type
- Claim closure project (decreased inventory)
- Monthly and quarterly Sedgwick claim reviews
- Daily review of incident reports with communication to EH&S for accident investigation to prevent recurrence
- Legislative reforms
- Improved follow-up on ergonomic assessments
- Implementation of an ergonomic matching funds program
- Emphasis on transitional work (including a self-help toolkit for supervisors)
- Improved training programs on health, safety, and disability management

What were some of the loss prevention and loss control programs UC Berkeley developed last year with their Be Smart About Safety (BSAS) funds?

- **Ergonomics**: Hired an Ergonomic Specialist to pilot a matching funds program for ergonomic equipment in non-computer environments targeting the top two high injury departments, establish an equipment loaner program, and strengthen the campus network of department computer workstation evaluators.

- **Incident/Injury Investigation**: Hired a Safety Specialist to assist campus departments in investigating work-related injuries/illnesses to identify root causes and actions needed to prevent recurrence. Will also develop “lessons learned” messages for dissemination across the campus.

- **Safety Communication**: Hired a Safety “Marketing” Communications specialist responsible for getting the “safety” message out to the campus by creating promotional materials, including targeted safety publications, and coordinating outreach activities.

- **Wellness Program in High Injury Departments**: Hired a Wellness Coordinator to manage and deliver wellness initiatives in Cal Dining to address nutrition, fitness, smoking cessation, and stress. Coordinating with Recreational Sports to deliver fitness to Cal Dining employees with physically demanding jobs.

What programs will UC Berkeley use this year’s BSAS funds for?

While we are still in the planning stage for these funds, in addition to continuing our current BSAS programs, we have been considering a wide range of ideas including:

- Safety perception survey
- Re-instituting a Health & Safety Fair
- Purchasing safety equipment
- Expanding WorkFit and worksite wellness programs into other departments
- Electronic medical record hardware and software assistance in our Occupational Health Clinic
- Behavior-based safety program

OK, an easy one...American Idol or Survivor?

Sopranos

GO BEARS!

“Prevention is the Key” to Protection for Employees in the Workplace and Families at Home

Healthcare workers should get their recommended immunizations for their own well-being, and for the health of their families, patients and colleagues. ACIP, the Advisory Committee on Immunization Practices, has outlined those immunizations that apply to healthcare workers, as well as for the general public.

Immunizations are killed or attenuated (weakened) viruses, killed bacteria, or toxins that, when given, provide ones immune system with a strategic head start against fighting specific infections. Because healthcare workers are continually exposed to myriad infections, these vaccines can prevent infections and spread of potentially catastrophic diseases.

A disaster avoided doesn’t attract the same attention as when devastation hits. Once an infection takes hold it’s often too late for anything but crisis intervention that is never guaranteed to be effective. Prevention - in the form of timely immunizations - is far easier, cheaper and more effective. Even if they don’t completely prevent their targeted diseases, they can certainly contain both severity and infectiousness.

Depending on a healthcare worker’s exposure to various illnesses, different immunizations may be recommended. Most individuals working in a healthcare facility should be immunized against those airborne illnesses where immunizations exist - Measles, Mumps, Rubella and Varicella. Influenza immunizations should be given on a yearly basis as each season brings new influenza strains requiring new vaccines.

Employees that have potential contact with patient blood or body fluids should be offered Hepatitis B vaccinations, a series of 3 vaccines given over a 6 month period. Individuals working with children should also consider a Pertussis booster as waning immunity often renders adults susceptible in spite of prior immunization. A new vaccine, Tdap, is available for Pertussis prevention that is given in place of the next scheduled tetanus booster. It can also be given within 2 years of the last tetanus booster in individuals who have close contact with children less than 12 months of age.

Rarely are healthcare workers more likely than the general population to need the meningococcal vaccine. The rabies vaccine is rarely offered to researchers.

Not every healthcare worker can receive all recommended vaccines. Individuals who are pregnant or immunocompromised (have weakened immune systems) should not receive “live-attenuated” vaccines.

The best way to determine if you have adequate immunity or need any of the above immunizations, or to address any other questions you may have, is to schedule an appointment with your primary care physician or local Employee/Occupational Health clinic.

Additional information on immunizations for healthcare workers is available at [www.cdc.gov/mmwr/preview/mmwrhtml/00050577.htm](http://www.cdc.gov/mmwr/preview/mmwrhtml/00050577.htm)
The University has employees that travel to foreign countries to conduct teaching or research activities. Most trips take place with the employee traveling to and from the foreign country without any mishap. But what if a situation arises that requires an employee to be medically evacuated? And he/she is halfway around the world? And you don't speak the language of the country he/she is in?

We recently had an incident in New Caledonia, a UC Berkeley professor conducting research in the mountain forests, fell down a ravine into a fast-moving stream filled with large rocks and boulders. The strong undercurrent and rapids carried him downstream and he was thrown up against the many rocks and boulders. The professor suffered a crushed right leg below the knee and extreme bruising to his entire body. He was not found for at least 12 hours when he had to be airlifted to a hospital. Because of the delay in getting medical treatment, a septic infection set in and was spreading. Two surgeries to remove infected tissue were performed while he was in the hospital in Noumé. He was in intensive care there for more than a two-week period before moving to a regular post-ward. Once the infection was fully eliminated he was released to come back to the U.S. The professor was the only UC employee on the research trip, the doctors and hospital employees spoke very little or no English, and he was in a country halfway around the world by himself. Who's going to make all the arrangements for his safe return to the U.S.? Who's going to communicate with the people in New Caledonia who primarily speak French? How are we going to find out how he's doing? He's too far away to simply get in your car and drive or get on a plane and fly to be there with him. And who will accompany him home?

We immediately engaged the Travel Assistance service provided by the University's Business Travel Accident policy. They can arrange for emergency medical evacuation, translation services, and be the communication link between the medical professionals, the employee's family, and the University. Because there was a 12+ hour time difference, it was difficult for the Berkeley campus to make contact. The Travel Assistance was beneficial in that it is a 24-hour service and they have people working around the clock.

Initially it was uncertain what method of transportation would be needed to bring the professor back to the U.S., particularly if he were unable to fly on a commercial flight. The Travel Assistance was on stand-by and ready to assist with making arrangements when the time came. When the professor was released from medical care, he was able to fly home on a commercial flight, but required being accompanied by a medical assistant. Upon his arrival in the U.S. he would need to be transported to a hospital for further medical treatment. The policy provides for payment of emergency medical evacuation expenses. This may include the airlift from the remote area to a hospital, the medical assistant to accompany him on his flight back home, the ambulance transports, and medical services provided during transport.

The “Emergency Medical Evacuation” benefit was an enhancement to the Business Travel Accident policy as of June 15, 2006.

While we hope we never have to use it, it has proven to be a good thing to have. Of greater significance is that many efforts had to be coordinated and we all had to work together to make it happen.

“The successful resolution of this very complicated situation is in great part due to the timely and thoughtful team effort by numerous staff in Risk Management, EH&S, and Workers’ Compensation at both Berkeley and Office of the President units, and the staff at AIG and Sedgwick. I was pleased to see all the pieces fall into place immediately after my first contact with Berkeley’s Risk Management Office. Our Professor is back home and receiving excellent care.”

– Campus Department Director

The Travel Assistance is a 24-hour service and is there to lend a “helping hand”, not only in emergency medical evacuations, but they can also assist with other services needed when traveling in a foreign country. While expenses for other travel assistance services may not be covered under the policy, they are available to provide guidance and are a resource for you. Following are some of the services the Travel Assistance can help you with:

- **Pre-departure Services** – information on immunization requirements, appropriate medical exams and treatments, passport and visa requirements, weather, and travel hazards.
- **Lost Baggage/Passport** – immediate telephone advice on how to proceed, notification to authorities if you lose your passport and directions for replacing it.
- **Insurance Coordination** – when seeking medical treatment in a foreign country and assistance is needed with filling out medical claim forms.
- **Evacuation and Repatriation** – coordination of evacuation if a medical emergency requires being evacuated to a treatment facility or repatriation of remains for loss of life. The policy does provide benefit payment of this service.
- **Travel Medical Emergency Services** – assistance with obtaining local medical care or hospital treatment, maintain contact with your local and personal physician, provide medical records, and maintain contact with you, your family, employer and physicians.
- **Legal Assistance** – assistance with arranging help from local attorneys, embassies, and consulates and maintain a communication link with you, your family, and employer.
- **Global Assistance** – advice on contacting and using services available from consulates, government agencies, translators and other service providers that can help with travel-related problems. The Travel Assistance maintains a central location for translations and communication during emergencies.
UCLA Recreation launched the FITWELL Program to activate wellness on the UCLA campus by educating, motivating and empowering faculty and staff to make healthy lifestyle choices specifically in the areas of fitness and exercise, nutrition and weight management, stress management, and general health education.

With the simple goal of activating the campus, FITWELL’s underlying objectives include creating a strong, high visibility image that campus constituencies can relate to; developing self-perpetuating programs designed for high levels of participation; and fostering a culture of wellness on campus.

In addition to personal training, group exercise, mind/body and instructional programs, the FITWELL Program incorporates new active wellness options including BruinWalkers, a free walking program; the Fit Squad, a mobile unit of instruction and education; and the FIT TO Series of custom programs designed to address a variety of topics.

Developed in support of UCOP Risk Services “Be Smart About Safety”, a workplace safety and wellness program and UC Living Well, a UC wide wellness initiative, the FITWELL Program through UCLA Recreation works with Workers Compensation, Environmental Health & Safety, Healthcare, Insurance and Risk Management, Human Resources and other campus agencies to bring greater awareness of and to promote the benefits of wellness programs to the campus community.

To promote fitness and wellness on campus, the FITWELL program offers departments highly visible, exciting loss prevention, wellness programs and services that include:

- Fun, easily implemented employee team programs.
- No cost introductory or customized department-based mobile FITWELL programs.
- Low cost department recharge custom training programs and services.
- Low cost employee FITWELL incentive certificates for awards and recognition.

The term FITWELL Services is now clearly associated with how faculty and staff are defining and meeting their fitness and wellness needs, and with a number of programs that have touched thousands of participants.

FITWELL has been activated through more than 50 Campus presentations, Employee Orientations and Campus Fairs.

BruinWalkers continues to grow through word of mouth, department organized walking, walking events and enthusiastic participation, and now has over 5,000 registered walkers with more than 1 billion collective steps logged to date.

- The Fit Squad has outreached to various campus departments to provide education and training in simple fitness breaks, posture, and nutrition choices. Custom department programs were implemented with General Services, Housing and Dining and ASUCLA. In all, 300 hours of Fit Squad sessions were given to over 20 departments.
- Self-care choices such as chair massage are also catching on and the so-called traditional fitness options like independent or group exercise and personal training are serving more of the campus than ever.

While the response to the launch of FITWELL at UCLA has been tremendous, plans are underway to enhance and expand the program in an effort to reach employees in the most convenient, accessible ways possible. In 2007-08, FITWELL is introducing:

- Fit Mobiles – Mobile Gym concept
- Fit EDU – Interactive video and web content
- Fit PARKS-Fit STOPs – At various campus locations
- Fit ZONES with outdoor employee programs
- Fit SPORTS – Employee sports leagues
- Expanded employee access to recreation services such as instructional programs, personal training, private lessons and more.

Workplace wellness programs, such as UCLA Recreation’s FITWELL program, can offer great benefits to UCLA and its employees by facilitating a healthy workplace culture. Incorporating physical activity and healthy eating into an office or other organizational culture pays dividends for participants and helps to control health care expenses. The FITWELL program will continue to offer a variety of wellness options to choose from to aids in employee’s commitment to fitness, including the Fit Squad’s ‘get started’ package to help departments launch work site programs and establish an organizational culture that values employees making healthy lifestyle choices.

With the launch of the FITWELL Program in 2006-07 and the enhancements for next year, UCLA Recreation and its campus partners have created the momentum to activate a true culture of wellness that supports a number of our university and student development and success goals.

Helping Hand from page 6

The number to call for Travel Assistance is:

In the U.S. or Canada, call 1-800-626-2427
Outside the U.S. or Canada, call collect 01-713-267-2525

The Regents of the University of California
Business Travel Accident Policy No.: GTP 805 56 49
Policy Effective: January 15, 2007

If you have any questions relating to the Business Travel Accident policy, contact Cindy Low at 510 987-9828 or cindy.low@ucop.edu

NOTE: The following countries are currently excluded from coverage under the Business Travel Accident policy: Iraq, Chechnya, Afghanistan, Israel, Iran, North Korea, Pakistan, Somalia and Sudan. Excluded countries are subject to change at any time. In the event you are traveling on University business to one of these countries or any other war risk country, you must contact your local Risk Management office well in advance of the trip.
Make Wellness A Priority in 2007 and Beyond!

Wellness is a way of living... eating a healthful diet, being physically active, and managing your well-being every day

There is growing national awareness among employers that investments in health and wellness can reduce health care costs, improve productivity and employee morale, and reduce absenteeism. In recent years, the University of California has addressed the issue of workplace wellness through its health plan offerings and through campus or department-level programs.

The University’s goal is to build a healthier workforce and be committed to supporting wellness efforts by making it easier to make wellness a priority. Beginning in 2007, the University rolled out a worksite wellness initiative coordinated by UC Office of the President called UC Living Well. The pilot stage includes three locations (UC Berkeley, UC Los Angeles campus/medical center, and Office of the President) and three statewide medical plans (Blue Cross, Health Net, and PacifiCare). Plans for a 2008 implementation at the other UC locations will begin later this year. Work locations are a viable place to promote health and wellness because 70% of working age Californians are currently employed and a large part of our life is spent being at work.

About UC Living Well

The mission of UC Living Well is to maximize current UC and health plan resources to ensure a productive, engaged workforce by collaborating between and among the UC Office of the President, the pilot UC locations, and the pilot medical plans.

Goals of UC Living Well include:

- Encourage all faculty and staff to lead and maintain a healthy lifestyle.
- Provide easy access to the wellness activities and programs offered by UC locations and UC-sponsored medical plans.
- Build a healthier UC workforce by increasing participation in wellness programs.

The new UC Living Well website at http://atyourservice.ucop.edu/employees/health_welfare/living_well/index.html supports these goals by serving as a portal to the many wellness resources available to enhance the personal health and well-being of UC faculty and staff and their families. The first step to improving your own personal health is to understand what health risks you have. You can increase your awareness of your personal health status by taking the Health Risk Assessment (HRA) offered by your medical plan.

What is a Health Risk Assessment (HRA)?

An HRA is a confidential online questionnaire that takes 15-20 minutes to complete. After logging on to your medical plan’s secure website, you answer questions about your current health status and immediately receive a personalized report. There is no cost for taking it and, in fact, some medical plans offer financial incentives for completing an HRA. Use the information and recommendations from the HRA as a guide for (1) understanding individual health risks and what you can do to address those risks; (2) prioritizing next steps to improve personal health; and (3) taking action and getting involved with wellness programs and services. The HRA is your initial step in the direction of wellness - getting a status report on your health. Gaining a better understanding of your current health status will enable you to identify goals for “living well”.

“Active for Life”

In support of UC Living Well, the Office of the President embarked on a concentrated initiative called “Active for Life” to encourage good nutrition and physical activity. Weekly newsletters provide employees with an easy to read health and fitness guide which contains health tips, nutritious recipes, and other beneficial health resources.

“Active for Life” is an interactive physical activity program that motivates employees to be more active on a regular and consistent basis, as well as promote healthy eating habits. It combines individual and group strategies to encourage participants to change lifestyle behaviors and not only become active at work, but also in their personal lives.

CHANCE TOMORROW TODAY
COMMIT TO A HEALTHIER YOU!

Occupational Medicine with Employee Health from front page

The occupational/employee health clinics are staffed with physicians, physician assistants, and nurse practitioners who are certified in occupational medicine to provide advice or treatment for work-related health problems. The services provided will vary from location to location and can range from providing immunizations and first aid care to long term injury and disability management. Some can provide urgent medical care and help with initial evaluation, stabilization and referral or basic diagnosis and on-going treatment and preventative services for work-related injuries. They provide pre-placement and periodic surveillance screening, return-to-work examinations, physical evaluations, consultation and education on occupational health issues, and assist with addressing many workplace health concerns an employee may have. The occupational/employee health clinic staff has special expertise in handling health issues that people encounter on the job and they work in close partnership with other health and safety professionals at the University. For more information and availability of these services at your location, contact your local Occupational/Employee Health, Workers’ Compensation or Environment, Health and Safety office.

Additional information on UC OEHAC is available at http://www.ucop.edu/riskmgt/oehac.html and will be updated with current occupational and employee health issues.

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