

Well-Being Champion Impact on Employee Engagement, Staff Satisfaction, and Employee Well-Being

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Abstract

Objective: To evaluate the potential impact of a workplace well-being champion on employee and organizational measures of well-being.

Patients and Methods: Baseline well-being measures were collected in October 2-20, 2017 and analyzed from January 1, 2018 through June 30, 2018 by incorporating a focused question set (addressing meaning in work, work-life integration, and physical, social, financial, emotional, and general well-being) into the biennial Mayo Clinic All-Staff Survey.

Results: The survey was distributed to 64,059 employees, with a response rate of 73%. Employees with a work unit well-being champion had more favorable responses overall than did employees reporting no well-being champion. The percentage responding “favorably” to each well-being measure differed from 2 to 12 percentage points and were all highly statistically significant ($P < .001$). Measures with the greatest difference included questions associated with the well-being domains of physical (85% vs 73%), social (84% vs 72%), and financial (72% vs 63%), as well as general well-being (69% vs 60%). Those reporting having a well-being champion had more favorable responses to several questions regarding the immediate supervisor and the work environment being conducive to carry out organizational values, trust within the work unit, ability to speak freely, efforts to make everyone feel a part of the team, and accountability within the work unit.

Conclusion: Having a work unit well-being champion, coupled with an organizational commitment to employee well-being, is associated with better employee engagement, satisfaction, and perception of personal well-being, as well as a more favorable perception of the organization, strongly supporting the multilevel benefits of a robust well-being champion program.

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Workplace wellness programs have traditionally been focused on promoting individual behavior change.¹ Over time, workplace wellness offerings have expanded from basic health information and fitness advice to a growing array of more comprehensive options, such as multi-week courses, sophisticated self-monitoring programs, and individualized coaching services with financial incentives.² Simultaneously, the perception of employee wellness programs as a necessary expense to reduce future health care spend has shifted to that of a crucial investment for shaping

organizational culture, building brand equity, and facilitating the recruitment/retention of top talent,³ particularly for the millennial generation that expects purpose, community, and flexibility in the workplace.⁴

Forward-looking organizations are recognizing that it is essential to acknowledge the full picture of the workplace environment and the impact for the employee experience by putting employees at the center and redesigning workplace practices to fit with employee interests and needs.⁵ Most notably, organizations must address the obstacles and create the conditions for employees to practice

a healthy lifestyle.⁶ By doing so, employee well-being initiatives have the potential not only to improve personal health behaviors but to impact teamwork, trust, and respect within a work team. From a management perspective, implementing employee well-being activities can be beneficial for employees in terms of happiness and relationship forms of well-being as well as for the performance of the organization.⁷ This is especially important as the worksite health promotion industry places a greater focus on a more holistic approach for well-being and the link to employee engagement.

The prevalence of stress in our employees and the impact of high stress on our employees' quality of life and health behaviors have been well documented.^{8,9} The health care workplace environment has unique challenges. Government regulations have increased the workload for physicians and all health care professionals because of the reduced number of uninsured patients, increased demand in health care services, higher practice costs, and additional reporting and regulation requirements.¹⁰ Notably stating, the workload, autonomy, and work-life balance of physician and health care workers have been affected because of the health care reform that adds to burnout.¹⁰ Moreover, these contributors to employee dissatisfaction and burnout in the health care workplace have become increasingly common concerns within other industries as well, indicating the urgent need for greater attention to defining and implementing innovative holistic approaches for supporting employee well-being.

An employee-led well-being champion program (WCP) can be effective in raising the awareness, understanding, participation, and overall success of an employee health and wellness program.¹¹ Previous research of our organization's WCP has solicited feedback from employees participating in champion-led activities. Benefits reported by employees have included increased awareness of wellness opportunities, greater sense of support for achieving a healthy lifestyle, and higher perceived health and wellness.¹² However, to date, the potential impact of well-being champions on staff satisfaction and employee engagement is lesser known. Therefore, the purpose of this study was to evaluate whether

the presence or absence of a well-being champion within the employee's work unit had a demonstrable impact on select personal and organizational measures of interest, leveraging the organization's All-Staff Survey to solicit and obtain enterprise-wide input. The large-scale data collection approach allowed for associations to be analyzed overall as well as by select employee subgroups defined by job type, location, and duration.

METHODS

All aspects of this study were reviewed by the Mayo Clinic Institutional Review Board for human research and deemed to be exempt.

Setting

As a nonprofit academic medical center, Mayo Clinic has employees on geographically distinct, but operationally integrated, campuses in Rochester, Minnesota; Scottsdale and Phoenix, Arizona; Jacksonville, Florida, and throughout the Mayo Clinic Health System, which includes dozens of community-based practices located primarily in the upper Midwest. To address employee well-being, our organization has taken a bolder, more holistic approach to the previous segmented model for worksite wellness programming. For example, Mayo Clinic established an a WCP in 2011 to improve the health and well-being of its employees across a functionally diverse workforce, as previously described.¹²

Well-Being champions are self-identified employees who value health and wellness, have a genuine interest in supporting their colleagues, and want to promote a "grassroots" approach to wellness programs. The crux of the champion role is to engage their colleagues in activities that promote well-being. Champions promote health and wellness opportunities via print, electronic, and in-person communications using ready-made program resources and are given the autonomy to promote programs of personal and work group interest. Promotions can cover several domains of well-being, including physical activity, volunteerism, team building, social interaction, stress management, financial well-being, and new experiences for the work group. For well-being champions to be able to have the time and autonomy to carry out their role within their

TABLE 1. Well-Being Domain Descriptions and Associated Survey Questions

Domain	Description	Survey question	Response options
Social	Build a sense of connection, belonging, and inclusion anywhere.	There is a spirit of cooperation and teamwork within my work unit.	Strongly disagree, disagree, neutral, agree, strongly agree, don't know/not applicable ^a
Physical	Learn, engage, and maintain physical health behaviors to help you achieve optimal health and energy.	The organization provides support through resources and programs to help me lead a healthy lifestyle (nutrition, exercise, sleep, etc).	Strongly disagree, disagree, neutral, agree, strongly agree, don't know/not applicable ^a
Emotional	Cultivate positive emotions and responses that foster meaning and fulfillment in all spheres of your life.	I feel burned out from my work.	Every day, a few times a week, once a week, a few times a month, once a month or less, a few times a year or less, never ^b
Financial	Resources to be more financially confident and comfortable now and into the future.	The organization provides support through resources to help me successfully manage personal finances.	Strongly disagree, disagree, neutral, agree, strongly agree, don't know/not applicable ^a
Work-life integration	Create a sense of balance and harmony between personal and professional realms.	My work schedule leaves me enough time for my personal/family life.	Strongly disagree, disagree, neutral, agree, strongly agree, don't know/not applicable ^a
Meaning in work	Get support with ongoing self-discovery and find a deeper awareness of meaning and purpose in work.	The work I do is meaningful to me.	Strongly disagree, disagree, neutral, agree, strongly agree, don't know/not applicable ^a
General		How would you rate the organization on taking a genuine interest in the well-being of its employees?	Very poor, poor, so-so, good, very good ^c
General		I actively make my well-being a priority.	Strongly disagree, disagree, neutral, agree, strongly agree, don't know/not applicable ^a
Demographic		Does your work area have a dedicated well-being champion?	Yes, I don't know, no

^aResponses of "strongly agree" or "agree" were categorized as "favorable." "Don't know/not applicable" responses were removed from the denominator in the data summary.

^bResponses of "a few times a month," "once a month or less," "a few times a year or less," or "never" were categorized as "favorable."

^cResponses of "very good" or "good" were categorized as "favorable." "Don't know/not applicable" responses were removed from the denominator in the data summary.

work area, efforts at an organizational leadership level were solidified early on in the creation of the program. This included support from human resources to receive supervisor approval for the champions to commit 1 to 5 hours per month to carry out activities and attend meetings during the workday. These expectations are reviewed through a supervisor agreement form, so clear roles and responsibilities between the supervisor and the well-being champion are established at the onset of the champion taking on the role.

A multistep process was used to implement the WCP, beginning with the identification and training of dedicated employee well-being specialists. Initial activities included resource and program development, recruitment, and orientation for well-being champions. These employee well-being specialists provided ongoing comprehensive communication while focusing on the retention, recognition, and evaluation of the well-being champions and associated activities to expand and sustain the program. Employee well-being

TABLE 2. Employee Population Characteristics by All Staff Survey Response Status

Characteristic	Total (N=64,059)		Responder (n=46,787)		Nonresponder (n=17,272)	
	n	%	n	%	n	%
Sex						
Female	46,911	73.2	34,613	74.0	12,298	71.2
Male	17,148	26.8	12,174	26.0	4,974	28.8
Age (y), mean (SD)	43.9	(12.5)	44.4	(12.3)	42.5	(13.0)
Job type – category (condensed)						
Admin – administration	13,922	21.9	11,542	24.9	2,380	13.9
Admin – office support	11,369	17.9	8,922	19.2	2,447	14.2
Admin – operational service	9,321	14.7	5,986	12.9	3,335	19.4
Clinical – provider/scientist	6,308	9.9	3,972	8.6	2,336	13.6
Clinical – Registered Nurse/Licensed Practical Nurse	14,991	23.6	10,315	22.2	4,676	27.2
Clinical – technician/technologist	7,679	12.1	5,674	12.2	2,005	11.7
Job location						
Arizona	6,563	10.2	5,233	11.2	1,330	7.7
Florida	5,806	9.1	4,453	9.5	1,353	7.8
Rochester	35,375	55.2	26,022	55.6	9,353	54.2
Mayo Clinic Health System	16,315	25.5	11,079	23.7	5,236	30.3
Duration of employment						
<1 y	6,526	10.2	4,348	9.3	2,178	12.6
1-2 y	11,943	18.6	8,269	17.7	3,674	21.3
3-5 y	8,283	12.9	5,990	12.8	2,293	13.3
6-10 y	10,512	16.4	7,851	16.8	2,661	15.4
11-15 y	8,753	13.7	6,543	14.0	2,210	12.8
≥16 y	18,042	28.2	13,786	29.5	4,256	24.6
Do you have a well-being champion?						
Yes			18,395	39.7		
No			11,347	24.5		
Unsure			16,602	35.8		

specialists deliver workshops for current and new well-being champions to connect with available resources, offer creative and feasible methods to implement ideas, and provide activities for well-being champions to share with their work groups. The workshops allow well-being champions to stay engaged in their role and provide tools for champions to create meaningful activities within their work groups. In addition, the employee well-being specialists coordinate a recognition banquet to celebrate both the champion role and the support of the supervisor. Awards are given for honors such as Supervisor of the Year, Well-Being Champion of the Year, Best Well-Space, and Unsung Hero.

Currently (at the time of the survey), the WCP includes more than 1200 well-being champions across the organization, or approximately 1.9% of employees are now well-being champions (we now have 1431). The program

goal is to have 2.0% of employees serve in the role of a well-being champion across the organization to ensure a wide reach, which has been achieved since the time of the survey.

The program gives well-being champions the autonomy to choose their audience and work group with whom they serve. For example, a medical secretary may choose to execute activities for their medical secretary colleagues, their colleagues within the department they work within, or both. In addition, well-being champions may serve employees in a virtual setting or employees at different physical locations, depending on the makeup of the team. This autonomy impacts the ability to accurately track the exact number of employees that each champion reaches and impacts.

Data Collection

Every 2 years, Mayo Clinic conducts a full-length, enterprise-wide All-Staff Survey.

Feedback gained from the survey provides important insights into how employees view their work and their workplace. The strength of this tool relies on response rate and feedback shared; the survey is a chance for employees' voices to be heard and action to be taken. The results guide efforts to make the workplace better and culture stronger.

Employee engagement and culture are important drivers of Mayo Clinic's success as an organization. As a tool, the survey helps to identify what most influences these attributes at Mayo Clinic overall and within localized work areas. A focused set of well-being questions were identified and/or newly incorporated in the October 2017 All-Staff Survey (Table 1). The measures were chosen from the existing longitudinal survey items and also created for alignment with Mayo Clinic's comprehensive employee well-being strategy. The impact of a well-being champion was assessed by associating the well-being measures with responses to an additional question: "Does your work area have a dedicated well-being champion?" with a response of "yes," "no," or "unsure."

An independent agency, Mercer | Sirota, conducted the survey, collected the responses, analyzed the data, and reported findings to Mayo Clinic. The survey consisted of approximately 80 questions in total and typically took less than 10 minutes for the respondents to complete. A number of assurances are in place to keep survey feedback confidential, including the use of an independent agency. Mercer | Sirota hosts the survey on its secure website and summarizes survey results in an aggregated format. No one at Mayo Clinic sees how an individual responded to the survey questions. Supervisors and managers receive work area reports for their direct reporting units only when 5 or more responses are received.

Subjects

The All-Staff Survey was sent to all employees (allied health staff and consultants) with an active regular employment status via the human resource employment record system. This included 64,059 employees across all sites and regions. Employee status was designated as supplemental/casual call/pro re nata employees, temporary/limited tenure, on leave for short-term disability, and research

temporary professionals. Residents/students, volunteers, and employees on leave for long-term disability were excluded (Table 2).

Analysis Plan

Analysis was conducted from January 1, 2018 through June 30, 2018. All survey responses were summarized with frequencies and percentages. Demographic characteristics (sex, job category, job location, and duration of employment) were compared between respondents and nonrespondents using chi-square tests, and age was compared using a 2-sample *t* test. These demographic characteristics were also compared between the well-being champion status groups (yes, no, unsure) using chi-square tests for categorical variables and analysis of variance for age. The percentage of individuals responding "favorably" to selected well-being survey measures was compared between the well-being champion status groups using chi-square tests. All analyses were performed using SAS version 9.4 (SAS Institute Inc). Given the large sample size, most statistical tests were highly significant ($P < .001$), and emphasis is placed on the magnitude of the differences (ie, differences in the percentage responding favorably between groups).

RESULTS

The All-Staff Survey response rate was 46,787 out of 64,059 (73%). As compared with nonresponders, responders were more likely to be female (74.0% vs 71.2%), older (mean age, 44.4 years vs 42.5 years), and in administration roles (24.9% response rate), with clinical — provider/scientist being the least likely to respond (8.6% response rate). There was a slight overrepresentation of employees from Arizona and Florida among responders (11.2% from Arizona, 9.5% from Florida) as compared with nonresponders (7.7% from AZ, 7.8% from Florida). Employees from the Mayo Clinic Health System were slightly underrepresented among responders (23.7%) as compared with nonresponders (30.3%). Responders also tended to have a longer duration of employment (Table 2).

As compared with those with no well-being champion and those who were unsure, respondents reporting a well-being champion were more likely to be female (80.0% vs 71.5% vs 69.0%) and were also slightly

TABLE 3. All Staff Survey Responder Characteristics by Well-Being Champion Status

Characteristic	Well-being champion status						P value ^{b,c}
	Well-being cham- pion (n=18,395)		No well-being champion (n=11,347)		Unsure if they have a well-being cham- pion (m=16,602)		
	n ^a	%	n ^a	%	n ^a	%	
Sex							
Female	14,707	80.0	8111	71.5	11,453	69.0	<.001
Male	3688	20.0	3236	28.5	5149	31.0	<.001
Age (y), mean (SD)	44.0	(12.0)	45.1	(12.1)	44.4	(12.7)	<.001
Job type – category (condensed)							
Admin – administration	4794	26.1	2819	25.3	3839	23.4	<.001
Admin – office support	3481	18.9	2069	18.5	3306	20.1	.002
Admin – operational service	1411	7.7	1784	16.0	2705	16.5	<.001
Clinical – provider/scientist	1208	6.6	920	8.2	1799	10.9	<.001
Clinical – Registered Nurse/Licensed Practical Nurse	5715	31.1	1947	17.4	2542	15.5	<.001
Clinical – technician/technologist	1761	9.6	1623	14.5	2249	13.7	<.001
Job location							
Arizona	2182	11.9	1122	9.9	1891	11.4	<.001
Florida	1361	7.4	1216	10.7	1841	11.1	<.001
Rochester	11,231	61.1	5775	50.9	8772	52.8	<.001
Mayo Clinic Health System	3621	19.7	3234	28.5	4098	24.7	<.001
Duration of employment							
<1 y	1197	6.5	743	6.5	2368	14.3	<.001
1-2 y	3119	17.0	1889	16.6	3172	19.1	<.001
3-5 y	2369	12.9	1497	13.2	2063	12.4	.15
6-10 y	3178	17.3	1976	17.4	2631	15.8	<.001
11-15 y	2635	14.3	1692	14.9	2151	13.0	<.001
≥16 y	5897	32.1	3550	31.3	4217	25.4	<.001

^aFrequencies may not sum to column totals because of missing data.

^bP values for categorical items are from a test comparing that particular category between the 3 well-being champion groups; for example, comparing the percentage of women (80.0% vs 71.5% vs 69.0%; $P<.001$).

^cBoldface indicates statistical significance ($P<.001$).

younger (mean age, 44.0 vs 45.1 vs 44.4). For job type, those reporting a well-being champion had more representation from clinical – RN/LPN roles and less representation from admin – operational service, clinical – provider/scientist, and clinical – tech roles as compared with those who responded “no” or “unsure.” For job location, Rochester was overrepresented among those reporting a well-being champion (61.1%) as compared with those responding “no” (50.9%) or “unsure” (52.8%). With respect to duration of employment, those who were unsure had a shorter duration of employment whereas those reporting a champion were similar to those who said “no” (Table 3).

With respect to associations between well-being measures and well-being champion

status, respondents who reported having a well-being champion provided more favorable responses overall as compared with those reporting no well-being champion, all with statistical significance ($P<.001$). The percentage responding “favorably” to each well-being measure differed from 2 to 12 percentage points between these groups. Measures with the greatest difference include those questions associated with the well-being domains of physical (85% vs 73%), social (84% vs 72%), and financial (72% vs 63%) as well as general well-being (69% vs 60%) for the statement “Mayo Clinic takes a genuine interest in the well-being of its employees” (Table 4).

Beyond the personal well-being measures, respondents who reported having a well-being champion also viewed several

TABLE 4. All Staff Survey Responders With “Favorable” Well-Being Response by Well-Being Champion Status

Item	Well-being champion status			Significant comparisons ^b
	Well-being champion (n=18,395)	No well-being champion (n=11,347)	Unsure if they have a well-being champion (n=16,602)	
	% ^a	% ^a	% ^a	
The work I do is meaningful to me.	94	92	92	a, b
My work schedule leaves me enough time for my personal/family life.	76	71	73	a, b, c
Mayo Clinic provides support through resources and programs to help me lead a healthy lifestyle (nutrition, exercise, sleep, etc.).	85	73	78	a, b, c
I feel burned out from my work.	79	75	79	a, b, c
Mayo Clinic provides support through resources to help me successfully manage personal finances.	72	63	66	a, b, c
There is a spirit of cooperation and teamwork within my work unit.	84	72	78	a, b, c
Mayo Clinic takes a genuine interest in the well-being of its employees.	69	60	66	a, b, c
I actively make my well-being a priority.	76	72	74	a, b, c

^aPercentages shown represent column percentages. The column total is reflective of all respondents, though the denominator for each survey question varies because of nonapplicable responses or missing data.

^bPairwise comparisons between the well-being champion (1), no well-being champion (2), and unsure if they have a well-being champion (3) groups—a: groups 1 and 2 significantly different ($P<.001$); b: groups 1 and 3 significantly different ($P<.001$); c: groups 2 and 3 significantly different ($P<.001$).

organization-level measures more favorably than did other respondents. Table 5 includes all survey items that had a difference of greater than 10 percentage points when comparing those with a well-being champion with those without. This included 2 of the well-being measures noted earlier: physical and social domain measures. Additional questions that had differences greater than 10 included several that evaluated department supervisors or leaders. More favorable responses were also given to questions related to the immediate supervisor, particularly for the supervisor explaining the reasons behind decisions and change, encouraging talent and skill development, and holding career development conversations. Further, more favorable responses were reported by those with a well-being champion for questions that addressed the work environment being conducive to carry out organizational values, trust within the work unit, ability to speak freely, efforts to make everyone feel a part of the team, and accountability within the work unit (Table 5).

DISCUSSION

In this large, enterprise-wide, survey-based study of nearly 65,000 employees at a geographically and functionally diverse health care organization (Mayo Clinic), we observed an impressive 73% response rate, and in this robust data set, we found that the reported presence of a well-being champion was uniformly associated with a more favorable impression of personal and organizational well-being. The observed associations crossed all job types, geographies, and duration of employment. Interestingly, the presence of a well-being champion was also associated with positive responses to the noncore well-being questions included in the All-Staff Survey, which may speak to a stronger culture of well-being within the relevant work units. Also of note is that the noncore well-being questions focused on elements within the work units, including the immediate supervisor, and thus aligned with recent research on this topic.¹³ These findings suggest that the well-being champion model in place at Mayo

TABLE 5. All Staff Survey Responders Favorable Responses >10% by Well-being Champion Status

Item	Well-being champion status			Significant comparisons ^b
	Well-being champion (n=18,395) % ^a	No well-being champion (n=11,347) % ^a	Unsure if they have a well-being champion (n=16,602) % ^a	
Core well-being questions				
Mayo Clinic provides support through resources and programs to help me lead a healthy lifestyle (nutrition, exercise, sleep, etc.). ^c	85	73	78	a, b, c
There is a spirit of cooperation and teamwork within my work unit. ^c	84	72	78	a, b, c
Additional questions				
Department leadership behaving in ways that model the values of the organization.	79	68	76	a, b, c
My work environment makes it easy to live out the Mayo Clinic values.	81	70	76	a, b, c
My immediate supervisor does a good job of explaining the reasons behind decisions and changes.	81	70	77	a, b, c
There is a high level of trust among employees within my work unit.	75	63	69	a, b, c
Where I work, I feel free to speak my mind without fear of negative consequences.	72	60	66	a, b, c
Where I work, efforts are made to make everyone feel like part of the team.	80	68	74	a, b, c
Individuals in my work unit are held accountable for their actions.	70	58	65	a, b, c
My immediate supervisor encourages me to develop my talents and skills.	82	70	76	a, b, c
My immediate supervisor holds career development conversations with me.	77	64	70	a, b, c

^aPercentages shown represent column percentages. The column total is reflective of all respondents, though the denominator for each survey question varies because of nonapplicable responses or missing data.

^bPairwise comparisons between the well-being champion (1), no well-being champion (2), and unsure if they have a well-being champion (3) groups—a: groups 1 and 2 significantly different ($P<.001$); b: groups 1 and 3 significantly different ($P<.001$); c: groups 2 and 3 significantly different ($P<.001$).

^cAlso shown in Table 4.

Clinic is beneficial to our organization and could be replicated with appropriate investment in other organizations (even beyond health care).

It is important to note that the WCP was implemented within the framework of a comprehensive employee well-being strategy. Recognizing the tremendous impact whole person care has on employees' lives both at and away from work, the Mayo Clinic Human Resources department outlined a well-being strategy focused on 6 pillars of well-being: social, physical, emotional, financial, work-life integration, and meaning in work. As the employee well-being team creates and delivers scalable, expert-driven, evidence-based

programs to enhance employee well-being, we have further explored the various roles within an organization, including that of supervisors¹³ and well-being champions.¹²

A well-designed WCP will be based on principles of behavior change and will be founded in social cognitive theory, with research establishing the importance of peer support and social networks for individual behavior.^{14,15} Well-being champions provide the critical peer support needed to improve and maintain healthy behaviors among coworkers¹⁶ and tailor larger institutional wellness programs to meet the needs and characteristics of their specific work group. As this research establishes, their benefits span across

job types, work locations, and demographics as well-being champions have direct knowledge and understanding of the workplace, health/wellness concerns, personal challenges, and organizational issues that are most important to their employee colleagues and families.¹⁷

The WCP has previously been evaluated and key strategies for implementation identified.¹² Organizational support is critical and includes top leadership, human resources (as well-being champions conduct activities during the work day), and direct supervisor support through a supervisor agreement form. With provided ready-made program resources that cover all 6 domains of well-being, champions are given the autonomy to promote programs of personal and work group interest. An emphasis on well-being champion retention has been imperative and includes many forms of recognition to encourage long-term involvement in the WCP.

In the workplace, the potential benefits of peer support interventions, such as those that include well-being champions, are limitless.¹⁸ Well-being champions are a potential agent of change as they are invested in their own wellness and can educate and support their coworkers.¹⁹ Well-being champion programs have been proposed as a high reach strategy to enhance employee participation in broader wellness initiatives, promote a culture of health and wellness at the worksite, and impact workplace healthy living behaviors.¹⁹ This research reports overall that having a well-being champion is associated with a more favorable perception of the organization. With respect to specific well-being measures, the favorable associations are similar or stronger, but it is set against a background of already high favorability, so it is more difficult to detect differences in some areas. Importantly, none of the All-Staff Survey questions exhibited a statistically significant unfavorable pattern by well-being champion status, further exhibiting the potential as a positive organizational influencer within the work environment.

Strengths

Notable strengths of this study were the large number of employees, impressive response rate, functional and geographic diversity, and

consistency of the observed favorable impressions across personal and organizational domains. Although these data were self-reported, several measures were in place to ensure confidentiality of responses, thus providing an opportunity for employees to respond without concern of responses linking to an individual.

Limitations

The results of this study indicate an association between awareness of a well-being champion and positive measures of well-being and staff satisfaction; however, the observational and cross-sectional nature of our analysis cannot determine causality. Exposure data reflected self-reported awareness of a well-being champion and not necessarily the actual presence of a well-being champion. Unfortunately, we could not validate that awareness indeed represented the existence of a well-being champion because the survey was anonymous. Therefore, some subjects exposed to a well-being champion may be unaware of it and would have been classified as nonexposed. In addition, well-being champions are included in the respondents to the All-Staff Survey to respect anonymity, so there is the potential their responses bias the data. Furthermore, under ideal conditions, a study like this would be approached using a cluster analysis rather than assuming independence to the exposure. The anonymous nature of the survey and other methodological issues precluded such an analysis. Finally, given the large number of subjects, most comparisons were statistically significant, even though some differences could not be considered meaningful from the well-being or organizational standpoint.

Implications and Next Steps

The results of this research suggest that a WCP could impact well-being and satisfaction when implemented as part of a comprehensive employee well-being strategy. As institutions and corporations further emphasize employee well-being, this research offers support for the investment and implementation of a WCP for a large dispersed employer. To replicate our reported results, we believe organizations would need to have a comparable level of commitment to support the champions in

their role; develop, validate, and promote a comprehensive WCP; and be prepared to sustain and assess the WCP with respect to both near- and longer-term success metrics. Well-being champions have the potential to impact employee well-being and staff satisfaction at the individual and organizational level, as they extend the reach of well-being staff and have direct interaction with employees. Further prospective research, perhaps using a randomized study design, would provide additional data regarding a potential cause-effect relationship between a WCP and increased employee well-being.

CONCLUSION

A comprehensive WCP appears to promote better employee engagement, satisfaction, and perception of personal well-being. Having a well-being champion in a work unit, coupled with a comprehensive employee well-being strategy, is associated with a more favorable perception of the organization, suggesting that well-being champions could be positive influencers within the work environment.

Abbreviations and Acronyms: WCP = well-being champion program

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