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THE MAYO MODEL FOR WELLNESS

AN EXPERT INTERVIEW WITH DR. PAUL LIMBURG

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with

DR. LIMBURG

ABOUT **PAUL LIMBURG, MD**

Paul Limburg, M.D., M.P.H., is a consultant in the Department of Internal Medicine and professor of medicine at Mayo Clinic. He is a prolific author, speaker and researcher, specializing in chronic disease prevention. As the medical director for the Office of Wellness, Dr. Limburg oversees Mayo Clinic's wellness strategies across employees, patients, consumers and community members to ensure a consistent approach in the way Mayo Clinic tries to improve health and well-being across these population segments. Dr. Limburg is also a local youth sports coach, member of the Augustana College Athletic Hall of Fame, and retired trumpet player.

ABOUT **RYAN PICARELLA, MS, SPHR**

As President of WELCOA, Ryan works with communities and organizations around the country to ignite social movements that will improve the lives of all working people in America and around the world. With a deep interest in culture and sociology, Ryan approaches initiatives from a holistic perspective that recognizes the many paths to well-being that must be in alignment for long-term healthy lifestyle behavior change. Ryan brings immense knowledge and insight to WELCOA from his background in psychology and a career that spans human resources, organizational development and wellness program and product design. Prior to joining WELCOA, Ryan managed the award winning BlueCross BlueShield of Tennessee (BCBST) Well@Work employee wellness program, a 2012 C. Everett Koop honorable mention awardee. Since relocating to Nebraska, Ryan has enjoyed an active role in the community, currently serving on the Board for the Gretchen Swanson Center for Nutrition in Omaha. Ryan has a Master of Science in Industrial and Organizational Psychology from the University of Tennessee at Chattanooga and a Bachelor of Science in Psychology from Northern Arizona University.

What does the medical community really think about the wellness industry? What is the Mayo Model for Wellness? Dr. Limburg from the Mayo Clinic sits down with WELCOA President Ryan Picarella to hear about how one of the most cutting-edge clinics for disease treatment is jumping head first into health promotion.

I had the opportunity early last year to visit the Mayo Clinic in Rochester, and I really left blown away. I was amazed at not just the rich history, but how entrenched the Mayo culture is in every touch point among patients, staff and visitors. What I would love to start our conversation with today is a discussion about how a very clinical institution has begun to embark on the wellness journey. I think for too long prevention and treatment have existed at two different ends of the spectrum, and there has not really been enough of an overlap. So my first question is, in your own words, at what point did Mayo really decide to take a hold of the prevention and wellness piece and integrate it with the clinical side of the spectrum?

DR. PAUL LIMBURG Thanks Ryan. At Mayo Clinic, we are informed by our past as we look forward to the future. So much of what we do is targeted to a new time but has roots dating back to the founding members of Mayo Clinic. Even in 1928, Dr. Charles Mayo made the quote, "The object of all health education is to change the conduct of individual men, women and children by teaching them to care for their bodies well." That I think is a philosophy that has carried forward over the almost one hundred years since the time when Dr. Mayo made that quote. It really has positioned us to make wellness part of the overall health journey. So the way that we are looking at delivering our Mayo knowledge, if you will, is to take what we had traditionally provided in a direct clinician-patient relationship and extend it to individuals who might benefit in other sorts of relationships.

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Our leadership has now challenged us to do something on a global scale—bring Mayo Clinic expertise to 200 million people around the world by 2020. Wellness and healthy living as front and center concepts make our message particularly relevant to a wider population and help us form those new relationships. We also recognize that sometimes wellness may be too broad or confusing of a term for some. Really what we are trying to do is help people live longer, healthier, happier lives. In that context, wellness and the things

that we position under the Mayo Clinic Model of Wellness are relevant to just about everybody. So we want to extend our knowledge in ways that are scalable outside of traditional clinical practice and be able to deliver that expertise to anyone who might find value from such a relationship.

★ So, in your role, you oversee both wellness for patients and for the employees at Mayo as well, correct?

PL That's correct. Mayo Clinic created the Office of Wellness several years back to define and deliver our wellness strategies, which intentionally touch several population segments. This includes our employees, but we also have external corporate relationships where we use the same or similar approaches that we would use internally with our own staff. In addition, we apply these strategies to better serve our patients, consumers and community members who are looking for wellness expertise from Mayo Clinic but are not necessarily a Mayo Clinic employee or patient. That is part of our responsibility—to be working at multiple levels to try to improve health and well-being.

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★ How and why did this shift towards wellness occur, and when did it occur? Would you say this is a relatively new thing for Mayo or has this been evolving over a longer period of time?

PL I think it is more of an evolution than a dramatic shift or a transformation in our approach. For example, we always have provided lifestyle change and behavior change recommendations to our patients. We see about 1.3 million patients a year across all of the Mayo campuses—and that is a substantial number, but if we want to do something in an even more extensive way, we need to bring that expertise out more broadly, beyond the clinician visit. We see our growing wellness activities as just an extension of the *knowledge* that we have always provided to our patients, but now being brought out through different partners or different channels like books, newsletters and website consumer health information, to name a few. It is not the knowledge that is new; it is a different focus on how we extend our reach, and how we pursue collaboration opportunities where we are mission-aligned and can

reach new market segments or target audiences with the expertise that we have been honing through our research and education and our clinical practice for more than 150 years.

★ One thing that was so impressive during my time there was just the efficiency at which the Mayo operates. I had a completely integrated experience among various specialists, everybody having access to all of my information and being able to look at my health in a comprehensive way. The clinical model of care you guys follow feels light years ahead of everybody else. Is there a similar model of *wellness* that you leverage in your approach to lifestyle improvement?

PL It all is based on an integrated delivery. We want to make sure that the information, the expertise that we provide meets somebody's immediate need but also extends and helps them on their lifetime health journey. It does not have as much impact if we separate the wellness information from the healthcare information. They have to be really hand-in-glove because healthcare and wellness information will apply differently to patients at different points in their lives based on where they find it to be of most value. The Mayo Clinic model of care is based on a team-oriented, evidence-based approach, and we apply that same philosophy to our wellness offerings.

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We have prioritized specific areas under the Mayo Clinic model of wellness that are the same challenges that the healthcare system and the broader population face. Specifically nutrition, weight management and physical activity represent key concerns, and we have specialized knowledge and expertise in these areas. Healthy sleep is also an important area of focus, to which there has probably been more limited attention paid outside of Mayo, but we have clinicians and researchers here who are helping us deliver effective solutions in our clinical practice and beyond. Stress and resiliency is another major component of the Mayo Clinic model of

wellness, and it is a challenge that both corporate America and the general public are trying to deal with in a variety of ways. Our goal is to help people deal with environmental and other stressors in a way that allows them to be as productive and be as happy as they can be.

Tobacco avoidance is another area of emphasis in our wellness portfolio. The medical community has recognized tobacco use as a major public health issue for many, many years now, but it's still a significant problem on a global scale. In collaboration with our colleagues in the Mayo Clinic Nicotine Dependence Center, we provide tobacco cessation services that can effectively reduce this problem. Lastly, the Mayo Clinic model of wellness includes an emphasis on preventive services. There are still many preventable diseases for which we can do a better job of promoting education and awareness, leading people towards the activities that may reduce their risk such as lifestyle changes or access to the right screenings for hypertension, cancer, and other conditions. Again, a team-oriented, evidence-based approach is what forms the foundation of the Mayo Clinic model of wellness.

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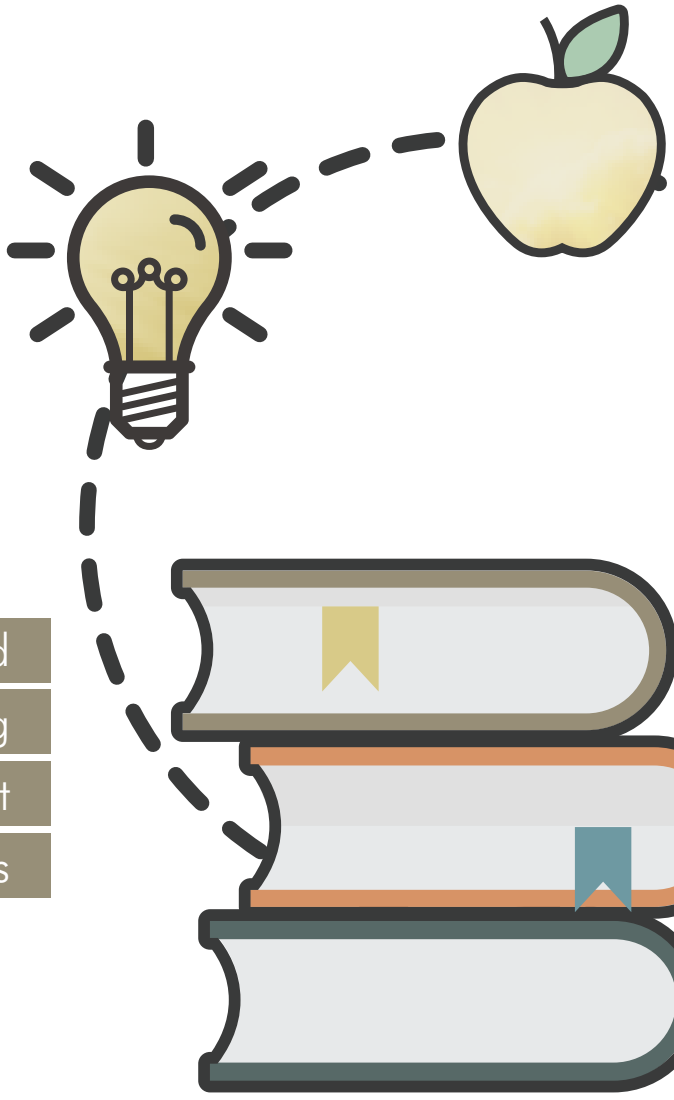
★ So I am curious where your passion for wellness come from. Is it something that you have always been interested in? What is your personal story as it relates to wellness?

P L Great question, thanks. In my clinical practice as a gastroenterologist, I primarily see patients with newly diagnosed GI cancers, or people who are at risk for these malignancies. Over time, I became more and more interested in doing research to identify ways to prevent cancer, which then transformed and evolved into prevention and wellness of chronic diseases more broadly. So it is something that I live on a daily basis in my clinical practice. I also have a research program that is focused on cancer prevention, and even some of the business activities that I and many others are involved with here at Mayo are related to bringing our wellness expertise out as far as we can reach beyond Mayo Clinic, to a global audience that hopefully finds benefit from the relationship.

★ Mayo is so fortunate to have that new seven-story building completely dedicated to wellness. Correct if I am wrong, but you can do anything down to getting your golf swing analyzed while you are there, get a massage and probably work out in the same day. Pretty cool stuff. Why was that investment important to Mayo and what would you say are the primary goals for that particular facility?

P L In order for us to be the best healthcare providers, we need to be role models for the people that we serve—patients and otherwise. Through generous benefactor support and institutional commitment we are able to provide outstanding wellness facilities for employees in Rochester and at other campuses across our organization, so our staff can take care of themselves in order to be better caregivers to our patients. The Dan Abraham Healthy Living Center was made possible through a generous gift from Mr. Abraham. It started out as an employee facility which is what the lower floors are comprised of and Mayo Clinic staff who work in Rochester can use those lower floors. There is a wide range of activity equipment and fitness classes, cooking classes, wellness coaching, and much more. The building was recently expanded to serve patients as well. The third floor is a state-of-the-art sports medicine center and that is designed for everyone from high school athletes to elite athletes or executive athletes—anybody who is interested in taking their game to the next level if you will.

The fourth through the seventh floors of the Dan Abraham Healthy Living Center house the Mayo Clinic Healthy Living program. That program is focused on lifestyle and behavior change, and sustainable behavior change is the ultimate goal. The Healthy Living Program is open to everyone. It provides immersive individualized programs centered on our cornerstones of nutrition, physical activity and resiliency. The significant presence that the Dan Abraham Healthy Living Center has created in Rochester really does demonstrate to our patients and our community the commitment that we that we have made to wellness and healthy living more broadly. Lastly, it also serves as a research laboratory where we can experiment with some of the new offerings that we are building. So as we consider a new approach in stress and resiliency, for example, we have a nice opportunity to first work with and learn from our own employee groups, then bring new, more informed offerings into our patient care activities and into our corporate programs delivered outside of Rochester.



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★ I think one of the challenges that a lot of health and wellness practitioners and even medical doctors struggle with is finding ways to motivate people to take that first step to make a change. Whether it is moving more, eating better or quitting smoking. What are some learnings or experiences throughout your career, whether it is from working with patients or working with the employees at Mayo, that you can share to advise readers on how to motivate people to begin to take that first step towards a healthy lifestyle?

P L Well, a couple of things Ryan. I think that it is not one-size-fits-all, and I think in the past maybe we have had too narrow of a perspective about what is going to work and then we just try to shoehorn that into every sort of a situation particularly with respect to workplace wellness. Experience is telling us that a more individualized, holistic approach should yield greater benefits. Effective and engaging corporate wellness programs also need to be aligned with the goals of the organization, as well as the goals of the individuals who work for that organization. Assessing the readiness for change in both of those settings, the organization's readiness for change and the individual's readiness for change, is critical. The idea of an integrated suite of offerings and activities centered on lifestyle really makes the most sense to me with respect to instilling sustainable changes. Moving forward, corporations that adopt a more holistic view to wellness, rather than just looking at engagement rates in individual offerings like a health assessment, are more likely to achieve success.

Where we are headed as an organization is really trying to do a better job of assessing and changing organizational culture as it relates to health and wellbeing, which is multidimensional as you are well aware. Employee wellness programming is an important facet of the overall portfolio, but we also need to provide training and support at the leadership level, so that wellness is viewed as a key part of the principles that drive the business and also so leaders can most effectively serve as role models. I think that combined efforts to promote all of the different domains that make up a positive "culture of health" are more powerful than just focusing on any of the individual elements alone.

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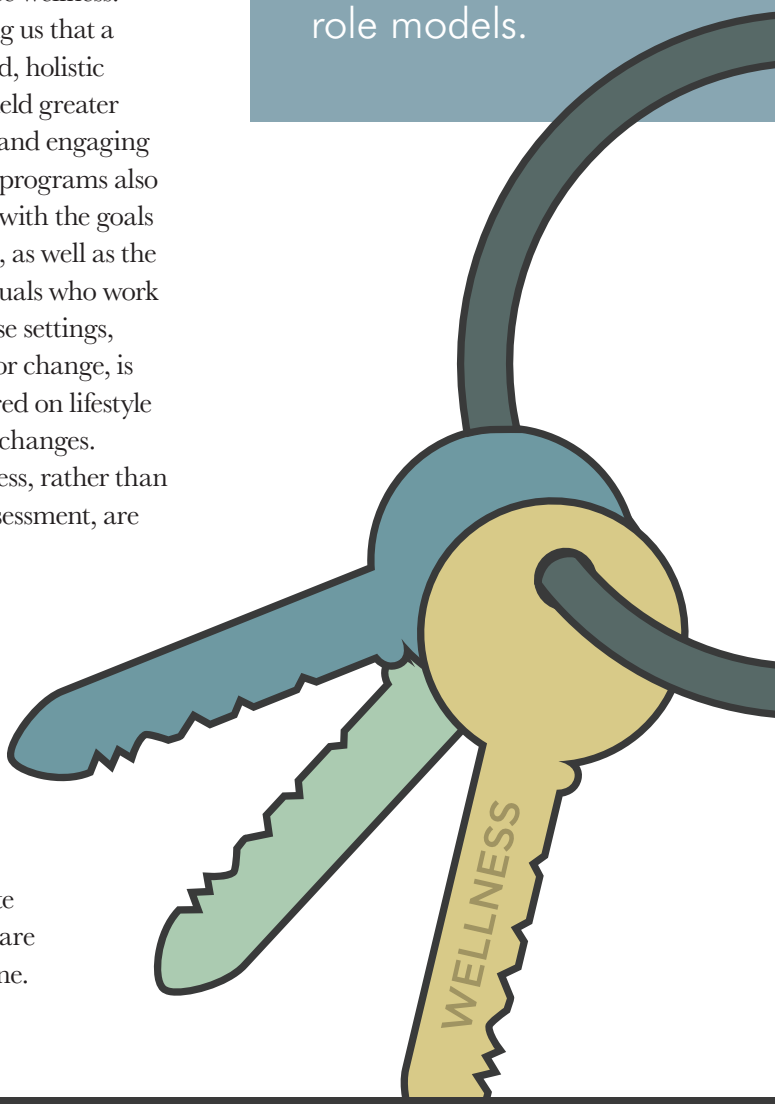

★ Great answer. One of the reasons why I am so impressed with the lifestyle center is that it really integrates three important tenants of culture that WELCOA believes should be aligned in a high-performing organization: people, place and purpose. *People* is has been the traditional focus. Place is really starting to think about the built environment and how the physical environment really impacts behavior and health. Then the *Purpose* component, which I think you guys have built in as well with the prayer rooms and the meditation rooms and getting people to connect with strong intrinsic motivation to make a change. That brings me to the next question; how does Mayo measure the value of your employee wellness program? Is it a cultural approach like you referenced, or are there other types of metrics or indicators that you look at to measure the success of your program?

> It is really hard to… make a dramatic shift in focus away from sick care and toward health and well-being. But I do think that the broader communities are listening.

P L It is always a work in progress. We are evolving as an organization and we are working through the Office of Wellness with our colleagues in our HR benefits program to try to think through, under this culture of health framework, what is it that is most important to us as an organization so that we can provide the highest level of health and well-being to our employees for all the reasons that we have talked about already. It has to go beyond healthcare spend and include performance, productivity, absenteeism, turnover, job satisfaction, sense of purpose, etc. However, some of these elements, alone or in combination, can be a bit more difficult to measure. We have taken steps in the right direction. We are starting to apply some of our learnings from our periodic staff survey to help shape our focus on issues like stress and resiliency, and are putting more emphasis on value on investment rather than return on investment.

★ It seems like that there has been some skepticism within the provider community for employee wellness as an industry. Do you think that perception is beginning to change?

P L I would love to say unqualified yes. People are starting to pay more attention to wellness, and maybe that is a first step towards doing things differently. In healthcare there are so many demands for time and so much information that is available and needs to be

communicated in a very short time period (if we are talking about a typical clinician visit). So it is really hard to get everything in and really to make a dramatic shift in focus away from sick care and toward health and well-being. But I do think that the broader communities are listening. There are some unlikely groups who are really starting to make advances in the wellness spacing such as technology companies and consumer goods companies who are starting to have an interest because they see how their products, such as a performance clothing line for example, could be coupled with expertise from wellness practitioners to deliver something that is of even more value to the markets that they are trying to reach.

The way that I might frame it is, when somebody asks if we can afford a commitment to wellness, I would ask them to consider the other side of the coin. I other words, can we afford not to commit to wellness? The predictable consequences of staying on our current course with respect to some of the most serious issues encountered in healthcare today and for the foreseeable future are substantial but are also in many ways potentially preventable through lifestyle change and other interventions. So I think the journey ahead is becoming clearer, but we still have a ways to go.

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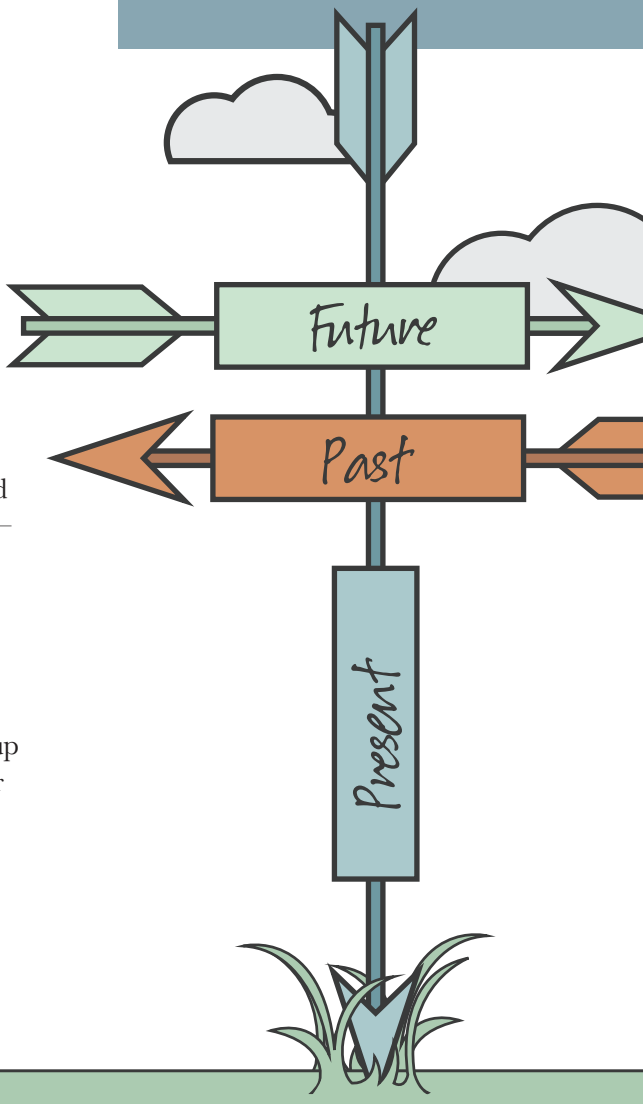

★ The last question I have about your program is regarding families. How do you incorporate families into Mayo programs? Can they use the lifestyle center along with the rest of employees, or what steps have you all taken to extend programming to dependents?

P L Focusing on families is critical to success in many of our prioritized wellness areas, and I would broaden it to include whatever the support system is for that individual and what they find to be central to their purpose in life. To the extent that we can, we build programs that are less individually-focused and more focused around all the influential people in a person's life who can help make a difference—particularly when it is dealing with behavior change.

★ Thanks for your time, Doctor Limburg.

P L Thanks, Ryan. It is great to have the opportunity to align with another group who is doing this important work so we can further invigorate and accelerate our common strategies. Hopefully having these productive conversations will lead to real advances for the people we're all trying to serve.

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