

# Healing Healthcare:



## A Guide for Transforming Healthcare Systems Through Plant-Based Nutrition and Lifestyle Medicine

by The Plantrician Project

The  
**Plantrician Project**  
*Planting the seeds of change™*





**HENRY**  
FOUNDATION

**The Henry Foundation** was established by James C. and Paula A. Henry on August 9, 2006, to improve the quality of life for residents of Midland, Texas. The mission is “focusing resources to change lives.” To date, millions have been invested locally in projects which have a broader impact on the community in the areas of education, human services, and health. The Plantrician Project is part of Midland Memorial Hospital’s Midland Lifestyle focus, which The Henry Foundation believes will have long term benefits for the community and the good of Midland Health.



**Scott Stoll, M.D.**

Dr. Stoll is the co-founder of The Plantrician Project, the International Plant Based Nutrition Healthcare Conference, the International Journal of Disease Reversal and Prevention, and the Regenerative Health Institute, a unique collaborative project with the Rodale Institute that integrates health. He is a member of the Google FoodLab, serves on the Advisory Board at Whole Foods for their healthcare clinics and served as a member of the Whole Foods Scientific and Medical Advisory Board. Dr. Stoll is the chairman of the Board for The Plantrician Project and chief medical director for the Rouxbe cooking school.

Every year Dr. Stoll hosts the very popular one week health immersion, Dr. Stoll’s Total Health Immersion in Naples, Florida and helps attendees recover lost health, overcome addictions, and restore emotional balance. In addition to authoring several books and scientific articles, hosting his own daily TV and radio programs, Dr. Stoll has appeared on numerous national shows including the Dr. Oz show, hosting a 2018 PBS special Food As Medicine, and numerous documentaries including Eating You Alive, Wait till its Free, and The Game Changers. As well as being a published author and member of the 1994 Olympic Bobsled Team, he is a highly sought-after international speaker. Dr. Stoll and his family live in Bethlehem, Pennsylvania.



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by Scott Stoll, MD, FABPMR,  
Co-Founder and Chairman, The Plantrician Project

and

Sarah Moran



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# Healing that Lasts

In Midland, Texas, residents come together for a monthly community meal. It's a big potluck, started by a Midland Health physician, where people sample whole food, plant-based meals and learn about everything from cooking to meditation to healthy sleep habits.

At Lee Health in Lee County, Florida, a specially designed garden allows patients to receive physical therapy treatment in the fresh air and sunshine, among plants and flowers.

And at Eskenazi Health in Indianapolis, Indiana, a representative from every department was represented in an 80-hour mind-body medicine course. Now a staff member from each department can be involved in supportive care—from medical staff to the people who work in billing—and they've learned how to identify and meet a patient's emotional needs.

A culture of wellness and a focus on lifestyle medicine have taken root at these leading healthcare systems and others. Across the country, healthcare systems are looking to improve quality of life by supporting and promoting all elements of wellbeing: body, mind and spirit, and by teaching self-care to their employees, patients and communities.

They're teaching people how to prevent, improve and even reverse disease through daily lifestyle choices about food, physical activity, stress management and sleep. It's all about sustainable solutions that improve health for the long haul.

## The Need is Clear

This lifestyle medicine approach is critical, as health and healthcare systems around the world face unprecedented threats. Despite years of cautionary research and news reports, chronic lifestyle-related disease and obesity continue to rise at record levels:

- Obesity rates tripled between 1975 and 2016.
- The global epidemics of type 2 diabetes, heart disease, cancer and dementia mean chronic non-communicable diseases have become the leading causes of death and disability.
- Nearly 80 percent of healthcare costs are related to the treatment of lifestyle-related disease, according to the Centers for Disease Control and Prevention (CDC).



Midland Health in Midland, Texas



Lee Health in Lee County, Florida



Eskenazi Health's rooftop garden at night



Faced with the reality of these challenges, a small but growing number of healthcare providers and healthcare systems have responded proactively. They've implemented substantive programs built on a foundation of nutrition and lifestyle intervention, and they're getting great results.

This focus on whole food, plant-based diets and emphasis on lifestyle came about after extensive research. Leaders in these forward-thinking healthcare systems dug into the data and discovered that food is the most effective way to prevent, suspend and reverse the most common chronic diseases.

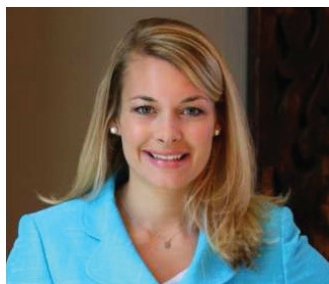
Yet a major challenge faces the people leading this change and modern healthcare in general: the volume-based reimbursement model, which financially rewards higher patient volume, procedures and testing. Transitioning to a value-based model that uses nutrition and lifestyle as treatment can perplex conventional systems and lead to questions like, "How can this work?" and, "What's the return on investment?"

This guide answers these and other challenging questions. Read on for real-life, practical guidance from leading healthcare systems and providers across the country who have successfully implemented programs rooted in lifestyle medicine.

These visionaries succeeded without a blueprint. Their passion, vision, unity and relationships were the currency that opened doors, solved problems, created solutions and changed cultures. Through this guide, they share their knowledge and wisdom to help you and your healthcare system cultivate change and transform your organization.

## Ahead of the movement

“The whole lifestyle medicine philosophy is really in line with population health management and a value-based healthcare model,” says Marcy Madrid, vice president of planning and marketing at Midland. “It’s looking at the root cause, rather than just giving a ‘band-aid’ or using a procedure or pharmaceutical that will send patients back to us over and over again.”



*“The whole lifestyle medicine philosophy is really in line with population health management and a value-based healthcare model.”*

– Marcy Madrid,  
vice president of  
planning and marketing  
at Midland Health.

As the movement toward population health puts more responsibility on healthcare systems to give better quality care and show meaningful improvement, these pioneering hospitals are already in a good position. They’ve figured out how to make their wellness mission work strategically so that it’s good for people and good for business.

But nobody said being a pioneer is easy. “We want to deliver care that’s more preventative, but the system is still set up as fee-for-service, and many of the reimbursement models aren’t meeting us there yet,” Madrid says.

Wayne Jonas, M.D., is a family physician, researcher and author who works with health systems around the country to help them make successful transitions to integrative health. Many of those efforts are done through his role as executive director of Samueli Integrative Health Programs, a nonprofit philanthropy that empowers patients and doctors with solutions to enhance health, prevent disease and relieve chronic pain.

“In the U.S. we’ve developed a system that’s wonderful for management of acute care—we can save your life and stop a heart attack, change a joint or remove a cancer extremely well,” Jonas says. “But what about creating health?”



Wayne Jonas, M.D., researcher, author and executive director of Samueli Integrative Health Programs

Jonas says he sees increasing awareness that things need to change. “We’re seeing costs go up, but health outcomes are not improving, so it’s clear we’re getting less value. Yet we don’t necessarily know what to do about it, and even when we do, there’s often resistance to change.”

Nonetheless, forward-thinking healthcare systems are finding ways to create health. They’re transforming their organizations to focus on lifestyle medicine and become centers of wellness, despite the challenges. They’re moving forward with help from passionate leaders and employees, other clinics that are on the same path and support from consultants.

“All of this is just the right thing to do,” says Staton Awtrey, M.D., a cardiothoracic surgeon at Midland. “And not only is it the right thing to do, it’s the cost-effective thing to do. This is the next frontier, and as more large studies demonstrate the significant return on investment, we will see a wholesale change in healthcare in this country. When that happens, insurers will see they can save a tremendous amount of money doing the right thing. It will be obvious that this is the strategy that needs to be embraced.”

The health systems that already have a solid footing in lifestyle medicine have documented a return on investment or they anticipate a financial return in the future. Beyond that, the intangible outcomes are priceless, says Awtrey. “Seeing my patients transform and seeing their quality of life improve radically is the most rewarding thing.”

Watch a short video  
chronicling Midland Health’s  
transformation to focusing on  
food and lifestyle medicine.  
<https://vimeo.com/239522452>



### **Forging a new path**

Ironically, when it comes to creating a culture of wellness, it's healthcare systems that have an extra set of challenges. The obstacles in an industry intended to heal make it hard to focus on prevention, lifestyle choices and overall wellbeing. Jonas describes some of the difficulties:

- **Education:** Medical schools and medical programs don't include much, if any, training on how potent lifestyle choices are when it comes to preventing or improving disease. Medical schools also have minimal, if any, training on how to use food as medicine.
- **Time:** The system still makes money off volume rather than value, so providers don't have time to sit down with patients to review underlying lifestyle factors or provide ongoing support for change.
- **Tools:** Electronic documentation processes are becoming even more cumbersome, which means providers spend more time documenting than addressing underlying social determinants.
- **Coverage:** "The biggest obstacle is that we're paying for the wrong things," Jonas says. "In general, we don't cover the things that prevent and reverse disease—we only cover the things that treat the consequences once it occurs."

In order to overcome these challenges and make the needed transitions, Jonas suggests hospitals "create an overall framework that directs most activities toward the underlying factors that promote health and healing."

Jonas and the Samueli Institute worked with Lee Health, for example, and shared tools such as their "optimal healing environment" model as a guide for that framework.

"No. 1, you have to have leadership—especially the CEO and executives—wanting to drive this," Jonas says. You also need a group of innovators and a robust improvement process in the hospital so you can fuse new ideas into day-to-day routines.

Indeed, a 2016 article in Harvard Business Review looked at the research on organizations that had encouraged wellness successfully, and leadership was noted as essential. The review's findings on strong wellness initiatives in corporate settings and other organizations can help healthcare triumph as well:

- **Leading by example.** A successful program begins with a sincere commitment and ongoing support from leaders. These leaders lead by personal example and indicate how much they value wellness by incorporating it into the organization's vision, mission and purpose.
- **Building the culture.** Health and wellness need to be thoughtfully integrated into every element of the business. Creating this culture in daily work life includes things like offering healthy food, creating walking trails, providing social support and developing health-promoting policies.
- **Engaging employees to own the program.** Instead of imposing a plan upon employees, ask them for their help and input. Find out what's important to them and what wellness initiatives they'd like to see. This engagement can be achieved through surveys, focus groups and wellness committees.
- **Communicating well.** Communication needs to be done strategically, frequently, through multiple communication channels and in a way that's targeted to the audience. As the article explains, successful communication "boils down to getting clear messages out to workers: this is what the program entails, here is how it works, here's what's in it for you, and here are ways to get involved. This can overcome some of the top barriers to program participation and success: lack of awareness, lack of interest and suspicions about employers' motivations."
- **The right incentives.** Paying people or rewarding employees for health outcomes or habit changes may not work in the long term. However, smart incentives that encourage people to adopt a healthier behavior that they will find satisfying is more likely to stick. For example, if the incentive gets employees to work out together in some activity they enjoy, those employees will notice they feel better, healthier, more productive at work and more socially connected.
- **Measure and monitor.** Before you begin, develop a way to evaluate the return on investment and the value you are creating.

**Another great guide for healthcare systems looking to transform comes from leadership expert and Harvard Business School Professor John Kotter, Ph.D. Kotter developed an eight-step process for leading change:**

**STEP 1: Create a sense of urgency**

**STEP 2: Build a guiding coalition**

**STEP 3: Form a strategic vision and initiatives**

**STEP 4: Enlist a volunteer army**

**STEP 5: Enable action by removing barriers**

**STEP 6: Generate short-term wins**

**STEP 7: Sustain acceleration**

**STEP 8: Institute change and establish culture**

A successful transition to focusing on wellness must mind these principles. It must be strategic, intentional, well-organized and consistent. And yet there's also a strong grass-roots component, pioneering hospital leaders say.

Enduring change is first cultivated within a small, passionate and committed group of leaders who are willing to steward the vision. Early momentum is developed through a clearly communicated narrative that demands urgent intervention from leadership and employees. Successful change, according to Kotter, requires support from 75 percent of the leadership because change is led, not managed, by an inspired and influential coalition.

Next, the vision is clarified and simplified so that it can be communicated as frequently as possible in a short five-minute speech or in one to two sentences. It must effectively describe the immediate need and an elegantly-proposed solution.

Early implementation requires the vigilant identification of obstacles and quick, agile strategic plans to maintain the pace of transformation. Short-term wins, according to Kotter, should be broadcast through every available medium to celebrate success and reaffirm support for the vision. (However, short-term wins shouldn't be viewed as completion of change, rather they should motivate more intensive effort and implementation of the next steps).

Finally, as the change initiative becomes more integrated into the organization's system and culture, the driving coalition should always strive for continuous improvement. They must also recruit talented team members who can assist in shaping and establishing the new culture.

With a good overarching structure in place, passionate and enthusiastic people naturally spread spontaneous good ideas, large and small. Take this example from Christin Collins, system director of health and wellness at Lee, and her colleague Scott Kashman, chief acute care officer at Lee and co-author of the book, "Mindful Healthcare: Healthy Team, Healthy Business."

The two were leading a leadership team retreat. They started their meeting with a "calm palm" meditation along with a 7-minute guided meditation. The energy in the room shifted, and the meeting got off to a great start.

"One by one, people started saying, 'I'm going to start doing that in my department—begin meetings with a meditation,'" Collins says. "It wasn't like we said, 'Here's a policy and you need to meditate before meetings, and here's a beautiful video and a website about how to do that.' It just happens organically like this, one piece at a time." Experience is often the best teacher. In the case of nutrition and lifestyle, the experience of true health energizes and solidifies change.



Successful healthcare systems are making transitions from the inside out, and then out beyond that. In other words, they're starting internally by focusing on the people inside their building and then extending out into their broader communities and surrounding areas.

Educating and involving employees is foundational, these leaders say, and it's a key to transformational success. "We can't effectively care for others unless we learn how to effectively care for ourselves," says Lisa Harris, M.D., CEO at Eskenazi.

Many of the healthcare systems started their transformation by using the Community Health Improvement Program (CHIP). CHIP is a proven 9-week lifestyle medicine program that emphasizes plant-based nutrition and discusses physical activity and stress management.

Another option for patient and employee education is the Ornish program. It's an 18-session, 9-week lifestyle program focused on intense cardiac rehabilitation. Ornish focuses on food and exercise as well as mental and emotional wellbeing, and it's usually covered through Medicare and insurance. Research shows both CHIP and the Ornish program effectively improve health and lower costs.

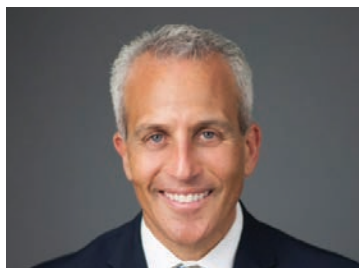
*"We can't effectively care for others unless we learn how to effectively care for ourselves."*

- Lisa Harris, M.D.,  
CEO at Eskenazi.

Knowing the incredible power of food, the forward-thinking healthcare systems have also made big changes in their cafeterias and inpatient meals by:

- Using organic produce grown in on-campus gardens.
- Widely expanding their whole food, plant-based menu offerings.
- Removing fryers, sugary drinks and slushy machines.
- Moving healthy options to prominent positions in their cafeterias.
- Subsidizing the healthier options in their cafeterias to encourage and reward employees for making good choices.

Midland spent a lot of time educating hospital staff about the research and data on lifestyle medicine and the power of a whole food, plant-based diet to improve health. Having employee buy-in was critical for success. As employees started to make personal changes and feel better, they became more passionate about spreading the wellness word. Midland also offers employees the "Better U" program, which is a website and wellness portal that provides all kinds of free wellness information, instructions, videos and online courses.



*"When our employees take better care of themselves, they're in a better position to take good care of their colleagues, patients, patients' families and the greater community."*

- Scott Kashman, chief acute care officer at Lee Health.

Eskenazi offers wellness coaching to its employees and teams with its Go365 program. Employees who participate in Go365 receive information about how to make healthy decisions and can earn rewards for wellness activities. In 2017, the program's inaugural year, more than one third of employees participated.

At Lee, health coaches reach out to employees to offer free support or resources and to plug those employees into targeted programs that address specific health issues. Lee also offers, for a fee, a 10-day course where participants receive 20 plant-based meals. The participants have labs drawn before starting the course and then again after the 10 days. The lab work has demonstrated that participants lower their glucose, cholesterol, triglycerides, HDL, LDL, blood pressure (systolic and diastolic) and weight. The more that employees experience these kinds of changes, the more they believe in the power of lifestyle choices.

Lee's Kashman says he has been focused on the wellbeing of employees throughout his career. "They're the ones who are taking care of our patients or supporting the people who take care of our patients," he says. "When our employees take better care of themselves, they're in a better position to take good care of their colleagues, patients, patients' families and the greater community."

Part of focusing on the health and wellbeing of your team, Kashman says, “is inviting their feedback on ways to create a better healing environment within the system. Ask them for ideas on improving daily workflow or patient outcomes or anything else related to wellbeing.” After all, Kashman says, “if your employees are healthy and happy and feel valued, supported and engaged, they will deliver exceptional care, provide helpful ideas and drive performance.”

“I always feel that healthcare needs to be ‘patient centric’, yet we’re always hearing about issues with burnout and resiliency among healthcare providers,” he says. “Taking care of employees and showing you truly care can help prevent burnout and turnover,” he adds.



Attendees of the first Food Is Medicine event select healthy afternoon snacks



## Investing in wellness is good business

The existing research on corporate wellness programs can be a helpful guide as healthcare systems look to make organizational changes focused on wellness.

“The most successful and healthiest companies create a culture of wellness that permeates every aspect of the business, from the cafeteria to the food served at meetings to messaging and signage,” says Scott Stoll, M.D., co-founder of the Plantrician Project. “Successful wellness programs become seamless and embedded in every aspect of business like an ethos of health—these programs should be seen as equal to things like sales and marketing or business and product development. And the most successful programs begin with food as the foundation.” Comprehensive wellness programs include education and support on nutrition, smoking cessation, physical activity, sleep, stress management and safety. When these efforts are done right, the data shows it does pay off for employees and employers:

- A meta-analysis of 100 studies determined that for every \$1 invested in a wellness program, the return on investment was \$3.27 for healthcare costs and \$2.73 for absenteeism.
- Wellness programs that include a disease management component in addition to a lifestyle or preventative component have an even greater return on investment, according to 2012 research by the RAND Wellness Programs Study. These two-pronged programs yield \$1.50 for every \$1 invested. And the majority of the savings in this study came from the disease management component, which was directed at the 13 percent of employees who had active chronic disease. Helping this group make the right lifestyle choices produced a \$3.80 return on investment, with an average savings of \$136 per member per month.
- The companies that have these comprehensive programs have lower healthcare cost increases—their costs go up 1 to 2 percent per year, while the national average is a 7 percent rise, according to a 2014 article in Harvard Business Review.

At Lee, a system that covers nearly 20,000 people on its health plan, creating a culture of wellness and developing employee health programs has saved millions, says Sal Lacagnina, D.O., medical director of wellness and employee health at Lee. Employee wellness has had about a two to one return on investment there, and that’s what other leading hospitals have experienced, too.

To succeed, these changes need to be made thoughtfully, and they need to be fully integrated into the entire health system. “This can’t just be the flavor of the month, like ‘let’s do wellness for a few months,’” Lacagnina says. “You have to develop a wellness culture across the entire system and do a lot to actually walk the walk and talk the talk.”

## Changing minds, hearts and bodies

Showing people that their daily lifestyle choices and food habits play an important role in their health is a major change in many people’s thinking, says Madrid. Especially when they may be used to thinking, “Where’s the band-aid?” and “Can’t I just take a pill?” which is how many people view health.

“The idea that we’ll give you the tools and information and support but you have to take ownership and responsibility and make some hard changes is a complete change in philosophy,” Madrid says. “It takes a lot of time and patience and grace.”



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– Sal Lacagnina, D.O., medical director of wellness and employee health at Lee Health.

So it's important to communicate with all of that in mind, Madrid suggests. Maintain sensitivity to the fact that it's hard to go against the grain in our culture. But when leaders and passionate staff have a solid footing in the research, that can help the process go faster and smoother. Consider the power of these two studies, for instance:

### **GEISINGER'S FRESH FOOD "FARMACY"**

Geisinger Health System, in Pennsylvania, started this program in 2016 to help improve care and lower costs for patients who have type 2 diabetes. They targeted patients in a county that had high rates of diabetes, food insecurity, poverty and unemployment.

Geisinger used electronic health records to identify patients who would meet the criteria of needing the most help. Then, patients who were interested enrolled in a program where they participated in group classes and learned about healthy foods, goals, exercise, mindfulness and how to manage diabetes. Participants also met the people on their care team, which included a program coordinator, nurse, primary care doctor, dietitian, pharmacist, health coach and administrative support.

Geisinger built a food pantry onsite at one of its clinics so that patients could come to one location for care and food. They partnered with their local food bank and area grocery stores to provide each participant with enough wholesome food, menus and recipes to make two healthy meals five days a week for their entire family. After 12 months, participants' average HbA1c levels dropped more than two points, from 9.6 to 7.5 (compare that to the typical drop seen when patients add a second or third diabetes medication, which lowers HbA1c about 0.5 to 1.2 points). That two-point drop is significant—it corresponds to a decrease in risk for serious complications or death by 40 percent.

The program was more effective than medication, and at a fraction of the cost. The "side effects" were that it significantly improved patients' cholesterol, blood sugar and triglyceride levels.

Diabetes is one of the most expensive medical conditions, but this Farmacy program costs only about \$2,200 per patient per year. Geisinger was able to collect data from the participants they insured. Those patients' mean annual healthcare costs dropped 80 percent, from \$240,000 per person per year to \$48,000 per person.



## MANNA STUDY

This was a pilot study from the Philadelphia-area nonprofit MANNA (Metropolitan Area Neighborhood Nutrition Alliance). The organization provides healthy meals and nutrition education to people who are living with chronic or life-threatening illness. They bring clients three balanced meals per day seven days a week.

Their recent study compared MANNA clients (who were receiving healthy meals) with a similar group of patients on Medicaid who did not receive MANNA services. After 12 months of comparison, the results showed:

- The average monthly healthcare costs for MANNA clients was 28 percent lower over the six months after they started services than the six months before they started services.
- The average monthly healthcare costs were 31 percent lower among the MANNA clients than the comparison group.
- The average inpatient hospital stay was 37 percent shorter among the MANNA clients than the comparison group.
- The number of hospital admissions for the MANNA clients was half that of the comparison group.

These studies and others show that not only is food medicine, it's *powerful* medicine—and one that's affordable and has all kinds of positive “side effects.”

Knowing this research on how potent food is for preventing, improving, and reversing disease, leading healthcare systems have made food a major focal point. They've emphasized fresh fruits and vegetables and whole food, plant-based menus for their cafeterias and patient meals.

In the book, “The Plant-Based Workplace: Add Profits, Engage Employees and Save the Planet,” author Gigi Carter (<http://plantbasedworkplace.com>) summarizes the financial case for plant-based meals at work. Looking at the epidemiological data and corporate studies, she writes, “the successful implementation of a plant-based workplace food environment will yield both tangible and intangible benefits, including lower direct healthcare costs, increased productivity, and improved quality of life for employees.” Carter goes on to write:

“In summary, beyond the fundamental financial and environmental business cases for a plant-based workplace, the ethical considerations are equivalent to the moral obligation many business leaders feel to provide a safe workplace. The ‘Health’ in EHS (Environmental Health and Safety) needs to be broadened to include all aspects of health, and not just acute health. Implementing a plant-based workplace does not take away someone's right to eat whatever they want; it's merely another way for businesses to show they care about the wellbeing of their workforce, while lowering healthcare costs, improving productivity and contributing to a food system that is more sustainable for our beloved planet Earth.”

As stated in the Academy of Nutrition and Dietetics Association 2016 position paper, “Plant-based diets are more environmentally sustainable than diets rich in animal products because they use fewer natural resources and are associated with much less environmental damage.”

Carter closes her book with an extension of this point:

“In closing, our global food system is interconnected with the health of our bodies and of the planet. The food a company provides has profound implications for productivity, profits, employee wellbeing, and the global ecosystem. It is time to create a set of workplace food-environment standards analogous to other safety standards required for responsible business practices. In the end, it takes system thinkers to truly understand the gravity of what is at stake, and to do what will undeniably be accepted as the right thing to do.”

As more health professionals recognize how intimately human health is connected with the health of our planet, sustainability is becoming more of a focus in hospitals and health systems. Using renewable energy, reducing waste,

choosing materials carefully and implementing a plant-based workplace can all improve the quality of our air, water, soil and food. And all of that will protect human health and wellbeing. Starting with food is one direct route to begin this emphasis on sustainability. (See [www.sustainablehospitals.org](http://www.sustainablehospitals.org) for more ideas).

In Carter's book, she outlines five high-level steps that can guide the implementation of a plant-based workplace (her book provides more detail on how to accomplish each step):

- STEP 1:** Identify core team and executive sponsor
- STEP 2:** Plan development
- STEP 3:** Design communication, education, and training
- STEP 4:** Inspire through engagement
- STEP 5:** Measure, track, and adjust

Indeed, among health systems that have made these changes, many described a process that aligns with Carter's recommendations. Leading hospitals and clinics have come up with fun and innovative ways of embracing whole food, plant-based eating.

- Eskenazi Health created a 5,000-square-foot rooftop garden called the Sky Farm. In their first year, they harvested more than 3,000 pounds of fresh vegetables, fruits and herbs that were used in inpatient meals and in the hospital's cafes. Eskenazi has gone from sourcing 3 percent of food locally to 50 percent—they're well on their way to their goal of 100 percent.
- Lee developed a program, led by dietitians and chefs, to teach at risk girls how to plan healthy menus, cook, navigate the grocery store and make healthy choices given financial and logistical considerations.
- St. Luke's University Health Network in Pennsylvania partnered with the Rodale Institute to open a 12-acre organic farm on the hospital campus. Food harvested from the Rodale Farm is used to make meals for hospitals in this health system.
- Wellness leaders at Midland started the monthly community meal, where about 600 area residents get an email invite to the potluck. If they're attending that month, they receive a plant-based recipe to make and bring along. Potluck meal themes include breakfast, holidays, picnic fare and dessert. Participants have access to all the recipes after the event. This simple community event has helped to inspire and organize significant change within the hospital system and surrounding region.



Eskenazi Health in Indianapolis, Indiana



*“Now every day we hear from someone in the community who says their life has changed—they got their life back.”*

– Christin Collins, system director of health and wellness at Lee Health.

### **Community influence**

At Midland, wellness champions saw so many opportunities to build relationships with the outside community that they decided to start a nonprofit organization. They connected with other Midland residents and leaders who are also passionate about wellness. Together, they formed the organization Healthy City to take over efforts that didn’t make sense for the healthcare system to direct. Now, Healthy City organizes community events, community meals, grocery store tours, cooking demonstrations and other efforts related to awareness and support.

Although not all of Healthy City’s efforts are focused on food, it is a major emphasis. After all, food is the most efficient way to help people improve their health. And since food has such strong social and emotional currents, it’s the most natural way to connect with the community. On top of that, food provides a natural and fun way to gather people together and create positive relationships.

Building meaningful, helpful relationships with the community is also a strong value at Lee. It’s an official part of one of their wellness positions. Healthcare ambassadors from Lee regularly speak at community events and meetings. They also invite area residents to hear internationally known speakers, participate in educational events and enroll in the CHIP program. Lee’s Healthy Life Centers offer the community about 50 free classes a month, including things like Guided Meditation for Wellness, Brain Boosters and the Whole Food, Plant-Based Series.



A master gardener gives advice on what to plant at the grand opening of the Midland Health Community Garden

“I would encourage hospitals to get involved in their communities in a very intentional way,” says Collins. “The health system can connect with the people who are already doing wellness work in the schools and businesses and organizations in the area,” she says. “You want to be part of the conversation and help connect the dots to create a great continuum of care.”

“I found it easy to get the community excited about their own health,” Collins adds. “At least it’s certainly easier than changing the entire healthcare delivery model.” Her approach was to lead by example and show anybody who was interested how Lee could support their wellness journey.

“One by one, they became our advocates and our spokespeople,” she says. “Now every day we hear from someone in the community who says their life has changed—they got their life back.”



## KEY TAKEAWAYS

- The current healthcare system is not sustainable. Costs are rising and so are chronic illness rates.
- Healthcare systems that want to focus on true health are challenged by lack of education, time constraints and reimbursement models.
- The shift toward population health and a value-based system aligns with the lifestyle medicine philosophy because they all lead to long-term, cost-effective, sustainable health improvements.
- Successful hospital transformation often involves reaching out into the broader community, connecting with people in an intentional, visible, consistent way.
- Among all the lifestyle changes people can make, changing the way people eat is the most effective way to reverse and prevent disease.
- Many healthcare systems find success by starting changes with their own employees as well as the patients they go at risk for. These systems often begin with lifestyle education classes, such as CHIP and the Ornish program.
- It's important to track data in order to prove that an initiative is financially viable and is improving health outcomes.
- An increasing number of studies and hospital experiences prove that focusing on lifestyle choices, and particularly improving the way people eat, provides a return on investment.
- Successful transformation often begins with a small group of passionate, dedicated individuals who develop and steward the vision.
- Communicating early and often about why changes are being made and the effect those changes are having can help overcome resistance and provide the inspiration to keep going. Clear and considerate communication should be a major emphasis.
- Support from leadership is critical for transforming a system. Leaders should be living examples who make thoughtful, intentional lifestyle choices.
- The shift to focusing on wellness and lifestyle needs to be deeply integrated into the entire system as a fundamental part of the culture, versus being treated as an “add-on.”
- Showing a return in investment through early initiatives and small “wins,” like results from CHIP and Ornish programs, can provide the momentum to keep going with a transformation and to expand and increase other initiatives.

# Midland Health





# CASE STUDY: Midland Health in Midland, Texas



Tomato plants at the Midland Health Community Garden

## **Selling Salad in Cattle Country**

When the Midland Health system adopted a new vision in 2014, to “be the healthiest community in Texas,” they *really* meant it—from the bottom of their hearts to the tips of their forks to the ends of their yoga mats. So began the hospital’s transition from “sick care” to true “health care.”

The new mission opened the door to a massive transformation that spread beyond the hospital walls and across their city in West Texas, a community known for ranching, oil and “more steak, please!”

Of course, change is hard. It’s hard for individuals, organizations and the national healthcare setup, as the leaders at Midland will quickly acknowledge. An organizational transformation that emphasizes lifestyle medicine is not for the faint of heart. But it is doable, and it is worth the effort. And as Midland has found, it’s incredibly rewarding.

## Healing results



*“I never leave it at surgery, I always encourage people to change what they eat and how they live, because I know that has a tremendous effect—it improves their overall health and quality of life.”*

– Staton Awtrey, M.D.,  
cardiothoracic surgeon at Midland.

“Physicians went into medicine to help heal people, not just palliate and watch them get worse and escalate their medical interventions,” says Staton Awtrey, M.D., a cardiothoracic surgeon at Midland, a 474-bed hospital. “The fact that you can make people well by employing tools like nutrition in your practice is empowering, and it’s something I would imagine every physician would love to do.”

Awtrey is a heart surgeon, but he says, “I never leave it at surgery, I always encourage people to change what they eat and how they live, because I know that has a tremendous effect—it improves their overall health and quality of life.” He often gives patients the choice between setting up an operation or changing their lifestyle and diet for a period of time first. Consider a couple of examples of patient successes, and it’s easy to see why:

- One man in his 30s had multiple sclerosis, bowel incontinence and was overweight. He used a walker to get around and was too weak to work or interact with his wife and young children. His medication list was growing as quickly as he was declining. But then he was inspired to change his lifestyle after attending the local “Food is Medicine” event, and he adopted a whole food, plant-based diet. Three months later he was walking freely, had lost nearly 40 pounds and was looking for a job. “It was a complete turnaround,” Awtrey describes. “It would have been miraculous, except that by definition miracles are unexpected and not reproducible—and these kinds of transformations and results are reproducible.”
- Another patient in his 70s had a heart attack but couldn’t be immediately operated on due to his pneumonia. He was morbidly obese and needed a wheelchair to get around. He also had osteoarthritis, high cholesterol, high blood pressure, coronary artery disease and essentially no quality of life. “I gave him the option of surgery in six weeks or a radical lifestyle change,” Awtrey says. The patient opted for the latter. Three years later he has lost more than 100 pounds and walks unassisted. His coronary artery disease symptoms have disappeared, and he’s down from 18 medications to three. His quality of life and ability to function have improved drastically.

Awtrey says the first step for this kind of transformation, in people and organizations, is “get educated.” Because the research and data are powerful. That’s how he got his start. He and his wife, Blythe Awtrey, attended The Plantrician Project’s International Plant-Based Nutrition Healthcare Conference ([www.pbnhc.com](http://www.pbnhc.com)) on plant-based food and watched the documentary “Forks Over Knives.”

“Like most physicians, I had no idea how much of an impact nutrition has on health and disease,” he says. Awtrey’s family changed their diet, and he went from student to teacher. He was eager to share information with his patients—he knew that they could feel better, suspend and even reverse their chronic disease.

**KOTTER’S  
STEP 1:**  
Awtrey is passionate  
about sharing  
powerful information  
about how food  
choices can heal.



The Lifestyle Medicine Center offers educational classes every Thursday night to teach their patients and members of the community about plant-based nutrition and a variety of other topics

Those patients would get excited about the promise of change, he says. But then, “they’d walk out of the office and be bathed in the jungle, and it was very difficult for patients to follow through.” It was a problem he was determined to solve.

## Getting big goals off the ground

Meanwhile, education among the Midland staff was growing. Awtrey invited Scott Stoll, M.D., co-founder of the Plantrician Project, to visit Midland and share information about whole food, plant-based diets. Stoll gave a speech at a conference for the public at a local church and provided a continuing education presentation for hospital staff. The events created a buzz among physicians and administrators and seeded change.

Educational events like those were key, says Marcy Madrid, vice president of planning and marketing at Midland. “These events planted the seeds of knowledge in the minds and hearts of the people who would be key influencers moving forward.”

**KOTTER’S  
STEP 2:**  
Awtrey and others build a guiding coalition through education.

“What helped us succeed was that a lot of these ideas and philosophies were mission driven,” she says. “It was easier to latch onto new things then, because even if there wasn’t an obvious direct return on investment, the ideas were aligned with our mission. If our mission is truly to make people healthier, we have to look at all the aspects of what affects your health—it’s physical, mental, social and spiritual.”

Knowledge of the research spread throughout the system. Support was there, including from the CEO, certain administrators and a committed group of physicians. The hospital had momentum and formed a health and wellness committee to see the emphasis on lifestyle medicine take root.

**KOTTER’S  
STEP 3:**  
Midland already had the strategic vision in place, and it then formed an initiative, the wellness committee, to help see this particular mission through.

Wellness education continued, with events like the “Food is Medicine” conference, the launch of a hospital-led community garden project, a community-wide Wellness Tour and hosting of public film viewings for “PlantPure Nation” and “Forks Over Knives.”

Food services made massive changes in the cafeteria and in patient meals. Midland offered classes like CHIP and the Ornish program to help employees improve their health. They brought in speakers and offered courses on lifestyle medicine as continuing medical education (CME) options for medical staff. They created a monthly social club to encourage connectedness and support among employees who are making lifestyle changes.

Midland also promoted healthy lifestyles and whole food, plant-based diets with informational brochures, signage and by streaming a looped “Forks Over Knives” on patient TVs. Dreams of an on-site clinic devoted to lifestyle medicine were discussed.

*“If our mission is truly to make people healthier, we have to look at all the aspects of what affects your health—it’s physical, mental, social and spiritual.”*

- Marcy Madrid, vice president of planning and marketing at Midland Health.

## Creating community for lasting change

Back to those patients Awtrey saw, the ones whose enthusiasm to change the way they ate and lived fizzled when they came up against the barriers of the outside world. Awtrey and Stoll discussed the problem and wondered if the missing piece was adequate support to help those healthy transitions stick.

So in 2014, Awtrey started a monthly community meal event. Today, a growing list of 600 people from the community and the hospital receive an email invitation about the upcoming month’s meal. If they reply yes, they’re coming, they’re assigned a whole food, plant-based recipe to prepare and share at the monthly potluck. Sometimes the meal has a theme, like breakfast, holidays, dessert, picnic fare or appetizers. Participants can sample the food and keep the recipes they enjoy so they can make them at home anytime.

**KOTTER’S  
STEP 5:**  
Awtrey and Stoll came up with a way to remove a barrier by creating community and support for people who were inspired to make dietary changes.

“Sometimes people think they’re just going to be eating salad three times a day for the rest of their lives, and then they get to enjoy all this fun, flavorful food,” Awtrey says. “This event is really eye opening for people.”

The monthly meal includes a brief educational component, some question and answer time and a few testimonials from participants. “This has made all the difference,” Awtrey says. “What we’ve done is created community—we’ve created a support group.”

**KOTTER’S  
STEP 6:**  
The new community program is a “win” that inspires and motivates community members and staff.

“All of this is just the right thing to do,” he says. “And not only is it the right thing to do, it’s the cost-effective thing to do.”

## Keeping people out of the hospital without bankrupting the hospital

*“Sometimes people think they’re just going to be eating salad three times a day for the rest of their lives, and then they get to enjoy all this fun, flavorful food.”*

- Staton Awtrey, M.D., cardiothoracic surgeon at Midland Health.

With time, it will be easier and easier to prove that it’s much less expensive to keep people well than to treat them when they’re sick, says Larry Wilson, M.D., vice president for medical affairs at Midland. Wilson is the former director of the emergency medicine staff at Midland, and he returned to school for an MBA because of his passion to help change the landscape of healthcare delivery.

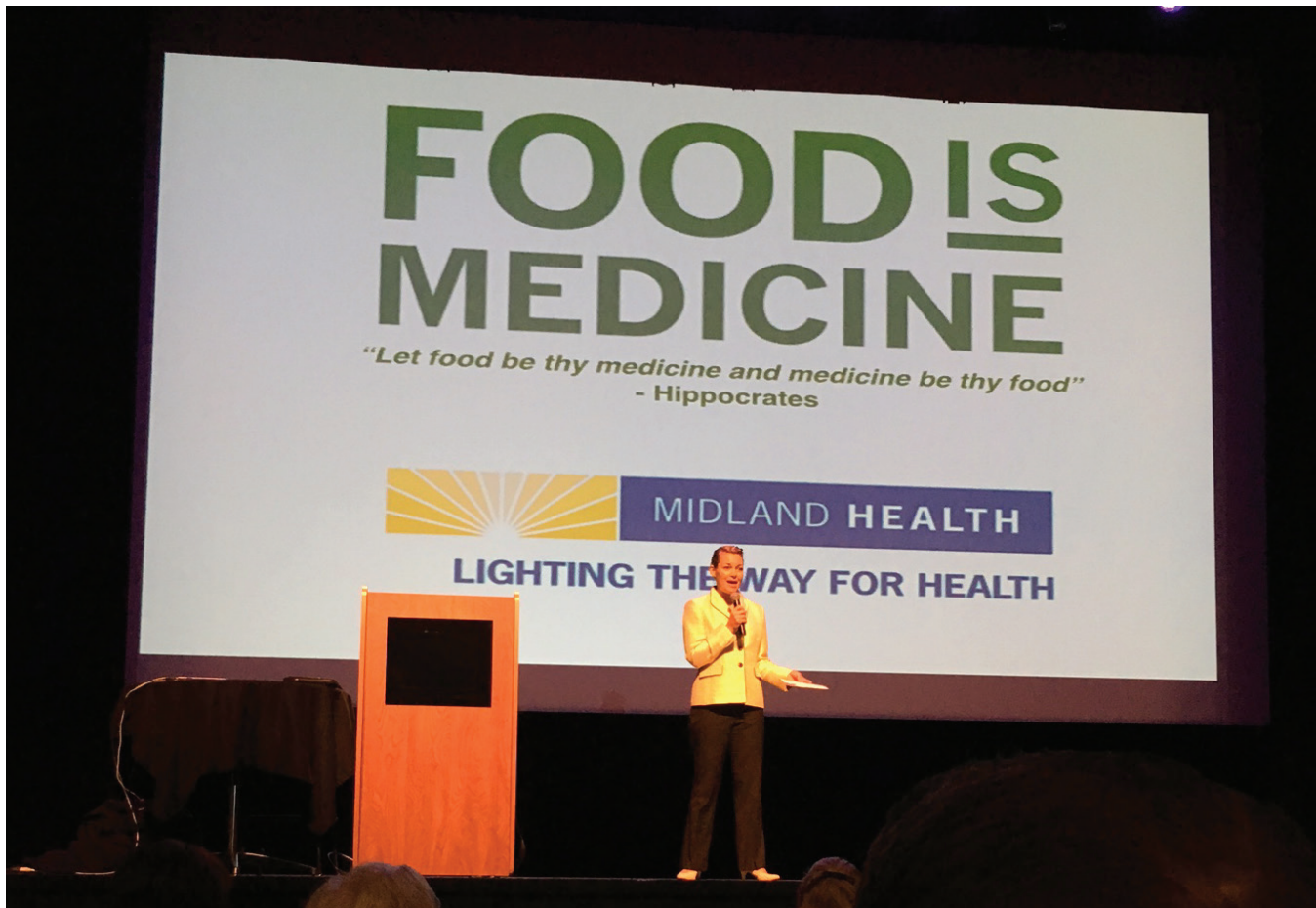
Wilson is glad to see the push for value-based care and population health, but today’s national healthcare set up and reimbursement models certainly don’t support that yet.

So what’s a hospital to do when it believes in keeping people healthy and using lifestyle medicine but gets paid with fee for service, by treating people who are sick? How can a system like Midland work to prevent hospitalization without bankrupting itself? There’s an inherent conflict in all of this.

Wilson says that in order to succeed, you need to think big but then take small, strategic steps and capture the data so you can prove your model. For Midland, a nonprofit, government-funded institution that provides health insurance for its employees, the strategy was to begin where they could really affect the bottom line. That meant starting with their own employees and the populations they go at risk for, including the uninsured and underinsured.

Wilson works on two efforts, Midland Quality Alliance and the Equitable Care Alliance, both of which are good for the hospital’s finances and for patients:

**KOTTER’S STEP 3:**  
Midland develops a strategy and initiatives, Midland Quality Alliance and Equitable Care Alliance, to save money and improve health.



Marcy Madrid, vice president of planning and marketing for Midland Health, emceeds the first annual Food Is Medicine event

Midland Quality Alliance: This program focuses on creating a clinically integrated network. This means everyone involved in healthcare delivery—physicians, specialists, nurse practitioners, physician assistants, inpatient rehabilitation staff, nurses and others—is working in a more collaborative fashion. This way, they can set goals together based on the patients they’re serving. The idea is that through more coordinated care, you deliver more value and reduce the need for acute care. But again, this ideal means people are using the hospital less, which means a reduced revenue stream. However, there’s a cost savings when the effectiveness and efficiency of coordinated care is applied to patients the hospital goes at risk for and the employees the system insures. The goal is to prove the coordinated care concept with Midland’s health plan and then offer a structured program to others, such as the city, school district and other self-insured businesses and organizations.

Equitable Care Alliance: The hospital takes on about \$35 million in annual costs for charitable care—the people who can’t afford their own healthcare. This program focuses on high risk and at risk patients and works to help this population 1) use lower cost alternatives for their care and 2) become empowered and engaged in their wellness. The most prevalent issues in this population are fairly predictable: diabetes, hypertension, hyperlipidemia, obesity and smoking.

Midland used its data tracking to estimate the cost of various health issues within the charitable population. For example, they looked at the people who came in throughout one year with issues related to diabetes or hypertension:

- There were 717 inpatient visits for a total hospital cost of just over \$8 million.
- There were about 3,000 emergency department visits for a total cost of just over \$3 million.
- That means a 10 percent reduction in this targeted population’s use of the hospital and emergency department would result in more than \$1 million in savings for the hospital every year.



*“We don’t make them feel criticized, instead we reach out and connect, and that’s empowering—then they see they are getting well, and they like that.”*

– Larry Wilson, M.D., vice president for medical affairs at Midland Health.



Meals at the community meal monthly potluck, which is run by Healthy City, a nonprofit community organization started by Midland Health wellness leaders.

“A lot of times there are social determinants and other things that inhibit people’s ability to get care, and if we can identify these, get them the resources they need and meet them at their level, people start to see there is a benefit to them,” Wilson says. “We don’t make them feel criticized, instead we reach out and connect, and that’s empowering—then they see they are getting well, and they like that.”

**KOTTER’S STEP 5:**  
Midland encourages healthier (and cost effective) behavior by identifying and then removing people’s barriers to care.

### Helping employees means good news travels fast

The other population that made sense to target was the employees and beneficiaries the system was insuring. At Midland, that’s a group of about 3,000 people. Using claims data from a third party, they stratified the group by risk and cost and found:

- Highest risk: 47 members cost more than \$114,000 per year per member.
- High risk: 339 members cost about \$13,400 per year per member.
- Moderate risk: 397 members cost about \$6,000 per year per member.
- Low risk: 2,060 members cost less than \$1,000 per year per member.

Midland was spending more than \$10 million per year to manage about 400 members of the health system. So they started by targeting those 400 members, Wilson explains. They hired a care coordinator, who is like a case manager, to reach out to those members and see what help they need. The care coordinator identifies barriers, provides personalized information and plugs people into the right providers, programs and resources. As these members become healthier, not only do they feel better, but the cost to insure them goes down.

Consider one case Midland identified. A member who had diabetes was using the emergency department for all of her care needs. They connected this member with a primary care doctor and gave her information and support to manage her disease so she could stay out of the hospital.

**KOTTER’S STEP 5:**  
Midland removes barriers to care for their health insurance members and reaches out to those members with targeted assistance.

The cost to run the data and maintain the outreach on these programs is low, Wilson says. There’s the care coordinator position, administrative support and a handful of employees who spend a decent amount of time on the effort. But the savings is significant. If Midland could reduce the cost of those 400 highest-risk members by just 10 percent, that’s \$1 million in savings.

This is an example of how important it is to track data so you can prove your model, Wilson says. Numbers give providers feedback and show it's effective and financially prudent to make these efforts to help people change their habits and lifestyles.

“We want to do the right thing, but we need to do it in a way that’s sustainable so we can keep these programs going,” Wilson says.

*“We want to do the right thing, but we need to do it in a way that’s sustainable so we can keep these programs going.”*

- Larry Wilson, M.D., vice president for medical affairs at Midland Health.



**MIDLAND HEALTH**

# 2016 WELLNESS TOUR

**WORK OUT WITH JOHNNY QUINN**  
U.S. Olympic Bobsled Athlete

**LEARN ABOUT FOOD IS MEDICINE**  
with Dr. Staton Awtrey, Dr. Padmaja Patel and Blythe Awtrey, RN, MSN

**JOIN THE RHYTHM RUN 5K, Heart Walk and Bed Races**

**WET 'N WILD**  
with Midland Fire Department

**FREE HEALTH SCREENINGS**

The graphic features a teal background with a green leaf illustration in the top right corner. Below the text are three overlapping photographs: a man in a suit (Johnny Quinn), hands holding several carrots, and a person's feet in blue and yellow running shoes on a paved surface.

Each year, Midland Health partners with the city of Midland, Midland College and Midland Independent School District to host the Wellness Tour, a week-long event to encourage healthy behaviors



## System-wide support

The efforts to connect with employees about health improvements have been far reaching at Midland. Those efforts wouldn't have been meaningful, however, if it weren't for authentic, visible, ongoing support from the top down, says Madrid.

Over time and with ongoing meetings and conversations, the research about how beneficial lifestyle and food changes are sunk into the hearts and minds of the CEO, high level vice presidents and board members, as well as more physicians and staff. People were experiencing more and greater personal transformations and victories, which directed even more energy to the effort. Madrid herself, for instance, found her multiple sclerosis went into remission after changing to a whole food, plant-based diet.

**KOTTER'S  
STEP 1 & 2:**  
Midland created an inspired sense of urgency as more leaders and staff experienced the power of food and lifestyle changes. A coalition emerged from this momentum.



*“We’re getting employees engaged and learning about their health. They’re eating healthier and living healthier, and they’re getting off medications.”*

– Cory Edmondson, senior vice president of strategic development at Midland Health.

“Even if you don't have a life-threatening diagnosis, when you personally engage in this and make the changes and start really caring for your body and changing how you eat, you realize how vital you can feel,” she says. “That really sparks a fire in you, and you have this personal passion because you know this changed your life and you've seen other people's lives change. Then you naturally work faster and harder and everything flows easier because you're working with a real passion and purpose behind you.”

One of the major early efforts to change employees' lives at Midland was CHIP, which stands for Community Health Improvement Program. CHIP is a proven 9-week lifestyle medicine program that emphasizes plant-based nutrition and discusses physical activity and stress management. Midland invited employees to join at no cost (and the cost to the hospital is roughly \$250 per employee). The hospital collected data over four separate groups with a total of 85 employee participants and found:

- Average weight loss: 8 – 12 pounds (1 – 2 pounds per week), and some people lost up to 25 pounds over the 9-week course
- Average drop in cholesterol: 5 percent
- Average drop in LDL: 15 percent
- Significant medication savings due to decreasing need

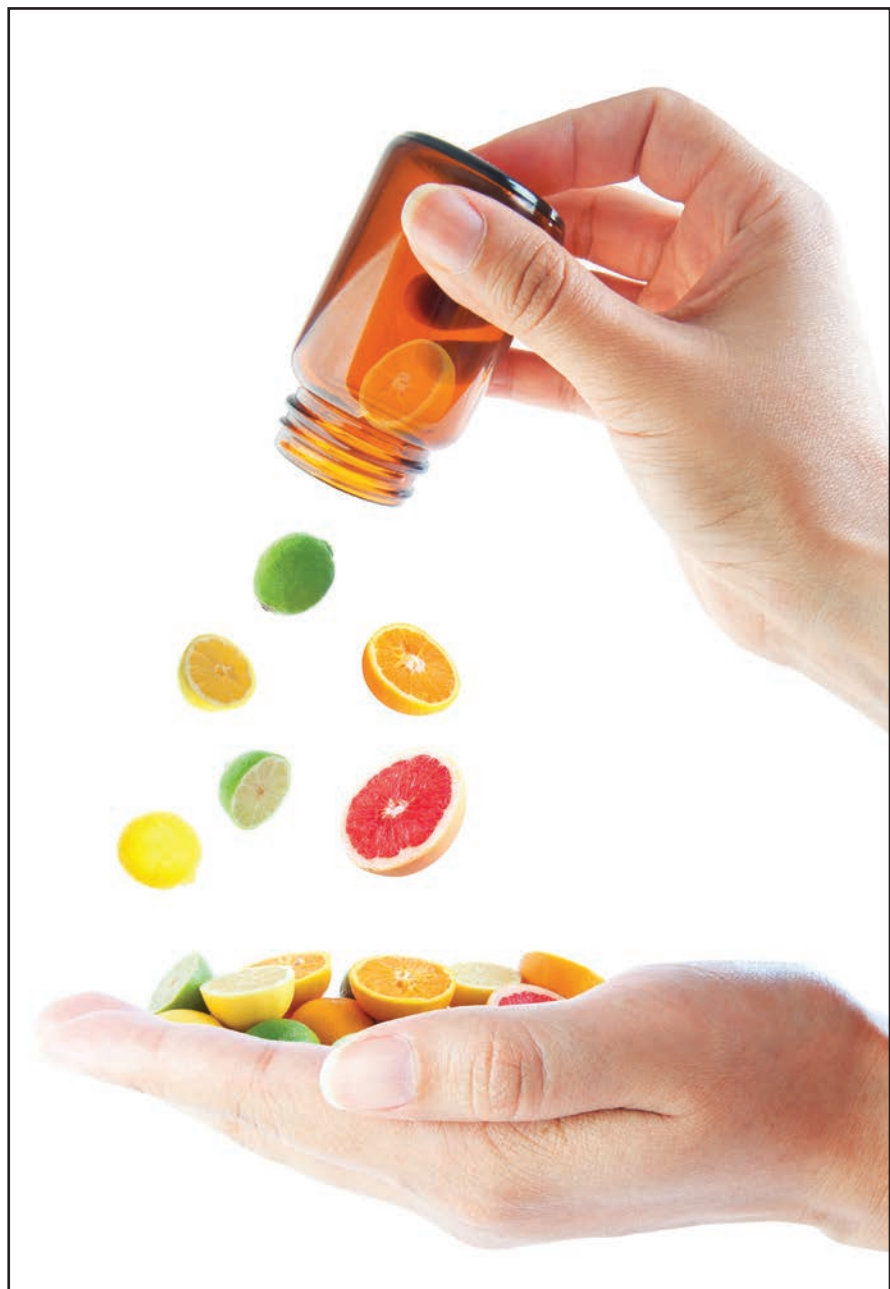
“The employees in CHIP started seeing results and feeling better, so they started talking about it with other employees and within the community,” says Cory Edmondson, who is senior vice president of strategic development and oversees the lifestyle medicine program at the hospital. “Then we started having people coming to us, asking questions” because they noticed CHIP participants getting healthier. Seeing is believing, after all. (Midland is also offering CHIP in the community, and the health system is now working to help the city of Midland bring the program to its employees).

Seeing positive results, even in a small group of people, also brought momentum to the hospital to continue evolving and expanding the efforts—for employees, patients and beyond. Midland started offering employees the Ornish program, an 18-session, 9-week lifestyle program focused on intense cardiac rehabilitation. Ornish covers food and exercise as well as mental and emotional wellbeing. It’s an approved Medicare and insurance program.

**KOTTER’S  
STEPS 4 & 6:**  
Midland employees experienced improvements, and along with their improvements, the hospital saw benefits from a productivity and financial standpoint. The success led to a natural “army” of staff who believed in the message and the method.

Midland also provided employees with the free “Better U” program, which is a website and wellness portal Midland developed. This web-based program offers a wealth of health information and guidance, including classes, videos, instructions on how to read labels, cooking demonstrations, information on financial wellbeing and personalized notifications that keep participants on track with their wellness goals. This program is now offered outside the hospital walls, reaching employers and residents in the greater community.

“We’re getting employees engaged and learning about their health. They’re eating healthier and living healthier, and they’re getting off medications,” Edmondson says. “The return on investment from an employer standpoint is definitely there.”





Midland Health sells PlantPure Nation frozen meals in their Market to offer a quick and healthy lunch option for patients, visitors and staff

### **If food is medicine, what's being served at the hospital?**

Another major effort at Midland was changing the food offered to patients, employees and visitors. The hospital first changed patient menus by bringing in more whole food, plant-based meal options.

The next step was a big one—the cafeteria. That was a big mountain to climb, Madrid says, and wouldn't have been possible if the CEO and leaders in various departments weren't already on board. Usually cafeterias operate independently of the hospital. They run like a separate restaurant (which happens to be within another business, which happens to be a hospital).

Running like a restaurant usually means offering the kinds of foods and drinks people crave (and that they especially crave when under stress or feeling emotional, as people often are when they're visiting a hospital). But transitioning the cafeteria was part of walking the talk, so over time they made significant changes, including:

- Removed the oil fryers, so everything that was once fried is now baked or air fried
- Ended free refills on soda
- Stopped offering large serving sizes of soda, and started offering only smaller sized cups
- Eliminated clearly unhealthy options, such as milkshakes, corn dogs and fried foods
- Brought in more healthy foods, including many more whole food, plant-based options that are available on a daily basis

There were bumps in the road as these transitions got off the ground. Fresh foods spoil faster, and usually cost more. For instance, you can buy a lot more frozen corn dogs (which will last longer in the freezer) than fresh broccoli (which will go bad if it's not eaten). From a business standpoint, it certainly didn't make sense for the cafeteria to buy more broccoli and fewer corn dogs, Madrid says, but the organization had to support that type of change.

At first that meant a lot of healthy food got thrown out because not enough was being eaten. Demand doesn't appear suddenly, rather it's a slow and ongoing process, Madrid says. Money was lost initially, and the supply had to be adjusted accordingly, as different people changed their behaviors at different times. But it's been critical to have the healthy choices available, Madrid says, so that when people are ready to take healthy steps, the food is there: "We have to have options people can act on within our four walls."

**KOTTER'S  
STEP 7:**  
Midland continued to stick with and expand upon their efforts despite the challenges.

## Thoughtful, graceful communication

Certainly, none of these changes at Midland were easy. And when you're talking about changing people's daily lifestyle, and especially their choices around food, it's even harder. Food is a deeply ingrained emotional, social and cultural topic. And food addictions and other lifestyle vices affect everyone, regardless of socioeconomic status, education level, gender, age, race or any other demographic.

There's definitely resistance to change at first, Madrid says. You have to expect and be prepared for it, in order to succeed. You also have to be aware of cognitive dissonance, she says.

Cognitive dissonance is what happens when people come across new information that's in conflict with what they currently believe or how they currently live. That causes an internal conflict for people. They grapple with that uncomfortable incongruence until either 1) they accept the information as true, which means they have to make changes in order to eliminate their inner conflict or 2) they disregard the information as wrong at some point, so they can continue doing what they're doing.

"You have to have a lot of grace when dealing with these kinds of messages—you're not going to walk into a bar and tell a bunch of people who have an addiction to alcohol that they need to stop drinking," Madrid says. "There's a time and place and a certain method for communicating."

At Midland, the communication strategy was critical as the organization transformed. Madrid says it's important that everyone understands why changes are being made. People needed to see how upcoming changes aligned with the hospital's mission, and they needed to know the research that supported those changes. They also needed to believe that the hospital was doing these things because it really cares.

"We've really embraced the idea of lifestyle medicine and how your lifestyle, your behaviors and your individual engagement in your own health journey has a bigger impact on your health than any medical intervention or treatment we can offer," Madrid says. "Now that we've recognized it, we feel it's our responsibility as an organization to make people aware and to promote this to our community as an option." In short, it's about teaching people their choices matter, and supporting them to make better choices.

### **KOTTER'S STEP 8:**

**The changes at Midland have been cemented into the vision, the culture, the procedures and the future plans.**

"We just kept beating the drum," Madrid says. "We stayed as positive as possible and focused on all the positive outcomes and the lives changed rather than beating people over the head about what they're doing wrong."

Consistent, graceful communication has been important in the community, among patients, among employees and with key influencers within the hospital. Madrid gives routine updates in hospital leadership meetings and board meetings about wellness efforts and the impact they're having. The hospital has regular communication with staff and employees.

## Going way beyond those hospital walls

The people leading the lifestyle charge at Midland saw so much opportunity to offer more support in the community, that they realized some of it was beyond what the hospital itself could or should do. That prompted some of Midland's wellness leaders (including Madrid and her husband, Carlos Madrid; Awtrey and his wife, Blythe Awtrey, R.N.; and Padmaja Patel, M.D., who is an internal medicine physician and the medical director of Midland's Lifestyle Medicine Program, and her husband, Mrunal Patel, M.D.) to form a nonprofit organization called Healthy City alongside other passionate community members.

### KOTTER'S STEPS

#### 2, 3 & 4:

Midland wellness champions connected with others in the community to create an organization that could expand upon the work of the hospital, bringing even more wellness resources into the community of Midland, Texas.

Healthy City took over running community events, community meals, grocery store tours, cooking demonstrations and other efforts related to awareness and support. The organization partnered with local restaurants, grocery stores and wellness businesses to ensure the support is there for people who are transitioning toward healthier lifestyles.

Another popular offering is the hospital's new model garden. Madrid says in conversations about health, and by asking what people wanted to learn about, she heard a lot of people say they were curious about gardening. Gardening is rare in West Texas, and people didn't really know how to get started.

"We also heard from a lot of people that they perceived eating healthier, fresh foods was expensive, so we wanted to teach them to grow their own healthy foods to save money and to give them a deeper connection to their food and where it comes from," Madrid says.

Gardens provide inexpensive and healthy fresh foods, plus they keep people active and outdoors, where they get fresh air and sunshine. In the community gardens, people also forge relationships with other gardeners from all walks of life. For instance, wealthy business leaders garden in plots next to refugees who are being hosted by a local church and are working hard to start a new life in a new country.

Midland worked with master gardeners to build a community garden model on their campus. Before the gardens even opened, the gardener plots (which cost \$15 per season) had filled up, and a waiting list had started. Now other organizations and businesses in Midland can open branches based on the model. For example, the local YMCA opened a branch in a more high-risk neighborhood that's in a food desert.

## Lifestyle from the ground up

Clearly, the focus on lifestyle and wellness and true health care was not just an “add on” at Midland. Rather, it’s a foundational, integral and ongoing part of the culture itself, and that’s why it’s been a success, Midland leaders say. As the staff has experienced personal transformation, they’re extending their enthusiasm and passion and information on to patients and their families. Everyone who is touched by these positive changes becomes a natural spokesperson by being an example to the surrounding community.

**KOTTER’S  
STEP 4:**  
A volunteer “army” of passionate individuals continued to naturally spread information and inspiration around the hospital and community.

One gem that’s connected all those pieces—hospital leaders, staff, patients and the community at large—is Midland’s new Lifestyle Medicine Clinic. Patel runs that clinic and is also the medical director of the overarching Lifestyle Medicine Program at Midland. Patel became a leader in the movement after attending a “Food is Medicine” conference with Awtrey. “I was completely blown away—there was so much compelling data,” she says.

She was also involved in forming Midland’s wellness committee early on, and she initiated the idea for the Lifestyle Medicine Clinic. “The lifestyle medicine philosophy is really close to my heart—it resonates with what I’ve believed all my life,” she says. “This just seems like the right thing to do, and now I have the tools to do it.”

Patel looked at models for similar clinics around the country to see what was working, and to learn how these kinds of operations can be financially viable.

The clinic opened as a community resource for holistic health that provides physical, mental and spiritual education. They bill insurance and Medicare for things like the Ornish program and regular appointments, so patients are paying a copay or deductible just like they would at a regular doctor’s appointment.

Patel uses lifestyle changes as a first-line treatment for patients, suggesting medications and other interventions only as needed after that. Because patients come to the clinic already prepared to make lifestyle changes, she can spend more time with her patients to create a personalized plan with their input and provide them with additional information and encouragement. The resources, services, personnel and support she needs to do this right are at her fingertips—all under the roof of the clinic’s dedicated building.

The clinic hosts educational classes once per week for \$5 that include a range of topics, including nutrition, chronic disease, grocery store tours, food addiction, benefits of physical activity and stress management. The clinic also offers individualized nutrition counseling, diabetes education, cardiac rehab and support groups for people struggling with various health issues. Anyone in the community can plug into these resources.

The results have been amazing, Patel says. She’s seen patients reversing diabetes, getting off blood pressure medications and losing 40 or 50 pounds.

“I’ve had tears of joy and gratitude as people heal their bodies and reverse disease,” she says. “This is one of the most rewarding experiences of my life—it has truly brought such meaning and purpose to my medical profession.”



*“This is one of the most rewarding experiences of my life—it has truly brought such meaning and purpose to my medical profession.”*

– Padmaja Patel, M.D., internal medicine physician and the medical director of Midland’s Lifestyle Medicine Program.



## KEY TAKEAWAYS

- Changes need to take place from the ground up, starting with the mission and vision.
- Changes also need support from the top down, including from the CEO, key administrators and leaders in every department.
- Dream big, but start small.
- Make changes one step at a time. Celebrate each win and make them known, but keep reaching for more.
- Education is critical for everyone involved. Do your research and attend plant-based healthcare conferences and other educational events where support and community can be fostered.
- Form a small group, or groups, of people who are passionate about wellness. Have them meet on a regular basis.
- Expect resistance, but keep going anyway.
- Good communication can help head off or address resistance.
- Practice patience. It takes a lot of time and energy to change people's minds and habits, and it takes even more time to change the culture of an entire system.
- Communication needs to be widespread, consistent, positive, graceful and well-timed. Testimonials and personal stories are powerful.
- Communication with leadership and system departments needs to be routine, such as quarterly, and these meetings need to discuss progress and future plans.
- Track data so you can prove your model and its benefits.
- When you have success, consider sharing or selling your model outside the hospital, to others in your region or even across the country.
- Reach out into the community and form meaningful connections and relationships there.

# Eskenazi Health





# SPOTLIGHT ON: Eskenazi Health, Indianapolis, Indiana



Eskenazi Health's rooftop Sky Garden.

## Excellence in care from every angle

Lisa Harris, M.D., CEO of Eskenazi Health in Indianapolis, wants everyone to have the opportunity to live a happy and satisfying life. She's been working to transform Eskenazi, a level 1 trauma center with a 315-bed hospital and 10 health centers, to provide that opportunity. Harris is focusing on lifestyle choices—chiefly, nutrition—to create health and to prevent, suspend and reverse disease.

She also believes that everyone deserves healthcare in beautiful buildings that inspire health and promote healing. And she has seen that when you're resourceful, there's always a way to make progress toward these kinds of lofty aspirations.

In order to make this happen, Harris helped bring together small groups of passionate wellness champions and critical decision makers. The group included key administrators, physicians and attorneys who met regularly to steward the vision and solve the inevitable challenges of change.

**KOTTER'S STEP 2:**  
Harris built a guiding coalition by bringing together groups of key decision makers.

Harris says these group members' commitment and consistency helped get ideas off the ground, overcome resistance and shepherd initiatives to completion. "Don't let critics stop your progress," she says. "Don't be afraid to do this—there are more people who need it than you can imagine."

Under Harris' vision, Eskenazi has implemented a wide range of innovative wellness initiatives, including:

### **Mind-body training**

Every department in the hospital was represented in an 80-hour mind-body medicine course. Now a staff member from every department can be involved in supportive care—from medical staff to the people who work in billing—and they've learned how to identify and meet a patient's emotional needs.

### **Healthy Me Program**

This is a free wellness program that focuses on lifestyle management. It supports patients and employees of all ages in their efforts to improve their health and wellbeing. Health coaches are available in every primary care office to provide education, encouragement and accountability so that the healthy choice is the easy choice. Free membership includes meetings with a personal wellness coach; quality of life and physical activity assessment; non-medical nutritional advice; support groups; training in mind-body techniques; walking groups; a free gym membership; cooking demonstrations; healthy recipes; and support for weight loss, smoking cessation and stress management. In warmer months, members can join the Healthy Me Garden Clubs to learn more about gardening and fresh produce.

### **The Sky Farm**

This 5,000-square-foot rooftop garden produces 3,000 to 5,000 pounds of fresh vegetables, fruits and herbs every year. The produce is used in the meals that are served to patients and used in the cafes. Eskenazi has a "sky farmer" employee who tends to the garden, but other employees, patients and visitors are welcome to work in the garden too—the garden beds were even designed to be wheelchair accessible. The Sky Farm means more people are connecting with where their food comes from and the miracle of its growth. They're also learning about different types of fresh produce and herbs, and they're getting fresh air and sunshine when they visit the rooftop gardens. The Sky Farm has contributed to the hospital progressing from 3 percent of food produced locally to 50 percent—well on its way to a goal of 100 percent. Watch a video of the Sky Farm here <https://www.youtube.com/watch?v=ai1WJIQbjQ>.



Eskenazi Health: Yoga class on the hospital's rooftop Sky Farm



### **Lifestyle medicine clinic**

Every staff member at this clinic, which opened in 2018, has been trained in lifestyle medicine. A patient's first visit to the clinic is a group visit where they make a commitment to certain goals. People who have chronic illness are then connected with chronic disease management groups for their particular condition. Patients also see their physicians once per month for maintenance and management. The hospital expects significant savings from this style of clinic. The ultimate vision is that this will become the model for all primary care in the health system, unless someone chooses to opt out of the lifestyle medicine tract.

### **Health coaching**

Eskenazi created a program to hire health coaches for every primary care clinic office. With help from grants, these coaches provide free support to all primary care patients.

### **Meals on Wheels Partnership**

Patients are screened before discharge, and any who are considered high risk for readmission receive free therapeutic Meals on Wheels for one month. At the end of the month, they can continue to receive supportive meals on a sliding scale basis. This reduced readmission rates from 15 down to 8 percent. In addition, there was a documented change in taste preferences among participants in just two weeks.

Harris advises starting transformations like this with employees first. "The staff needed to know and feel the change before encouraging patients," she says. She also reminds people not to let critics or skeptics stop your progress. Instead, "let passion lead, followed by a commitment to see it through."

# Lee Health



# CASE STUDY: Lee Health, Lee County, Florida



### Wellness Wheel Drives Healthy Futures

For Florida’s Lee Health, which is the fourth largest healthcare system in the country, delivering top-notch care means creating a truly healing environment and thinking holistically about all the elements of health and wellbeing.

With this in mind, Lee developed its “wellness wheel,” which includes six elements of a healthy lifestyle: nutrition, physical activity, purpose driven living (“your why”), mental and behavioral health, stress management and sleep. That wheel has become the lens through which the health system looks for ways to support the wellbeing of its team, says Scott Kashman, chief acute care officer for Lee, and co-author of the book, “Mindful Healthcare: Healthy Team, Healthy Business.”

“Even though my job is to provide oversight of the hospitals, one of the most rewarding things for me is knowing that we’re focusing on the wellbeing of our staff, physicians, patients and community. Ultimately, this will keep them



Lee Health developed this Wellness Wheel to illustrate the various elements of a healthy lifestyle

healthier and outside the hospital, which is the most expensive place for care,” Kashman says. “It’s all about empowering people to take better care of themselves and each other and creating an optimal healing environment here to support them.”

Like many successful transformations, Lee’s progress began with a small group of passionate, committed individuals. Kashman has always been focused on wellness, personally and professionally. And so has Lee’s Sal Lacagnina, D.O., medical director of wellness and employee health. The two of them, along with a handful of other colleagues, including Larry Altier, system director of food and nutrition services, and Christin Collins, system director of health and wellness, were devoted to creating meaningful change. They supported one another in the drive to promote wellness, and they had the ear of the people in the c-suite.

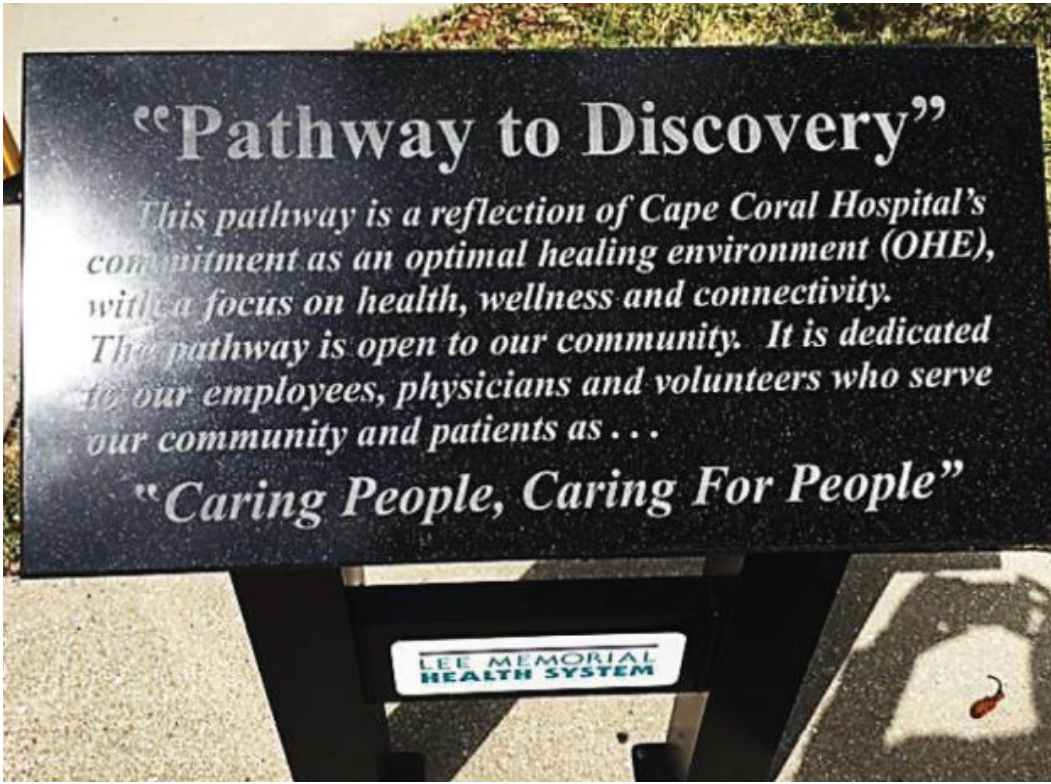
**KOTTER’S  
STEP 2:**  
Kashman,  
Lacagnina and  
others built a  
small coalition  
that believed in  
change.



Larry Altier, system director of food and nutrition services at Lee Health.

“If I wasn’t so passionate about what I believe to be the right way to deliver healthcare, and if we hadn’t really supported one another, this would have gone to pieces and dissolved,” Lacagnina says. “Finding champions to support one another and then as quickly as possible getting the health system to back it—from the c-suite down and from the ground up—is critical for success.

For Lee, a 1,426-bed multi-hospital system with 100 clinics and locations and more than one million patient contacts per year, promoting wellness and healing has meant a lot of things. It’s radical changes to the cafeteria menu and beautifully redesigned patient rooms and waiting areas. It’s a nature walkway on campus with gardens and space for outdoor therapy. It’s the creation of the Healthy Life Centers, which offer fitness classes, meditation classes, massage and more. And it’s supporting and teaching self-care and self-love for everyone: hospital leaders, employees, patients and the entire community in the Lee County area.





### Care for your caretakers first

Wellness leaders at Lee advise that an organizational transformation like this needs to happen strategically, and it needs to happen one step at a time. For them, the focus on lifestyle began with the very people providing care—the physicians who talk with patients at their bedside, the chefs who prep meals in the kitchen and the custodians who maintain the hospital floors.

**KOTTER'S STEP 3:**  
Lee develops a strategy that involves beginning the wellness emphasis with their own employees and the people they insure.

“When our employees take better care of themselves, they’re in a better position to take good care of their colleagues, patients, patients’ families, and the greater community,” Kashman says.

Lee is a huge system, and it covers 19,000 people on its self-funded health plan. When the health system looked at data from those members’ wellness exams, they found rates of health issues like diabetes, obesity and heart disease were pretty much on par with national averages. But shouldn’t people working for a healthcare system have at least a little bit of a leg up on health?

“Focusing on the lifestyle piece is really the only thing that makes sense,” says Lacagnina. “What drives me in my practice is to help figure out what’s not working and what you can do to improve your health.”

“We realized we needed to beef up our health and wellness programs and get people involved—give them the tools they need to become and stay healthy,” Lacagnina says. “Healthcare expenses were only going up, so we knew we needed to do something different.

A variety of efforts began to engage and empower employees and members, including free or very low-cost access to the following:

- **Health coaches:** Lee has three full time staff who are devoted health coaches. They use data from wellness exams to identify patients who could use help. That could be people who have prediabetes or diabetes, or people who are overweight or obese, for example. The health coaches reach out to those individuals to make them aware of all the resources and support that's available and to help plug people into the right kind programs, providers and classes.
- **CHIP program:** CHIP is short for Community Health Improvement Program. This is a proven 9-week lifestyle medicine program that teaches plant-based nutrition along with physical activity and stress management. After one year of the CHIP program, participants lost an average of 17 pounds and lowered their cholesterol by 20 points. Most normalized their blood sugar levels. Lee invested \$38,000 into the program and saved \$70,000.
- **Personal and family counseling:** The counseling programs are low cost, and this is one way the health system supports mental health. Lee bought a software program that can help identify depression, anxiety and insomnia, so they can reach out to those members and use a full-team approach to improve people's mental health.
- **Start Anew class:** This is a 10-day course focused on eating a whole food, plant-based diet. Participants have labs drawn before and after the course so they can clearly see the effects of their changes. They also receive 20 plant-based entrees and a recipe book. Results show that after the short program, there are already notable decreases in glucose, cholesterol, triglycerides, HDL, LDL, blood pressure (systolic and diastolic) and weight. In one survey, nearly all participants—93 percent—said they'd recommend the program to others, and 64 percent reported the flavor of the foods was above average.
- **Wellness champions:** Any employee who is interested in wellness can sign up to be a "wellness champion," which means they receive information and become part of a supportive group. They also help spread the word about wellness and helpful offerings.

**KOTTER'S STEPS 5 & 6:**  
Lee removed barriers to health for employees and members by inviting people to programs that are easy to access. These programs generated early "wins" for individuals and for the system.

**KOTTER'S STEP 4:**  
Lee created a volunteer army of wellness champions to help support the grassroots side of their transformation.



One initial barrier to the programming was some staff worried the wellness push was some sort of clandestine operation, Lacagnina says. Was the system playing “big brother”? Would employees in poor health lose job opportunities? What was the motivation exactly?

Over time, employees started to see that Lee really did care and genuinely was trying to help them. Thanks to the outreach and new focus on employee health, some members were learning they had diseases they didn’t know they had. They were able to catch things earlier and make big gains in their health. With time, personal success stories spread among the staff and alleviated employees’ initial concern about motives.

## KOTTER’S

### STEP 5:

Lee overcame the challenge of suspicious employees. They did so by continuing to promote and support wellness and letting employees positive experiences with the programs demonstrate that they truly cared about wellbeing.

“We know we’ve saved millions on our health program already,” Lacagnina says. “In general, we’ve had a two to one return on investment in one year. You have to realize it can take a few years to start to get money back, but wellness will have a good return on investment—that’s created by better health among your staff. Then you will start to see health costs go down, and that’s all good for the bottom line.”

### KOTTER’S STEP 6:


Lee sees a 2:1 return on investment from employee and health insurance member programs, a “win” that provides the data to encourage expanded programming.

**October: National Vegetarian Awareness Month**

**Vegetarian Chef Challenge**

Chefs from each Lee Memorial Health System hospital will create a vegetarian entrée using only plant based ingredients. Come watch them prepare their creations, sample each one and vote for your favorite dish 11 a.m. - 1 p.m.

- Oct. 17, Lee Memorial Hospital Cafeteria
- Oct. 18, Health Park Medical Center Atrium
- Oct. 19, Cape Coral Hospital Cafeteria
- Oct. 20, Gulf Coast Medical Center Cafeteria

 LEE HEALTH

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### **Value staff to create value**

The focus on employees had two parts. The first was about empowering them with their own health and providing the support and care they need.

“I always feel that healthcare needs to be patient centric, yet we’re always hearing about issues with burnout and resiliency among healthcare providers,” Kashman says. “We truly need to focus on the health and wellbeing of our employees if we want to give the best patient care and prevent burnout.” Simply put, healthy, engaged employees will do better work and provide better experiences for their colleagues, patients and visitors.

The second focus on staff was sincerely inviting them to share their feedback—about how to make a more optimal healing environment for everyone: the staff, physicians, volunteers, patients, patients’ families and the community. After all, the employees are the ones who have their heads and hearts and hands in every facet of the operation. There are nearly 20,000 people working with Lee, including more than 13,000 employees, more than 4,000 volunteers and more than 1,500 physicians and advanced medical providers. That’s essentially a small-city full of brainpower and heart to tap into.

When those employees, physicians and volunteers are invited to share their ideas, and those ideas are taken seriously and acted upon, it shows them that they are valued and can make a difference, Kashman says. And that gives staff a stronger sense of purpose about their work and more engagement with their jobs. Patients and families are among the benefactors.

#### **KOTTER’S STEPS 4 & 7:**

Lee has engaged employees and volunteers for their ideas on how to improve the system, and Lee is taking those ideas seriously. The sincerity expands the number of people who believe in the changes and want to see it through. New ideas contribute to the sustained action of increasingly focusing on wellness.

For example, an employee might have an idea on something seemingly minor like a way to remove a redundancy in a process. But when the change is made, work flows a little easier and that takes some degree of stress out of their day. Or, an employee might have grand visions and start a transformative new program, which has definitely happened at Lee.

In one meeting, an employee brought up a concern about patients who are malnourished. The hospital did some screening and ran some data. Then they began a pilot study to provide meals to those patients who were flagged as at risk or malnourished. The program was called Flavor Harvest at Home.

Patients who were identified as at risk met with a registered dietitian and were discharged with this prescription: to receive two prepared plant-based meals per day for four weeks, at no cost. The hospital's cost was \$840 per person for the full four weeks of meals.

The results? Among the group who received the service:

- 58 percent drop in readmission.
- 70 percent improvement in fluid status.
- 84 percent improvement in strength.
- Among those who were hospitalized, their stays were an average of 3.24 days shorter.

Ultimately, AARP provided a grant to keep the program running. The program Flavor Harvest at Home was born. It's been estimated to save \$3,800 per patient. And this all started because employees were invited to share their concerns, insights and ideas.



**Flavor HARVEST**

**LMHS Fast Facts**

- Fourth largest public health system in the United States
- One of the largest public health systems in Florida
- More than 10,500 employees and more than 4,500 volunteers
- More than 1,000 physicians on the LMHS medical staff
- Four acute care hospitals and two specialty hospitals
  - Cape Coral Hospital 291 beds
  - Health Park Medical Center 270 beds
  - Lee Memorial Hospital 355 beds
  - Gulf Coast Medical Center 349 beds
  - The Rehabilitation Hospital 60 beds
  - Golisano Children's Hospital 98 beds
  - Health Park Care Center 120 beds
  - Regional Cancer Center
- More than 1,600 patient beds

**Food & Nutrition Fast Facts**

Provides meal service to:

• Cape Coral Hospital—291 beds	retail, inpatient, outpatient
• Health Park Medical Center—270 beds	retail, inpatient, outpatient
• Lee Memorial Hospital—355 beds	retail, inpatient, outpatient
• Gulf Coast Medical Center—349 beds	retail, inpatient, outpatient
• The Rehabilitation Hospital—60 beds	retail, inpatient, outpatient
• Golisano Children's Hospital—98 beds	retail, inpatient, outpatient
• Health Park Care Center—120 beds	bed inpatient
• Regional Cancer Center	outpatient
• Page Field	retail
• Santa Barbara Financial Complex	retail
• Culinary Solutions	retail, inpatient
• LPG Bass Road	outpatient
• LPG Pine Island Road	outpatient
• LPG College Parkway	outpatient
• LPG Surfside	outpatient

**Vendor Services**

- 5 Subway operations
- 5 ChocoLattes Coffee Kiosks
- Vending

- Provides over 1.5 million inpatient and outpatient meals annually
- Over 5.0 million meals served each year
- Culinary Solutions produces over 15,000 meals daily for LMHS
- Over 2.2 million cafeteria transactions annually
- Generates over \$7.0 million in cash/noncash revenues to health system
- Provides \$1,000,000 in catered events to hospital/non hospital clients
- Provides Medical Nutrition Therapy services
- Manages physician meal services for all acute locations—6 facilities

## How it plays out on the ground

The focus on creating a holistic healing environment at Lee has manifested in a range of tangible ways, including:

**KOTTER'S STEP 7:**  
Lee makes continual changes as part of its transformation to emphasizing the full picture of wellness.

**The Pathway of Discovery:** This is a thoughtfully designed trail system that connects different parts of the campus and contains multiple features. It started with a conversation between Kashman and Joan Odorizzi, a former Lee healing environment business partner and co-author with Kashman of the “Mindful Healthcare” book. Odorizzi was talking about how great it would be to create a pathway across the campus that would mirror the veins and arteries and circulatory system in the body. It could unite the community and symbolize the interconnectivity of everyone and everything, she thought.

The idea started with a vision, and the hospital got it going and brought it to life one piece at a time. “This became a community project,” Kashman explains. “It’s an example of the advice I’d give to start small, spread locally and regionally and then influence nationally.” Today this Pathway of Discovery includes a range of elements, including the teaching garden and exercise stations.

**Teaching garden:** A therapist designed a teaching garden where patients can have physical therapy and speech therapy outside, among the plants and flowers. A master gardener and volunteers oversee this garden, which has more than 75 kinds of plants. Lee has also connected with local schools that do hands-on lessons in the teaching garden. Lee talks with those teachers and students about how food is medicine. The American Heart Association (AHA) donated planters and provided curriculum.



**Healing garden:** This is a quiet space where staff, patients and the community can relax and enjoy the beauty of nature.

**Exercise stations:** Exercise opportunities are stationed throughout the pathway. This element ended up being an extension of the city’s parks and recreation department, and Lee employees and community members funded the exercise stations. The city of Cape Coral used grant money to pay for a sidewalk that connects all the pieces of the pathway, making it easier for people to stay active and safe.

**Healthy Life Centers:** These three centers offer a variety of opportunities for the entire community. They host about 50 wellness classes and events per month that anybody can attend for free. People can also sign up for a gym membership to use the fitness facilities. Any community member or patient can hire a lifestyle coach, or sign up for yoga, Pilates or meditation classes, or make an appointment for hypnotherapy, craniosacral therapy, acupuncture, massage therapy or Reiki. The Healthy Life Centers offer snacks and meals made with produce from the Teaching Garden.

These wellness centers bring all the pieces together and in doing so strengthen the relationship between the hospital and the community. For example, if a fitness center member starts having back pain, he can easily connect with Lee’s physical therapy department or pain management department.

**A thoughtfully designed interior and exterior environment:** Kashman and Odorizzi explain in their book: “After much research and consultation, we learned that if patients had access to more healing spaces, it would help them heal faster. Plus, the staff would also take greater pride in our environment they build each day. In changing our environment (internal and external), we trusted that everyone from our patients to our staff would feel healthier and happier.”

Lee carefully considered what colors to paint the walls and how much natural sunlight was accessible. Some ceilings were painted with artwork so that patients lying in bed for long periods of time would have a healing focal point to enjoy. Some stairwells were decorated with nature-based paintings. This made the stairwells more inviting, which encourages greater use of the stairs versus the elevators.

As the book sums up, “All our decisions were geared toward maintaining or restoring wellness and well-being.”

## Cooking up a new philosophy

Food is one of the six elements of Lee’s wellness wheel, and it’s been a major focus of the system’s transformation. Lee provides more than 5 million meals every year, including 1.5 million patient meals and more than 2.2 million cafeteria transactions. The cafeteria generates more than \$7 million in revenue to the hospital.

That means Larry Altier, who again is the system director of food and nutrition services for Lee, has a lot of mouths to feed. He’s the one who takes the hospital’s food and nutrition philosophy and makes a strategy to see it out on the menu.

“There are about as many opinions and viewpoints on food as there are people in the world,” Altier says. So Lee did a lot of research, put together focus groups and worked with medical staff to develop these guiding principles that most everyone could agree on:

- *Consuming nutrient-dense whole foods, colorful fruits, vegetables, whole grains, nuts, beans and lean proteins provides the body what it needs for optimal health.*
- *This philosophy coupled with avoiding highly processed foods, concentrated sugars, fats and engaging in regular exercise provides for an optimal lifestyle.*

- Removed fryers from the cafeteria, along with foods like chicken wings and french fries
- Eliminated foods like hotdogs and hamburgers and replaced them with items like veggie burgers and wraps
- Eliminated the high-fat and high-sodium foods from the grill
- Removed the slushy machine and sugary drinks
- Added lean meat options to the grill, such as bison and organic grass-fed beef
- Introduced a full line of low-sodium soups
- Added a new seafood entrée Monday through Friday
- Brought in organic tilapia and wild-caught salmon
- Added 48 new salad bar choices
- Switched to organic greens
- Added a vegetarian-focused cold station that offers chilled salads, pitas and wraps. This station includes a blender where people can make smoothies from fruits, vegetables and coconut water.
- Added “Great Grains,” a grain-based specialty station
- Added healthy snacks in vending machines
- Increased organic and non-GMO choices

## Getting change off the ground

“Even in our own department there were some pretty entrenched perspectives,” Altier says. “We really had to identify the research and data and give examples and rationalize why following a more plant-based approach was the right thing to do, because even some of my own staff didn’t believe in the path we were following.”

And the meat and potatoes crowd did voice their displeasure when they lost some of the items they were accustomed to. People were used to eating certain products, and they also were used to the economic value of meals like a hot dog with french fries.

“You really have to know your facts to overcome resistance because everything can be argued away if you don’t know your facts,” he says. “But when you have a solid basis of information, over time, in most cases, the staff will move in that direction.”

Altier says it also helps to anticipate all the questions you’ll get when you change something as culturally entrenched and emotional as food. Have an FAQ prepared on the front side, and ensure leaders and the people directing the change know how to respond to queries really well.

**KOTTER'S  
STEP 5:**  
Food services helped overcome resistance to change, even within its own department, through education and intentional communication.

Otherwise, Altier says, you might end up with a staff member questioning the changes and a leader responding with something like, “Yeah, I don’t know what they were thinking.” That’s going to hurt the entire effort, while confident, research-based answers will move you forward.



At Lee, they focused on framing everything as options, alternatives and invitations, versus an invasion on people's beloved foods. So instead of "we're taking away your prime rib," it's "we're inviting you to try something new—like black bean breakfast burritos—and it's a delicious meal."

The hospital spent about two years strongly promoting and explaining the reasoning behind the push for more plant-based meals. Lee also used what Altier calls "small cycles of change" for a gentler but more sustainable transition in the cafeteria. (Drastically changing everything at once won't win a lot of fans, Altier says). One example of a small change is they renamed the department's brand "Flavor Harvest," which is the identity for the cafes, menus and catering program. The design has a bright, natural look with many images of fresh fruits and vegetables.

Kashman adds that there is a new population food service gains by making these changes. Before the transition, he'd look around the cafeteria and notice that the people who were packing their own food were bringing healthier choices than the cafeteria offerings. That meant the hospital wasn't providing enough opportunities for people who already cared about nutritious food. In other words, the people making good choices were underserved. As the hospital made positive changes, more of that healthy-bag-lunch segment started buying meals in the cafeteria.

"We even have some people who are outside the system come in to eat in our cafeterias now," Kashman says. "We serve more meals than most restaurants."

Another strategy deployed was focusing on one new food per month. They call it their "Savor the Flavor" program. For example, for an entire month, they promoted eggplant. Posters described the benefits of eggplant, the cafe made different meals with eggplant and it was included among the salad bar options.

One fun program has been the vegetarian Chef's Challenge, where a chef from each of Lee's four main hospital cafeterias competes against one another to create a vegan or vegetarian meal using only plant-based ingredients. They advertise the events and invite people to come watch, sample and vote for their favorite.

"We've found when you bring all of this into the mix, more and more people will become interested and it will gain traction little by little," Altier says. "That's exactly what happened to us, and the more we introduced things as an addition versus a change, the more people accepted it."

Lee subsidized healthier foods so those items could be discounted for staff, which means it paid for staff to make those changes. Lee has chosen to invest in helping pay for healthier plant-based foods, and customers are also paying a little more overall. Altier guesses it's about a 20 percent increase in food costs for a menu focused on fresh, organic, plant-based options.

From a revenue perspective, there probably isn't a return on investment, he says, "Although long term, with what happens to your work force in terms of chronic disease management, there probably is a positive return on investment."

As for patient meals, a lot are the same as what's on the menu in the cafeteria. Of course, there are certain populations in the hospital where a particular kind of menu is needed to support a health condition. But in general, the hospital has made the same kinds of changes for patient meals as they have for the cafeterias. In the fifth year of the transition, the hospital has moved their total mix of products from less than 10 percent plant-based to more than 50 percent plant-based in some sectors.

When Lee started using more organic food and far more fresh fruits and vegetables, it was not an issue with their supplier, Altier says. Being as large of a system as they are probably helped. They simply put in a request and order with their vendor, and they'd have their needs met within a couple weeks.

## Improving health for the next generation

As part of looking at the whole picture, Lee also started a wellness program called 5210 in their childcare facilities. This program means employees' children are getting early exposure and education about healthy foods and physical activity. Every week, a particular fruit or vegetable is included in the curriculum, and that instruction is combined with physical activities that promote the food. The featured produce is then included in childcare meals and snacks that week. 5210 uses colorful, engaging educational materials that feature the highlighted fruit or vegetable and help reinforce the lesson. Kids get tools, information and simple recipes they can take home.

As part of the 5210 program, the childcare centers added several new menu items for the kids, including: vegetarian chili, vegetable lasagna, turkey burgers, veggie wraps and portobello mushroom pizza sliders.

A sampling of before and after numbers shows the changes for the children's lunch entrée menu:

- From 25 animal protein entrees to 13
- From 1 vegetarian entrée to 11
- From 6 pork entrees to 0
- From 8 beef entrees to 4

Other changes in the childcare menus included:

- Removing processed bakery items and replacing them with fresh bread
- Using freshly made hummus in snacks
- Increasing produce by 14 percent
- Emphasizing vegetables that may be unfamiliar to students
- Switching from offering 14 fruits (all of which were canned) to 24 fruits (12 of which were fresh)
- Removing processed cheese in exchange for less processed cheese, such as cheddar or farmer's
- Using only grass-fed beef





**Overcoming barriers:  
Wellness as a foundation, not an add-on**

None of the transformation and focus on wellness would have been possible without support from the top. “You really need support—both verbally and financially—from the CEO and the CFO and leadership,” Lacagnina says. “They have to understand this is part of the strategy for the health system, and they have to talk it up and help everyone see this is something we really want to do.”

*“You have to develop a wellness culture across the entire system and do a lot to actually walk the walk and talk the talk.”*

- Sal Lacagnina, D.O., medical director of wellness and employee health at Lee Health.

“This can’t just be the flavor of the month, like ‘let’s do wellness for a few months,’” he says. “You have to develop a wellness culture across the entire system and do a lot to actually walk the walk and talk the talk.”

With a solid foundation in place, you can overcome common barriers, Lacagnina says, for instance:

**KOTTER'S STEP 5:**  
Lee overcame common barriers that can get in the way of transformation.

**CHALLENGE:** Independent care silos make it difficult to change the way healthcare is delivered and to develop integrated care.

**SOLUTION:** Pull together a passionate team from different departments in the system. At Lee, that group started initially with a handful of people, including Lacagnina, Kashman, Altier and Collins.

*As they gained support from the c-suite and from employees, they expanded into a food is medicine group. They met routinely to discuss how to incorporate nutrition into clinical practice and to share findings. That group later grew into a broader lifestyle medicine committee, and today they meet every quarter.*

*Those committee meetings address another obstacle, which is the silos that separate various departments. “You really have to work hard to develop relationships across the silos,” Lacagnina says. “You have to bring everyone together so you know what each other is doing and so you can coordinate your efforts.”*

**CHALLENGE:** A healthcare system may wonder, how can we afford to invest in this? Yet the wellness team needs appropriate funding and resources in order to bring ideas to life and deliver services.

**SOLUTION:** It’s critical to have the right tools to track the data on the clinical and financial side—those numbers can be persuasive, proving financial and clinical success, Lacagnina says.

**CHALLENGE:** Most providers are not educated in lifestyle medicine or the power of nutrition to prevent and reverse disease, making it challenging for them to deliver care that’s focused on these daily lifestyle choices.

**SOLUTION:** The healthcare system needs to invest in training providers, Lacagnina says. Most providers have only been trained in chronic disease management, not prevention and wellness.

Currently about 25 Lee providers are going through the American College of Lifestyle Medicine certification program. Lee covers half the cost of the training, and providers can use their continuing education money to pay for the other half. That's quite an incentive—providers at Lee can get this advanced training free.

Also, the physician and nurse residency programs include a wellness component at Lee, and they're all trained in the six areas of the wellness wheel.

As Lee grew its wellness culture, this four-part strategic focus has remained top of mind, Kashman says:

1. Getting great health outcomes
2. Creating exceptional patient experiences
3. Maintaining strong financial outcomes
4. Coordinating care across the continuum

It's hard work but it's worth it, Lacagnina says. "You get to hear these stories about how people's lives were changed, just through these simple things we're asking them to do."

In 2016 Lee Memorial Hospital changed its name to Lee Health, marking its shift away from mostly taking care of sick patients toward its focus on prevention, wellness and a holistic view of community and population health.

There's a lot of intention, thoughtfulness and strategy that goes into an organizational transformation like this, and the movement also takes on a strong grassroots component, Kashman says. "It takes off when you find people who have a passion for it, and you bring them in and connect the dots across the continuum."

## Caring in the greater community

One passionate employee was Collins, who again is Lee's system director of health and wellness. Her position was developed to support the cultural shift. A lot of the initiatives and efforts she's made professionally have developed out of her personal growth and recognition of what would be supportive for others' wellness journeys.

Collins is the one who developed the concept of the wellness wheel. It came out of a conversation with Kashman, where she was emphasizing that although food is a critical piece of health, it's not the only piece.

"Our concentration was so heavy on the food side, and that's a common entry point for people when they're looking at lifestyle changes," she said. "We wanted to not only support folks who were seeking nutrition counseling to affect their health but also introduce them to the other five factors," which again are: physical activity, purpose driven living ("your why"), mental and behavioral health, stress management and sleep.

"It's all really just common sense, but some of these things are constantly marketed against and the culture is set up in a way that makes it hard," Collins says. "The wellness wheel is a cool tool where we can say to people, 'Where are you willing to enter the journey?'"

"Once people enter the wheel they start to feel better, and their eyes are opened about other ideas too—new ways they can heal and take care of themselves," she says.

Collins and her husband participated in the CHIP program early on. "I started thinking, 'I want my best friend to come with me too!' but my friend wasn't an employee," Collins says. "I started wanting to really open things up and extend out into the community."

*"The wellness wheel is a cool tool where we can say to people, 'Where are you willing to enter the journey?'"*

- Christin Collins, system director of health and wellness at Lee Health.

As a person who was already highly involved in the outside community, Collins was a natural ambassador and the perfect person to make connections between the hospital system and residents in the Lee County area. And as she personally addressed all the elements of the wheel herself, people in the community noticed.

**KOTTER'S STEP 7:**  
Lee continued to grow, expand and accelerate their programming by making strong connections with the Lee County community.

“People literally saw my physical, emotional and spiritual health transformation right before their eyes,” she says. “So they’d come up to me and say, ‘What’s going on? You seem like a completely different person?!’ and then it was easy to get them excited about their own health.”

Collins found that community members—even more so than some medical professionals who may have been entrenched in a particular model or belief system—were really open-minded and quickly embraced the ideas of lifestyle change and holistic health. People were interested in taking more responsibility for their health, and they were eager for the information and support needed to do so.

“You can be a lighthouse, and people will just come to you,” Collins says. “You can be a beacon of hope.”

In addition to the natural interest people have had in talking with her about wellbeing, Collins furthers the efforts through formal efforts: speaking at a small business group, the Rotary club or the women’s association and also by sharing through social media. She goes out into the community and also invites people to events at the hospital. She fundraises so that more wellness programs can be brought to the community. Here are some highlights:

- **CHIP:** The CHIP program that Lee offered to employees was extended to the community. Community members can take the course, for a fee, at different locations throughout the system.



- **National speaker series:** Collins arranged for respected speakers to come talk to the community about living healthy lifestyles. The events have become so popular they're now held at an area church that can hold 1,100 people. As one example, Lee recently hosted Dr. Darrin Morten, an internationally recognized lifestyle medicine speaker.

Expanding beyond the speaking event, Morten is also guiding a pilot program called the LIFT project, which is focused on positive psychology and happiness. The program includes 60 community influencers from around Lee County, including those from the health system, the school systems, the area chamber, a community foundation and more. Participants are learning about things like your physical environment, gratitude, positive speak and the neurology of your brain.

- **Babcock Ranch:** Babcock Ranch is the first solar-powered city in the country, and it was created to be a center of wellbeing. It's a community designed to make holistic health and wellness easy. Lee has collaborated with this nearby Florida city, which wanted to have a wellness center and medical services available. Lee currently has a Healthy Life Center at Babcock Ranch, and they've opened a lifestyle medicine physician clinic there too.
- **Cooking collaborative with the PACE Center for Girls:** Collins had an idea about starting a food and cooking course for at risk girls. She and Altier talked about the idea, brought it to fruition, and now it's been operating for five successful years. Lee's culinary kitchen, Culinary Solutions, is right across the street from the Pace Center for Girls, which helps at risk young ladies.

When the girls are close to leaving the at risk school program, they can participate for free in Lee's functional cooking program at Culinary Solutions to inform and empower their own health and teach their families.



“We wanted to support their journey as they prepare to return to a regular school,” Collins says. So Altier and the clinical team at Lee developed a 6-week functional cooking course taught by chefs and dietitians. The course teaches girls how to shop in a food desert and make the best choices possible given financial and logistical circumstances. The girls learn the foundations of nutrition, menu planning, navigating grocery stores, purchasing wisely and how to cook basic meals. Many of the participants come from troubled circumstances and challenging environments, or they may even be living on their own.

The program is a community benefit, Altier explains. It’s a low-cost, low-risk approach that requires only a small material investment from Lee. But the fruits of this effort—providing independence, knowledge and empowerment— can benefit the girls, and their loved ones, for a lifetime.

The collaborative program includes a celebratory graduation. Collins said at a recent ceremony she attended, every single girl had a family member or support person there, even though it was held at 4 p.m. on a Tuesday—clearly a workday for many. Collins went around the room asking people about the experience:

“These family members would say, ‘My daughter came home with this meal she created, and she had such pride. She became the leader in our family and she has educated us on how to eat better. We started putting down our electronic devices and sitting down to have a meal and conversation together,’” Collins says. “It was so moving.”

Collins also heads up Healthy Lee. This is a group led by Lee Health that brings organizations around Lee County together to promote a healthier environment in the community by supporting healthy lifestyles as well as mental and behavioral health. All these initiatives and more meant Collins was recently named 2016 “person of the year” by the southwest Florida newspaper, The News-Press.

**KOTTER’S STEPS 2 & 4:**  
Lee is building a coalition and a “volunteer army” in the greater community to help support health and wellness for all residents in and around Lee County.

Forging these strong, genuine connections with the community is great for people and it’s great for the health system as well, Kashman says. It shows the hospital cares. It builds trust and relationships. It shows Lee is a leader in wellness. It brings patients through their doors when they do need hospital services.

“This whole movement is in the pioneering stage,” Collins says. “For anybody who wants to take this on, know that it can be challenging, and you have to have a lot of patience. Don’t try to change the things you can’t control—instead concentrate on who you can help and how you can help them.”

The efforts will be as rewarding as they are challenging—and well worth it, Collins says. “Every day we get communication from individuals who share a life-altering story.”



## KEY TAKEAWAYS

- Remember the power of a small group of passionate people to bring about organizational change.
- Get support from your leaders and support the grassroots efforts for change.
- Start small, capture the data so you can prove your model and then expand.
- Don't be discouraged when you don't see a financial impact right away.
- Look at national benchmarks for guidance.
- Find ways to bring champions of wellness together to strengthen the cause (the transition can feel like an uphill battle, but there's more support in numbers).
- Invest heavily in educating all the people who are affected by changes so they will understand why changes are being made.
- Anticipate people's questions and doubts about the changes, and create FAQs so people can respond to those questions or criticisms in a positive, meaningful and accurate manner.
- Make the health and wellbeing of your staff primary. That way, you'll ensure your patients are getting the best care and you will also prevent burnout.
- Empower your employees. Routinely and sincerely invite them to share feedback and ideas on how to create a healthier healing environment.
- Bridge silos and integrate care across the continuum for more efficient, effective, holistic care.
- Maintain regular meetings, where every department is represented, to discuss plans and progress on wellness initiatives.
- Remember the physical environment is an important element of healing. Pay attention to the aesthetics and care of your building and grounds, as research shows it improves healing.
- Dedicate a position, or multiple positions, to focus on wellness for employees and for the community.
- Make continual efforts to reach out to your broader community and become involved so you can offer wellness information and services.
- Be an example. When you address all the elements of the wellness wheel and pay more attention to the health of your body, mind and spirit, people will notice and start asking you what you're doing different. Your efforts around self-care will naturally spark others' interest.

# Closing

## Tangible and intangible ingredients for success

There's an art and a science to a successful organizational change around wellness. Each of the healthcare systems featured created something unique given their particular location, business environment, size, culture, values and level of outside competition.

But one thing they all have in common is they're leading, by example, a much-needed change in how healthcare is approached and how it is delivered. These leaders have all also followed the science of organizational change that guides successful transformation.

Consider the guidelines for building wellness programs, as outlined in a joint statement from the Health Enhancement Research Organization, American College of Occupational and Environmental Medicine, American Cancer Society and American Cancer Society Action Network, American Diabetes Association and American Heart Association. The group described the cultural support components necessary for success:

- **Leadership support:** Senior leaders endorse and support the wellness program.
- **Champions:** A wellness committee, champion and/or ambassador approach is implemented to help design and advance the wellness program throughout the organization.
- **Environment:** A physical work environment that supports engaging in healthy lifestyle behaviors and emphasizes safety.
- **Policies:** Organizational policies that support a healthy workplace.
- **Health benefit design:** Coverage and access is offered or available for preventative services and for acute and chronic healthcare services for all individuals.



The leaders from pioneering healthcare systems described the same elements and the same science when they recounted their process. They've also captured the data to show that it works.

For instance, the Geisinger program for people who have type 2 diabetes illustrates some of the benefits. As previously mentioned, the program offers participants free wholesome meals as well as information about healthy eating and healthy living. A study showed that after 12 months, participants' HbA1c levels lowered by more than two points, which corresponds with a decrease in the risk for serious complications or death by 40 percent.

It's not surprising then, that the program has also demonstrated a significant financial reward. Over the years, payer-side costs have dropped by an average of two-thirds. And among patients whose claims data was collected, there was an 80 percent reduction in annual healthcare costs, from an average of \$240,000 to \$48,000 per member per year. It's an incredible savings for a program that costs only \$2,200 per patient per year.

These kinds of results provide proven incentives for healthcare leaders who want to create sustainable health solutions. Knowing this, inventive healthcare systems are embracing the art of change. They're finessing the basic structure and key components of transformation in order to meet the unique features of their particular culture.

Leading change is never easy, and neither is taking risks. Organizational change in general is challenging, and healthcare in particular has its own set of obstacles. But in addition to the science and the art, these healthcare systems share the key intangibles for success: passion, compassion, inspiration and hope.

As people experience their own personal transformation, see colleagues and patients become empowered and watch lives turn around, it sparks a real fire, Madrid says. "Then you're driven by something deeper, and you work with a different energy and a different force behind you."





# Resources

## Books

“The Plant-Based Workplace: Add Profits, Engage Employees and Save the Planet,” by Gigi Carter.

<http://plantbasedworkplace.com>

“Mindful Healthcare: Healthy Team, Healthy Business,” by Scott Kashman and Joan Odorizzi

## Websites and resources

[www.PlantricianProject.org](http://www.PlantricianProject.org) - The 501(c)3 organization dedicated to filling the void in medical education related to evidence-based clinical nutrition: educating, equipping and empowering medical professionals in regard to evidence-based whole food, plant-based nutrition

[www.PBNHC.com](http://www.PBNHC.com) - Annual CME conference for healthcare providers

[www.PlantBasedDocs.com](http://www.PlantBasedDocs.com) - Searchable international database of plant-based practitioners

[www.PlantBasedResearch.org](http://www.PlantBasedResearch.org) - Vetted compendium of research on plant-based nutrition

[www.CulinaryRx.com](http://www.CulinaryRx.com) - Plant-based science and basic culinary educational program

[www.IJDRP.org](http://www.IJDRP.org) - International Journal of Disease Reversal and Prevention: An open source journal dedicated to the science of Lifestyle Medicine

[www.DiseaseReversalDigest.com](http://www.DiseaseReversalDigest.com) - The emerging science of plant-based nutrition for the general public

[www.LifestyleMedicine.org](http://www.LifestyleMedicine.org) - The nation's medical professional association for clinicians dedicated to a Lifestyle Medicine-first approach to healthcare

The 8-Step Process for Leading Change, by John Kotter, leadership expert:

<https://www.kotterinc.com/8-steps-process-for-leading-change/>

Samueli Integrative Health Programs and Wayne Jonas, M.D.: <http://drwaynejonas.com/>

## Guides

<https://plantricianproject.org/quickstartguide> - Get started today with the library of easy to read Plant-Based Nutrition Quick Start Guides

## Movies

“Forks Over Knives” documentary

“PlantPure Nation” documentary

“Eating You Alive” produced by board member Dan Purjes: <https://www.eatingyoualive.com/>

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