Kimberly-Clark Professional conducted contamination testing on everyday objects people commonly come in contact with in six cities across the U.S.: Atlanta, Chicago, Dallas, Los Angeles, Miami, and Philadelphia. Using an Adenosine Triphosphate (ATP*) meter, a device commonly used to monitor sanitary conditions, hygienists swabbed and analyzed objects to measure levels of ATP. Everyday objects with an ATP reading of 300 or higher are considered to have a high risk for illness transmission. The highly contaminated surfaces included gas pump and mailbox handles, escalator rails, parking meters, and ATM, crosswalk and vending machine buttons.

Additional research was conducted in consultation with Dr. Charles Gerba, Professor of Microbiology at the University of Arizona, which revealed contamination hot spots in the workspace. According to the study, various office surfaces tested were found to have high levels of contamination. Hygienists collected nearly 5,000 individual swabs from office buildings housing more than 3,000 employees. The participating office buildings represented a broad cross-section of office “types” including manufacturing facilities, law firms, insurance companies, healthcare companies and call centers.

“People are aware of the risk of germs in the restroom, but areas like break rooms have not received the same degree of attention,” said Dr. Gerba. “This study demonstrates that contamination can be spread throughout the workplace when office workers heat up lunch, make coffee or simply type on their keyboards.” An estimated 85% of employees miss work each year due to “minor illnesses” such as colds, stomach flu and other contagious illness. That makes minor illness the number one cause of short-term absence.

Kimberly-Clark Professional has introduced an innovative well-being program, The Healthy Workplace Project, which results in improved health for employees by reducing the spread of workplace germs. Wellness service manager for The Healthy Workplace Project, Arleen Foreman, notes that “best practices from infection prevention are integrated with engaging activities to promote healthy behaviors and work environment.” Customized services include employee competitions, prizes and giveaways, ongoing education, audits and reporting. If you are interested in learning more about The Healthy Workplace Project, please contact Arleen at arleen.foreman@kcc.com.

- Arleen Foreman
  Kimberly-Clark Professional
  Worksite Wellness Committee

* ATP is present in all animal, vegetable, bacteria, yeast and mold cells. Detection of ATP indicates the presence of contamination by any of these sources.

**Resources**

1. The Chartered Institute of Personnel and Development. Absence Management 2011 Annual Survey
3. Healthy Returns? Absence and Workplace Health Survey 2011
The Affordable Care Act and Public Health

A Summary of the Health Reform and Healthy People Initiative Article

The Affordable Care Act (ACA), the historic health reform law passed in 2010, lays the foundation for prevention and builds upon the goals and objectives established in Healthy People 2020. The ACA supports a comprehensive model for health in the U.S. through the application of the ecological model of health and the integration of clinical and preventive services.

The ACA sets the stage for prevention in several ways. First, effective September 2010, all new group plans and insurance policies must cover, at no cost, clinical preventive services recommended by the US Preventive Services Task Force. Second, the ACA created the National Prevention Council to create a focus on prevention and develop a National Prevention Strategy. Third, the ACA established a Prevention and Public Health Fund that will provide funding over the next ten years to promote health and prevent disease. Lastly, the ACA also authorized investment in several other programs, including the National Health Services Corps and community health centers that will strengthen the public health infrastructure. Below is a summary of the ACA’s focus areas.

**Tobacco Use:** The ACA directly addresses tobacco use through numerous health systems and broader public health reforms. Clinical interventions will be enhanced through the ACA by removing financial barriers to accessing cessation services and creating medical homes and primary care systems that ensure appropriate counseling, cessation treatments, and follow-up. In 2010, the Prevention and Public Health Fund awarded funding to communities to implement evidence-based tobacco control programs and policies. These include telephone-based tobacco cessation services, outreach programs targeting vulnerable population, and anti-tobacco media campaigns showing the negative health consequences of tobacco use.

**Physical Activity:** The ACA builds upon the Guide to Community Preventive Services recommendations to make physical activity the easy choice by providing funding for communities to make the built environment more conductive to active living and encourages walking, bicycling and stair climbing. The ACA-authorized Community Transformation Grants enables multi-sectoral ways to promote physical activity and other health outcomes through a “health in all policies” approach, including education, planning, and transportation.

**Overweight and Obesity:** The Food and Drug Administration is charged with implementing new federal requirements for nutrition labeling of foods sold at certain food chains and establishments to raise awareness of the caloric content of foods. To promote worksite wellness programs, the ACA expands premium discounts that employers can offer as financial incentives to increase participation in weight control programs, provides employers with technical assistance and best practices, and provides grants to small employers to establish comprehensive worksite wellness programs. The ACA also supports the creation of a Healthy Weight Collaborative administered by the Department of Health and Human Services’ Health Resources and Services Administration for multi-sector partners to engage state and local communities in linking public health and primary care to prevent and treat obesity in children and families.

**Substance Abuse and Mental Health:** Screening for alcohol use is expected to be enhanced through the ACA’s strengthening of the primary care system and its assurance of coverage for clinical preventive services for new plans. ACA also builds upon previous laws requiring uniformity of coverage for
mental health treatment. Furthermore, these actions will be enhanced through the minimum benefits package that is expected to be available in 2014 through insurance exchanges, which will ensure that essential mental health and substance abuse services are available to lower income populations through Medicaid and subsidized private insurance. In 2010, through the ACA-authorized Prevention and Public Health Fund, funding was dedicated to the integration of behavioral health into primary care settings to help prevent and promote health and wellness.

**Injury and Violence:** The National Prevention Council will begin to address the multi-sector problems through a social determinants of health approach. Specifically, the federal government will partner with a diverse group of stakeholders to prevent injury within worksites, homes, neighborhoods, schools, and other settings.

**Responsible Sexual Behavior:** Increased access to care under the ACA will provide opportunities for counseling and screening, including first-dollar coverage for US Preventive Services Task Force recommended screenings for sexually transmitted infections.

**Immunization:** The ACA will reduce the financial barrier to immunization by ensuring first-dollar coverage for immunizations recommended by the Advisory Committee on Immunization Practices for those in private insurance plans.

**Access to Care:** One of the most significant changes under the reform is to ensure all Americans have insurance and access to primary care. The Prevention and Public Health Fund will allocate funds to bolster the primary care workforce. Additionally, funding will support the expansion and creation of community health centers making affordable primary care services available to millions of people regardless of insurance status or ability to pay.

**Environmental Quality:** The National Prevention Council will increase attention on the physical environment and look more broadly at the consequences of the current transportation systems, agricultural policies, and community design and development.
Breastfeeding is the Best Start to Life
First Annual WIC Breastfeeding Awareness 3K Walk

Saturday, August 25, 2012
Check-In: 7:30 a.m.
Walk Begins: 8:30 a.m.
FREE REGISTRATION AND PARKING!

Who: All breastfeeding women; Past, present and future; WIC Families, La Leche League; health and breastfeeding advocates and more!

Come join us for:
1.8 mile walk around the park
Breastfeeding & Health Booths
Kids’ Activities
Music & Raffles

Location: Kendall Indian Hammocks Park
11395 SW 79th Street, Shelter 5
Kendall, Florida 33173

For more information call (786) 336-1333
Miami-Dade County Health Department WIC & Nutrition Program
WIC is an equal opportunity provider

For additional information or to participate in the Consortium:
Tel: 305-278-0442
www.healthymiamidade.org