PRESENTER

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THE PROBLEM – CRISIS OF HEALTH

• Work Environment
• Aging Workforce
• Stress
• High risk of chronic diseases
CHALLENGES AND OPPORTUNITIES

• Poor health and low healthcare usage
• Impact that serious crashes have upon population
• Increased medical costs (WC and health insurance)
SO WHAT IS OBESITY?

**Body Mass Index**

Ratio of person’s height and weight

- Healthy adult BMI = 18.5 to 25
- Overweight adult BMI = 25 to 29
- Obese adult BMI = 30 to 35
- Morbidly obese adult BMI = greater than 35
OBESITY IN THE CMV POPULATION

- Leading cause of death and disease
- 66% of US population = obese
- Utah study = 53.3% obese
  26.5% morbidly obese
- 400% - 3 or more co-morbid conditions
- 8.4lbs average weight gain
OBESITY AND OTHER HEALTH CONDITIONS CONNECTION

Obese drivers compared to normal weight drivers (BMI >30 - 35)
- 3.6x - high blood pressure
- 4.15x – diabetes
- 5.49x – sleep disorders

Morbidly obese drivers compared to normal weight drivers (BMI >35)
- 6.94x – high blood pressure
- 7.99x diabetes
- 28.59x sleep disorders
Hypertension – A person is physically qualified to drive a CMV if that person has no current clinical diagnosis of high blood pressure likely to interfere with the ability to operate a CMV safely.

Stage 1 – Systolic of 140-159 and or diastolic BP of 90-99
• Low risk of BP related acute incapacitation

Stage 2 – Systolic of 160-179 and/or 100-109 diastolic
• One time certification of 3 months to reduce to below 140/90.

Stage 3 – Systolic at or greater that 180 and/or 110 diastolic
• High risk of acute BP related event
• May not be qualified, even temporarily, until reduced to 140/90 and treatment well tolerated.
HYPERTENSION

- 24% of those with high blood pressure readings = undiagnosed

- 30% with HTN of either 160mm or 90mm already taking meds
TYPE 2 DIABETES

- Increased 150% in males during past 30 years
- 50% higher prevalence in trucking
- Estimated 14.3% within driving population
- 1.7 million new U.S. diagnoses each year
- 78 million pre-diabetes
FMCSA (DOT) MEDICAL EXAMINATION - SLEEP APNEA

• No current regulation in place – screening “recommendations” only
• Poor sleep and chronic sleep deprivation
• Estimated 28% of CMV driver – mild or higher OSA levels
MEDICATION CHALLENGES

- Prescription spend increasing exponentially
- 43% of sickest say it is difficult to afford meds
- 37% advise they occasionally skip refills due to cost
- Medical plans tightening the rules
SO WHAT CAN WE DO?
SCHNEIDER NATIONAL HEALTH AND WELLNESS

- Sleep Apnea Initiative
- Health Coaches
TRUCKS, INC. HEALTH AND WELLNESS

- Company management and supervisors trained
- Annual Physical Examinations – Exceed DOT
- Annual biometrics evaluation
- In-house coaching
- Workout equipment at corporate office
- Positive ROI, driver retention, and safety
• Siphiwe Baleka – someone you should get to know
• 13 week weight loss program
• Increase metabolic rate to high intensity
• Strategic food intake changes
• Make it simple

http://www.siphiwebaleka.com/
https://www.facebook.com/Fitness-Trucking-241439089227493/
http://www.afaa.com/courses/the-baleka-method-driving-metabolism
http://skm.me/sw/57kS
Fundamentals Of A H/W Program
FUNDAMENTALS OF A H/W PROGRAM

1. Culture Of Care
2. What Does Success Look Like
3. Establish Where They’re At
4. It Must Be Easy and Sustainable
5. Education/Promotion
You Have To Start Somewhere
QUESTIONS?

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