## Supplemental Digital Content 1: WFHN Conceptual Model and Hypothesis



The following a priori hypotheses relevant to the ROI study are highlighted in the above graphic.

Employee Health

* 1. Intervention employees will have reduced work-family conflict compared to UP employees at follow-up
	2. Intervention employees will have reduced cardiovascular risk compared to UP employees at follow-up
	3. Intervention employees will have improved length of sleep and sleep quality compared to UP at follow-up
	4. Intervention employees will have reduced psychological distress compared to UP at follow-up

Workplace Effects

3.1. The intervention will increase individual workers’ productivity, safety compliance and job satisfaction, and reduce job strain, commuting time, organizational citizenship and burn out, compared with usual practice (UP).

3.2. The intervention worksites will have increased retention at the worksite level compared with UP.

3.3. The intervention worksites, compared with UP, will have reduced health care costs and worker’s compensation claims costs for injuries and accidents.

3.4. The intervention will have a positive ROI at 18 months.

3.5. The intervention will have an effect on employees' perceptions of work environment which will include manager support (FSSB), and work climate.

Mediation Hypothesis

4.1. The health effects of the intervention on both employees and their family members will be mediated by a reduction in work-family conflict.