

# WORKPLACE WELLNESS

Provided by Employer Flexible



## Workplace Wellness Assessment Checklist

Use the checklist below to assess your workplace as well as to identify wellness program strengths and areas that need improvement.

#	Wellness Component	Yes	In Process	No	Potential Priority	Comments
<b>General</b>						
1	Do you have support from key stakeholders such as senior leadership, HR managers, safety officers, etc.?					
2	Do you currently have a policy outlining the requirements and functions of a comprehensive workplace wellness program?					
3	Do you have a committee that meets at least once a month to oversee your workplace wellness program?					
4	Do you have a workplace wellness plan in place that addresses the purpose, nature, duration, resources required and expected results of your program?					

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5	Does your new employee orientation include an explanation of workplace wellness programs, and are new hires given copies of any physical activity, nutrition and tobacco use policies?					
6	Does the worksite offer educational programs for health areas such as physical activity, nutrition and tobacco cessation?					
7	<p>Do you encourage employee participation in wellness programs? The following are ways to promote participation:</p> <ul style="list-style-type: none"> <li>• Information at orientation</li> <li>• Fliers or bulletin boards</li> <li>• Letters mailed to employees</li> <li>• Announcements at meetings</li> <li>• Employee newsletter articles</li> <li>• Incentive or reward programs</li> <li>• Public recognition</li> <li>• Health insurance discounts</li> <li>• Sponsor employee sports teams</li> </ul>					
8	Do you provide health counseling or other support mechanisms to modify behaviors?					
9	Do you offer adequate health care coverage for employees and their families for the prevention of and management of chronic disease?					
10	Is there a budget for employee health promotion that includes funds for programs or a portion of a salary for a coordinator?					
General areas totals (number of “yes,” “in process” and “no” items)						

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<b>Physical Activity</b>						
11	Does your company culture discourage sedentary behavior, such as watching TV on breaks and sitting for long periods of time?					
12	Do you provide flexible scheduling so employees can make time for exercise?					
13	Are employees provided with breaks during working hours and encouraged to be active during those breaks?					
14	Does the company map out on-site or nearby walking trails?					
15	Does the company encourage employees to map their own biking or walking routes to and from work?					
16	Does the company allow for walk-and-talk meetings instead of sit-down meetings to encourage activity?					
17	Do you provide exercise messages and information to employees?					
18	Do you provide prompts to promote physical activity near stairwells or elevators?					
19	Do you provide bike racks in safe and convenient locations?					
20	Do you provide showers or changing facilities?					

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21	Do you provide outdoor exercise areas, playing fields or walking trails for employee use?					
22	Do you provide or support a broad range of competitive and non-competitive physical activities that help develop the skills needed to participate in physical activities?					
23	Do you offer company-sponsored fitness programs or clubs for employee's other than at an exercise facility?					
24	Do you provide free, discounted or employer subsidized memberships to fitness centers?					
25	Do you offer incentive-based programs to encourage activity (e.g., pedometer walking campaigns)?					
26	Do you provide on-site physical activity classes such as aerobics, kickboxing, yoga, etc.?					
27	Do you provide an on-site exercise facility?					
28	Do you provide incentives for engaging in physical activity (e.g., merchandise, coupons or cash)?					
29	Can employees use the worksite's indoor or outdoor physical activity facilities outside of work hours?					
30	Do you provide on-site childcare coverage to facilitate physical activity participation?					
Activity area totals (number of "yes," "in process" and "no" items)						

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#	Wellness Component	Yes	In Process	No	Potential Priority	Comments
<b>Nutrition</b>						
31	Do you send healthy eating messages to employees (via email, messages, bulletin boards, etc.)?					
32	Do you promote the consumption of fruits and vegetables in catering and cafeteria policies through motivational signs, posters, etc.?					
33	Do you provide protected time and dedicated space away from the work area for breaks and lunch?					
34	Do you offer appealing, low-cost, healthy food options, such as fruits and vegetables in the vending machines, snack bars and break rooms?					
35	Do you promote healthy choices by increasing the number of healthy options that are available? Do you use competitive pricing to make healthy choices more economical?					
36	Does your on-site cafeteria follow healthy cooking practices?					
37	Does your on-site cafeteria set nutritional standards that align with the Dietary Guidelines for Americans?					
38	Do you label food to show appropriate serving size and calories, and provide employees with food models, pictures or portable food scales for weighing portion sizes?					
39	Do you offer healthy food options at meetings and company events?					

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#	Wellness Component	Yes	In Process	No	Potential Priority	Comments
40	Do you make water available throughout the day?					
41	Do you make kitchen equipment (refrigerators, microwaves, stoves, etc.) available to employees for food storage and cooking?					
42	Do you offer locally grown fruits and vegetables on-site?					
43	Do you provide on-site gardening?					
44	Do you provide interactive food opportunities, such as taste-testing, food preparation skills and peer-to-peer modeling?					
45	Do you have workplace policies and programs that promote breast-feeding?					
46	Do you provide an appropriate place for breast-feeding or pumping?					
47	Do you provide lactation education programs?					
48	Do you provide incentives for participation in nutrition and weight management activities?					
49	Do you include the employees' family members in campaigns promoting fruit and vegetable consumption?					
<b>Nutrition area totals (number of "yes," "in process" and "no" items)</b>						
<b>Health Screening and Disease Prevention and Management</b>						
50	Do you offer health risk assessments?					
51	Do you offer easy access to free or reasonably priced health screenings?					
<b>Screening area totals (number of "yes," "in process" and "no" items)</b>						

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#	Wellness Component	Yes	In Process	No	Potential Priority	Comments
<b>Tobacco Use</b>						
52	Do you prohibit tobacco use anywhere on your property?					
53	Do you post prompts or posters to support your no tobacco use policy?					
54	Do you promote the Tobacco Quit Line (800-QUIT-NOW)?					
55	Do you support participation in smoking cessation activities during work hours (flex time)?					
56	Do you provide counseling through an individual, group or telephone counseling program on-site?					
57	Do you provide individual, group or telephone counseling sponsored through your health plan?					
58	Are smoking cessation medications covered through your health plan?					
<b>Tobacco area totals (number of "yes," "in process" and "no" items)</b>						
<b>Cardiac Emergency Response Plan</b>						
59	Do you have a written plan for emergency response to cardiac events?					
60	Do you provide emergency training in cardiopulmonary resuscitation (CPR) and/or automated external defibrillators (AEDs) for response to cardiac events?					
<b>Cardiac response totals (number of "yes," "in process" and "no" items)</b>						

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Worksite Scorecard (Totals of all categories)	Yes	In Process	No	Potential Priority	Comments
<b>General (10)</b>					
<b>Physical Activity (29)</b>					
<b>Nutrition (19)</b>					
<b>Health Screening and Disease Prevention (2)</b>					
<b>Tobacco Use (7)</b>					
<b>Cardiac Emergency Response Plan (2)</b>					
<b>Worksite Total (60)</b>					