

# Michigan's Healthy Workplaces

## Resource Guide

*A Worksite Wellness Resource Guide for  
Michigan Worksites — Large and Small*



# Cardiovascular Health, Nutrition & Physical Activity Section Michigan Department of Community Health

Revised June 2011

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We want to acknowledge that this guide is possible because of the expert input we received from our partners. Their contributions allowed us to create a Michigan-specific resource that employers can use to create healthier workplaces.

This publication was modeled after the *Wisconsin Worksite Resource Kit to Prevent Obesity and Related Chronic Diseases*, August 2006. The original publication was developed by the Department of Health and Family Services, Division of Public Health, Nutrition and Physical Activity Program, Wisconsin Partnership for Activity and Nutrition.

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# MICHIGAN'S HEALTHY WORKPLACES RESOURCE GUIDE

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## Foreword

Improving the health status of Michigan's workforce is a key recommendation in a report submitted to Governor Jennifer Granholm by her council of Economic Advisors.<sup>1</sup> The recommendation was rated as a high priority with the potential return on investment rated very high. Currently, 75 percent of total healthcare costs are related to treatment of chronic diseases. Not only are chronic diseases affecting individuals at much younger ages, but "baby boomers" are moving into the prime ages for the development of chronic diseases and their complications. Less than 5 percent of Michigan adults report that they meet recommended federal guidelines for healthy eating, physical activity, and non-use of, or exposure to, tobacco products.

In August 2006, Governor Granholm received an award from the National Governors Association Center for Best Practices through the *Healthy States* competitive grant program to fund the *Michigan's Healthy Workplaces* project. *Michigan's Healthy Workplaces* project was designed to work with up to 25 businesses of 50 employees or more from the Governor's *Cities of Promise* initiative. *Cities of Promise* is an interagency initiative that aims to create inviting, thriving, and prosperous communities. A partnership team in each city includes a state agency representative, local unit of government partners, and other stakeholders including churches, schools, businesses, hospitals, community development corporations, and human service organizations. The role of the state agencies is to work with the team in a strategic, collaborative fashion to focus resources on the city. The *Michigan's Healthy Workplaces* project will collaborate with state-level organizations to establish sustainable public-private city partnerships and influence local constituents to work with business.

Worksites are an important venue to address nutrition, physical activity, and tobacco use issues. This guide was developed to assist in the implementation, expansion, and maintenance of a worksite wellness program. This guide provides step-by-step instructions of how to use the free assessments available to Michigan worksites, types of activities to implement, links to information on how to implement, and ways to determine effectiveness.

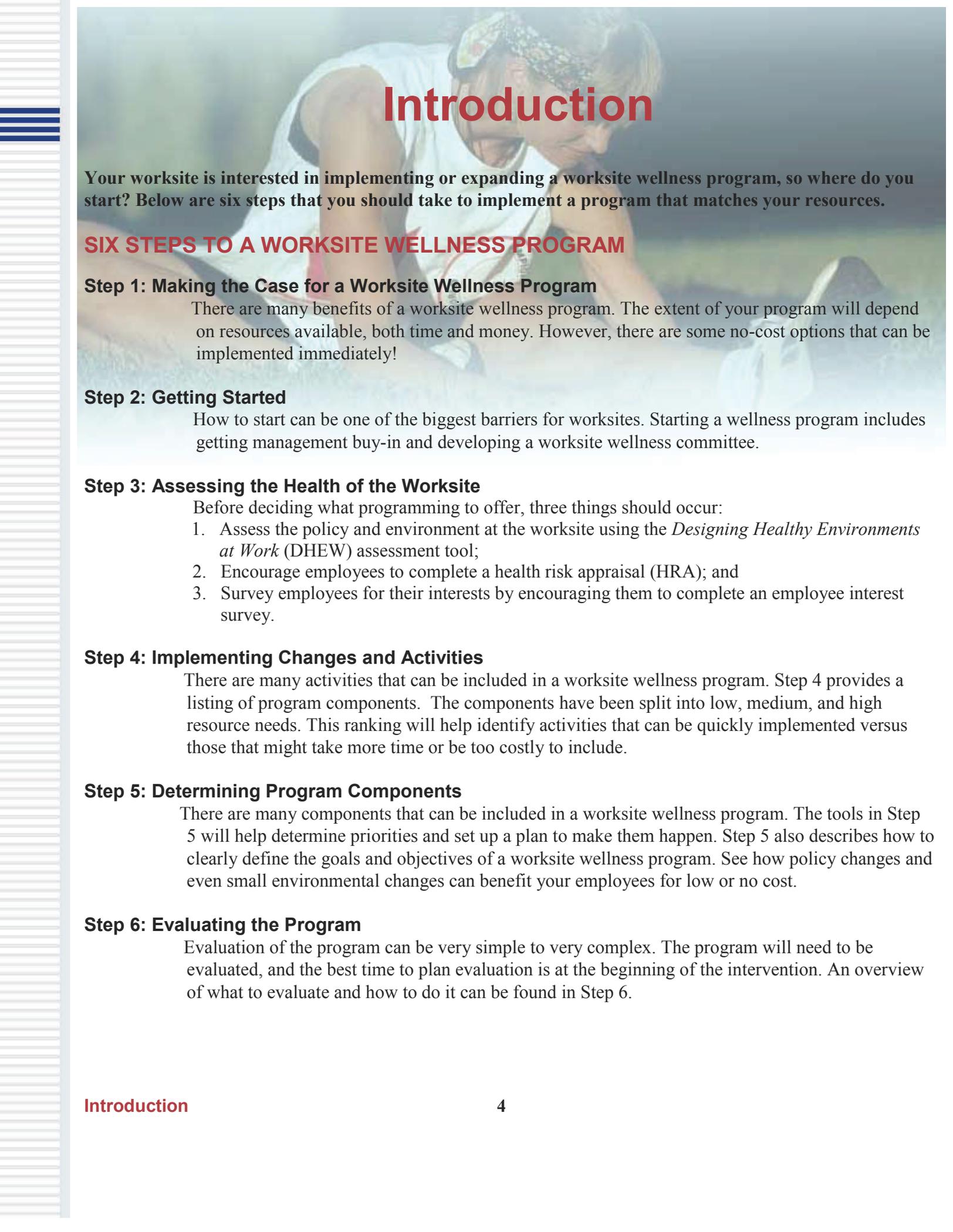
It will take the active involvement of many public and private partners to change systems, community, and individual behaviors. Worksites are one key environment for that change to take place. By working together, the people of Michigan have a great opportunity to create communities that support healthy lifestyles and reduce the health and economic burdens of chronic disease.

The model for this guide was originally developed as a collaborative effort of the Wisconsin Partnership for Activity and Nutrition - Business Subcommittee and the Chronic Disease Programs of the Wisconsin Division of Public Health. Wisconsin's resource kit focuses on strategies to offset risk factors that contribute to obesity and chronic diseases.

The Cardiovascular Health, Nutrition & Physical Activity Section of the Michigan Department of Community Health received permission to edit the original publication to contain resources relevant to Michigan worksites.

References to additional resources are for informational purposes and not an endorsement of organizations or products.

<sup>1</sup> Council of Economic Advisers Report of the President. February 3, 2006.



# Introduction

Your worksite is interested in implementing or expanding a worksite wellness program, so where do you start? Below are six steps that you should take to implement a program that matches your resources.

## SIX STEPS TO A WORKSITE WELLNESS PROGRAM

### Step 1: Making the Case for a Worksite Wellness Program

There are many benefits of a worksite wellness program. The extent of your program will depend on resources available, both time and money. However, there are some no-cost options that can be implemented immediately!

### Step 2: Getting Started

How to start can be one of the biggest barriers for worksites. Starting a wellness program includes getting management buy-in and developing a worksite wellness committee.

### Step 3: Assessing the Health of the Worksite

Before deciding what programming to offer, three things should occur:

1. Assess the policy and environment at the worksite using the *Designing Healthy Environments at Work* (DHEW) assessment tool;
2. Encourage employees to complete a health risk appraisal (HRA); and
3. Survey employees for their interests by encouraging them to complete an employee interest survey.

### Step 4: Implementing Changes and Activities

There are many activities that can be included in a worksite wellness program. Step 4 provides a listing of program components. The components have been split into low, medium, and high resource needs. This ranking will help identify activities that can be quickly implemented versus those that might take more time or be too costly to include.

### Step 5: Determining Program Components

There are many components that can be included in a worksite wellness program. The tools in Step 5 will help determine priorities and set up a plan to make them happen. Step 5 also describes how to clearly define the goals and objectives of a worksite wellness program. See how policy changes and even small environmental changes can benefit your employees for low or no cost.

### Step 6: Evaluating the Program

Evaluation of the program can be very simple to very complex. The program will need to be evaluated, and the best time to plan evaluation is at the beginning of the intervention. An overview of what to evaluate and how to do it can be found in Step 6.

## Step 1: Making the Case for a Worksite Wellness Program

### WHAT IS WORKSITE WELLNESS?

For the purposes of this resource guide, worksite wellness refers to the education and activities that a worksite may do to promote healthy lifestyles to employees and their families. This resource guide focuses on improving the healthy lifestyle behaviors associated with reduced risk of chronic disease, including adequate physical activity, good nutrition, and abstaining from tobacco use.

### WHY WORKSITE WELLNESS?

#### ■ *Examples of how worksite wellness strategies can lead to real cost savings for a company:*

1. Comprehensive worksite health programs focused on lifestyle behavior change have been shown to yield a \$3-\$6 return on investment (ROI) for each dollar invested. It takes 2-5 years after the initial program investment to realize these savings.
2. An independent review of nine businesses investing in health and productivity management initiatives found the ROI estimates ranging from \$1.40-\$4.90 in savings per dollar spent.
3. A review of 42 studies found that worksite health promotion programs can reduce absenteeism, health-care, and disability workers' compensation costs by more than 25 percent each.

Rising healthcare benefit costs are a significant concern and poor health habits and unnecessary medical care costs consume portions of corporate resources as well as the employee paycheck. The worksite is an ideal setting for health promotion and disease prevention programs, since employees spend many of their waking hours at work, nearly 50 hours per week!

#### ■ *Examples of Michigan businesses that have implemented worksite wellness programs.*

Many Michigan businesses are creating healthier workplaces for their employees. Michigan's *Worksite Wellness Chronicles* highlight work that is being done in businesses across Michigan related to worksite wellness programs. See Appendix A for an example of a Chronicle. **Click here** to access Chronicles.

Examples from other states can be found in the Partnership for Prevention's Leading by Example document. The contributors have embraced the concept that health and productivity are inextricably linked. These leaders recognize that not only the growth but, in some cases, the very sustainability of their organizations is linked to employee health. To read more about these companies, see:

[http://www.prevent.org/data/files/initiatives/lbe\\_smse\\_2011\\_final.pdf](http://www.prevent.org/data/files/initiatives/lbe_smse_2011_final.pdf)

### Benefits of a Worksite Wellness Program

#### ■ *Wellness programs help control costs*

An investment in employee health may lower health care costs or slow the increase in providing that important insurance benefit. In fact, employees with more risk factors, including being overweight, smoking and having diabetes, cost more to insure and pay more for health care than people with fewer risk factors.

A worksite wellness program can raise awareness so employees with fewer risk factors remain in a lower-cost group. A program can also encourage employees with health risk factors to make lifestyle changes to improve their quality of life and lower costs. The payoff in dollars as well as in quality of life can have a big impact on a company's bottom line. The average cost/benefit ratio for wellness programs based on a summary of 28 articles was \$3.48 saved per \$1 invested.

### ■ ***Increase productivity***

Healthier employees are more productive. This has been demonstrated in factory settings as well as office environments. Employees in workplaces with wellness initiatives miss less work. Presenteeism, in which employees are physically present on the job but are not at their most productive or effective, is also reduced in workplaces that have wellness programs.

### ■ ***Reduce absenteeism***

Healthier employees miss less work. Companies that support wellness and healthy decisions have a greater percentage of employees at work every day. Because health frequently carries over into better family choices, employees may miss less work caring for ill family members as well. The cost savings of providing a wellness program can be measured against reduced overtime to cover absent employees and other aspects of absenteeism.

### ■ ***Improve morale and enhance image for the organization***

A company that cares about its employees' health is often seen as a better place to work. Those companies save money by retaining workers who appreciate the benefit of a wellness program and they can attract new employees in a competitive market.

### ■ ***Still not convinced?***

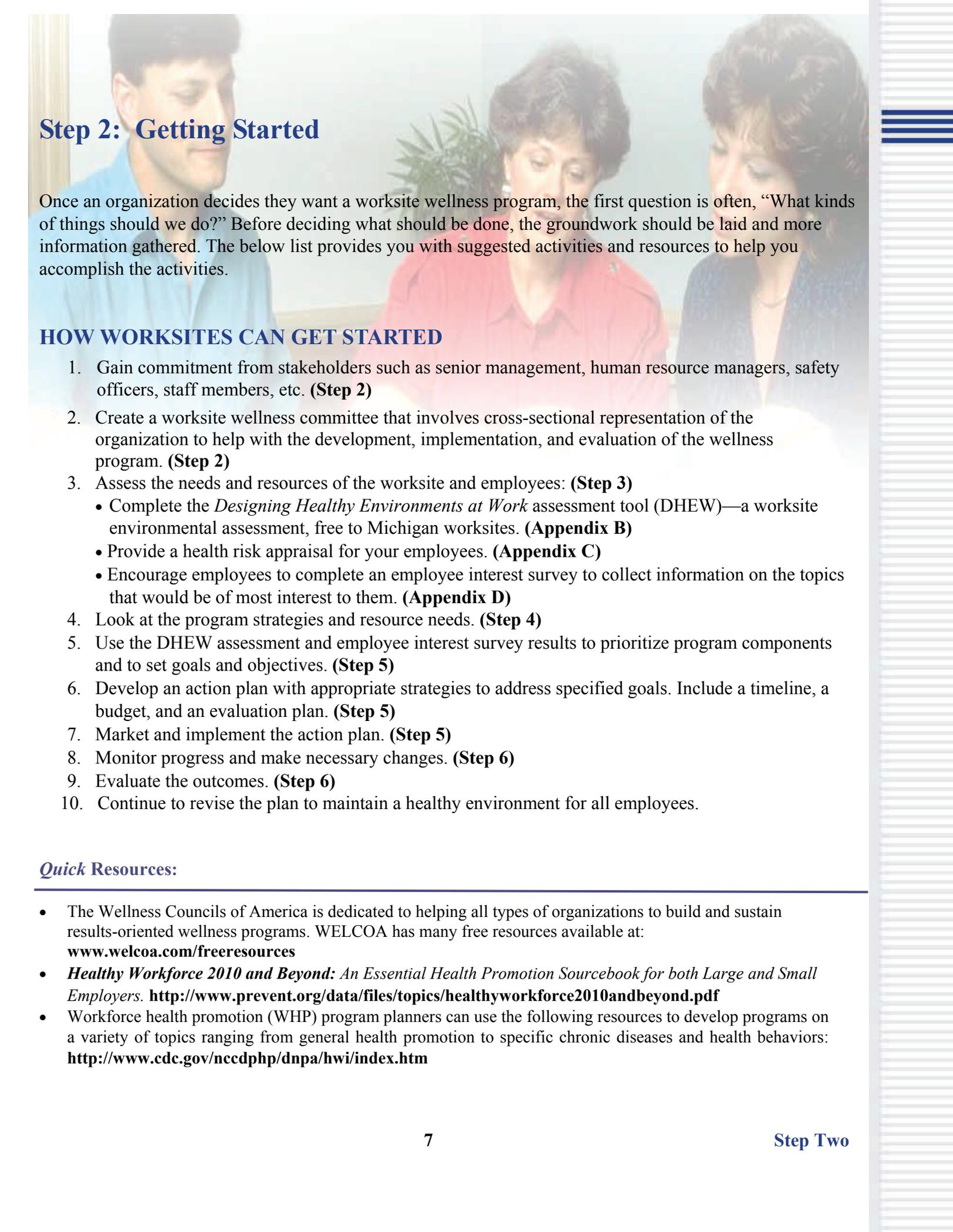
Here are three quick statistics and corresponding data on the Michigan adult workforce:

1. Physical inactivity results in the annual loss of about 20 days per worker.
2. Individuals who are overweight or obese incur up to \$1,500 more in annual medical costs than individuals who are a healthy weight.
3. Cigarette smokers are absent from work on average 6.5 days per year more than nonsmokers. Employees that smoke costs a company an estimated \$3,391 per year -- including \$1,760 in lost productivity and \$1,623 in excess medical expenses.

## **PERCENT OF ADULTS WITH CHRONIC DISEASES OR THEIR RISK FACTORS**

<b>Risk Factor</b>	<b>State of Michigan</b>
Obese: Body Mass Index (BMI) $\geq 30$	30.9
Overweight (includes obese)(BMI $\geq 25$ )	66.6
Diabetes	9.4
Current smoker	19.8
High blood pressure	30.4
High cholesterol	38.9
Inadequate physical activity	48.6
Less than 5 servings of fruits or vegetables	77.8

Source: Behavioral Risk Factor Surveillance System (BRFSS) 2009

A background image showing three people in an office setting. On the left, a man in a blue shirt is looking towards the center. In the middle, a woman in a red shirt is looking down at a document. On the right, a woman in a dark blue top is also looking at the document. The image is slightly faded and serves as a background for the text.

## Step 2: Getting Started

Once an organization decides they want a worksite wellness program, the first question is often, “What kinds of things should we do?” Before deciding what should be done, the groundwork should be laid and more information gathered. The below list provides you with suggested activities and resources to help you accomplish the activities.

### HOW WORKSITES CAN GET STARTED

1. Gain commitment from stakeholders such as senior management, human resource managers, safety officers, staff members, etc. **(Step 2)**
2. Create a worksite wellness committee that involves cross-sectional representation of the organization to help with the development, implementation, and evaluation of the wellness program. **(Step 2)**
3. Assess the needs and resources of the worksite and employees: **(Step 3)**
  - Complete the *Designing Healthy Environments at Work* assessment tool (DHEW)—a worksite environmental assessment, free to Michigan worksites. **(Appendix B)**
  - Provide a health risk appraisal for your employees. **(Appendix C)**
  - Encourage employees to complete an employee interest survey to collect information on the topics that would be of most interest to them. **(Appendix D)**
4. Look at the program strategies and resource needs. **(Step 4)**
5. Use the DHEW assessment and employee interest survey results to prioritize program components and to set goals and objectives. **(Step 5)**
6. Develop an action plan with appropriate strategies to address specified goals. Include a timeline, a budget, and an evaluation plan. **(Step 5)**
7. Market and implement the action plan. **(Step 5)**
8. Monitor progress and make necessary changes. **(Step 6)**
9. Evaluate the outcomes. **(Step 6)**
10. Continue to revise the plan to maintain a healthy environment for all employees.

### Quick Resources:

- The Wellness Councils of America is dedicated to helping all types of organizations to build and sustain results-oriented wellness programs. WELCOA has many free resources available at: [www.welcoa.com/freeresources](http://www.welcoa.com/freeresources)
- *Healthy Workforce 2010 and Beyond: An Essential Health Promotion Sourcebook for both Large and Small Employers*. <http://www.prevent.org/data/files/topics/healthyworkforce2010andbeyond.pdf>
- Workforce health promotion (WHP) program planners can use the following resources to develop programs on a variety of topics ranging from general health promotion to specific chronic diseases and health behaviors: <http://www.cdc.gov/nccdphp/dnpa/hwi/index.htm>

### ■ *Gain Support From Management*

Support from all levels of management is a key to the success of a wellness program. To ensure continued support by management, provide an overview of the project, discuss communication methods, and address any needs/concerns they may have. Communicate clearly and often the goals and benefits to the company and participants. Confirm that there will be sufficient resources and staff time to develop and implement the wellness program.

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## Developing a Worksite Wellness Committee

### ■ *Assembling the Worksite Wellness Committee*

The worksite wellness committee is responsible for promoting the worksite wellness program, planning activities, recruiting team leaders, and conducting the evaluation. The size of the committee will depend on the size of the company and the scope of the program or activities. The committee should include staff that represents various employee shifts and departments such as management, union representatives, human resources, or administrative assistants. There is no minimum or maximum size, but the committee should be large enough to represent the workforce. If a wellness council, health promotion committee or other relevant groups already exist, be sure to involve them on the committee. Committee members can focus on recruitment, activities, events, rewards/incentives, and evaluation.

### ■ *Designate a Coordinator*

Management or the worksite wellness committee should identify a worksite wellness coordinator to manage the program. Although the worksite wellness committee and others can share some of the responsibilities, having the right person coordinating efforts increases the likelihood that the program will be well managed and delivered. The level of success for the wellness program is often linked to the coordinator's time and ability. It is essential that some or all of the coordinator's time be dedicated to the wellness program. If this isn't possible, then the company should consider contracting with an outside party to provide programming. The Michigan Department of Community Health (MDCH) has a vendor directory available that lists vendors from around the state that can assist worksites in implementing a worksite wellness program (see Appendix E). Also check local healthcare organizations and/or YMCAs to see if they provide this service. There are also vendors that provide these types of services, and have familiarity with the worksite's community.

### ■ *Committee Meetings*

The worksite wellness committee should meet on a regular basis—at a minimum monthly when beginning a worksite wellness program. The committee may meet more often during peak times when planning or implementing activities or programs. The frequency of meetings will depend on what the committee plans to accomplish.

### ■ *Maintaining the Momentum of the Workgroup*

To maintain a productive, engaged worksite wellness committee, regularly add new members to the committee and include groups that are not represented. Maintain a connection with management and report successes.

### ■ *Appoint or Recruit Team Leaders*

Effective delivery of many wellness initiatives is often dependent on a leader who is close to the participants. Depending on the structure of the organization, the worksite coordinator may want to develop smaller teams that have leaders or “captains” to help provide motivation, information, and support to the program participants.

Leaders have a major impact on whether the participants have a positive experience. A team leader can be the point of contact or messenger for information shared between the program participants and the worksite wellness council and vice versa.

It is important that team leaders are creative, enthusiastic, and committed to the program. Team leaders do not have to be the most active and healthy staff members; it is more important that they have the skills to help motivate their team members to success.

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## WHAT IS IT GOING TO COST?

### ■ *Staff Time*

Building a successful worksite wellness program requires staff time. Some larger organizations may spend 20 hours per week for 3 to 6 months preparing all the steps prior to launching a worksite wellness program.

### ■ *Business Costs*

Monetary costs can fluctuate widely, depending on whether the employer pays all costs, the employees pay all costs, or the costs are shared. The Wellness Councils of America estimates the cost per employee to be between \$100 and \$150 per year for an effective wellness program that produces a return on investment of \$300 to \$450. Sample expenditure for various levels of programs would be:

PROGRAM TYPE	COST PER EMPLOYEE
A minimal (largely paper) program	\$1 - \$7
A moderate program	\$8 - \$15
A medium program with several activities	\$16 - \$35
A fairly comprehensive program	\$36 - \$75
A very comprehensive, effective program	\$76 - \$112

Keep in mind that the return on investment will likely be greater with more comprehensive programs, so the higher cost will also generate a greater return on investment due to lower health care costs and less absenteeism.

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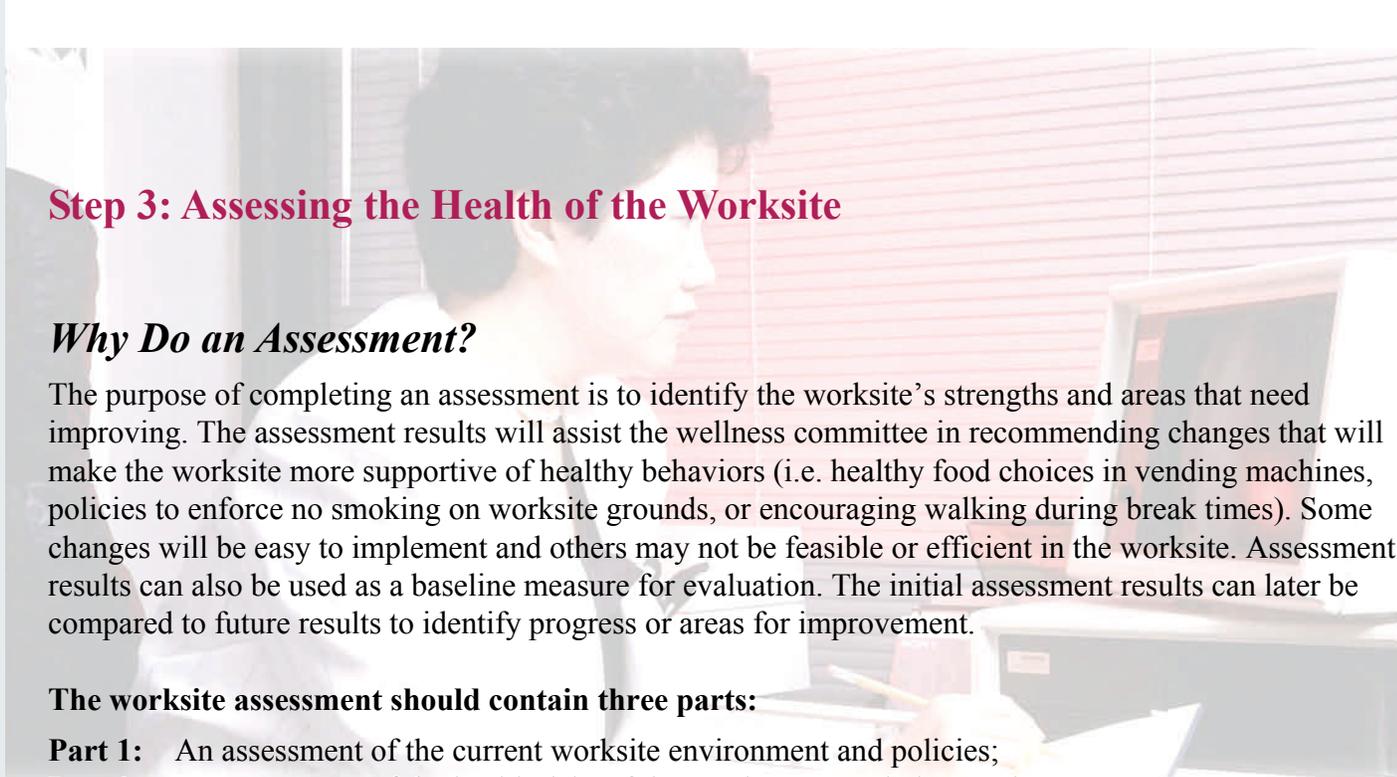
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## A FINAL THOUGHT ON START-UP

After the groundwork has been laid to develop a wellness program, take time to plan the component that will result in a *quality* program. Many people want to jump into programming at this point, but following all the steps will ultimately make the program more successful. Assuring the programming is geared to the employees' needs and interests and proven strategies are used, will greatly increase the likelihood for success.

### *Quick Resource:*

• *Healthy Workforce 2010 and Beyond: An Essential Health Promotion Sourcebook for Employers, Large and Small* <http://www.prevent.org/data/files/topics/healthyworkforce2010andbeyond.pdf>



## Step 3: Assessing the Health of the Worksite

### *Why Do an Assessment?*

The purpose of completing an assessment is to identify the worksite's strengths and areas that need improving. The assessment results will assist the wellness committee in recommending changes that will make the worksite more supportive of healthy behaviors (i.e. healthy food choices in vending machines, policies to enforce no smoking on worksite grounds, or encouraging walking during break times). Some changes will be easy to implement and others may not be feasible or efficient in the worksite. Assessment results can also be used as a baseline measure for evaluation. The initial assessment results can later be compared to future results to identify progress or areas for improvement.

**The worksite assessment should contain three parts:**

**Part 1:** An assessment of the current worksite environment and policies;

**Part 2:** An assessment of the health risks of the employee population; and

**Part 3:** An employee survey and/or other means for employee input to identify interests and the types of programming that will be used.

### **Part 1: Assessing the Current Worksite Policies and Environment**

#### ■ *Who should do the assessment?*

Create an assessment workgroup—of at least 4-5 people—who will be responsible for completing the assessment. The assessment workgroup can be a subset of the worksite wellness committee. Forming a diverse group from all areas and levels of the organization is important for meaningful assessment and successful planning and implementation. Suggested participants include: human resources, employees from various departments, administrators, supervisors, and worksite wellness committee staff.

#### ■ *When should the assessment be done?*

Use the assessment as a starting point for the wellness initiative. Once the assessment has been completed, the results will help determine the areas of focus (i.e. healthy eating, physical activity, general health, etc.). An annual assessment should be scheduled to gauge progress, continue improvements, and provide accountability.

#### ■ *Using the Designing Healthy Environments at Work Assessment Tool*

Completing the *Designing Healthy Environments at Work* (DHEW) assessment tool helps determine what well-ness components are currently in place and provides an overview of some of the changes that worksites should consider implementing.

The DHEW assessment tool is available on-line, free to Michigan worksites. Go to [www.mihealthtools.org/work](http://www.mihealthtools.org/work) to access this tool. A full printed version of DHEW can be found in Appendix B.

## ***DHEW Components:***

**SECTIONS.** There are four major sections (Worksite Health Promotion, Tobacco, Physical Activity, and Nutrition). Each section has several questions that address what policies and/or environmental supports are currently in place at the worksite.

**CURRENT STATUS.** DHEW questions have a combination of “yes or no” or multiple choice answers, which are provided. Have the following information about the worksite handy (usually available from the human resources department):

1. total number of employees
2. percent of employees who are:
  - full-time
  - salaried
  - eligible for employer-paid health benefits
  - union members
  - manual laborers
  - 2nd or 3rd shift workers
  - away from the worksite half or more of their hours (e.g., sales)

After completing the first four sections of DHEW, the last section, Section 5 - Additional Information and Next Steps, is a summary and planning section to allow worksites to reflect on what was learned in completing the assessment. DHEW also includes a scorecard. Scores are calculated each time the assessment is saved, thereby giving worksites feedback each time they enter and save their data. DHEW results can be used with the results from the employee interest survey, health risk appraisal, and other existing data to complete an Action Plan Worksheet, described in Step 5.

## **PART 2: HEALTH RISK APPRAISAL (HRA)**



### ■ ***Why do a health risk appraisal?***

A health risk appraisal is a technique for determining the presence of disease and estimating the risk that someone with certain characteristics will develop disease within a given time span. It can help companies of all sizes identify their work-force’s problems and establish targets for improvement. Using the HRA, you can discover risk levels, determine appropriate interventions, and measure results. Assessments help employees manage their health care and allow companies to control their health care costs.

### ■ ***Importance of privacy***

It is important to ensure that records of employee health screenings or other health-related records are secured in locked file cabinets or storage areas at all times. Strict confidentiality policies improve the success of worksite health programs by allowing employees to divulge highly personal information without fear of public knowledge or discrimination. Inappropriate use of personal health information obtained at the worksite can destroy the employee’s trust, and ultimately, can damage an employers’ effort to protect the health and safety of their workforce. Fear of disclosure also may prevent employees from using employer-sponsored assistance programs or from participating in voluntary medical surveillance or wellness programs.

## ■ *How to conduct a health risk appraisal*

Many health plans and health care systems have health risk appraisals or similar assessment programs. If you offer health insurance, contact your health plan or health care provider to see what services they offer. If you do not offer health insurance to your employees and/or if your health insurance provider does not offer this service, there are local companies that offer this service. On average, a health risk appraisal may cost \$15 - \$50 per employee.

The HRA provides employees with a report on their health risks, based on their answers to the HRA questions. Depending upon the HRA, employers are able to receive an aggregate report that can provide the worksite wellness committee with a better understanding of the current health habits and interest areas of the employees. The Michigan Department of Community Health (MDCH) has a free, on-line appraisal that takes approximately 10 minutes to complete. It must be completed in one session—employees cannot save their answers and return to the HRA later.

Employers can request a group number that employees will use when completing the HRA. Contact MDCH *before* employees begin completing the HRA. Go to [www.michiganstepsup.org](http://www.michiganstepsup.org) under Businesses and click on *How to obtain a group number for the HRA*.

Before employees complete the free, online HRA available through the MDCH, they may want to have the following information handy:

- o Employer Group Number
- o Height
- o Weight
- o Blood Pressure
- o Cholesterol
- o Approximate date of last annual physical
- o Routine screening (prostate, mammogram, colon, etc.)

If this information is not available, the HRA can still be completed; however, the report will provide the employees with more accurate results if they are able to provide answers to these questions. Instructions for completing the free, online HRA can be found in Appendix C.



## PART 3: EMPLOYEE INTEREST SURVEY

### ■ *Why do an employee interest survey?*

An employee interest survey should be conducted to get a better understanding of what employees are interested in having in their wellness program. Offering initiatives that employees want will increase the chances that they will participate. The survey (Appendix D) is in paper form. As was the case with the DHEW and HRA results, the initial employee interest survey results can be used as a baseline measure that can be compared with a follow-up survey results to note progress.

The worksite wellness committee should make it as easy as possible for employees to complete and submit the interest survey, so there is a high return rate. An incentive or prize for people who complete the survey could increase the response rate. For more on incentives, see the Quick Resource links below.

#### ***Quick Resource:***

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- WELCOA has a free guide to using incentives in a walking program. Many of the tips can be used with other activities: [http://www.welcoa.org/freeresources/pdf/stepbystep\\_ic.pdf](http://www.welcoa.org/freeresources/pdf/stepbystep_ic.pdf)
- Colorado Physical Activity and Nutrition Program has a worksite resource kit that addresses incentives (page 39): <http://www.cdph.state.co.us/pp/COPAN/resourcekits/WorksiteWellnessResourceKit.pdf>



## Step 4: Implementing Changes and Activities

Step 4 will provide background information for specific program strategies that worksites can use to develop and implement health promotion goals. After reviewing the information in this section, you should go through the prioritizing exercise in Step 5 to narrow your focus and put your written action plan in place. Do not prioritize until you have a good idea of what programming options are available and their cost, time, and importance to your employees and management.

### ■ *Program Strategies*

At this point, the worksite wellness committee should have the aggregate results of DHEW, the HRA, and the employee interest survey (**Step 3**). Now it's time to take a look at the program strategies that have been proven to work or are best practices from other worksites. Step 4 lists a number of strategies to consider for when developing or enhancing a wellness program. The worksite should be able to use the DHEW feedback report to get an overview of its policies and environments that promote healthy lifestyles. For those programs or strategies that were not yet in place, you will have the opportunity to get an overview of the relative resource costs needed to implement the strategy and see what reference or resource materials are available to help with implementation.

### ■ *Focus Areas*

Wellness programming can include many components and activities. This resource guide focuses on creating supportive policies and environments that promote healthy behaviors among employees and to reduce health risks related to chronic disease. The following areas are highlighted, using specific activities or strategies to address each area:

- o Worksite Health Promotion
- o Tobacco
- o Physical Activity
- o Nutrition

Each focus area has its own distinct section that consists of two sections: the first section focuses on evidence-based or best practice strategies that can be done in the workplace; the second section provides additional information or resources related to each strategy.

**IMPORTANT:** This section is meant to provide a base of ideas on where to start and what to implement. It is by no means an exhaustive list of opportunities and activities. Contact local volunteer health organizations (American Cancer Society, National Kidney Foundation, American Heart Association, etc.), health promotion vendors, health care facilities, businesses that have worksite wellness programs, universities, etc. for ideas on how to promote health at the worksite.

## Programming Strategies: Sample of Page 1

Illustrated below is a sample of what you will find in the four focus areas that follow this introduction.

- ① **Strategies arranged by resource level.** This provides a summary of programming that can be done at the worksite. The components have been split into **low, medium, and high resource needs**. The three levels indicate the relative amount of staff and financial resources that will be needed to implement the program. These levels were developed to make it easier to identify strategies that can be implemented quickly from those that might take more time or financial resources to do so.
- ② **Influencing change on a variety of levels.** The options are further classified by the level where change takes place. In Step 5, there is a summary of the need for change to occur at the **individual, environmental and policy levels**. The tables that follow will indicate which level is being influenced for the related activity.

① List of strategies arranged by level of resources needed.

① Box indicating at what level change takes place.

### SAMPLE OF PAGE 1 - Strategies

	INDIVIDUAL LEVEL	ENVIRONMENTAL/ ORGANIZATIONAL LEVEL	POLICY LEVEL
<b>LOW RESOURCES</b>			
1. Offer flexible work hours to allow for physical activity during the day.			<b>X</b>
2. Support physical activity breaks during the workday, such as stretching or walking.			<b>X</b>
3. Map out on-site trails or nearby walking routes.	<b>X</b>	<b>X</b>	
<b>MEDIUM RESOURCES</b>			
1. Provide shower and/or changing facilities on-site.		<b>X</b>	
2. Implement incentive-based programs to encourage physical activity, such as pedometer walking challenges.		<b>X</b>	
<b>HIGH RESOURCES</b>			
1. Provide an on-site exercise facility.		<b>X</b>	

## RESOURCES FOR THE RECOMMENDED STRATEGIES: *Sample of Page 2*

The previous page showed a sample of how the strategies are displayed. The below sample shows you what the second page will look like. The second page will repeat the strategy list, but it will also provide:

1. links to additional resources;
2. examples or links to examples, and;
3. greater detail for each of the program areas listed.

The first page of each program area gives an overview of things that can be done in the workplace. The second page contains additional information or resources regarding the implementation of a strategy. An example of the second page is shown below.

### SAMPLE OF PAGE 2 — *Resources for Recommended Strategies*

#### PHYSICAL ACTIVITY RESOURCES FOR THE RECOMMENDED STRATEGIES LOW RESOURCES

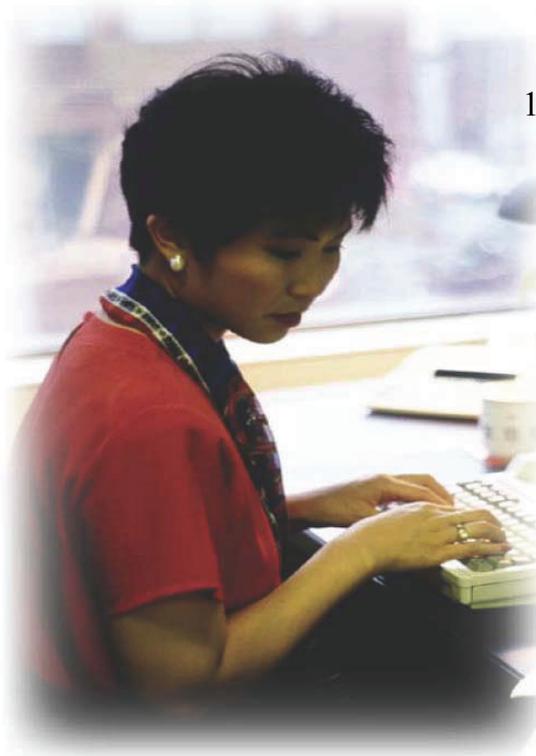
1. Offer flexible work hours to allow for physical activity during the day. Supervisors will support this as a standard work practice. <http://charmec.org/mecklenburg/county/HealthDepartment/wtw/activity/Pages/SamplePolicy-FlexibleSchedules.aspx>
2. Support physical activity breaks during the workday. Supervisors will support this as a standard work practice.
3. Map out on-site trails or nearby walking routes. <http://www.mapmyrun.com/>

#### MEDIUM RESOURCES

1. Provide shower and/or changing facilities on-site.
2. Implement incentive-based programs to encourage physical activity, such as American Heart Association's *Start!* program.  
[http://www.startwalkingnow.org/start\\_workplace\\_walking\\_program.jsp](http://www.startwalkingnow.org/start_workplace_walking_program.jsp)

#### HIGH RESOURCES

1. Provide an on-site exercise facility.  
<http://www.cdph.state.co.us/pp/COPAN/resourcekits/WorksiteWellnessResourceKit.pdf>  
(page 45)



## TWO FINAL KEY REMINDERS:

### 1) *Communication is Key*

Regardless of what programming is chosen, communication is essential to make the program more successful. It is likely that there are some employees that are very experienced in communications and marketing. They would be excellent additions to the worksite wellness committee!

There are many ways to get the word out about worksite wellness activities:

1. Place information in the company newsletter
2. Announce the wellness program through company-wide email
3. Announce program information at staff meetings
4. Place informational posters in the hallways or common areas
5. Place information in payroll envelopes
6. Organize a kick-off event

### 2) *Wellness Coordinator*

This was highlighted in Step 2, but it bears repeating. The level of success for the wellness program is often linked to the coordinator's time and ability. It is essential that some or all of the coordinator's time be dedicated to the wellness program. If this is not possible, then the company should consider contracting with an outside party to provide programming.

Outside parties that may provide selected wellness programming or complete wellness services include:

1. *Listing of Worksite Vendors in Michigan* (Appendix E or <http://www.michigan.gov/cvh> (under *Healthy Businesses*)
2. Local healthcare organizations
3. YMCAs
4. Local health coalitions — check with your health department or MSU Extension Office
5. Independent contractors

Check with local contacts to see if any of these sources might be an option.

## FOCUS AREA: WORKSITE HEALTH PROMOTION

■ **What:** Organizations that have well-defined worksite wellness programs and policies in place will have a greater chance of being successful. A company culture where wellness is supported will encourage healthy behavior.

■ **Why:** A well-defined program with management support is essential for a successful program. Including educational efforts that address knowledge, attitude and behavior change, and that are assisted by skill building sessions and social support set the groundwork for a wellness program.

■ **How:**

	Individual LEVEL	Environmental/organizational LEVEL	Policy LEVEL
<b>Low Resources</b>			
1. Have a current policy outlining the requirements and functions of a comprehensive worksite wellness program			X
2. Have a worksite wellness plan in place that addresses the purpose, nature, duration, resources required, and expected results of a worksite wellness program		X	
3. Orient employees to the wellness program and give them copies of the tobacco, physical activity, and nutrition policies.	X	X	
4. Promote and encourage employee participation in its smoking cessation, physical activity, and nutrition education/weight management programs.		X	
5. Provide health education information through newsletters, publications, websites, email, libraries, and other company communications.	X	X	
<b>Medium Resources</b>			
1. Have a representative committee that meets at least once a month to oversee the worksite wellness program.		X	
2. Offer regular health education presentations on various physical activity, nutrition, and wellness-related topics. Ask voluntary health associations, health care providers, and/or public health agencies to offer onsite education classes.	X	X	
3. Host a health fair as a kick-off event or as a celebration for completion of a wellness campaign.	X	X	
4. Designate specific areas to support employees such as nursing mothers.		X	
5. Conduct preventive wellness screenings for blood pressure, body composition, blood cholesterol, and diabetes.		X	
6. Provide confidential health risk appraisals.	X	X	
7. Offer on-site weight management/maintenance programs for employees.	X	X	
<b>High Resources</b>			
1. Have a worksite budget for employee health promotion that includes some funds for programming and/or a portion of a salary for a coordinator.		X	
2. Provide adequate healthcare coverage for employees and their families for prevention of and rehabilitation of chronic disease.		X	
3. Add weight management/maintenance, nutrition, and physical activity counseling as a member benefit in health insurance contracts		X	

## RESOURCES FOR WORKSITE HEALTH PROMOTION RECOMMENDED STRATEGIES

### LOW RESOURCES

1. Policies outlining the functions of a comprehensive worksite wellness program.
2. Worksite wellness plan summary: <http://www.dshs.state.tx.us/workarea/DownloadAsset.aspx?id=27730>
3. Employee orientation to the wellness program and wellness policies.
4. Promote and market worksite health promotion activities.
5. Health education and information. <http://health.nih.gov/>.

### MEDIUM RESOURCES

1. Representative wellness committee:  
<http://www.ilir.umich.edu/wellness/comprehensiveprogram.html>.
2. Health education presentation resources.
3. Health fair planning guides:  
<http://fcs.tamu.edu/health/hfpg/index.php>.
4. Designate specific areas to support nursing mothers:  
[http://www.opm.gov/Employment\\_and\\_Benefits/WorkLife/OfficialDocuments/HandbooksGuides/Nursing/index.asp](http://www.opm.gov/Employment_and_Benefits/WorkLife/OfficialDocuments/HandbooksGuides/Nursing/index.asp)
5. Preventive wellness screenings for blood pressure, body composition, blood cholesterol, and diabetes.  
Screening list:  
<http://www.cdphe.state.co.us/pp/COPAN/resourcekits/WorksiteWellnessresourcekit.pdf>  
(pages 8-9).
6. Free health risk assessment (HRA) available on the Michigan Steps Up website:  
[www.michiganstepsup.org](http://www.michiganstepsup.org) under *Businesses* link.
7. On-site weight management/maintenance programs at a convenient time for employees.

### HIGH RESOURCES

1. Worksite wellness budget considerations.
2. Providing healthcare coverage for prevention and rehabilitation of chronic disease:  
<http://www.businessgrouphealth.org/preventive>.
3. Adding weight management/maintenance, nutrition, and physical activity counseling as a member benefit in health insurance contracts.

### Overall Resources:

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- Centers for Disease Control and Prevention (CDC) *Healthier Worksite Initiative*:  
[www.cdc.gov/nccdphp/dnpa/hwi/index.htm](http://www.cdc.gov/nccdphp/dnpa/hwi/index.htm). This site addresses workforce health promotion (WHP). Well-constructed and well-run programs can reduce costs to the employer and improve employee health and morale.
- Wellness Council of America (WELCOA) for a variety of general wellness information:  
<http://www.welcoa.org/freeresources>
- Michigan Steps Up! Healthy Business: [www.michiganstepsup.org](http://www.michiganstepsup.org). This website contains resources that are specifically selected for Michigan worksites. The site also contains *Worksite Wellness Chronicles*, which highlight health promotion activities in Michigan businesses.

## FOCUS AREA: TOBACCO CESSATION

**What:** The negative health effects of smoking are well known. Smoking is the leading cause of preventable death each year in the United States, and the associated diseases and health care costs are significant. Smokers tend to require more medical costs, see physicians more often, and are admitted to hospitals for longer periods than nonsmokers.

**Why:** The business case for covering smoking cessation is clear. According to the Centers for Disease Control, smoking costs the nation \$167 billion a year in healthcare costs and lost worker productivity. The CDC estimates each employee that smokes costs a company \$3,391 per year — including \$1,760 in lost productivity and \$1,623 in excess medical expenses. Smoking cessation programs have shown some immediate return on investment and a significant return on investment in a relatively short time period (as little as two years).

**How:**

	INDIVIDUAL LEVEL	ENVIRONMENTAL/ ORGANIZATIONAL LEVEL	POLICY LEVEL
<b>LOW RESOURCES</b>			
1. Policy prohibiting tobacco use anywhere on property.			X
2. Provide prompts/posters to support no tobacco use policy.		X	
3. Promote the Michigan telephone quit line (1-800-QUITNOW).		X	
4. Provide materials with information, motivation, and strategies for quitting.	X		
5. Distribute materials that promote tobacco-free lifestyles.	X	X	
<b>MEDIUM RESOURCES</b>			
1. Policy supporting participation in smoking cessation activities during duty time (flex-time).			X
<b>HIGH RESOURCES</b>			
1. Provide counseling through an individual, group, or telephone counseling program on-site.	X	X	
2. Provide counseling through a health plan sponsored individual, group, or telephone counseling program.	X	X	
3. Provide cessation medications through health insurance.	X	X	

## RESOURCES FOR THE RECOMMENDED TOBACCO CESSATION STRATEGIES

### LOW RESOURCES

1. Clearly and conspicuously post “no smoking” signs or the international “no smoking” symbol at each entrance. For more information on the smoke-free law go to [www.michigan.gov/smokefreelaw](http://www.michigan.gov/smokefreelaw)
2. Remove ashtrays and other smoking paraphernalia from anywhere smoking is prohibited.
3. Policy prohibiting tobacco use anywhere on property.  
[http://mihealthtools.org/work/100\\_PERCENT\\_SMOKEFREE\\_POLICY.PDF](http://mihealthtools.org/work/100_PERCENT_SMOKEFREE_POLICY.PDF)
4. Provide prompts and posters to support a no tobacco use policy.  
<http://www.wellnessproposals.com/tobacco/tobacco-cessation-posters.htm>
5. Promote the Michigan Quit Line (1-800-ACS-2345).
6. Provide materials with information, motivation, and strategies for quitting. [www.michigan.gov/tobacco](http://www.michigan.gov/tobacco)
7. Distribute materials that promote tobacco-free lifestyles. <http://health.nih.gov/>

### MEDIUM RESOURCES

1. Policy that supports participation in smoking cessation activities during duty time (flex-time).

### HIGH RESOURCES

1. Provide counseling through an individual, group, or telephone counseling program on-site.  
[http://www.opm.gov/Employment\\_and\\_Benefits/WorkLife/OfficialDocuments/handbooksguides/](http://www.opm.gov/Employment_and_Benefits/WorkLife/OfficialDocuments/handbooksguides/)
2. Provide counseling through a health plan sponsored individual, group, or telephone counseling program.
3. Provide cessation medications through health insurance.

### Overall Resources:

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- Michigan Department of Community Health, Tobacco Section provides helpful information on local smoking cessation resources, what health plans cover smoking cessation, smoker’s quit kit, and more. Click on <http://www.michigan.gov/tobacco>
- Freshstart is the American Cancer Society’s smoking cessation program. This program is designed to help participants stop smoking by providing them with the essential information and strategies needed to direct their own efforts at stopping. <http://www.acsworkplacesolutions.com/freshstart.asp>
- Centers for Disease Control and Prevention (CDC) *Healthier Worksite Initiative* has a Toolkit Section that addresses tobacco use and cessation in worksites:  
[http://www.cdc.gov/nccdphp/dnpa/hwi/toolkits/other\\_healthy\\_choices.htm](http://www.cdc.gov/nccdphp/dnpa/hwi/toolkits/other_healthy_choices.htm)
- Professional Assisted Cessation Therapy (PACT) resource guide  
<http://www.endsmoking.org/resources/employersguide/pdf/employersguide-2nd-edition.pdf>
- Additional documents that may be helpful when promoting smoking cessation/tobacco-free lifestyles to employees can be found in the DHEW Resource Guide:  
<http://mihealthtools.org/work/Default.asp?tab=resources#section2>

## FOCUS AREA: PHYSICAL ACTIVITY

■ **What:** People who are physically active reduce their risk for heart disease, diabetes and some cancers and also reduce their stress levels. The recommended level of physical activity to produce some health benefits is 30 minutes of moderate activity, at least five times per week. Unfortunately, less than 50% of Michigan adults are meeting that recommendation.

■ **Why:** People who stay fit will cost the organization less, affecting the bottom line and ultimately saving the company money through their benefits and compensation plan. It can also reduce absenteeism and create a more productive workforce.

■ **How:**

	INDIVIDUAL LEVEL	ENVIRONMENTAL/ ORGANIZATIONAL LEVEL	POLICY LEVEL
<b>LOW RESOURCES</b>			
1. Post motivational signs at elevators & escalators to encourage stair use.		X	
2. Use existing challenges/programs to encourage physical activity.	X	X	
3. Create a company culture that discourages sedentary behavior, such as TV viewing on breaks and sitting for long periods of time.			X
4. Offer flexible work hours to allow for physical activity during the day.			X
5. Support physical activity breaks during the workday, such as stretching or walking.			X
6. Map out on-site trails or nearby walking routes.		X	
7. Host walk-and-talk meetings.		X	
8. Provide exercise/physical fitness messages and information to employees.		X	
9. Have employees map their own biking or walking route to and from work.	X		
10. Provide bicycle racks in safe, convenient, and accessible locations.		X	
<b>MEDIUM RESOURCES</b>			
1. Provide shower and/or changing facilities on-site.		X	
2. Provide outdoor exercise areas such as fields and trails for employee use.		X	
3. Provide or support recreation leagues and other physical activity events (on-site or in the community).		X	
4. Start employee activity clubs (e.g., walking, bicycling).	X	X	
5. Explore discounted or subsidized memberships at local health clubs, recreation centers, or YMCAs.		X	
6. Implement incentive-based programs to encourage physical activity, such as American Cancer Society's Active for Life Program.	X	X	
<b>HIGH RESOURCES</b>			
1. Offer on-site fitness opportunities, such as group classes or personal training.		X	
2. Provide an on-site exercise facility.		X	
3. Provide incentives for participation in physical activity and/or weight management/maintenance activities.		X	
4. Allow for use of facilities outside of normal work hours (before/after work).		X	
5. Provide on-site child care facilities to facilitate physical activity.		X	

## RESOURCES FOR THE RECOMMENDED PHYSICAL ACTIVITY STRATEGIES

### LOW RESOURCES

1. Post motivational signs at elevators and escalators to encourage stair usage.  
<http://www.cdc.gov/nccdphp/dnpao/hwi/toolkits/stairwell/index.htm>
2. Use existing challenges/programs to encourage physical activity. *Start!* American Heart Association's program that encourages heart-healthy lives: <http://startwalkingnow.org>
3. Company culture that discourages sedentary behavior.
4. Offer flexible work hours to allow for physical activity during the day.  
<http://health.utah.gov/hearhighway/pdfs/ExerciseRelease.pdf>
5. Support physical activity breaks during the workday. An example of a web-based physical activity program that reminds employees to get up and move: <http://possibility.com/PowerPause/>
6. Map out on-site trails or nearby walking routes: <http://www.mapmyrun.com/>
7. Host walk-and-talk meetings. Go for a walk in the hallway or on a short outside route to cover the content of a sit-down meeting. Supervisors will support this as a standard work practice:  
<http://www.cdc.gov/women/planning/walk.htm>
8. Provide exercise/physical fitness messages and information to employees.  
<http://www.lightenupwisconsin.com/>
9. Have employees map their own biking route to and from work. <http://www.mapmyrun.com/>
10. Provide bicycle racks in safe, convenient, and accessible locations.  
<http://mihealthtools.org/communities/default.asp?tab=resourceguide>

### MEDIUM RESOURCES

1. Provide shower and/or changing facilities on-site.
2. Provide outdoor exercise areas such as fields and trails for employee use.
3. Support recreation leagues and other physical activity events (on-site or in the community).
4. Start employee activity clubs (e.g., walking, bicycling). <http://startwalkingnow.org>  
<http://aom.americaonthemove.org>
5. Explore discounted or subsidized memberships at local health clubs.
6. Implement incentive-based programs to encourage physical activity, such as American Cancer Society's Activity for Life program. [http://www.startwalkingnow.org/start\\_workplace\\_walking\\_program.jsp](http://www.startwalkingnow.org/start_workplace_walking_program.jsp)

### HIGH RESOURCES

1. Offer on-site fitness opportunities, such as group classes or personal training. <http://www.acefitness.org/>
2. Provide an on-site exercise facility.  
<http://www.cdphe.state.co.us/pp/COPAN/resourcekits/WorksiteWellnessresourcekit.pdf> (page 45)
3. Provide incentives for participation in physical activity and/or weight management/maintenance activities.  
<http://www.cdphe.state.co.us/pp/COPAN/resourcekits/WorksiteWellnessresourcekit.pdf> (See page 39 for incentive ideas)
4. Allow for use of facilities outside of normal work hours (before or after work).
5. Provide on-site childcare facilities to facilitate physical activity.

### Overall Resources:

- Michigan Steps Up! Businesses website has ideas for changes you can make. Go to <http://www.michiganstepsup.org> under *Businesses* and click the link to "Ideas for Changes You Can Make."
- Read the *Worksite Wellness Chronicles* and learn what other Michigan businesses are doing to create healthier worksites: [www.michiganstepsup.org](http://www.michiganstepsup.org)
- Centers for Disease Control and Prevention (CDC) Healthier Worksite Initiative. The website has toolkits that address reducing barriers and increasing access to places for physical activity in the workplace:  
<http://www.cdc.gov/nccdphp/dnpao/hwi/index.htm>

## FOCUS AREA: NUTRITION

■ **What:** Both healthy eating and physical activity are associated with overweight and obesity prevention and management. Additionally, adults with an increased fruit and vegetable intake can better manage their weight. Consumption of fruits and vegetables can also help with the prevention of chronic diseases such as cancer, stroke, and heart disease. Furthermore, education on appropriate portion sizes can help reduce caloric intake, thus reducing the risk of weight gain.

Having fresh fruits and vegetables available in the workplace helps to improve access, which ultimately can help people consume more fruits and vegetables. Worksite cafeterias or vending machines can be stocked with healthier alternatives for employees. Moreover, pricing healthier foods lower than non-nutritious foods and promoting healthier choices can help employees make better decisions.

Supporting breastfeeding employees by reducing worksite barriers is essential, as breastfed infants will be at a lower risk of overweight and obesity later in life.

■ **Why:** Employees are likely to eat or drink snacks and meals at work. Thus, offering appealing, low-cost, healthful food options at the worksite is one way to promote healthful eating by employees. Vending machines are a quick and convenient way for employees to purchase these types of food. By offering healthful food choices at company meetings and functions, employees have increased opportunities for making healthy food choices at work that can benefit their health. By increasing opportunities for employees to store and prepare food at work, the less likely they are to choose to eat out.

Women who breastfeed after returning to work miss less time caring for sick children and their family health care costs are less. Women whose breastfeeding is supported at work are happier, more productive and less likely to resign. Breastfeeding also promotes weight loss and a quicker return to pre-pregnancy weight.

Specific strategies and resources can be found on the following three pages.



**How:**

	INDIVIDUAL LEVEL	ENVIRONMENTAL/ ORGANIZATIONAL LEVEL	POLICY LEVEL
<b>LOW RESOURCES</b>			
1. Send healthy food messages to employees via multiple means (i.e. email, posters, payroll stuffers, etc.).	X	X	
2. Promote the consumption of fruit & vegetables in catering/cafeteria through motivational signs, posters, etc.	X	X	
3. Provide protected time and dedicated space away from the work area for breaks and lunch.			X
4. Offer appealing, low-cost, healthful food options, such as fruits and vegetables, juices, and low-fat dairy products in vending machines, snack bars and break rooms.		X	
5. Promote healthy choices by: <ul style="list-style-type: none"> <li>• Increasing the percentage of healthy options that are available</li> <li>• Using competitive pricing to make healthier choices more economical</li> <li>• Advertise or mark healthy options so that they stand out</li> </ul>		X	
6. Have on-site cafeterias follow healthy cooking practices.		X	
7. Have on-site cafeterias set nutritional standards that align with dietary guidelines for Americans.		X	
8. Provide appropriate portion sizes and provide portion size information via labeling food to show serving size and calories and by using food models and pictures or portable food scales for weighing portion sizes.		X	X
9. Offer healthful food alternatives at meetings, company functions, and health education events.		X	X
10. Make water available throughout the day.		X	
<b>MEDIUM RESOURCES</b>			
1. Make kitchen equipment (refrigerators, microwaves, stoves, etc) available for employee food storage and preparation.		X	
2. Offer local fruits and vegetables at the worksite (i.e. farmer's market)		X	
3. Provide on-site gardening.		X	
4. Provide interactive food opportunities such as taste testing, food preparation skills and peer-to-peer modeling.		X	
5. Establish workplace policies and programs that promote and support breastfeeding.		X	X
6. Provide an appropriate place for breastfeeding/pumping.		X	
<b>HIGH RESOURCES</b>			
1. Provide incentives for participation in nutrition and/or weight management/maintenance activities (these can range from inexpensive low resource items (water bottles) to high resource items (health insurance rebates).	X	X	
2. Include the employees' family members in campaign promoting fruit and vegetable consumption (worksite plus family intervention).	X	X	
3. Provide lactation education programs.		X	

## RESOURCES FOR THE RECOMMENDED NUTRITIONAL STRATEGIES

### LOW RESOURCES

1. Send healthy food messages to employees via multiple means (i.e. email, posters, payroll stuffers, etc.).  
<http://health.nih.gov/>
2. Promote the consumption of fruit & vegetables in catering/cafeteria through motivational signs, posters, etc.
3. Provide protected time and dedicated space away from the work area for breaks and lunch.
4. Offer appealing, low-cost, healthful food options, such as fruits and vegetables, juices, and low-fat dairy products in vending machines and snack bars and break rooms.  
<http://www.cdph.ca.gov/programs/cpns/Documents/Network-FV-WP-VendingMachineStandards.pdf>
5. Promote healthy choices by:
  - Increasing the percent of healthy options that are available. <http://www.eatsmartmovemorenc.com/>
  - Using competitive pricing to make healthier choices more economical.  
<http://www.tompkins-co.org/wellness/worksites/workwell/snackbowl.html>
  - Advertise or mark healthy options so that they stand out.
6. Have on-site cafeterias follow healthy cooking practices. <http://www.gsa.gov/portal/content/104429>
7. Have on-site cafeterias set nutritional standards that align with dietary guidelines for Americans.  
<http://www.health.gov/dietaryguidelines/>
8. Provide appropriate portion sizes and provide portion size information via labeling food to show serving size and calories and by using food models and pictures or portable food scales for weighing portion sizes.  
<http://hp2010.nhlbi.nih.net/portion/>
9. Offer healthful food alternatives at meetings, company functions, and health education events.  
[http://www.sph.umn.edu/img/assets/9103/nutrition\\_guide.pdf](http://www.sph.umn.edu/img/assets/9103/nutrition_guide.pdf)  
<http://www.cdph.state.co.us/pp/copan/resourcekits/WorksiteWellnessResourceKit.pdf> (page 34)
10. Make water available throughout the day.

### MEDIUM RESOURCES

1. Make kitchen equipment (refrigerators, microwaves, stoves, etc) available for employee food storage and preparation.
2. Offer local fruits and vegetables at the worksite (i.e. farmers' market).  
<http://www.cdph.ca.gov/programs/cpns/Documents/Network-FV-WP-ProduceDelivery.pdf>  
<http://www.cdph.ca.gov/programs/cpns/Documents/Network-FV-WP-FarmersMarketTool.pdf>  
[www.michiganfarmfun.com](http://www.michiganfarmfun.com)
3. Provide on-site gardening.
4. Provide interactive food opportunities such as taste testing, food preparation skills, and peer-to-peer modeling.
5. Establish workplace policies and programs that promote breastfeeding. Sample Policy Supporting New Mothers at the Worksite:  
[http://www.opm.gov/employment\\_and\\_benefits/worklife/officialdocuments/handbooks/guides/nursing/index.asp](http://www.opm.gov/employment_and_benefits/worklife/officialdocuments/handbooks/guides/nursing/index.asp)
6. Provide an appropriate place for breastfeeding/pumping. United States Breastfeeding Committee: Accommodations for Breastfeeding in the Workplace: <http://www.usbreastfeeding.org/>

### HIGH RESOURCES

1. Provide incentives for participation in nutrition and/or weight management/maintenance activities (these can range from inexpensive low resource items (water bottles) to high resource items (health insurance rebate).  
<http://www.cdph.state.co.us/pp/COPAN/resourcekits/WorksiteWellnessresourcekit.pdf> (See page 39 for incentive ideas)
2. Include the employees' family members in campaign promoting fruit and vegetable consumption (worksite plus family intervention).
3. Provide lactation education programs.

## Overall Resources:

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- The Nutrition Environment Assessment Tool (NEAT) is an online assessment of a community’s environment and policies related to promoting and supporting healthy eating and the provision of access to healthy foods within the workplace, community and school settings: <http://mihealthtools.org/neat/>
- Michigan Steps Up! Businesses website has ideas for changes you can make. Go to <http://www.michiganstepsup.org> under *Businesses* and click the link to “Ideas for Changes You Can Make.”
- Read the *Worksite Wellness Chronicles* and learn what other Michigan businesses are doing to create healthier worksites: <http://www.michiganstepsup.org> under *Businesses*.
- Centers for Disease Control and Prevention (CDC) Healthier Worksite Initiative. The website has toolkits that address reducing barriers and increasing access to places for healthy eating in the workplace: <http://www.cdc.gov/nccdphp/dnpao/hwi/index.htm>
- My Pyramid Plan offers employees a personal eating plan with the foods and amounts based on individual needs. [www.mypyramid.gov](http://www.mypyramid.gov)



## Step 5: Determining Program Components

Now that you have gathered data from the worksite assessment, HRA aggregate report, and the employee survey, it's time to create an action plan. By comparing what is currently offered against the gaps that were identified in the assessments, it should be easy to identify additional policy and environmental strategies that can be implemented at your worksite. Also, by identifying the gaps and comparing them with the current health habits and interests of the employees that were gathered in the HRA and employee survey, it should be easier to match high priority gaps with high priority employee needs or interests. Finally, by answering questions about the importance, cost, time, effort, and potential number of employees that will be reached by the program strategies, the worksite wellness committee will be ready to select the activities that will be included in the worksite's wellness program. A model to use to walk through this process is included later in this chapter in the form of a Recommendation Table (Appendix F).

### WHAT SHOULD BE CONSIDERED?

As plans are made on where to focus wellness efforts, consider that some efforts may have greater impact than others. Wellness programming can include many components, such as:

1. Health screening and assessment
2. Education through presentations, printed materials, and web resources
3. Program activities, including "campaigns" over a specified time period
4. Environmental change
5. Policy change

All of the components listed above have merit, but changing the environment and changing policy is crucial to affecting change in most health habits. Policies create the opportunity for widespread behavioral change because they change the existing "rules," which can have a powerful effect on employee behavior and habits. Environmental changes, both physical and cultural, provide options or opportunities to adopt healthier habits and can also result in widespread change. These changes are sustainable, and usually do not require continuous financial resources.

At a minimum, all programming should involve creation of a supportive social and physical environment where healthy decisions are the norm. Part of creating this environment is to clearly define the organization's expectations regarding healthy behaviors, and implement policies that promote health and reduce risk of disease.

The DHEW report provides recommendations for ways in which a worksite can more effectively support employee health and wellness activities via policy and/or environmental changes. The table on the next page provides characteristics of a policy/environmental change versus an activity/event.

CHARACTERISTICS OF EVENTS	CHARACTERISTICS OF POLICY/ENVIRONMENTAL CHANGE
One Time	Ongoing
Unique: Usually don't result in behavior change	Promote behavior change over time
Focus on the individual	Focus on the organization
Not part of an ongoing plan	Part of an ongoing plan
Short in duration	Long term
Non sustaining	Sustaining

Company policies and changes in the work environment will affect or influence individual behavior at work, which may also lead to changes outside of work. In many cases, policy and environmental changes make it easier to make the better health choice. An example would be serving bagels and fruit instead of pastries at company events. Some other simple examples are:

**Formal written policies:**

1. Guidelines for ordering food for company events
2. No smoking on company property
3. Company cost-sharing for health club memberships

**Environmental changes or cues:**

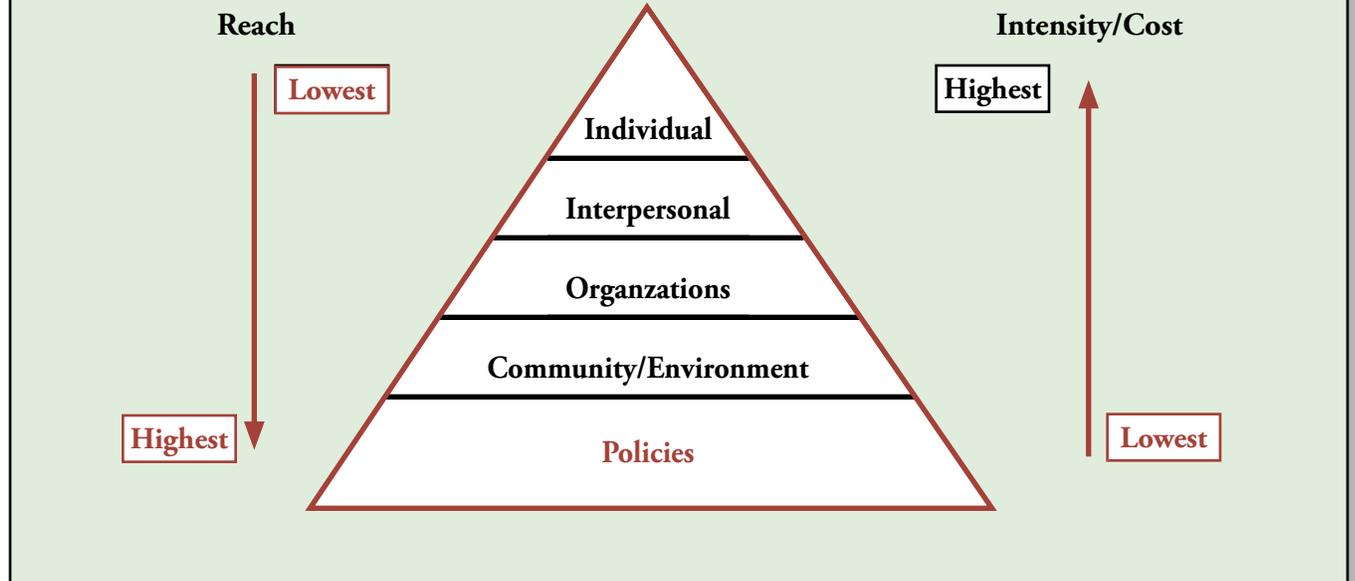
1. Outdoor bike racks
2. Labeling or highlighting healthy food choices
3. Posters promoting healthy messages

In Step 4: *Implement Changes and Activities* there are several suggested policy or environmental changes that can be made according to the needs of your worksite. The planning tools described within this section (Step 5) should be used to determine which changes should be made first. Think about addressing some of the easy changes first to get a taste of success and show that your wellness program is working. As the program develops, some of the more difficult issues can be addressed.

Unlike trying to impact change at an individual level, environmental and policy changes have the ability to impact large groups of people and will likely provide the most “bang for the buck.” The diagram on the next page illustrates why changes in the environment or changes in policy are so important.

## LEVELS OF CHANGE & SCOPE OF IMPACT

### THE GOAL IS BEHAVIOR CHANGE



What the above diagram illustrates is that interventions that target individual behavior change take a great deal of resources and impact only one person at a time. Policy and higher-level interventions targeting communities and organizations have a much greater potential impact. Although wellness strategies should address as many levels as possible, it's also important to focus on areas where the greatest potential benefit could occur.

### EMPLOYEE READINESS: STAGES OF CHANGE AND PROGRAM CONSIDERATIONS

A major factor to be aware of is that people vary greatly in their readiness to change behavior. In the survey of employees it may be helpful in developing programming to know what percent of employees are at the various stages. Most people go through five stages in changing behaviors:

1. **Pre-contemplation** – At this stage they are not thinking about changing their behavior in the near future.
2. **Contemplation** – They are beginning to seriously think about changing their behavior in the near future (next six months).
3. **Preparation** – At this stage most people have tried to change their behavior at least once in the past year, and they are thinking about trying again within the next month.
4. **Action** – Real steps are being actively taken to change their behavior. This is the stage where a slip is most likely to occur.
5. **Maintenance** – This stage applies to people who have changed their behavior for over six months and are now maintaining that healthy behavior.

People can move from one stage to another in order, but they can also move back and forth between the various stages before they adopt a behavior for good. Again, a slip is not a failure, but an important part of the learning and behavior change process. Most people may attempt healthy behavior change several times before they succeed and the chance of success increases every time.

The Employee Interest Survey (Appendix D) asks questions related to the stages of change for physical activity, nutrition, and tobacco use. Use these questions to better understand where the employees are at and tailor the programming accordingly.



## **DEVELOPING THE WELLNESS PLAN CONTENT**

One way to develop program activities is to take the results of the assessments and evaluate the areas where no policy or program exists or areas where some policy or program exists, but can be improved. For each of these items, ask the following questions:

1. How important is the item?
2. How much will it cost to implement the item?
3. How much time and effort would be needed to implement the item?
4. How great is the potential “reach” or how many employees may be affected?
5. How well does the item match employee’s interests? Use the survey results to help answer this question.

Activities should be “packaged” whenever possible so that they build off of each other, rather than pick a set of unrelated activities that are not connected. For instance, having a policy that encourages physical activity on break time, coupled with using pedometers as incentives and then providing maps or on-site trails to get staff out walking will lead to greater success. By providing the right mix of programs, a multiplier effect can be attained that is greater than the effect of adding up individual activities. “Packaging” related strategies will lead to greater participation and long term success.

## RECOMMENDATIONS – NARROWING THE SCOPE

The Recommendation Table below (and Appendix F) can be used to help narrow the scope of the wellness program. Once possible areas to focus on have been identified, asking the questions about importance, cost, time, effort, and reach should yield a very specific set of activities to implement.

### Recommendation Table

<b>Instructions:</b> List each of the areas for improvement as identified in the DHEW assessment (from Section 5 of the DHEW and/or other areas identified within each section of your DHEW Feedback Report). Rate each of the recommendations on the following aspects: importance, cost, time, and commitment. Rate each on a scale of 1-5 (low-high) using the chart below. Higher scores should indicate priority items to implement.							
<b>Importance</b>	How important is the recommendation? 1 = Not at all important      3 = Somewhat important      5 = Very important						
<b>Cost</b>	How expensive would it be to plan and implement the recommendation? 1 = Very expensive      3 = Moderately expensive      5 = Not expensive						
<b>Time</b>	How much time and effort would be needed to implement the recommendation? 1 = Extensive time & effort      3 = Moderate time & effort      5 = Low time & effort						
<b>Commitment</b>	How enthusiastic would employees be about implementing the recommendation? 1 = Not enthusiastic      3 = Moderately enthusiastic      5 = Very enthusiastic						
<b>Reach</b>	How many employees will likely be affected by this recommendation? 1 = Very few employees      3 = Some employees      5 = Most or all employees						
Item #	Recommendations	Importance	Cost	Time	Commitment	Reach	Points / Ranking
2.2	Post “no smoking” signage	4	4	3	4	5	20
3.1	Create a written policy supporting physical activity	4	3	5	5	5	22
3.3	Encourage non-motorized commutes to work	5	4	4	5	5	23

(A blank Recommendation Table can be found in Appendix F)

#### ■ *What can be done with this data? – Some examples.*

If limited resources prevent the worksite wellness committee from implementing all of the recommendations, look at the total score and category scores to help select priorities. Policy items have low cost and great reach so they might be the items to implement first. On the other end of the spectrum, recommendations such as an on-site fitness facility might be problematic because of cost and an alternative such as subsidized memberships to local physical activity facilities may be considered.

#### ■ *Be realistic!*

Limit the initial set of activities so efforts can be focused and have some early successes. The program can always be expanded as it matures, but a realistic set of objectives to begin with will require fewer resources and will keep you from being overwhelmed.

## Action Plan Worksheet

Once priorities have been decided, a specific action plan to implement the programming that's been selected should be developed. The action plan might include:

1. The overall goals and objectives of the wellness program.
2. Specific recommendations on strategies to implement. These need to be clearly stated and measurable or the evaluation won't be meaningful;
3. The chosen activities;
4. The staff, resources and materials needed to make it happen;
5. The time frame for completion;
6. The evaluation plan to measure results.

The action plan can also be used as part of a presentation to management. A presentation will help sell them on the wellness program and get buy-in for the specific strategies and activities that are selected for implementation. A sample Action Plan (Appendix G) is shown below.

### Action Plan Worksheet

<b>Definitions</b>	<b>Recommendations: Strategies to Implement</b>	Describe the strategies selected from the Recommendation Table			
	<b>Activities</b>	List the activities required to meet the recommendation			
	<b>Materials, Resources &amp; Personnel Time Frame</b>	List the individuals who will do the work; and the resources and tools they need to get the job done. When will implementation begin? How long will it take to finish?			
	<b>Evaluation Method</b>	How will you measure your successes and/or misfortunes?			
<b>Recommendations: Strategies to Implement</b>	<b>Activities</b>	<b>Materials Resources &amp; Personnel</b>	<b>Time Frame</b>	<b>Evaluation Method</b>	
1. Encourage non-motorized commutes to work	Install bike racks and distribute maps from local bike club on safe route to work	Bike racks Local bike club maps	6 months March-August	Process — installation of bike racks & number of riders Outcome — question on annual survey	
2. Post no smoking signage	Contact local tobacco coalition, state tobacco program for guidance on signs	Signs — number to be determined	3 months May-June	Process evaluation — signs posted in appropriate areas	
3. Create a written policy supporting physical activity	Draft and implement company policy on use of break & lunch time for activity	Wellness workgroup and staff input Management sign-off	1 month	Process evaluation — policy in place. Could also be a question as part of an annual survey (outcome evaluation)	

(A blank Action Plan can be found in Appendix G)

## MAINTAINING INTEREST & MOTIVATION

Once a program is started, a range of employee will participate. Some will already be very engaged in being active and eating well and the program will only reinforce and enhance their health. On the other end of the spectrum will be people who may not engage no matter what is done. The remaining group is probably the largest group in most organizations: people who are at various stages of readiness to improve their health given the right type of programming and motivation. Summarized below are some tips that can be employed once the program is up and running.

### ■ *Key Factors*

In today's society there are many key factors that influence people's health behaviors. Consider the following list in maintaining participation in the program:

1. **TIME.** People are busy, so the more you can work activity and healthy eating into their existing schedules, the better your chances for success. Example: A walk at lunch doesn't take away from existing time, it just uses it differently. Also look at the time of the day and length of any activity you might be promoting, since both time components may be factors.
2. **ACCESS.** How accessible is the worksite wellness programming. Is it onsite or at a nearby site? Is it offered at breaks or outside of normal work hours?
3. **KNOWLEDGE.** People need to know "Why" they are participating (the benefits) and also will need information about the "How to" in areas that are not commonly known. There is a wealth of information available on many wellness topics that can be found in the resource sections in Step 5.
4. **COST.** Being able to provide no cost or reduced cost programs will help participation rates. Coupled with incentives for participation, rates of participation will likely increase dramatically.
5. **INCENTIVES.** Some people need incentives to get started in a wellness program. A full list of incentive options can be found on the next page.

### ■ *Key Time Periods*

Good habits are often difficult to develop. There tends to be some critical times when people drop out or fall off of a physical activity or weight management program. The first key time zone seems to be around 6 weeks. If people can start and stay consistent with a program through the first **6 weeks**, they have made a fairly serious commitment to incorporate the habits into their lifestyle. The second key time is at about 6 months. Those who made it past 6 weeks may get bored and/or distracted from their program after several months. If people can get past **6 months** and sustain behavior through a full set of weather seasons, they have a very good chance of making the changes permanent.

Consider these time periods and think about how the program can "boost" the employees to get them past these critical time markers. Promoting individual or group "challenges," using incentives, or increased publicity/marketing are a few of the things that can be done to help get employees through these key time periods.

### ■ *Goal Setting*

Setting goals has been shown to lead to better participation and more people making a strong commitment. Whether it be a team goal of walking the equivalent of once around Michigan or an individual goal of so many miles or minutes of activity, the fact that there is something concrete to shoot for increases the likelihood people will stick with the program.



## ■ *Buddy Systems or Team Goals*

The social aspects of improving one's health cannot be underestimated. Many studies point to tight social groups being the backbone for a successful campaign because each individual has a commitment to something bigger than themselves and besides, it's just more fun for most people. Build some of the program activities around teams or partners and see what happens.

## ■ *Team "Campaigns"*

Some people like competition and others don't. Nevertheless, a worksite wide campaign has the advantage of keeping the message more visible and alive. Encourage campaign participation, but make it voluntary so that those who prefer that type of motivation can join while others can participate in their own way and at their own pace. If the idea of a campaign seems like too much work, consider tapping into existing campaigns where someone else provides the resources. The American Cancer Society's Active for Life program is just one such program that encourages employees to be more active on a regular basis by setting individual goals and forming teams for motivation and support. See Resources for the Recommended Physical Activity Strategies in Step 5 for more information on this and other team campaigns.

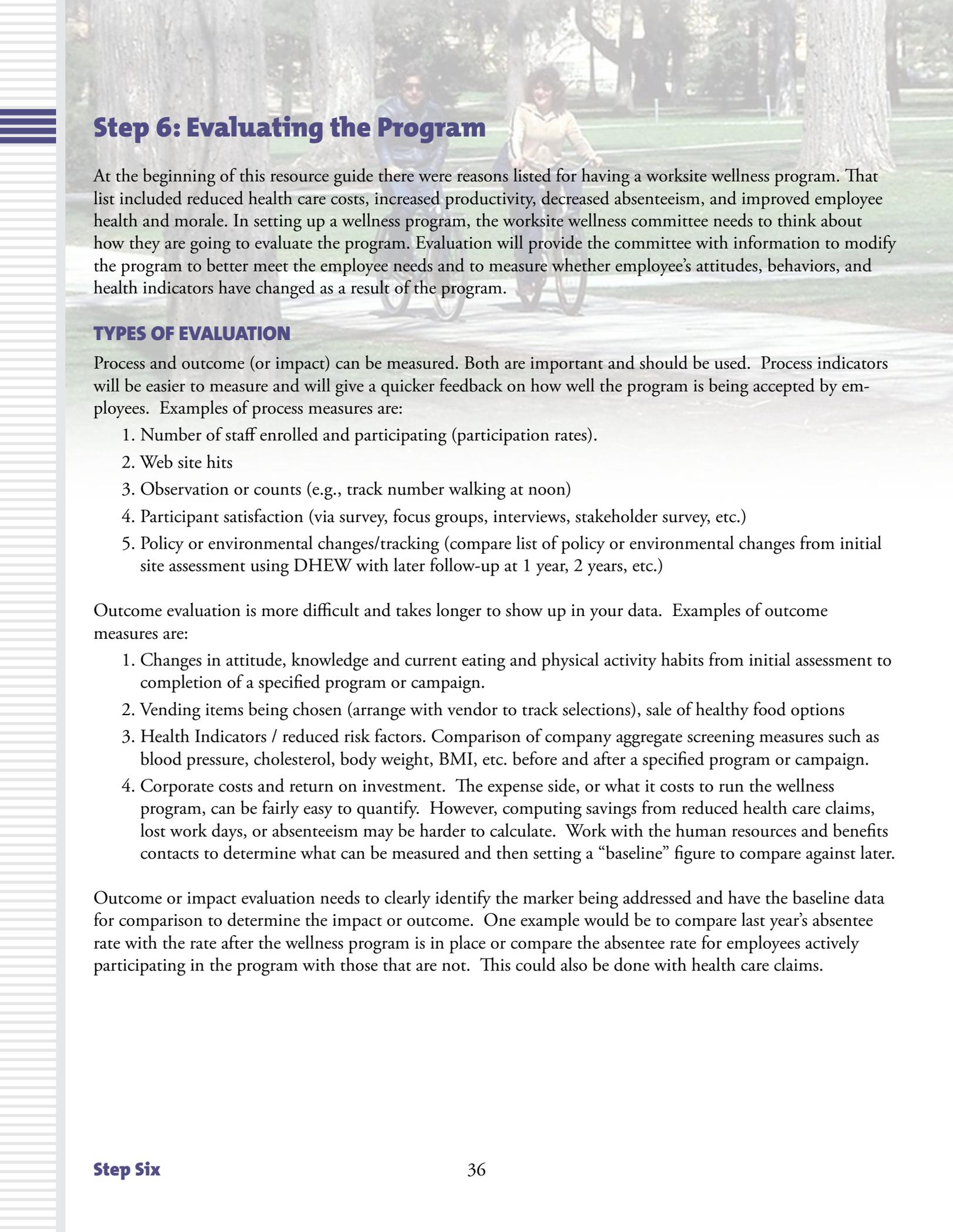
## ■ *Incentives*

Incentives are often helpful in maintaining or raising interest. Significant incentives such as cash or health insurance rebates have proven to be very strong motivators for employee participation. However, even smaller incentives can be beneficial. Listed below are some sample incentives:

1. **Achievement awards.** Verbal praise and a pat on the back are motivational to some, but a token of recognition of achievement may offer more. A colorful certificate to congratulate an employee for achieving a health-related goal is one example.
2. **Public recognition.** Announced recognition at campaign mid-point or wrap-up festivities.
3. **Food.** Include some healthy foods to kick-off, revitalize, or wrap up a wellness campaign.
4. **Entertainment.** Events serve a purpose in jump-starting, reenergizing, or wrapping up a campaign. Having entertainment of any kind can boost morale.
5. **Merchandise.** There is a long list of merchandise incentives, including sports equipment and small gift certificates to use at local merchants.
6. **Monetary rewards.** Nothing says incentive better than cash. Worksites that have used cash or rebates as an incentive have achieved much higher participation rates.
7. **Time off.** Maybe the next best incentive to cash or, for some people, even better than cash. This type of incentive makes good business sense if the number of absences drops significantly and attendance is used as one of the criteria.

## *Quick Resources:*

- WELCOA has a free guide to using incentives in a walking program. Many of the tips can be used with other activities: [http://www.welcoa.org/freeresources/pdf/stepbystep\\_ic.pdf](http://www.welcoa.org/freeresources/pdf/stepbystep_ic.pdf)
- Colorado Physical Activity and Nutrition Program has a worksite resource kit that addresses incentives (page 39): <http://www.cdph.state.co.us/pp/COPAN/resourcekits/WorksiteWellnessResourceKit.pdf>



## Step 6: Evaluating the Program

At the beginning of this resource guide there were reasons listed for having a worksite wellness program. That list included reduced health care costs, increased productivity, decreased absenteeism, and improved employee health and morale. In setting up a wellness program, the worksite wellness committee needs to think about how they are going to evaluate the program. Evaluation will provide the committee with information to modify the program to better meet the employee needs and to measure whether employee's attitudes, behaviors, and health indicators have changed as a result of the program.

### TYPES OF EVALUATION

Process and outcome (or impact) can be measured. Both are important and should be used. Process indicators will be easier to measure and will give a quicker feedback on how well the program is being accepted by employees. Examples of process measures are:

1. Number of staff enrolled and participating (participation rates).
2. Web site hits
3. Observation or counts (e.g., track number walking at noon)
4. Participant satisfaction (via survey, focus groups, interviews, stakeholder survey, etc.)
5. Policy or environmental changes/tracking (compare list of policy or environmental changes from initial site assessment using DHEW with later follow-up at 1 year, 2 years, etc.)

Outcome evaluation is more difficult and takes longer to show up in your data. Examples of outcome measures are:

1. Changes in attitude, knowledge and current eating and physical activity habits from initial assessment to completion of a specified program or campaign.
2. Vending items being chosen (arrange with vendor to track selections), sale of healthy food options
3. Health Indicators / reduced risk factors. Comparison of company aggregate screening measures such as blood pressure, cholesterol, body weight, BMI, etc. before and after a specified program or campaign.
4. Corporate costs and return on investment. The expense side, or what it costs to run the wellness program, can be fairly easy to quantify. However, computing savings from reduced health care claims, lost work days, or absenteeism may be harder to calculate. Work with the human resources and benefits contacts to determine what can be measured and then setting a "baseline" figure to compare against later.

Outcome or impact evaluation needs to clearly identify the marker being addressed and have the baseline data for comparison to determine the impact or outcome. One example would be to compare last year's absentee rate with the rate after the wellness program is in place or compare the absentee rate for employees actively participating in the program with those that are not. This could also be done with health care claims.

<b>Sample Evaluation Tool &amp; Measures</b>			
<b>Sample Process Objectives</b>	<b>2005</b>	<b>2006</b>	<b>Change</b>
Number of staff enrolled and participating (participation rates).	200	220	↑ 10%
Company wellness web site hits	10,620	22,000	↑ 107%
Observation or counts (e.g. track number walking at noon)	60	75	↑ 25%
Participant satisfaction (via survey, focus groups, interviews, stakeholder survey, etc.)	72%	80%	↑ 11%
Policy or environmental changes/tracking (Use Worksite Wellness Assessment Checklist and compare list of policy or environmental changes from initial site assessment with later follow-up at 1 year, 2 years, etc.)	10 in place	15 in place	↑ 50%
<b>Sample Outcome Objectives</b>	<b>2005</b>	<b>2006</b>	<b>Change</b>
Changes in attitude, knowledge and current eating and physical activity habits from initial assessment to completion of a specified program or campaign.			
Vending items being chosen (arrange with vendor to track selections), sale of healthy food options	25% Healthy choice	35% Healthy choice	↑ 40%
Cafeteria menu options			
Health Indicators / reduced risk factors. Comparison of company aggregate screening measures such as blood pressure, cholesterol, body weight, BMI, etc. before and after a specified program or campaign.	BP =140/100 Chol = 225 BMI = 30%	BP = 130/90 Chol = 212 BMI = 29%	↓ BP ↓ 6% ↓ 3%
Corporate costs and return on investment. The expense side, or what it costs to run your wellness program, can be fairly easy to quantify. However, computing savings from reduced health care claims, lost work days or absenteeism may be harder to calculate. Work with your human resources and benefits contacts to determine what can be measured and then setting a “baseline” figure to compare against later.	Sick days = 662  Health Care Claims = \$864,000	Sick days = 604  Health Care Claims = \$789,000	↓ 9% ↓ 58 days  ↓ 9% ↓ \$75,000

**Overall Resources:**

- Health Improvement: A Comprehensive Guide to Designing, Implementing and Evaluating Worksite programs. Center for Prevention and Health Services Issue Brief.  
[http://www.businessgrouphealth.org/pdfs/issuebrief\\_nov2004.pdf](http://www.businessgrouphealth.org/pdfs/issuebrief_nov2004.pdf)





# Appendix A



## Enthusiasm Makes Wellness Work

### Initiative in Brief

One of the key components of a worksite wellness program is enthusiastic and supportive leadership. Missy Best, Human Resource Specialist, provides that for Fabiano's wellness committee. Her enthusiasm coupled with the support that the committee received from the owners has helped to create a culture of wellness at Fabianos.

Every January Fabiano sponsors a "kick-off" to wellness. Someone from the local hospital comes onsite and does a health risk appraisal and health screening. Every year they have identified someone with a serious health problem, such as hypertension or diabetes. The health screening has even prompted major lifestyle changes. "We had one person lose 40 pounds and keep it off. [That person] is now a 'gym rat,'" said Best. Participation in the screening and assessment continues to grow each year.

They also have a *Get Healthy Contest*. For three months, participants make lifestyle changes to achieve or maintain a healthy weight. Some employees joined *Weight Watchers*, but most everyone just cuts back on junk food or gets more physical activity. A male and female winner will be determined and they both will win a free membership to a gym of their choice.

Fabiano Brothers also uses payroll deduction for corporate memberships to a gym. "If someone is not feeling well they can have accidents. When we feel good, we think better," said Best. Fabiano has a "Transition Program" that provides employees physical therapy after an injury, with the option of an additional three months to a gym to continue their rehabilitation. "Most everyone improves, so we're all winners," said Best.

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**Title:** Human Resource Specialist  
**Company:** Fabiano Brothers  
**Phone:** 989-773-3605 ext. 102  
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### Benefits

Noted benefits of the program are:

- Increased morale and decreased worker's compensation claims.
- Decreased absenteeism among employees.
- Competition motivates employees to make lifestyle changes.



Lunch boxes were distributed to employees with examples of healthy lunch ideas.

### Lessons Learned

- Employees are well worth the investment. You will get back what you put into the program.
- Listen to what people need and want. You don't have to spend a ton of money; be creative.
- Surround the employees with positive influences. When you are surrounded by positive influences nine hours of your workday, it is easier to maintain a healthy lifestyle.

**Cost:** Health risk appraisals-\$32-36 per person, gym membership \$100-150 each, pedometers, lunch boxes, flu shots  
**Risk Factor:** Overweight, other chronic disease risk factors, physical inactivity  
**Impact/Reach:** Approximately 70% of employees  
**Business/Sector:** Wholesale/Distribution





## **Appendix B**



# Designing Healthy Environments at Work (DHEW)

## INTRODUCTION & OVERVIEW

The *Designing Healthy Environments at Work* (DHEW) assessment was developed to help worksites assess their environment to find out how it supports healthy eating, physical activity and a tobacco-free lifestyle. The DHEW consists of five sections, each representing an important aspect of a healthy worksite environment. DHEW is the first step to improving your worksite's support of physical activity, nutrition, and tobacco-free lifestyles of employees. The results of DHEW will assist you in identifying the existing environmental and policy supports at your worksite that encourage healthy lifestyles. DHEW will also recommend ways in which your worksite can more effectively support employee health and wellness activities via policy and/or environmental changes.

All five DHEW sections follow a similar format which includes questions for the worksite team to answer and a score card that shows how many points your worksite receives out of the total possible points for each section and overall.

The best and easiest way to complete the DHEW is to use the online version. The online version automatically scores your DHEW each time you save your work. It also checks to make sure all questions are answered completely and consistently, thus preventing any inadvertent errors and providing immediate feedback on any necessary corrections. Additionally, for Section 4 (Nutrition) the online version displays (and scores) only the questions that are relevant to your worksite with regard to vending machines and cafeterias. For example, if you indicate that your worksite does not have a cafeteria, question related to cafeteria offerings are not displayed on the online form.

Because worksite teams usually need to collect data prior to completing the online assessment and because worksite wellness teams meet in locations where there is no access to the Internet, we have provided a print version that looks very similar to the online version. While this version won't allow for the automated scoring and corrections and other advantages offered online, it will make it easier for teams to transfer their answers quickly to the online DHEW. The print version also offers worksites that might be interested in completing DHEW a chance to preview the tool prior to registering to complete DHEW online.

The print versions are available for download and printing at <http://www.mihealthtools.org/work/>. For ease of printing, the materials are provided as downloadable PDFs. Other useful items already available on the DHEW website are:

- A Resource Guide — Provides links to resources that will help you in completing DHEW and defining actions that are most likely to make a difference.
- Frequently Asked Questions — Answers to common questions, such as “How long will it take to complete DHEW?” and “What are the benefits for completing DHEW?”

## HOW TO GET STARTED

1. Obtain management's support for employee wellness and completing DHEW.
2. Enlist the support of others at your worksite in completing the DHEW. It is easiest to complete as a team effort.
3. Register for the online DHEW at <http://www.mihealthtools.org/work/>.
4. Read through DHEW prior to completing it and determine team member assignments.
5. Walk through your worksite. Talk with employees in different departments and in a variety of jobs. Ask questions. Make note of environmental conditions that support or prohibit employees being healthy.
6. Answer each item to the best of your knowledge, being as precise as possible. Make sure all team members agree on the answers.

## Section 1: WORKSITE HEALTH PROMOTION

*Most worksites that have policies and environments that support employee health have one thing in common: health promotion is an integral part of the corporate mission, philosophy, culture, and structure. This section helps you assess the ways in which your worksite supports healthy lifestyle behaviors by incorporating health promotion into all venues throughout your organization.*

### 1.1 Which of the following health assessments/screenings, disease prevention or follow up services have been offered to your employees within the past 18 months?

	Offered?		If offered, is it onsite or free to employees?		If offered, is it available to dependents?		
	Yes (1 pt)	No (0 pts)	Yes (1 pt)	No (or does not apply) (0 pts)	Yes (1 pt)	No (or does not apply) (0 pts)	
Fitness assessments*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	*Fitness assessments measure aerobic capacity, flexibility, and muscle strength and endurance.
Health risk appraisals (HRA)*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	*Health Risk Appraisals assess how lifestyle behaviors affect health. Generally, HRAs offer an individualized report with recommendations for maintaining or improving health. <i>See the Resource Guide for more on HRAs.</i>
Health screenings* (diabetes, cholesterol, blood pressure)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	*Health screenings involve a relatively quick and simple biologic measure of physiologic status, such as a blood pressure check, a finger prick test (blood test) for cholesterol or diabetes. The results give an indication of further follow up (rather than being definitively diagnostic) for a variety of conditions where early detection can increase the chances of successful treatment.
Follow-up services* for employees identified as being at high risk for chronic disease	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	*Follow up services include referrals to resources or for further diagnostic testing for individuals who are identified as being high-risk for chronic disease(s). A follow-up contact should be done to find out if the referral was successful.

### 2.2 Which of the following classes or programs have been offered to your employees within the past 18 months?

	Offered?		If offered, is it onsite or free to employees?		If offered, is it available to dependents?	
	Yes (1 pt)	No (0 pts)	Yes (1 pt)	No (or does not apply) (0 pts)	Yes (1 pt)	No (or does not apply) (0 pts)
Nutrition or healthy eating	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Smoking cessation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Weight management (classes or programs, such as Weight Watchers)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Physical activity programs or classes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

---

**2.2 In which of the following ways does your worksite support new mothers?** (Check all that apply – 1 pt per checked box)

- A written policy supporting new mothers (for example: policies related to flex time, lactation breaks, or other lactation support)
- A lactation room\* at your worksite, accessible to all employees who are new mothers/lactating (breast feeding)
- Flex time
- None of these (0 pts)

\*A lactation room provides a private place – not a bathroom - where employees can go to nurse their babies or pump their breast milk to take home for later use. See the [Resource Guide](#) for more on policies that support new mothers.

---

**1.4a Do employees at your worksite have access to an Employee Assistance Program (EAP)\*?**

- Yes (1 pt – go to 1.4b)
- No (0 pts- [skip to 1.5](#))

---

**1.4b Check all the elements from the list below that apply to your Employee Assistance Program.** (1 pt per checked box)

- Offered to employees free of charge
- Offered to employees' dependents free of charge
- None of the above apply to our EAP (0 pts)

\*EAPs furnish professional counselors, who provide confidential assessment and short-term counseling to employees and their families in order to assist in dealing with issues that affect employees (e.g., marriage and family problems, stress related problems, financial and legal difficulties, and workplace conflicts). See the [Resource Guide](#) for more information on EAPs and how they support employee health and wellness.

---

**5.5 Does your worksite inform new employees during employment orientation about health promotion programs or classes offered?**

- Yes (1 pt)
- No (0 pts)
- Not applicable – no employee orientation conducted (0 pts)

---

**1.6 Does your worksite have a policy that gives employees paid time off to attend worksite-sponsored health promotion programs/classes that are scheduled during work hours?**

- Yes (1 pt)
- No (0 pts)
- Not applicable – no such programs exist/are scheduled during work hours (0 pts)

See the [Resource Guide](#) for information on these types of policies.

---

**1.7 Does your worksite have a health promotion budget?**

- Yes (1 pt)
  - No (0 pts)
- 

**1.8a Does your worksite have a worksite wellness committee?**

- Yes (1 pt — go to 1.8b)
- No (0 pts — [skip to 1.9](#))

See the [Resource Guide](#) for information on worksite wellness committees.

---

**1.8b How often does your worksite wellness committee meet per year?**

- At least 4 times annually (2 pts)
  - 2 to 3 times annually (1 pt)
  - Once or fewer times annually (or does not apply-no wellness committee) (0 pts)
- 

**1.8c Is your worksite wellness committee representative\* of your work force?**

- Representative (2 pts)
- Somewhat representative (1 pt)
- Not representative (0 pts)
- Does not apply — no wellness committee (0 pts)

\*Representative means that the wellness committee is comprised of at least one member from each type of employee group in your worksite, such as management, professional, clerical, union/non-union, first shift, second shift, and so on.

---

**1.9 Are employees at your worksite surveyed annually (at minimum) to determine their health and wellness needs?**

- Yes (1 pt)
- No (0 pts)

See the [Resource Guide](#) for a sample employee health survey.

---

**1.10 In the past year, has the president/CEO/owner of your worksite communicated his/her support of wellness programs and employee health to employees?**

- Yes (1 pt)
  - No (0 pts)
- 

**1.11 Does your worksite's mission statement include the support of employee health?**

- Yes (1 pt)
- No (0 pts)
- Not applicable — worksite does not have a mission statement (0 pts)

See the [Resource Guide](#) for information on how a worksite's mission statement can support employee health.

## Section 2: TOBACCO

*Smoking is the leading cause of preventable death, yet 26.1% of Michigan adults continue to smoke. Smokers, on average, miss 6.16 days of work per year due to sickness compared to 3.86 sick days for nonsmokers. Worksites can make it easier for employees to live a tobacco-free lifestyle by implementing policies, offering resources, and creating a tobacco-free environment. This section helps you assess how your worksite supports employees that are, and/or want to be, tobacco-free.*

### 2.1a Does your worksite have a written policy regulating smoking?

- Yes (5 pts — go to 2.1 b)
- No (0 pts — [skip to 2.2](#))

See the [Resource Guide](#) for information on written policies regulating smoking.

---

### 2.1b Does the policy provide for a 100% smoke-free work environment?

- Yes (10 pts)
  - No (0 pts)
  - Does not apply — no written policy (0 pts)
- 

### 2.1c Do all employees adhere to the policy?

- Yes (5 pts)
  - No (0 pts)
  - Does not apply — no written policy (0 pts)
- 

### 2.2 Are No Smoking signs posted at your worksite?

- Yes (1 pt)
  - No (0 pts)
- 

### 2.3 Are people only smoking in designated areas in your worksite?

- Our worksite is smoke-free so there are no such areas (1 pt)
- Yes, only in designated areas (1 pt)
- No, there are no designated areas (0 pts)
- No, there are designated areas but one or more employees smoke outside those areas (0 pts)
- Does not apply — all employees are nonsmokers (1 pt)

---

**2.4 Is the sale of tobacco products prohibited at your worksite (for example, in onsite stores or vending machines)?**

- Yes (1 pt)
  - No (0 pts)
- 

**2.5 Does your worksite provide any incentives\* for being a non-smoker or quitting smoking?**

- Yes (5 pts)
- No (0 pts)

\*Incentives may include: improved benefits allowances (discounted health insurance, increased disability payments, additional life insurance); added vacation “well days” off; direct cash payments or bonuses; material prizes or awards.

---

**2.6 In the past 12 months, has your worksite promoted smoking cessation/tobacco-free lifestyles\* to employees?**

- Yes — promoted 4 or more times in the past 12 months (2 pts)
- Yes — promoted 1 to 3 times in the past 12 months (1 pt)
- Not promoted in the last 12 months (0 pts)
- Does not apply — all employees are nonsmokers (2 pts)

\*Examples of promoting smoking cessation/tobacco-free lifestyles to employees include use of posters, brochures, videos, paycheck stuffers, flyers, newsletter articles, information on a website that serves employees, providing on-site cessation classes, providing insurance that covers cessation services and nicotine replacement therapy, publicity about local stop-smoking resources or events.

See the [Resource Guide](#) for more information on smoking cessation/promoting tobacco-free lifestyles.

## Section 3: PHYSICAL ACTIVITY

*Physical inactivity cost Michigan \$8.9 million in lost productivity, medical claims, and workers compensation. Worksites can make it easier for employees to be physically active at work by implementing policies, offering resources, and creating an activity-friendly environment. The questions in this section help you determine the ways in which your worksite supports employees in being physically active.*

### 3.1 Does your worksite have a written policy\* supporting employee physical activity?

- Yes (5 pts)  
 No (0 pts)

\*Policies may include allowances for flexible work schedules to allow employees to exercise; walk breaks; pre-labor stretching.

See the [Resource Guide](#) for information on these types of policies.

### 3.2.a Does your worksite provide work-sponsored physical activity opportunities for employees?

- Yes (1 pt — go to 3.2b)  
 No (0 pts — [skip to 3.3](#))

See the [Resource Guide](#) for information on work-sponsored physical activity opportunities.

### 3.2.b Which of the following worksite-sponsored activities have been offered to your employees in the last 18 months?

	Offered?		If offered, is it onsite or free to employees?	
	Yes (1 pt)	No (0 pts)	Yes (1 pt)	No (or does not apply) (0 pts)
Employee sport teams (such as softball, volleyball, golf, bowling)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Onsite physical activity classes or programs (such as yoga, aerobics, strength training)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Employees participating in a community sponsored event (such as <i>Walk for Life, Race for the Cure, Walk America</i> )	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Access to workout facilities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other physical activity events/programs Please list the events in the space below: <div style="border: 1px solid black; height: 30px; width: 100%; margin-top: 5px;"></div>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

See the [Resource Guide](#) for information about *Walk for Life, Race for the Cure, Walk America* and other similar events.

Examples include employee walking clubs or programs and activity challenges.

---

**3.3 Does your worksite encourage non-motorized commutes\* to work?**

- Yes (1 pt)
- No (0 pts)

\*Encouragement of non-motorized transportation having bike racks or a safe place for employees to park their bikes; sponsoring walk or bike to work days; materials and programs to encourage employees to use non motorized alternatives.

See the [Resource Guide](#) for information on non-motorized commuting.

---

**3.4 Does your worksite's physical environment\* support physical activity?**

- Yes (4 pts)
- No (0 pts)

\*A supportive physical environment may include safe and well-lit parking lots, campuses and stairwells to encourage walking.

---

**3.5 Does your worksite provide incentives\* to promote physical activity?**

- Yes (5 pts)
- No (0 pts)

\*Incentives may include: improved benefits allowances (discounted health insurance, increased disability payments, additional life insurance); added vacation "well days" off; direct cash payments or bonuses; material prizes or awards; subsidies for health club memberships.

---

**3.6 Does your worksite have a locker room with showers accessible to all employees?**

- Yes (1 pt)
  - No (0 pts)
- 

**3.7 In the past 12 months, has your worksite promoted physical activity to employees through the use of posters, brochures, videos, paycheck stuffers, flyers, newsletter articles, information on a website that serves employees, etc?**

- Yes — promoted 4 or more times in the past 12 months (2 pts)
  - Yes — promoted 1 to 3 times in the past 12 months (1 pt)
  - Not promoted in the last 12 months (0 pts)
- 

**3.8 In the past 18 months, has your worksite supported community physical activity opportunities, such as sponsoring community sports teams (adult or youth) or sponsoring or participating in community-sponsored physical activity events?**

- Yes (1 pt)
- No (0 pts)

See the [Resource Guide](#) for information on worksite-supported community physical activity opportunities.

## Section 4: NUTRITION

*Most adults spend a major portion of their waking hours at work, with lunch and snack breaks provided during the day. Worksites can make it easier for employees to eat healthy at work by implementing policies, offering resources, and creating healthy eating opportunities. This section helps you assess the ways in which your worksite environment supports healthy eating.*

**NOTE:** Some questions in Section 4 may not be relevant to your worksite. For example, if your worksite does not have a cafeteria, questions 4.8 through 4.11 would not be relevant. In the online version, these questions would not be displayed for worksites without a cafeteria and automated scoring adjustments would occur accordingly.

### 4.1 In the past 12 months, has your worksite promoted healthy eating\* to employees?

- Yes — promoted 4 or more times in the past 12 months (2 pts)
- Yes — promoted 1 to 3 times in the past 12 months (1 pt)
- Not promoted in the last 12 months (0 pts)

\*Examples of promoting healthy eating to employees include use of posters, brochures, videos, paycheck stuffers, flyers, newsletter articles, information on a website that serves employees, salad bar days, publicity about area farmers markets.

See the [Resource Guide](#) for more information on promoting healthy eating to employees.

### 4.2 Does your worksite encourage the provision of healthy food and beverage options\* at employee meetings or conferences?

- Yes (1 pt)
- No (0 pts)
- Not applicable — no food/beverages served at meetings (1 pt)

\*Examples of healthy food and beverage options include fruit; vegetables; salads, 100% fruit juices; bottled water; low-fat meats (such as turkey or chicken); foods prepared without fat (by grilling, baking or roasting rather than frying); bagels (rather than donuts); low-fat yogurt.

See the [Resource Guide](#) for more information on healthy food and beverage options.

### 4.3 Does your worksite support\* employees that bring their lunch to work?

- Yes (1 pt)
- No (0 pts)

\*Support may include providing a refrigerator, sink to clean dishes/utensils, eating area with seating, microwave and/or toaster oven for warming food.

### 4.4 Does your worksite have a written policy that vending machines or snack bars must offer healthy food/beverage options\*?

- Yes (1 pt)
- No (0 pts)

\*Healthy food options may include low-fat, low-sodium and/or sugar-free foods, such as fruit (fresh, canned or dried), pretzels or baked chips. Healthy beverage options include 100% fruit/vegetable juices, skim or 1% milk, and bottled water. Low-carb food items are not classified as healthy food options.

#### 4.5 Are there labels\* to identify at a glance “healthy” foods offered in vending machines and/or snacks stands?

- Yes (1 pt)  
 No (0 pts)

\*Labels that apply are those added to food choices at the point of purchase (such as a heart to indicate a heart-healthy food). This is not the nutrition labeled on most commercial foods or statements on packages, such as lite, low-fat, or sugar-free.

#### 4.6 How often are the following food items offered in the vending machines/snack stands?

	Often (at least 75% of the time) (2 pts)	Sometimes (25% to 50% of the time) (1 pt)	Rarely or Never (less than 25% of the time) (0 pt)
Low-fat snacks (fat content must be 3 grams fat or less per serving. Examples: pretzels, baked chip, low-fat cereal or granola bars.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reduced sugar or sugar free snacks. <i>See the <a href="#">Resource Guide</a> for information on reduced-sugar/sugar free snacks.</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Low sodium snacks (sodium content of 140 milligrams or less per serving)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fruits (fresh or dried)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Low-fat dairy products (fat content must be 5 grams fat or less per serving. Examples: low or non fat yogurt)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vegetables (not fried)			

#### 4.7 How often are the following beverage items offered in the vending machines/snack stands?

	Often (at least 75% of the time) (2 pts)	Sometimes (25% to 50% of the time) (1 pt)	Rarely or Never (less than 25% of the time) (0 pt)
100% fruit juices (not punches, fruit drinks, lemonade)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vegetable juices	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Skim or low-fat milk	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bottled water	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

#### 4.8 Does your worksite have a written policy requiring healthy food preparation practices\* in the cafeteria?

- Yes (1 pt)  
 No (0 pts)

\*Healthy food preparation practices include steaming, low-fat/salt substitutes, broiling and limited frying or cooking with butter or cream sauces.

#### 4.9 Does your worksite have a written policy that the cafeteria must offer healthy food options?

- Yes (1 pt)  
 No (0 pts)

\*Healthy food options include fruits, vegetables prepared without fat or cream sauces, low-fat entrees (such as grilled or baked turkey or chicken, pasta with tomato sauce and low-fat cheeses), salad bars with low-fat dressing, low-sodium and sugar-free options. Low carb foods are not healthy food options.

See the [Resource Guide](#) for information on cafeteria policies that support healthy eating.

#### 4.10 How often are the following food items offered in the cafeteria?

	4 to 5 times per week (2 pts)	2 to 3 times per week (1 pt)	Once a week or less (0 pt)
Vegetables (fresh, steamed, salad bar or tossed saled; not fried)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Low-fat entrees (fat content is 12 or less fat grams per serving. Examples: grilled or baked poultry or fish; sandwiches prepared without cheese or mayonnaise-type dressings)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Low sodium entrees (sodium content of 140 milligrams or less per 4-ounceserving)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fruits (fresh, dried or canned in its own juice)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Low-fat dairy products (fat content must be 5 grams fat or less per serving. Examples: low or non fat milk or yogurt, reduced-fat cheeses, low-fat cottage cheese)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Low-fat desserts (fat content is 3 or less grams per serving. Example: frozen yogurt)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

#### 4.11 Does your worksite cafeteria provide labels\* to identify “healthy” foods?

- Yes (1 pt)  
 No (0 pts)

\*Labels that apply are those added to food choices at the point of purchase (such as a heart to indicate a heart-healthy food or table tents with heart health information). This is not the nutrition labeled on most commercial foods or statements on packages, such as lite, low-fat, or sugar-free.

## Section 5: ADDITIONAL INFORMATION AND NEXT STEPS

*Although there are no scores for this section, it is a required section. The word “optional” will appear in parentheses beside all optional questions; all other questions are required.*

*The reasons we ask that you complete this section are:*

- *It provides the opportunity to translate learnings from the questions you answered into viable action steps to make your worksite healthier. Without taking action, improvements cannot be made.*
- *To assist the Michigan Department of Community Health in providing more effective support to your worksite and other worksites that are interested in improving their employees' health.*

### 5.1 Worksite Strengths:

**Please list what you believe are the most important things your worksite is doing to create an environment to help employees achieve better health. List at least one and up to eight.**

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_
- f. \_\_\_\_\_
- g. \_\_\_\_\_
- h. \_\_\_\_\_

### 5.2 Next Steps:

**Briefly describe at least one and up to five actions you would be willing and able to do in the next one to two years to make your worksite healthier.**

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_

### 5.3 People who helped complete the Designing Healthy Environments at Work assessment (DHEW)

Please enter the title of those who helped complete this assessment and the role they played. These include the people that provided the information you used to answer the various questions, such as managers of various departments.

JOB TITLE	ROLE PLAYED IN COMPLETING THE DHEW
<i>EX: Benefits Manager</i>	<i>Provided info about incentives</i>

### 5.4 Worksite Wellness Committee Information

#### 5.4 a Does your worksite have a worksite wellness committee?

- Yes (go to 5.4 b)
- No (go to 5.5)

**5.4 b** Please check all the employee groups/departments that are represented on your wellness committee. If a group/department on your committee does not appear below, please check the "Other" option and provide a brief description of the group/department represented in the space provided. Check all that apply below.

- Management
- Human Resources
- Food Service
- Employee Health and Safety
- Professional and/or administrative staff
- Clerical Staff
- Exempt employees
- Nonexempt employees
- Hourly/Part-time employees
- Union
- Other, SPECIFY \_\_\_\_\_

## 5.5 Additional Information About Your Worksite

**5.5a (OPTIONAL) Please indicate the approximate percent of employees (full and part time) in each of the following age groups.** Answer in whole numbers; the total should add to 100%.

AGE	% OF EMPLOYEES
Younger than age 20	
20 to 40	
41 to 50	
50 to 65	
Older than age 65	
<b>TOTAL</b>	

**5.5b (OPTIONAL) Please indicate the approximate percent of employees (full and part time) in each of the following race/ethnic groups.** Answer in whole numbers; the total should add to 100%

RACE / ETHNICITY	% OF EMPLOYEES
African American / Black	
Asian / Pacific Islander	
Hispanic / Latino	
Native American / American Indian	
White	
Other	
<b>TOTAL</b>	

**5.5c (OPTIONAL) Please indicate the approximate percent of male and female employees (full and part time).** Answer in whole numbers; the total should add to 100%.

GENDER	% OF EMPLOYEES
Male	
Female	
<b>TOTAL</b>	

## Designing Healthy Environments at Work Scorecard

<b>Healthy Work Environments Scorecard</b>	<b>Your Worksite's Score</b>	<b>Maximum Possible Score</b>	<b>Maximum Possible Score</b>
Section 1: Worksite Health Promotion		41	
Section 2: Tobacco		30	
Section 3: Physical Activity		30	
Section 4: Nutrition		43*	
<b>TOTAL</b>		<b>144*</b>	





# Appendix C



# Michigan Steps Up

## Directions for Completing an Online Health Risk Appraisal (HRA)



All Michigan residents, 19 years or older, are encouraged to complete the health risk appraisal (HRA) found on the Michigan Steps Up website. Follow the steps below to complete your own HRA. Before beginning, have the following information ready:

1. height
2. weight
3. approximate dates of most recent preventive services and health screenings
4. blood pressure and cholesterol measurements

While none of this information is required, it will make your HRA Profile report more accurate.

**STEP 1:** Go to [www.michiganstepsup.org](http://www.michiganstepsup.org).

**STEP 2:** Click on **Create Personal Plan**, found under **Quick Links** on the right-hand side of the page.

If you have already completed a Personal Plan, click on **Access Personal Plan Tools** instead and log in using your email address and Personal Plan Password. If you've forgotten your Personal Plan Password, you can request it be sent to you. It will be emailed to the address you used when you first created your Personal Plan. Proceed to **STEP 5**.

**STEP 3:** Once you are at the **Create Personal Plan** page, click on **Start Personal Plan**, found at the bottom of the page.

**STEP 4:** Complete the **Assessment Quiz**. This quiz is different from the HRA, and must be completed before completing the HRA.

For your convenience, use the box at the right to record your Group Code, email address and Personal Plan Password for future reference. The Group Code is a unique number assigned to your employer that allows aggregate group data to be reported. Your individual information will never be reported to your employer or any other unauthorized agency.

### KEEP IN A SECURE PLACE

Group Code: \_\_\_\_\_

Email Address: \_\_\_\_\_

Personal Plan Password: \_\_\_\_\_

HRA Password (4 digits): \_\_\_\_\_

After completing the quiz and setting your personal goals, click **Submit** at the bottom of the page. This will take you to the **Access Personal Plan Tools**.

**STEP 5:** On the **Access Personal Plan Tools** page, you will find several resources—including the HRA—that will assist you in achieving your personal goals. Click on **Click here to begin your HRA**.

**STEP 6:** Complete the HRA. It should take between 10 and 15 minutes, and must be done in one session. Assign an HRA Password, and record it in the above box. This will allow you to return to your HRA report once you close out of your HRA. If you were given a Group Code, enter it in the Group Code field of the HRA.

There are three reports you can print after you finish your HRA: 1) Health Risk Appraisal Profile, 2) Health Risk Appraisal Physician Report, and 3) Health Risk Appraisal Profile – How to use your report.

**Your privacy comes first!** Your Identification and Authorization are required to confirm your eligibility to use this HRA. Beyond this purpose, your information is considered anonymous. It is held in confidence by the University of Michigan Health Management Research Center and is never shared or used without your permission, except in aggregate, anonymous form for scientific research. If you have questions, please contact Christi Demitz at [demitzc@michigan.gov](mailto:demitzc@michigan.gov) or 517/335-8771.





## **Appendix D**



# Employee Interest Survey

Thank you for completing this survey. Your responses will give your worksite wellness committee insight into the types of activities that interest you. Participation in this survey is voluntary, and you do not need to respond to any of the questions that you do not wish to answer. The survey will take about five minutes to complete. The information you provide on this survey will only be shared with the wellness committee, unless you give written permission or it is combined with the responses of others so that individual level information is impossible to ascertain.

---

## Wellness Questions

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### What statement best describes your current level of physical activity? (choose one)

- I don't exercise or walk regularly now, and I don't plan to start in the near future.
- I don't exercise or walk regularly, but I've been thinking about starting.
- I'm doing moderate or vigorous physical activities for at least 30 minutes on some days, but fewer than 5 days a week.
- I've been doing moderate or vigorous physical activities for at least 30 minutes in a day, on five or more days a week, and have been doing it for the last 0 to 6 months.
- I've been doing moderate or vigorous physical activities for at least 30 minutes in a day, on five or more days a week, and have been doing it for 7 months or longer.

---

### When do you get most of your physical activity each day? (choose one)

- Before work
- During work hours on break and lunch times
- After work
- On the weekends
- None of the above

---

### Select the statement that best describes your current intake of 100% juices and fresh, frozen and/or dried fruits and vegetables.

- I don't eat fruits and vegetables regularly now, and I don't plan to start in the near future.
- I don't eat fruits and vegetables regularly now, but I've been thinking about starting.
- I'm eating some fruits and vegetables a day (total of 2 servings or less)
- I've been eating fruits and vegetables every day (total of 3 or more servings) for the last 0 to 6 months.
- I've been eating 5 or more servings of fruits and vegetables every day for 7 months or longer.

**Select the statement that best describes your current tobacco use.**

- I don't smoke
- I'm not thinking about quitting, at least not in the next six months.
- I'm thinking about quitting someday, but not right now.
- I want to quit within the next month or two, and I want to know more about how to do it.
- I have just quit and I am going through withdrawal.
- I have quit smoking and I want to know more about how to never smoke again.

**Please rate your interest in the following activities:**

	MY INTEREST IS				
	VERY LOW	LOW	NEUTRAL	HIGH	VERY HIGH
Back care education					
Budgeting/financial planning					
CPR / first aid training					
Cancer education / screening					
Cardiovascular health program					
Cholesterol & blood pressure education / screening					
Communication skills training					
Company sports teams					
Diabetes education / screening					
Emotional wellness program					
Health / fitness evaluation					
Nutrition education					
Physical activity classes					
Smoking cessation					
Stress management					
Substance abuse awareness					
Time management training					
Weight management program					
Other _____					
Not interested in any of the above					

---

**When is the best time for you to participate in wellness activities (check all that apply):**

- Before work
  - During the workday on break and lunch times
  - After work
  - None of the above
- 

**How would you like to receive communications regarding employee health activities?**

(choose one)

- Bulletin boards
  - Email
  - Memo
  - Newsletter
  - Paycheck stuffer
  - Other \_\_\_\_\_
  - Not interested in receiving communications regarding health activities
- 

**The following questions are OPTIONAL:**

**Gender:**

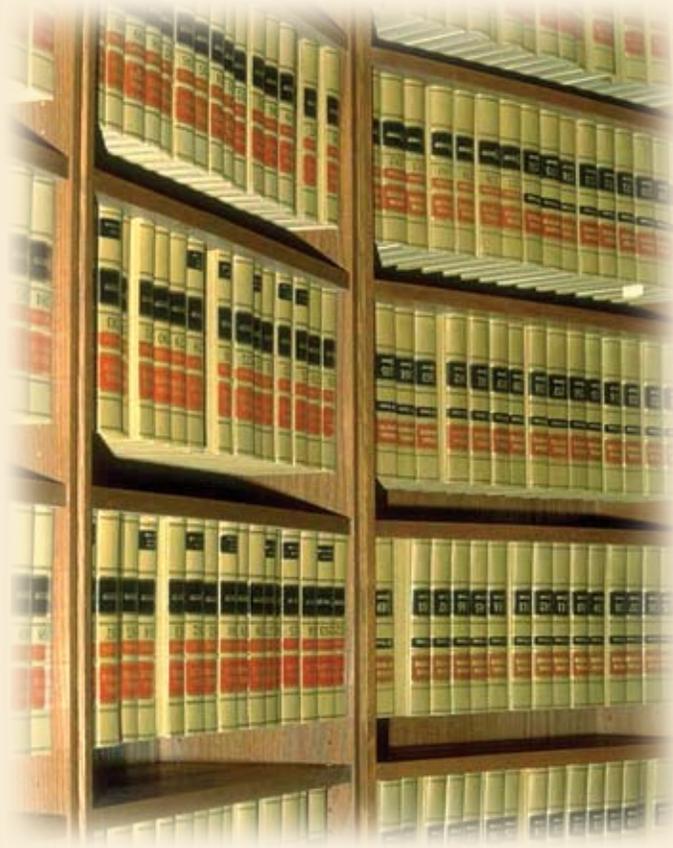
- Male
- Female

**Age:**

- <20
- 20-29
- 30-39
- 40-49
- 50-59
- 60+

**Thank you for your participation in this survey.**





## Appendix E





# Worksite Vendor Listing by Program Services

	PROGRAM SERVICES				
	HEALTH ASSESSMENT	RISK REDUCTION	ONSITE	OFFSITE	OTHER?
<p><b>Access Wellness Centers</b> 4154 Saginaw Court Ann Arbor, Michigan, 48103</p> <p>Contact: Patricia or David Kubany Phone: 734-665-9095 Email: <a href="mailto:spectrum@provide.net">spectrum@provide.net</a></p>	FE HRA CS	HH NE PA PE SC-G WM	No	Yes	Ergonomic Analysis  Cholesterol Screening  Bone Density Screening
<p><b>Aerobics Plus</b> 2766 Still Valley Ct E. Lansing, MI, 48823</p> <p>Contact: Joan Barch Phone: 517 351-3144 Email: <a href="mailto:barchj@msu.edu">barchj@msu.edu</a></p>	FE HRA CS	HH NE PA WM	No	Yes	
<p><b>Allegan County Health Department</b> 3255 122nd Ave., Ste 200 Allegan, MI, 49010</p> <p>Contact: Kathy Yonkers-Wright, RDH, MS Phone: 269-686-4523 Email: <a href="mailto:kwright@allegancounty.org">kwright@allegancounty.org</a></p>	HRA	HH NE PA PE SC-G SC-SH WM	Yes	Yes	Healthy Lifestyles Workshops and Support Meetings
<p><b>Bon Secours Cottage Health Services</b> 22300 Bon Brae St. Clair Shores, MI, 48081</p> <p>Contact: Peggy Murphy Kurza Phone: 586-779-7660 Email: <a href="mailto:peggy_kurza@bshsi.com">peggy_kurza@bshsi.com</a></p>	FE HRA CS	NE PA	No	Yes	

Health Assessment: Fitness Evaluation (FE); Health Risk Appraisal (HRA); Clinical Screening (CS).

Risk Reduction: Heart Health Education (HH); Nutrition Education (NE); Physical Activity Involving Workout (PA); Physical Activity involving Education but not Workout (PE); Smoking Cessation for Group (SC-G); Smoking Cessation

## Worksite Vendor Listing by Program Services

	PROGRAM SERVICES				
	HEALTH ASSESSMENT	RISK REDUCTION	ONSITE	OFFSITE	OTHER?
<p><b>Cadillac Family Physicians</b> 8950 Professional Drive Cadillac, MI, 49601</p> <p>Contact: Julie Keller Phone: 231-775-2493 Email: <a href="mailto:occupational@cadillacfamilyphysicians.com">occupational@cadillacfamilyphysicians.com</a></p>	HRA	HH SC-G SC-SH WM	Yes	Yes	
<p><b>Central Michigan Community Hospital</b> Wellness Central 2600 Three Leaves Drive Mt. Pleasant, MI, 48858</p> <p>Contact: Debbie Hilts Phone: 989-779-5606 Email: <a href="mailto:dhilts@cmch.org">dhilts@cmch.org</a></p>	FE HRA CS	HH NE PA PE WM	Yes	Yes	Worksite Wellness  CPR/First Aid Training  Stress Management
<p><b>Central Michigan University</b> <b>Department of Human Environmental Studies</b> 300 Russell St. Unit 10 Mt. Pleasant, MI, 48858</p> <p>Contact: Carolyn J. Hoffman, Prof. Emeritus Phone: 989-772-3408 Email: <a href="mailto:carolynh10@charter.net">carolynh10@charter.net</a></p>		NE	Yes	Yes	
<p><b>Comprehensive Health &amp; Safety Education</b> P.O. Box 373, Farmington, MI, 48332</p> <p>Contact: Barbara Seabolt Phone: 248-477-1066 Email: <a href="mailto:chasebls@provide.net">chasebls@provide.net</a></p>	HRA	HH NE PE SC-G SC-SH	Yes	Yes	CPR & First Aid, AED Training, Cholesterol Education, Stress Management, Ergonomic, Blood Pressure Education, Bloodborne Pathogens
<p><b>District Health Department #10</b> 521 Cobbs Street Cadillac, MI, 49601</p> <p>Contact: Kevin Hughes Phone: 231-876-3839 Email: <a href="mailto:khughes@dhd10.org">khughes@dhd10.org</a></p>	FE HRA	HH NE PE SC-G SC-SH WM	Yes	No	Consulting services to set-up and/or operate worksite wellness programs.

Health Assessment: Fitness Evaluation (FE); Health Risk Appraisal (HRA); Clinical Screening (CS).

Risk Reduction: Heart Health Education (HH); Nutrition Education (NE); Physical Activity Involving Workout (PA); Physical Activity involving Education but not Workout (PE); Smoking Cessation for Group (SC-G); Smoking Cessation

## Worksite Vendor Listing by Program Services

	PROGRAM SERVICES				
	HEALTH ASSESSMENT	RISK REDUCTION	ONSITE	OFFSITE	OTHER?
<p><b>Grand Valley Health Plan</b> 829 Forest Hills Ave SE Grand Rapids, MI, 49546</p> <p>Contact: Heather E. Bogetta R.D. Phone: 616-949-2410 X104 Email: <a href="mailto:bogettah@gvhp.com">bogettah@gvhp.com</a></p>	CS	HH NE PA PE SC-G SC-SH WM	Yes	Yes	Flu Shot Clinics
<p><b>Grand View Health System</b> N 10561 Grand View Ln Ironwood, MI, 49938</p> <p>Contact: Geneva Smiles Phone: 906-932-6208 Email: <a href="mailto:gsmiles@gvhs.org">gsmiles@gvhs.org</a></p>	HRA CS	HH NE PA PE SC-G	Yes	Yes	
<p><b>Great Lakes Family Care</b> 520 Cobbs Cadillac, MI, 49601</p> <p>Contact: Kelly Russell Phone: 231-775-6521 Email: <a href="mailto:krussell@trinity-health.org">krussell@trinity-health.org</a></p>	FE HRA	HH NE SC-G WM	Yes	Yes	
<p><b>Health for Life Consulting, Inc.</b> 6916 Kingdon Ave. Holt, MI, 48842</p> <p>Contact: Jane Braatz Phone: 517-699-1864 Email: <a href="mailto:jsbraatz@comcast.net">jsbraatz@comcast.net</a></p>		HH PA PEa	No	Yes	Services to the elderly
<p><b>Henry Ford Health System</b> 6525 Second Avenue Detroit, MI, 48202</p> <p>Contact: Darlene Zimmerman, MS, RD Phone: 313-972-1920 Email: <a href="mailto:dzimmer1@hfhs.org">dzimmer1@hfhs.org</a></p>		HH	No	No	Consulting services to set-up and/or operate worksite wellness programs.

Health Assessment: Fitness Evaluation (FE); Health Risk Appraisal (HRA); Clinical Screening (CS).

Risk Reduction: Heart Health Education (HH); Nutrition Education (NE); Physical Activity Involving Workout (PA); Physical Activity involving Education but not Workout (PE); Smoking Cessation for Group (SC-G); Smoking Cessation

## Worksite Vendor Listing by Program Services

	PROGRAM SERVICES				
	HEALTH ASSESSMENT	RISK REDUCTION	ONSITE	OFFSITE	OTHER?
<p><b>Holtyn &amp; Associates</b> 719 Turwill Lane Kalamazoo, MI, 49006</p> <p>Contact: Ken Holtyn Phone: 269- 382-5897 Email: ken@holtynhpc.com Website: <a href="http://www.holtynhpc.com">www.holtynhpc.com</a></p>	FE HRA	HH NE PA PE SC-G SC-SH WM	Yes	No	Cholesterol, blood pressure, glucose, screening  Environmental and policy audit, cultural assessment, wellness committee training and incentive programs.
<p><b>Huron Valley-Sinai Hospital</b> 1 William Carls Drive Commerce, MI, 48382</p> <p>Phone: 248-937-3314</p>	HRA CS	HH NE PA PE SC-G	Yes	Yes	
<p><b>Keweenaw Memorial Fitness Center</b> 700 Sharon Ave Houghton, MI, 49931</p> <p>Contact: Terry Smythe Phone: 906-482-8201 Email: <a href="mailto:tsmythe@kmmc.org">tsmythe@kmmc.org</a></p>	FE HRA	HH NE PA SC-G WM	Yes	Yes	Corporate wellness plans  Ergonomic evaluation
<p><b>Lakeland HealthCare</b> 1234 Napier Ave St Joseph, MI, 49085</p> <p>Contact: Melissa Schultz, RN, BSN, MA Phone: 269-927-5275 Email: <a href="mailto:mschultz@lakelandregional.org">mschultz@lakelandregional.org</a></p>	FE HRA CS	HH NE PA PE SC-G WM	Yes	Yes	Mental health assessment  Health management advisor, health coach, CPR, first aid, AED training, BBP training, and health fairs
<p><b>Lee McDonagh</b> 7555 Bircklan Dr. Canton, MI, 48187</p> <p>Contact: Lee McDonagh, RD, CDE Phone: 734-453-1029 Email: <a href="mailto:mcdonaghrd@woway.com">mcdonaghrd@woway.com</a></p>		HH NE WM	Yes	No	Diabetes Education

Health Assessment: Fitness Evaluation (FE); Health Risk Appraisal (HRA); Clinical Screening (CS).

Risk Reduction: Heart Health Education (HH); Nutrition Education (NE); Physical Activity Involving Workout (PA); Physical Activity involving Education but not Workout (PE); Smoking Cessation for Group (SC-G); Smoking Cessation

## Worksite Vendor Listing by Program Services

	PROGRAM SERVICES				
	HEALTH ASSESSMENT	RISK REDUCTION	ONSITE	OFFSITE	OTHER?
<p><b>Midland Community Cancer Services</b> 220 W. Main St. Ste. 105 Midland, MI, 48640</p> <p>Contact: Susan B. Dusseau, MA, CHES, Director Phone: 989-835-4841 Email: <a href="mailto:dusseau@cancerservicesmidland.org">dusseau@cancerservicesmidland.org</a></p>		SC-G SC-SH	Yes	Yes	You Can Lower Your Cancer Risk  Sun Safety presentations  Colorectal Kits
<p><b>MFit Health Promotion Division</b> University of Michigan Health System, 2850 South Industrial, Suite 600 Ann Arbor, MI, 48104</p> <p>Contact: Janice Gasaway Phone: 734-975-3049 Email: <a href="mailto:gasawayj@umich.edu">gasawayj@umich.edu</a></p>	FE HRA CS	HH NE PE SC-G SC-SH WM	Yes	Yes	Ergonomic  Fitness for duty  DOT physicals  Stress management  Cooking classes
<p><b>Northern Michigan Hospital</b> 360 Connable Avenue, Petoskey, MI, 49770</p> <p>Contact: Therese Green Phone: 231-487-4836 Email: <a href="mailto:tgreen@northernhealth.org">tgreen@northernhealth.org</a></p>	HRA CS	HH NE PA SC-G WM	Yes	Yes	
<p><b>Oakwood Healthcare System</b> Department of Community Health 23400 Michigan Ave Suite 606 Dearborn, MI, 48124</p> <p>Contact: Lindsey West Phone: 313-586-4938 Email: <a href="mailto:lindsey.west@oakwood.org">lindsey.west@oakwood.org</a></p>	FE CS	HH NE PA SC-SH WM	Yes	Yes	Diabetes Education  Genetic Risk Assessments for Cancer
<p><b>Omni Fitness Club</b> 40 E. Norton Ave. Muskegon, MI, 49444</p> <p>Contact: Lana Carson Phone: 231-739-3391 Email: <a href="mailto:lane_carson@omnifitnessclub.com">lane_carson@omnifitnessclub.com</a></p>	FE	HH NE PA PE WM	Yes	Yes	

Health Assessment: Fitness Evaluation (FE); Health Risk Appraisal (HRA); Clinical Screening (CS).

Risk Reduction: Heart Health Education (HH); Nutrition Education (NE); Physical Activity Involving Workout (PA); Physical Activity involving Education but not Workout (PE); Smoking Cessation for Group (SC-G); Smoking Cessation

## Worksite Vendor Listing by Program Services

	PROGRAM SERVICES				
	HEALTH ASSESSMENT	RISK REDUCTION	ONSITE	OFFSITE	OTHER?
<p><b>Portage Health</b> Community Health Dept. 500 Campus Drive Hancock, MI, 49930,</p> <p>Contact: Karin Van Dyke Phone: 906-483-1525 Email: <a href="mailto:kvandyke@portagehealth.org">kvandyke@portagehealth.org</a></p>	FE HRA CS	HH NE PA PE WM	Yes	Yes	Screening for blood sugar, blood pressure, and cholesterol
<p><b>Professional Fitness Systems</b> 31218 Wellston Warren, MI, 48093</p> <p>Contact: Darlene Sowa Phone: 586-979-9060 Email: <a href="mailto:darstar1@sbcglobal.net">darstar1@sbcglobal.net</a></p>		PA PE	Yes	Yes	Relaxation  Meditation  Exercise from a spiritual perspective
<p><b>Public Health Delta &amp; Menominee Counties</b> 2920 College Ave, Escanaba, MI, 49829</p> <p>Contact: Renee Barron Phone: 906-789-8110 Email: <a href="mailto:rbarron@phdm.org">rbarron@phdm.org</a></p>		NE PA PE SC-SH WM	Yes	Yes	Cholesterol Screening
<p><b>Sparrow Corporate Solutions</b> 2900 Hannah Blvd, Ste 211 East Lansing, MI, 48823,</p> <p>Contact: Kari Ruthig Phone: 517-364-8143 Email: <a href="mailto:kari.ruthig@sparrow.org">kari.ruthig@sparrow.org</a></p>	FE HRA CS	HH NE PA PE SC-G SC-SH WM	Yes	Yes	Strategic Planning, Environmental Evaluation  Wellness Coaching, Osteoporosis Education, Cancer
<p><b>St. Clair County Health Department</b> 3414 28th Street Port Huron, MI, 48060</p> <p>Contact: Susan Amato Phone: 819-987-5300 Email: <a href="mailto:samato@hd.stclaircounty.org">samato@hd.stclaircounty.org</a></p>		HH NE PE SC-SH	Yes	No	General communicable disease prevention  Bloodborne Pathogen Education

Health Assessment: Fitness Evaluation (FE); Health Risk Appraisal (HRA); Clinical Screening (CS).

Risk Reduction: Heart Health Education (HH); Nutrition Education (NE); Physical Activity Involving Workout (PA); Physical Activity involving Education but not Workout (PE); Smoking Cessation for Group (SC-G); Smoking Cessation

## Worksite Vendor Listing by Program Services

	PROGRAM SERVICES				
	HEALTH ASSESSMENT	RISK REDUCTION	ONSITE	OFFSITE	OTHER?
<p><b>St. John Health Systems</b> Occupational Health Services 110 Beech Street, Suite A Tawas, MI, 48764-0489</p> <p>Contact: Toni Lehr Phone: 989-362-9406 Email: <a href="mailto:klandon@sjhsys.org">klandon@sjhsys.org</a></p>	HRA CS	HH NE PA PE SC-G SC-SH WM	Yes	Yes	Women's Health Initiatives
<p><b>Training Options Consulting: Wellness Module</b> P.O. Box 674 Southfield, MI, 49037</p> <p>Contact: Sharon Martin Phone: 248-355-1447 Email: <a href="mailto:sharmar953@aol.com">sharmar953@aol.com</a></p>		HH NE PE SC-G SC-SH WM	Yes	No	Hypertension Education  Cholesterol Education  Diabetes Education
<p><b>Tuscola County Health Department</b> 1309 Cleaver Rd. Caro, MI, 48723</p> <p>Contact: Ann Hepfer Phone: 989-673-8114 ext. 117 Email: <a href="mailto:ahepfer@tchd.us">ahepfer@tchd.us</a></p>	HRA	HH NE PA	Yes	Yes	Rural Health Outreach  Mi-health tools survey utilization (worksites, restaurants, and schools)
<p><b>Visiting Nurse Services of Michigan</b> 1515 Cal Drive Davison, MI , 48423</p> <p>Contact: Jean Mawson, Phone: 810-496-8760 Email: <a href="mailto:jeanm@vnsn.org">jeanm@vnsn.org</a></p>	FE HRA CS	HH PA SC-SH WM	Yes	Yes	Bone density screening, CPR, first aid & EAD training, immunizations, travel health, ergonomic, consultation and training.
<p><b>VNA of Southeast Michigan</b> 25900 Greenfield Rd., Ste. 600 Oak Park, MI, 48237</p> <p>Phone: 248-967-8751 Email: <a href="mailto:krenny@vna.org">krenny@vna.org</a></p>	HRA CS	HH NE PE WM	Yes	Yes	Lab draws; immunization, blood pressure, TB testing, Travel Vaccinations, BMI, osteoporosis, body fat data analysis.

Health Assessment: Fitness Evaluation (FE); Health Risk Appraisal (HRA); Clinical Screening (CS).

Risk Reduction: Heart Health Education (HH); Nutrition Education (NE); Physical Activity Involving Workout (PA); Physical Activity involving Education but not Workout (PE); Smoking Cessation for Group (SC-G); Smoking Cessation

## Worksite Vendor Listing by Program Services

	PROGRAM SERVICES				
	HEALTH ASSESSMENT	RISK REDUCTION	ONSITE	OFFSITE	OTHER?
<p><b>Wellco Corporation</b>                      29488 Woodward Avenue, Suite 102                      Royal Oak, MI, 48073</p> <p>Contact:                      Scott Foster                      Phone: 248-549-4247                      Email: <a href="mailto:scott.foster@wellcocorp.com">scott.foster@wellcocorp.com</a></p>	FE HRA CS	HH NE PA PE WM	Yes	Yes	Actionable metrics, return on investment data.  WellWise seminars and teleseminars.  Coaching and consulting.

Health Assessment: Fitness Evaluation (FE); Health Risk Appraisal (HRA); Clinical Screening (CS).

Risk Reduction: Heart Health Education (HH); Nutrition Education (NE); Physical Activity Involving Workout (PA); Physical Activity involving Education but not Workout (PE); Smoking Cessation for Group (SC-G); Smoking Cessation



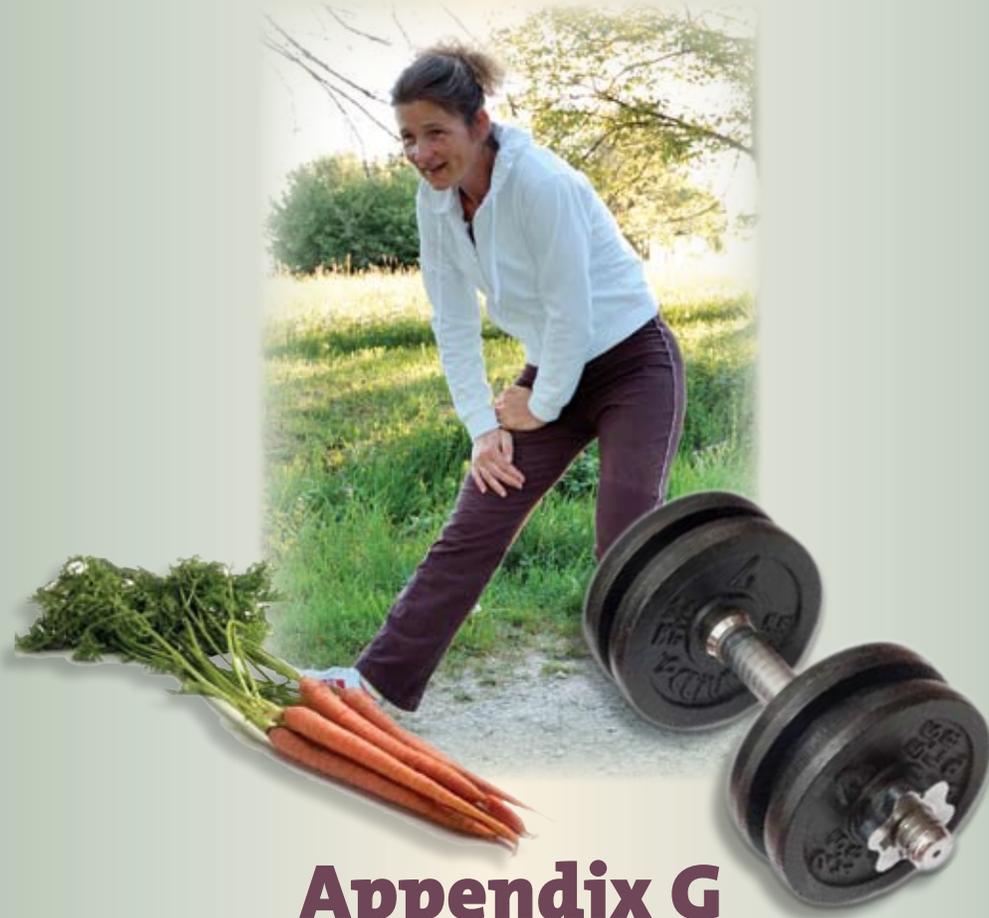


## Appendix F









## Appendix G



# Action Plan Worksheet

<b>RECOMMENDATIONS</b>	Describe the strategies selected from the Recommendation Table.				
<b>ACTIVITIES</b>	List the activities required to meet the recommendation.				
<b>MATERIALS, RESOURCES AND PERSONNEL</b>	List the individuals who will do the work; and the resources and tools they need to get the job done.				
<b>TIME FRAME</b>	When will implementation begin? How long will it take to finish?				
<b>EVALUATION</b>	How will you measure your successes and/or misfortunes?				
<b>RECOMMENDATIONS: STRATEGIES TO IMPLEMENT</b>	<b>ACTIVITIES</b>	<b>MATERIALS, RESOURCES &amp; PERSONNEL</b>	<b>TIME FRAME</b>	<b>EVALUATION METHOD</b>	<b>COMMENTS</b>
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					

# Appendix G

RECOMMENDATIONS: STRATEGIES TO IMPLEMENT	ACTIVITIES	MATERIALS, RESOURCES & PERSONNEL	TIME FRAME	EVALUATION METHOD	COMMENTS
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
20.					
21.					
22.					

*Michigan Department  
of Community Health*

