Vermont Worksite Wellness Organizational Assessment

Introduction

The Vermont Department of Health's Organizational Assessment is a tool created to help your worksite assess what policies, programs, and environmental supports are currently in place to promote the health and wellness of your employees. This assessment can be used to establish a baseline and help with planning to see improvements over the years.

To download a PDF of this assessment prior to completing it online, please $\underline{\text{click}}$ here.

For next steps in your worksite wellness planning process, <u>check out our webpage</u>! If you are interested in getting support from VDH, please email Stephanie.Bergen@vermont.gov.

This assessment also serves as the 2025 Governor's Excellence in Worksite Wellness Award application, which is available 4/1/25 and will close on 5/31/25. Please email Stephanie.Bergen@vermont.gov with questions regarding the application process, issues or requests for a copy of the completed application.

Reference:

The development of this tool referenced the Centers for Disease Control and Prevention. The CDC Worksite Health ScoreCard: An Assessment Tool for Employers to Prevent Heart Disease, Stroke, and Related Health Conditions. Atlanta: U.S. Department of Health and Human Services; 2014.

Vermont Worksite Wellness Organizational Assessment

Contact and demographic information

* 1. Contact Information	ı		
Name			
Company			
Address			
Address 2			
City/Town			
State	select state	_	
ZIP Code			
Email Address			
Phone Number			
* 2. Organization Typ	ne		
Education, Library,		Social services, Non-profit	
Healthcare, Mental		Transportation and Materials Moving	Į
Food service		Construction	
Production		Financial	
Sales and Retail		Other (please specify below)	
Other (please specify)			
* 3 How many peopl	e are employed in your	organization?	
0-100	e are employed in your	501-1000	
① 101-250		More than 1000	
251-500			
* / How many locati	ons does your organizat	tion have in Vermont?	
	ons does your organizat	tion have in vermont.	
<u> </u>			
More than 5			
* 5. How would you o	define your worksite?		
Fully in person			
Fully remote			
Hybrid (some in per	rson, some remote)		

award certificate. (Enter N/A if yo	n's name exactly as you would like it to appear on your ou aren't applying for a worksite wellness award)
them know which award your org this letter will be sent electronical	executive in your organization? We will send a letter letting ganization is receiving. NEW AS OF 2024 : Please note that ally to the email address of the person completing this n't applying for a worksite wellness award).
, , , ,	
* 8. What is the prefix of the to	op executive in your organization?
Mrs.	Or.
Ms.	O No prefix
◯ Mr.	N/A - Not applying for an award
○ M.	
Organizational supports and o	culture
* 9. Does the worksite have an	active wellness committee that meets regularly?
Yes	
O No	
* 10. Does the worksite make s performance goals of leaders a	sure that support for employee wellness is part of the and managers?
performance goals of leaders a	
performance goals of leaders a Yes No	and managers? nization who leads or manages employees been given formal
performance goals of leaders a Yes No * 11. Has everyone in the organ	and managers? nization who leads or manages employees been given formal
Performance goals of leaders a Yes No * 11. Has everyone in the organesources and/or training to su	and managers? nization who leads or manages employees been given formal
yes No * 11. Has everyone in the organesources and/or training to su Yes No * 12. Does the worksite's leaders and the organesources.	and managers? nization who leads or manages employees been given formal apport employee wellness? ership regularly, at least quarterly, communicate the importance
Performance goals of leaders a Yes No * 11. Has everyone in the organesources and/or training to su Yes No No	and managers? nization who leads or manages employees been given formal apport employee wellness? ership regularly, at least quarterly, communicate the importance

* 13. Has the worksite conducted an employee needs and interests assessment/survey for planning health promotion activities in the last 12 months?
Yes
○ No
* 14. Has the worksite established objectives for employee health promotion in the last 12 months?
○ Yes
○ No
* 15. Has the organization conducted any of the following activities for planning purposes in the last 12 months?
- Employee interest surveys
Absenteeism records analysisDisability claims audit
- Worker's Compensation claims analysis
- Healthcare claims analysis
- Other (please explain in Question #93 comment box)
○ Yes
○ No
* 16. Does the worksite actively promote and encourage employee participation in available worksite wellness activities?
Yes
○ No
* 17. Does the worksite offer health promotion initiatives that accommodate the schedules and workplace locations of all employees (for example, shift, remote, or hybrid workers)?
Yes
○ No
* 18. Does the worksite tailor health promotion programs and education materials to the language, literacy levels, and cultural backgrounds of the workforce?
○ Yes
○ No
* 19. Has the organization offered employees the opportunity to participate in a Health Screening and/or Health Risk Appraisal in the last year?
○ Yes
○ No

* 20. Does the worksite provide adaptive equipment and/or other materials to support employees with disabilities?
Yes
○ No
* 21. Does the worksite provide alternative wellness activities to accommodate employees of all abilities, including employees with disabilities?
○ Yes
○ No
* 22. Does the worksite make parts of the wellness and health promotion activities available to immediate family members?
○ Yes
○ No
\ast 23. Has the worksite evaluated the stated wellness program goals and objectives in the last year?
○ Yes
○ No
* 24. Has the worksite tracked participation in wellness program activities in the last year?
○ Yes
○ No
* 25. Has the worksite assessed employee satisfaction with the wellness activities in the last year?
Yes
○ No
* 26. Has the worksite measured changes in both the physical and cultural environment (e.g., policies, benefits, working conditions, etc.) in the last year?
○ Yes
○ No
\ast 27. Do at least 50% of employees participate in worksite wellness program/activities that are offered?
○ Yes
○ No

* 28. Does the worksite offer paid parental leave (separate from any accrued sick leave, annual leave, or vacation time?)
○ Yes
○ No
* 29. Does the worksite support employee participation and volunteering in activities that benefit the community?
○ Yes
○ No
* 30. Does the worksite's new employee orientation include an explanation of worksite wellness related policies and activities (i.e. healthy food standards, employee assistance programs (EAP), wellness portal, etc.)?
○ Yes
○ No
Vermont Worksite Wellness Organizational Assessment
Vermont Worksite Wellness Organizational Assessment utcome 1: Promote healthy food choices for employees
* 31. Does the worksite offer education, awareness and behavior change programs on nourishing food, such as the free My Healthy VT workshops offered through the State of
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* 34. Does the worksite identify healthier food and beverage choices where food is served with signs or symbols?
○ Yes
○ No
○ N/A - No food is served on the premises
* 35. Does the worksite have a healthy food policy requiring at least 30% of food in cafes, vending machines, etc. to meet predetermined healthy food standards? — Yes
○ No
N/A - No food is sold on the premises
* 36. Does the worksite have a policy requiring that healthier food and beverage choices are available during meetings when food is served?
○ Yes
○ No
N/A - Food is never served during work meetings
* 37. For employees working onsite, does the worksite make water available at no cost to employees throughout the day?
○ Yes
○ No
N/A - Employees work remotely
* 38. For employees working onsite, does the worksite make a refrigerator and microwave available for employee food storage and cooking?
○ Yes
○ No
○ N/A - Employees work remotely
* 39. For employees working onsite or remotely, does the worksite provide protected time and/or dedicated space away from the work area for breaks and lunch?
○ Yes
○ No

* 40. Does the worksite incentivize local food through any of the following ways: - Local food is prioritized when purchasing food for meetings or events. - An on-site CSA drop off is offered for employees. - An on-site or mobile farmers market is offered for employees at or near the worksite. - Local food is prioritized when purchasing food for sale to employees (e.g. cafeteria, vending machine, snack bar, etc.). - An on-site garden is available to employees during some or all of the year. - Other (please explain in Question #93 comment box) Yes No
N/A - Employees work remotely
1411 Employees work removely
Vermont Worksite Wellness Organizational Assessment
utcome 2: Go tobacco-free
st 41. Does the worksite promote free tobacco cessation resources available through 802Quits or other community resources?
Yes
○ No
* 42. Does the worksite support participation in tobacco cessation activities during the work day (e.g. allowing flextime to attend cessation classes)?
Yes
○ No
* 43. Does the worksite periodically promote or offer individual or group tobacco cessation counseling, either onsite or virtually (i.e. free counseling through 802 Quits, My Healthy VT workshop, a local hospital, or other organization/resource)?
Yes
○ No
* 44. For employees working onsite, are cigarette receptacles moved away from building entrances?
Yes
○ No
N/A - There are no receptacles or all employees work remotely

* 45. For employees working onsite, does the worksite have and actively enforce a written policy banning tobacco and e-cigarette use at the worksite including any outdoor areas (except for designated smoking areas) and company vehicles?
○ Yes
○ No
N/A - Employees work remotely and there are no company vehicles
* 46. For employees working onsite, does the worksite post tobacco-free signs around the building and grounds (to elevate awareness of the policy, for example)?
○ Yes
○ No
N/A - Employees work remotely
* 47. Does the worksite support employee tobacco cessation, either through covering costs for tobacco cessation medications including nicotine replacement, health coaching, hypnotherapy, etc.?
○ Yes
○ No
Vermont Worksite Wellness Organizational Assessment
Vermont Worksite Wellness Organizational Assessment utcome 3: Help employees get daily physical activity
* 48. For employees who commute to work, does the worksite actively encourage employees to bike, walk, or roll to work? (This could be through posters, challenges, emails, incentives, etc.) Yes No No N/A - Employees work remotely
* 48. For employees who commute to work, does the worksite actively encourage employees to bike, walk, or roll to work? (This could be through posters, challenges, emails, incentives, etc.) Yes No
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* 48. For employees who commute to work, does the worksite actively encourage employees to bike, walk, or roll to work? (This could be through posters, challenges, emails, incentives, etc.) Yes No N/A - Employees work remotely * 49. Does the worksite provide updated information about community resources for physical activity, such as classes offered in the community?
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* 48. For employees who commute to work, does the worksite actively encourage employees to bike, walk, or roll to work? (This could be through posters, challenges, emails, incentives, etc.) Yes No N/A - Employees work remotely * 49. Does the worksite provide updated information about community resources for physical activity, such as classes offered in the community? Yes No Yes No To be the worksite encourage physical activity, movement, and/or stretching breaks and

* 51. Does the worksite have a policy that supports physical activity during work time (e.g. offer or allow flex time for physical activity)?
Yes
○ No
* 52. Does the worksite provide opportunities, either onsite or virtually, such as a fitness space, fitness classes, or My Healthy VT workshops? — Yes
○ No
* 53. For employees working onsite, does the worksite provide space where employees can be physically active that is NOT a fitness center (for example, treadmill desks, chair exercises, a designated stretching space, walking path or maps of area trails/paths, etc.)?
Yes
○ No
N/A - Employees work remotely
Vermont Worksite Wellness Organizational Assessment
utcome 4: Become a family-friendly employer (lactation focus) * 54. For employees working onsite, does the company provide a private area with a door that
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* 54. For employees working onsite, does the company provide a private area with a door that locks for nursing or expressing milk? Yes No N/A - Employees work remotely * 55. Does the worksite provide flexible breaks (at least 15-20 minutes in the morning and afternoon, as well as lunch) during which an employee, working either onsite or remotely, can
* 54. For employees working onsite, does the company provide a private area with a door that locks for nursing or expressing milk? Yes No N/A - Employees work remotely * 55. Does the worksite provide flexible breaks (at least 15-20 minutes in the morning and afternoon, as well as lunch) during which an employee, working either onsite or remotely, can express milk or nurse?
* 54. For employees working onsite, does the company provide a private area with a door that locks for nursing or expressing milk? Yes No No N/A - Employees work remotely * 55. Does the worksite provide flexible breaks (at least 15-20 minutes in the morning and afternoon, as well as lunch) during which an employee, working either onsite or remotely, can express milk or nurse? Yes
* 54. For employees working onsite, does the company provide a private area with a door that locks for nursing or expressing milk? Yes No N/A - Employees work remotely * 55. Does the worksite provide flexible breaks (at least 15-20 minutes in the morning and afternoon, as well as lunch) during which an employee, working either onsite or remotely, can express milk or nurse? Yes No * 56. Does the worksite have a written policy that states your company's support of a parent's choice to breastfeed/chestfeed their infant(s) and describes the worksite accommodations

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Outcome 5: Promote preventative care and safety (Part 1)

classes, onsite or virtually, such as free My Healthy VT workshops available through the State of Vermont or other organization/resource?
○ Yes
○ No
* 58. Does the worksite offer influenza (flu) vaccinations with low or no out-of-pocket costs to employees?
○ Yes
○ No
* 59. Does the worksite promote influenza (flu) and other vaccinations through brochures, videos, posters, pamphlets, newsletters or other information?
○ Yes
○ No
* 60. Does the worksite provide a paid sick leave benefit?
○ Yes
○ No
* 61. Does the worksite accommodate chronic disease self-management activities during the workday (i.e. checking blood sugar, eating snacks, appointments, etc.)?
Yes
○ No
* 62. Does the worksite coordinate programs for occupational health and safety specific to employees' needs with programs for health promotion and wellness?
○ Yes
○ No
* 63. Does the worksite provide education to employees on the benefits and importance of sufficient sleep through educational seminars, workshops, classes, written or online information?
Yes
○ No

* 64. Does the worksite cover chronic disease medications for employees, either at no cost or highly subsidized cost to the employee? For example, medication for blood pressure, diabetes, asthma, etc.
○ Yes
○ No
N/A - Employer does not offer health insurance with medication coverage
65. Does the worksite periodically promote preventive screenings such as dental visits, cancer or heart disease screenings? For example, hanging flyers, digital communications, recognizing national awareness months, etc.
○ Yes
○ No
66. For employees working onsite, has the worksite conducted a worksite evaluation to identify asthma triggers in the workplace?
○ Yes
○ No
○ N/A - Employees work remotely
Vermont Worksite Wellness Organizational Assessment
utcome 5: Promote Preventive Care and Safety (Part 2)
* 67. Has the worksite conducted an ergonomic work station analysis for all employees, working either onsite or remotely, in the last year? — Yes
○ No
No * 68. Does the worksite provide employees with information on ergonomic issues specific to employees' needs?
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* 68. Does the worksite provide employees with information on ergonomic issues specific to employees' needs?
* 68. Does the worksite provide employees with information on ergonomic issues specific to employees' needs? Yes
* 68. Does the worksite provide employees with information on ergonomic issues specific to employees' needs? Yes No No 69. Has the worksite conducted a comprehensive, baseline hazard survey within the past five

accidents or injury on the job, specific to their position?
○ Yes
○ No
* 71. Does the worksite have one or more functioning AEDs (Automated External Defibrillator) in place that are clearly marked and routinely maintained?
○ Yes
○ No
N/A - Employees work remotely
* 72. Does the worksite have a safety or emergency response individual, team, or committee that is trained to respond to medical emergencies (i.e. have first aid and CPR certification)? Yes No
* 73. Does the worksite promote awareness of responsible alcohol and legal drug use through any the following formats? - Providing information on community resources for recovery. - Ensuring access to safe transportation to and from work-sponsored events where alcohol will be served. - Policies on alcohol and legal drug use at work events (both formal and informal events). - Policies on alcohol and legal drug use during work hours. - Online or paper self-assessment screening tools on alcohol use. - Other (please explain in Question #93 comment box)
Yes No
* 74. Does the worksite actively promote safe driving in any of the following ways: - Requiring adherence to hands-free laws when driving on staff time Requiring seatbelt use when driving on staff time Requiring adherence to all driving laws when driving on staff time Other (please explain in Question #93 comment box)
Yes
○ No
75. Does the worksite conduct regular safety and health self-inspections? Yes No

Outcome 6: Support the emotional wellbeing of employees

* 76. Does the worksite provide and promote opportunities for stress-reduction?
○ Yes
○ No
* 77. Does the worksite provide orientation for employees regarding workplace policies and mental health supports available?
○ Yes
○ No
* 78. Does the worksite have a list of local resources for screening and referral for mental health conditions?
Yes
○ No
* 79. Does the worksite provide training for managers on identifying and reducing workplace stress-related concerns?
Yes
○ No
* 80. Does the worksite provide training for managers on mental health conditions in the workplace?
Yes
○ No
* 81. Does the worksite provide opportunities for employee participation in organizational decisions regarding workplace issues that affect job stress?
Yes
○ No
* 82. Does the worksite actively promote work/life balance through established guidelines on working overtime, checking email or voicemail outside of work hours, etc.?
○ Yes
○ No
*83. Does the worksite actively seek to de-stigmatize mental health issues by increasing awareness, promoting communication, and providing education on depression and other mental health conditions?
○ Yes
○ No

* 84. Does the worksite allow employees to access mental health support services during working hours?
Yes
○ No
* 85. Does the worksite have a policy that supports employees who need mental health support (i.e. allowing leaves of absence, flexible scheduling, etc.)?
Yes
○ No
* 86. Does the worksite allow employees to access recovery support services during working hours or allow for leaves of absence to access services?
○ Yes
○ No
* 87. Does the worksite engage in other health initiatives throughout the community and support employee participation and volunteer efforts?
○ Yes
○ No
* 88. Does the worksite sponsor or organize social events throughout the year?
○ Yes
○ No
* 89. Does the worksite provide opportunities for career development and advancement?
○ Yes
○ No
* 90. Does the worksite recognize employee achievements?
○ Yes
○ No

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Additional Questions

91. OPTIONAL: If you have additional information to share related to 'Other' responses above
(Questions 15, 41, 74, and 75), please feel free to do so.
92. OPTIONAL: If you are applying for the 2025 Worksite Wellness Award and want to share any additional information about your wellness initiatives generally, please feel free to do so.
93. OPTIONAL: If you have any supporting documents you would like to submit with your award application, please attach here (mission statement, action plan, etc.). These answers have logic applied
Choose File Choose File No file chosen