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 <u>click</u> <u>here</u>.

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.

From 2/1/2024 through 5/31/2024 this assessment is also serving as the 2024 Governor's Excellence in Worksite Wellness Award Application. 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

Name			
Company			
Address			
Address 2			
City/Town			
State	select state		
ZIP Code			
Email Address			
Phone Number			
* 2. Organization Typ	pe		
Education, Library, Training		Social services, Non-profit	
O Healthcare, Mental Healthcare		Transportation and Materials Moving	
O Food service			
		○ Financial	
◯ Sales and Retail		Other (please specify below)	
Other (please specify)			
* 3. How many people are employed in your organization?			
	e are employed in your org		
0-100		501-1000	
0 101-250		More than 1000	
251-500			
* 4. How many locati	ons does your organization	have in Vermont?	
\bigcirc 1	ono acco your organization		
○ 2-5			
More than 5			
* 5. How would you o	lefine your worksite?		
Fully in person			
Fully remote			
Hybrid (some in per	rson, some remote)		
-			

* 6. Please spell your organization's name exactly as you would like it to appear on your award certificate. (Enter N/A if you aren't applying for a worksite wellness award)

* 7. What is the name of the top executive in your organization? We will send a letter letting them know which award your organization is receiving. **NEW THIS YEAR**: Please note that this letter will be sent electronically to the email address of the person completing this application. (Enter N/A if you aren't applying for a worksite wellness award).

* 8. What is the prefix of the top executive in your organization?

Mrs.	🔵 Dr.
○ Ms.	O No prefix
○ Mr.	🔘 N/A - Not applying for an award
○ M.	

Vermont Worksite Wellness Organizational Assessment

Organizational supports and culture

- * 9. Does the worksite have an active wellness committee that meets regularly?
 - O Yes
 - 🔵 No

* 10. Does the worksite make sure that support for employee wellness is part of the performance goals of leaders and managers?

- O Yes
- 🔿 No

* 11. Has everyone in the organization who leads or manages employees been given formal resources and/or training to support employee wellness?

- O Yes
- 🔵 No

* 12. Does the worksite's leadership regularly, at least quarterly, communicate the importance of wellness through written or verbal communications?

- O Yes
- 🔿 No

* 13. Has the worksite conducted an employee needs and interests assessment/survey for planning health promotion activities in the last 12 months?

O Yes

🔿 No

* 14. Has the worksite established objectives for employee health promotion in the last 12 months?

O 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 analysis
- Disability claims audit
- Worker's Compensation claims analysis
- Healthcare claims analysis
- Other (please explain in Question #93 comment box)

O Yes

🔿 No

* 16. Does the worksite actively promote and encourage employee participation in available worksite wellness activities?

O 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)?

O Yes

🔵 No

* 18. Does the worksite tailor health promotion programs and education materials to the language, literacy levels, and cultural backgrounds of the workforce?

O 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

* 20. Does the worksite provide adaptive equipment and/or other materials to support employees with disabilities?

◯ Yes

O No

* 21. Does the worksite provide alternative wellness activities to accommodate employees of all abilities, including employees with disabilities?

Yes

* 22. Does the worksite make parts of the wellness and health promotion activities available to immediate family members?

O Yes

🔿 No

* 23. Has the worksite evaluated the stated goals and objectives in the last year?

- O 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?

O Yes

🔿 No

* 27. Do at least 50% of employees participate in worksite wellness program/activities that are offered?

O 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.)?

O Yes

🔵 No

Vermont Worksite Wellness Organizational Assessment

Outcome 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 Vermont?

O Yes

🔿 No

* 32. Does the worksite provide updated information about community resources for healthy eating, such as educational classes offered in the community?

) Yes

🔿 No

* 33. Does the worksite provide updated information about community resources for food access, such nutrition assistance programming or free food available within the community?

YesNo

* 34. Does the worksite identify healthier food and beverage choices where food is served with signs or symbols?

O Yes

🔿 No

* 35. Does the worksite have a healthy food policy requiring at least 30% of food in cafes, vending machines, etc. to meet healthy vending criteria?

O Yes

🔿 No

 \bigcirc 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?

O Yes

🔿 No

* 37. For employees working onsite, does the worksite make water available at no cost to employees throughout the day?

O 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?

O 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?

O 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)

O Yes

🔿 No

Vermont Worksite Wellness Organizational Assessment

Outcome 2: Go tobacco-free

* 41. Does the worksite promote free tobacco cessation resources available through 802Quits or other community resources?

O Yes

🔿 No

* 42. Does the worksite support participation in tobacco cessation activities during the work day (e.g. allowing flextime to attend cessation classes)?

O Yes

🔿 No

* 43. Does the worksite provide 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?

O 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?

O 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?

O Yes

O No

🔿 N/A - Employees work remotely

* 47. Does the worksite offer health insurance coverage with no or low out-of-pocket costs for prescription tobacco cessation medications including nicotine replacement?

O Yes

🔿 No

Vermont Worksite Wellness Organizational Assessment

Outcome 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.)

O 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?

O Yes

🔿 No

* 50. Does the worksite encourage physical activity, movement, and/or stretching breaks and active meetings?

O Yes

* 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

O No

* 52. Does the worksite provide opportunities, either onsite or virtually, such as a fitness space, fitness classes, or My Healthy VT workshops?

Yes

* 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, at-home exercises, chair exercises, a designated stretching space, walking path or maps of area trails/paths, etc.)?

O Yes

🔿 No

○ N/A - Employees work remotely

Vermont Worksite Wellness Organizational Assessment

Outcome 4: Become a family-friendly employer (lactation focus)

* 54. For employees working onsite, does the company provide a private area with a door that locks for nursing or expressing milk?

O Yes

O 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

O 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 and/or benefits available to them?

O Yes

Vermont Worksite Wellness Organizational Assessment

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

* 57. Does the worksite offer chronic disease self-management classes, onsite or virtually, such as free My Healthy VT workshops available through the State of Vermont?

O Yes

🔿 No

* 58. Does the worksite offer influenza (flu) vaccinations with low or no out-of-pocket costs to employees?

O Yes

🔵 No

* 59. Does the worksite promote influenza (flu) and other vaccinations through brochures, videos, posters, pamphlets, newsletters or other information?

O Yes

🔵 No

* 60. Does the worksite provide a paid sick leave benefit?

- O Yes
- 🔵 No

* 61. Does the worksite accommodate chronic disease self-management activities during the workday (i.e. checking blood sugar, eating snacks, appointments, etc.)?

O 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

* 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's health insurance cover chronic disease medications at a low-cost to the employee?

Yes

65. Does the worksite promote preventive screenings such as dental visits, cancer or heart disease screenings? For example, hanging flyers, digital communications, recognizing national awareness months, etc.

O Yes

🔵 No

66. For employees working onsite, has the worksite conducted a worksite evaluation to identify asthma triggers in the workplace?

O Yes

🔿 No

🔿 N/A - Employees work remotely

Vermont Worksite Wellness Organizational Assessment

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Outcome 5: Promote Preventive Care and Safety (Part 2)
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* 67. Has the worksite conducted an ergonomic work station analysis for all employees, working either onsite or remotely, in the last year?

- O Yes
- 🔿 No

* 68. Does the worksite provide employees with information on ergonomic issues specific to employees' needs?

) Yes

🔿 No

69. Has the worksite conducted a comprehensive, baseline hazard survey within the past five years?

) Yes

🔿 No

* 70. Does the worksite provide all new workers comprehensive training on how to avoid accidents or injury on the job, specific to their position?

O Yes

* 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

O 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)

O 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)

O Yes

🔵 No

75. Does the worksite conduct regular safety and health self-inspections?

O Yes

🔵 No

Vermont Worksite Wellness Organizational Assessment

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?

O Yes

O No

* 78. Does the worksite have a list of local resources for screening and referral for mental health conditions?

O Yes

🔿 No

* 79. Does the worksite provide training for managers on identifying and reducing workplace stress-related concerns?

O Yes

🔵 No

* 80. Does the worksite provide training for managers on mental health conditions in the workplace?

O Yes

🔿 No

* 81. Does the worksite provide opportunities for employee participation in organizational decisions regarding workplace issues that affect job stress?

○ Yes

O 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.?

O Yes

O 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?

O Yes

O No

* 84. Does the worksite allow employees to access mental health support services during working hours?

◯ Yes

O 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

* 86. Does the worksite allow employees to access recovery support services during working hours or allow for leaves of absence to access services?

O Yes

🔿 No

* 87. Does the worksite engage in other health initiatives throughout the community and support employee participation and volunteer efforts?

O 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?

- O Yes
- 🔵 No

* 90. Does the worksite recognize employee achievements?

- O 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 2024 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.).

Choose File Choose File No file chosen