

The BeWell Champion Program: A Worksite Wellness Initiative

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ABSTRACT

Background: Adults spend most of their waking hours at work, which offers a setting to improve employee well-being. This paper describes the impact of an evidence-based employee wellness initiative on employees at a large health system.

Methods: The project team provided virtual technical assistance and training to a designated champion at 22 enrolled clinical sites. Measures included an abridged version of the Centers for Disease Control and Prevention (CDC) Worksite ScoreCard, a process evaluation, and employee participation data. Champions used baseline data for their site to select wellness initiatives.

Results: Results demonstrated positive improvements in multiple domains on the CDC Worksite ScoreCard, with significant improvements in organizational support and the overall score.

Conclusion: Utilization of evidence-based models, flexibility to meet the needs of varied clinical practice sites, and capacity for sustainability indicate this approach may be adaptable and feasible for other large health systems.

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BACKGROUND

The prevalence of chronic conditions in adults across the United States (U.S.) continues to increase, and a recent study found that most of the adult population 50 years and older, across all races, will have at least one chronic disease by 2050 (Ansah & Chiu, 2022). Today, the majority of an adult's waking hours are spent dedicated to work. According to the Bureau of Labor Statistics (2023), the typical American full-time worker spends over eight hours per day working, equating to more than one-third of their day at the workplace. This puts employers in a unique position to enhance their employee's health and well-being.



The healthcare workforce is a population that is in particular need of workplace well-being programs. In recent years, healthcare professionals have experienced widespread issues of burnout and professional dissatisfaction. According to a Centers for Disease Control and Prevention (CDC) report, healthcare workers reported higher levels of poor mental health days, burnout, and intent to change jobs in 2022 compared to 2018 (CDC, 2023). Improving workplace policies and practices in clinical settings is warranted to address this growing issue.

Additionally, the CDC calls for employers to develop evidence-based health programming; however, only 11.8% of employers offer a comprehensive worksite health promotion program (CDC, 2018, 2019). To support workplace wellness, the CDC developed the Worksite Health ScoreCard to facilitate the assessment and implementation of wellness initiatives that offer the greatest impact to employee well-being and healthcare costs (CDC, 2019).

According to a recent CDC survey, many barriers to workplace health promotion exist: lack of qualified personnel, cost, expertise, employee interest, space, and demonstrating program results were among top concerns (CDC, 2018). The CDC specifically recommends that workplaces offer training and tools to support a healthy workplace environment (CDC, 2019). One of these tools is the concept of a “wellness champion,” which is supported by the CDC (2021). Data from multiple programs support the value of champions in enhancing the success of workplace wellness initiatives (Amaya et al., 2017; Mitchell et al., 2021; Ryan et al., 2019; Wieneke et al., 2016). However, more research is warranted to determine the impact of a wellness champion on employee well-being (Amaya et al., 2017).

Building on the idea of wellness champions and the need to improve well-being in the healthcare workforce, the BeWell Champion program was established as a way to engage employees from a large healthcare organization in health and wellness activities. The goal of the program is to create a network of passionate individuals who are eager to promote a culture of health and well-being within a large healthcare system. Champions are tasked with gathering baseline data, implementing and promoting wellness initiatives based on that data, and evaluating the impact of these initiatives. The aim of this paper is to describe the impact of the BeWell Champion program implemented January-December 2023 at a large health system.

METHODS

Program Overview

The BeWell Champion program is facilitated by the Penn State PRO Wellness (PRO Wellness) team. PRO Wellness is a group within the Penn State College of Medicine in Hershey Pennsylvania (PA) that runs a wide variety of community based educational programming and research. The Champion program targets worksites within Penn State Health, a multi-hospital health system serving patients and communities across 29 counties in central PA. The program began in 2019 as part of the larger BeWell Employee Wellness program to engage a large and widespread employee population base in wellness activities. It has since expanded in size and scope. The role of a champion is to serve as a key wellness leader with a goal of fostering a culture of well-being at their worksite. Champions are recruited via email, newsletters, flyers, and word-of-mouth. The program is open to all Penn State Health employees. To apply, an employee must fill out an interest form. The interest form collects information related to employee position, worksite location, availability, and manager information. Employees are also asked why they wish to serve as a champion. Applicants are accepted on a first come first serve basis. Sites with a large number of employees may recruit a co-champion to ease the workload of a single champion. Following recruitment, PRO Wellness facilitates a

virtual kick-off training in January, which provides champions with program information, instructions, and a time to network at the start of the program.

Requirements of a BeWell champion include the following:

1. Attend a virtual kick-off event for program orientation
2. Complete the CDC ScoreCard assessment (pre and post program)
3. Distribute a survey to coworkers to gauge interest in well-being initiatives
4. Complete an action plan to address wellness needs/gaps identified in the assessment
5. Implement well-being initiatives detailed in an action plan
6. Communicate information about benefit-related wellness offerings and well-being programs to coworkers
7. Attend a virtual mid-year champion check-in meeting
8. Attend a virtual end-of-year celebration
9. Complete an end-of-year evaluation

Baseline Assessment

Prior to orientation, champions are tasked with completing the CDC Worksite Health ScoreCard (ScoreCard), to assess current wellness promotion strategies at each site. The ScoreCard offers worksites scores to reflect the relative impact of proven health promotion strategies (CDC, 2019). Specific categories include organizational support, tobacco use, nutrition, physical activity, weight management, stress management, sleep and fatigue, depression, high blood pressure, high cholesterol, prediabetes and diabetes, cancer, heart attack and stroke, musculoskeletal disorders, alcohol and other substance use, maternal health and lactation support, vaccine-preventable diseases, and occupational health and safety. Roemer et al. (2019) found that the CDC ScoreCard is a reliable and valid tool for assessing worksite health promotion policies, educational and lifestyle counseling programs, environmental supports, and health benefits.

In response to champion feedback from recent years that the length of the assessment, which includes over 150 questions, was a barrier to completion, as well as low return rate from previous years of the program, the PRO Wellness team provided an abridged version of the ScoreCard beginning in 2023. Because each question on the ScoreCard represents an individual intervention, strategy, or action that can be put into practice at the worksite, the following sections of the ScoreCard were retained based on the ability of the champions to implement wellness initiatives that could make an impact at their site over a short period of time: organizational support, weight management, nutrition, physical activity, and musculoskeletal disorders (Roemer et al., 2022). The depression, sleep and fatigue, and stress management categories were collapsed into a new category named “mental/emotional health.” Categories including high cholesterol, high blood pressure, heart attack/stroke, vaccine-preventable diseases, alcohol/substance use, diabetes, cancer, and maternal health and lactation support were removed due to a low likelihood of an initiative of making an impact over an eight-month period. The shortened version included a total of 43 questions (see [Appendix](#)).

The CDC ScoreCard scoring system reflects the relative impact of proven health promotion strategies. Each question has a point value that indicates its level of impact on health outcomes and the strength and breadth of evidence supporting the strategy’s effectiveness, from “good” (1 point) to “better” (2 points) to “best” (3 points) (Lang et al., 2020). The total number of points was recalculated to identify a new maximum per category based on questions removed and retained.

Champions also distributed an additional brief survey to co-workers at their sites to gauge interest in various

wellness initiatives and gather additional feedback on wellness programming. This was developed by the PRO Wellness team and included questions like “which dimension of wellness could use the most improvement at your site,” “what would be the best time for you to participate in employee wellness opportunities,” and “what would be the most ideal length of time for you to attend a wellness program?” They also rated their level of interest in different wellness initiative topics. Upon completion of the assessments, PRO Wellness analyzed, summarized, and shared results with champions.

Develop Action Plan

Using the assessment results, champions described plans to implement two wellness initiatives at their site over eight months. Champions were guided by the PRO Wellness team to fill out a brief action plan for each initiative they planned to implement. The action plan was designed to be short and simple for the champion to complete. It included questions that prompted Champions to describe the purpose of the initiative, how it would be implemented, how many employees it would impact, promotion plans (i.e., flyer, email communications), expected outcomes (i.e., increased physical activity levels), and strategies to measure initiative success (i.e., tracking attendance). Prior to implementation, the PRO Wellness team reviewed each plan to ensure that all programs were feasible based on budget and timeline.

Implement and Evaluate Action Plan

Beginning in April 2023, champions implemented their proposed initiatives with funding provided internally through Penn State Health’s Human Resources Department (approximately \$500/site). Champions attended a mid-year check-in (July 2023) with PRO Wellness to receive information on institutional wellness benefits, tips for successful implementation of their own programs and to network with other champions. PRO Wellness encouraged champions to provide regular updates regarding their planned and implemented initiatives, to ask questions, and to share successful implementation strategies with each other.

At the end of the program year, sites re-evaluated their current wellness status using the same abridged ScoreCard, completed a program process evaluation and attended a virtual celebration event in December 2023 to highlight successes and invite participation for the next year. Champions received free branded swag items (i.e, mugs, blankets, reusable bags, etc) as a thank you for participating. Champions also received recognition at the end of the program with a personalized engraved plaque.

Statistical Analysis

Paired *t*-tests were used to test mean changes for the scorecard domains from pre to post along with 95% confidence intervals (CI) and *p*-values. These paired *t*-tests were done only for the subset of individuals who completed both the pre and post surveys (16 total). Those with missing data at either time point were excluded.

RESULTS

2023 Champion Program

The 2023 program year saw the highest participation since the program was established. In 2023, PRO Wellness enrolled volunteer employees ($n = 23$) designated as “champions” from 22 clinical and non-clinical sites to participate in the year-long program. These individuals were associated with inpatient hospitals, outpatient clinics, and specialty provider locations. Champions’ formal titles included but were not limited to the following: Clinical Supervisor, LPNs, Senior Technology Educator, Clinical Case Coordinator, Medical Office Support, Pediatric Clinical Case Manager, Graduate Medical Education Coordinator, Respiratory Therapist, Practice Site Manager, Medical Office Supervisor, Practice Site Manager, LPN Manager, Program Manager, Medical Office Supervisor, Care Coordinator, and Staffing/Scheduling Support Associate. Champion-led wellness initiatives included challenges such as hydration, physical activity, stress management, and nutrition, as well as activities such as mindfulness, gratitude journaling, and group fitness classes/walks.

ScoreCard baseline results were received from all 22 sites with post-assessment results received from 16 of 22 sites. Pre and post results from the ScoreCard are shown in Table 1.

Table 1

Centers for Disease Control and Prevention Abridged Scorecard Pre and Post Assessments

Category	Pre-program score mean (SD) $n = 20$	Post-program score mean (SD) $n = 16$	Mean score change over time (SD) $n = 16$	95% Confidence Interval for Change	p -value
Organizational support	10.6 (7.1)	15.6 (5.6)	5.1 (7.8)	0.9, 9.2	0.021*
Physical activity support	6.0 (6.3)	9.4 (5.4)	2.8 (6.4)	-0.6, 9.2	0.10
Weight management support	1.6 (1.9)	2.1 (2.0)	0.2 (2.6)	-1.2, 1.6	0.77
Nutrition support	5.0 (3.4)	5.0 (3.1)	-0.2 (3.7)	-2.2, 1.8	0.84
Mental/emotional health support	6.2 (4.9)	9.8 (4.3)	2.6 (6.0)	-0.6, 5.8	0.10
Musculoskeletal support	1.0 (1.7)	1.9 (2.0)	0.7 (2.3)	-0.6, 1.9	0.26
Total points (all scores)	24.7 (14.7)	43.8 (15.9)	17.3 (18.1)	7.6, 26.9	0.002*

* $p \leq 0.05$

Significant improvement was seen in the area of organizational support. The mean improvement (pre to post) was 5.1 points (95% CI [0.9, 9.2]; $p = 0.021$). For the overall score of the scorecard, the mean improvement (pre to post) significantly increased by 17.3 points (95% CI [7.6, 26.9]; $p = 0.002$).

There were 282 total individuals impacted in this program year based on participation/attendance reported by champions. Participant comments were collected in a post program process evaluation. Positive feedback included,

“Everyone seemed to really enjoy the challenge. I got a lot of feedback after the challenge was over stating that this really helped them up their water intake even after we kept track,” and “My team loves doing this, it has been a great spirit booster.” One champion stated, “The program increased employee engagement, enjoyment in the workplace and comradery. Negative comments were related to barriers champions experienced with implementation and engagement, including “low staff buy in,” “little time to be able to engage in activities at work and outside,” “staff continues to be pulled in many directions,” and “very hard to find the time.”

DISCUSSION

Results from the BeWell Champion program demonstrated positive improvements in multiple domains on the ScoreCard, with significant changes in organizational support and the overall score. The data are consistent with the findings of large-scale randomized clinical trials (RCTs) of employee wellness programming that have demonstrated significant improvements in employee self-reported wellness and health beliefs in follow-up periods of ranging from 12–24 months (Reif et al., 2020; Song & Baicker, 2019). These same RCTs did not demonstrate improvement in objective clinical health measures (e.g. blood pressure, cholesterol) (Reif et al., 2020; Song & Baicker, 2019).

Yashin-Shaw and Morrison-Beedy (2022) use the term “intrapreneurs” to describe individuals in an organization who create value, growth or benefit that improves the overall organization. Similar to our champions, these intrapreneurs are described as key to building healthy academic communities through their innovation and leadership, even when they are not in formal leadership positions. This opportunity to build a healthy community and influence culture change is the key benefit of the champion approach. Furthermore, the champion model aligns with published guiding principles for organizational culture change in healthcare systems. These principles include fostering distributed leadership, fostering staff engagement, creating collaborative relationships, and continuously assessing and learning from change (Willis et al., 2016).

Several limitations exist, including the sample of employees, which was small, and only 16 of the 22 sites completed the post CDC ScoreCard assessment. Attrition over the program year was due to champions leaving the organization, switching roles within the organization, or lack of time to devote to the program. Additional critiques of the Champion program are it did not collect objective numeric metrics, and the ScoreCard only reflects the opinions of the champions at each site. Nonetheless, the results of the Champion program assessment provide quantitative data supporting improvements following participation and descriptive qualitative data that similarly support these assertions. Despite these limitations, this was a valuable experience in prompting the team to carefully consider how to most effectively gather essential follow-up data to support ongoing wellness efforts, while also being mindful of the demands placed on busy clinical staff. The goal for the program is to continue to increase the number of participating sites and employee reach.

CONCLUSION

The BeWell Champion program has been successfully implemented and sustained in the context of a large healthcare institution at multiple clinical sites and serves an important role in encouraging healthcare employees to engage in wellness activities. The model is easily adaptable to other large academic and clinical institutions. Awarded most sustainable concept at its presentation at the Ohio State Third National Summit on Promoting Well-being and

Resilience in Healthcare Professionals (2022), the Champion program presents a feasible and sustainable model to support employee wellness in a large health system.

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REFERENCES

- Amaya, M., Melnyk, B. M., Buffington, B., & Battista, L. (2017). Workplace wellness champions: Lessons learned and implications for future programming. *Building Healthy Academic Communities Journal*, 1(1), 59–67. <https://doi.org/10.18061/bhac.v1i1.5744>
- Ansah, J. P., & Chiu, C. T. (2023). Projecting the chronic disease burden among the adult population in the United States using a multi-state population model. *Frontiers in Public Health*, 10, 1082183. <https://doi.org/10.3389/fpubh.2022.1082183>
- Bureau of Labor Statistics. (2023). *American time use survey: Employment status by full- and part-time status, education, and gender*. U.S. Department of Labor. <https://www.bls.gov/charts/american-time-use/emp-by-ftpt-job-edu-h.htm>
- Centers for Disease Control and Prevention. (2023). *Health worker mental health: Challenges and solutions*. <https://www.cdc.gov/vitalsigns/health-worker-mental-health/index.html>
- Centers for Disease Control and Prevention. (2018). *Workplace Health in America 2017*. U.S. Department of Health and Human Services. <https://www.cdc.gov/workplace-health-promotion/media/pdfs/2024/06/2017-workplace-health-in-america-summary-report-final-updated-508.pdf>
- Centers for Disease Control and Prevention. (2019). Workplace Health Promotion. https://www.cdc.gov/workplace-health-promotion/php/scorecard/?CDC_AAref_Val=https://www.cdc.gov/workplacehealthpromotion/initiatives/healthscorecard/index.htm
- Centers for Disease Control and Prevention. (2021). *Work@Health Wellness Champion*. https://www.cdc.gov/workplace-health-promotion/php/work-at-health-instructor/wellness-champion.html?CDC_AAref_Val=https://www.cdc.gov/workplacehealthpromotion/initiatives/workathealth/get-involved/wellness-champion.html
- Lang, J. E., Mummert, A., Roemer, E. C., Kent, K. B., Koffman, D. M., & Goetzl, R. Z. (2020). The CDC Worksite Health ScoreCard: An assessment tool to promote employee health and well-being. *American Journal of Health Promotion*, 34(3), 319–321. <https://doi.org/10.1177/0890117119898026c>
- Mitchell, L., Amaya, M., Battista, L., Melnyk, B., Andridge, R., & Kaye, G. (2021). Manager support for wellness champions: A case study for consideration and practice implications. *Workplace Health & Safety*, 69(3), 100–108. <https://doi.org/10.1177/2165079920952759>

- Reif, J., Chan, D., Jones, D., Payne, L., & Molitor, D. (2020). Effects of a workplace wellness program on employee health, health beliefs, and medical use: A randomized clinical trial. *JAMA Internal Medicine*, *180*(7), 952–960. <https://doi.org/10.1001/jamainternmed.2020.1321>
- Roemer, E. C., Kent, K. B., Goetzel, R. Z., Krill, J., Williams, F. S., & Lang, J. E. (2022). The CDC Worksite Health ScoreCard: A tool to advance workplace health promotion programs and practices. *Preventing Chronic Disease*, *19*, E32. <https://doi.org/10.5888/pcd19.210375>
- Roemer, E. C., Kent, K. B., Mummert, A., McCleary, K., Palmer, J. B., Lang, J. E., Matson Koffman, D. M., & Goetzel, R. Z. (2019). Validity and reliability of the updated CDC Worksite Health ScoreCard. *Journal of Occupational and Environmental Medicine*, *61*(9), 767–777. <https://doi.org/10.1097/JOM.0000000000001660>
- Ryan, M., Erck, L., McGovern, L., McCabe, K., Myers, K., Nobrega, S., Li, W., Lin, W. C., & Punnett, L. (2019). "Working on Wellness:" Protocol for a worksite health promotion capacity-building program for employers. *BMC Public Health*, *19*(1), 111. <https://doi.org/10.1186/s12889-019-6405-1>
- Song, Z., & Baicker, K. (2019). Effect of a workplace wellness program on employee health and economic outcomes: A randomized clinical trial. *JAMA*, *321*(15), 1491–1501. <https://doi.org/10.1001/jama.2019.3307>
- Third National Summit on Promoting Well-being and Resilience in Healthcare Professionals. (2022). <https://clinicianwellbeing.osu.edu/2022summit>
- Wieneke, K. C., Clark, M. M., Sifuentes, L. E., et al. (2016). Development and Impact of a Worksite Wellness Champions Program. *American Journal of Health Behavior*, *40*(2), 215–220. <https://doi.org/10.5993/AJHB.40.2.6>
- Willis, C. D., Saul, J., Bevan, H., Scheirer, M. A., Best, A., Greenhalgh, T., Mannion, R., Cornelissen, E., Howland, D., Jenkins, E., & Bitz, J. (2016). Sustaining organizational culture change in health systems. *Journal of Health Organization and Management*, *30*(1), 2–30. <https://doi.org/10.1108/JHOM-07-2014-0117>
- Yashin-Shaw, I., & Morrison-Beedy, D. (2022). Intrapreneurs: Essential to building healthy academic communities. *Building Healthy Academic Communities Journal*, *6*(1), 22–28. <https://doi.org/10.18061/bhac.v6i1.8950>

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Appendix
CDC Worksite Health ScoreCard Assessment

CDC Worksite Health ScoreCard Assessment		
	Please complete the following survey to the best of your knowledge about your worksite (not Penn State Health as a whole). It should take you approximately 15 minutes. If you are not sure about an answer, check "no."	
Item #	Question	Response
1	What site do you work with?	Open-ended
Organizational Support Section (22 total points)		
During the past 12 months, did your worksite:		
2	Demonstrate organizational commitment and support of worksite health promotion at all levels of management? Answer “yes” if, for example, all levels of management participate in activities, send communications to employees, or have performance objectives related to a healthy workforce.	2 = yes 0 = no
3	Have an annual budget or receive dedicated funding for health promotion programs?	2 = yes 0 = no
4	Have an active and diverse health promotion committee? Answer “yes” if, for example, your health promotion committee is routinely engaged in planning and implementing programs, and includes workers from all levels of the organization, various departments, as well as representatives from special groups (e.g., remote workers, organized labor).	2 = yes 0 = no
5	Conduct an employee needs and interest survey for planning health promotion activities? Answer “yes” if, for example, your organization administers surveys or conducts focus groups to assess your employees’ readiness, motivation, or preferences for health promotion programs.	1 = yes 0 = no
6	Conduct ongoing evaluations of health promotion programming that use multiple data sources to inform decision-making? Answer “yes” if, for example, your organization routinely measures the quality and impact of health promotion programs. This may be measured using data on employee health risks, medical claims, employee satisfaction, or organizational climate surveys.	2 = yes 0 = no
7	Promote and market health promotion programs to employees? Answer “yes” if, for example, your worksite’s health promotion program has a brand name or logo or uses multiple channels of communication to inspire and connect employees to health promotion resources. These may include sharing employees’ health-related “success stories.”	2 = yes 0 = no
8	Have an employee champion or network of champions who actively publicize health promotion programs?	2 = yes 0 = no
9	Use and combine incentives with other strategies to increase participation in health promotion programs? Answer “yes” if, for example, your organization offers incentives such as gift certificates, cash, paid time off, product or service discounts, reduced health insurance premiums, employee recognition, or prizes.	2 = yes 0 = no
10	Use individual or team competitions or challenges in combination with additional interventions to support employees making behavior changes? Answer “yes” if, for example, your organization offers physical activity competitions.	2 = yes 0 = no
11	Provide a working environment that features healthy building design principles? Answer “yes” if, for example, your workspaces have access to natural light, exposure to plants and nature, communal spaces, good ventilation and air quality, comfortable temperature, or no excessive noise.	1 = yes 0 = no
12	Extend access to key components of the program to all workers, including hard to reach workers (e.g., telecommuters, contract workers, night shift workers, part-time workers)? Answer “yes” if, for example, your organization offers alternative options for participating in programs or services, such as 24-hour gym access or virtual access to lectures	1 = yes 0 = no

13	Provide work-life balance programming and resources? Answer “yes” if, for example, your worksite provides resources related to elder care, child care, tuition reimbursement or financial counseling.	3 = yes 0 = o
Physical Activity Section (17 total points) During the past 12 months, did your worksite:		
14	Provide educational materials that address the benefits of physical activity? Answer “yes” if, for example, your worksite offers brochures, videos, posters, or newsletters that address the benefits of physical activity, either as a single health topic or along with other health topics.	1 = yes 0 = no
15	Provide and promote interactive educational programming on physical activity? Answer “yes” if, for example, your worksite offers timely reminders/prompts to move, or “lunch and learns,” seminars, workshops, or classes that teach and promote physical activity. These programs may be provided in group or individual settings; in-person or virtually (online, telephonically, mobile app); on or off site; through vendors, on site staff, health insurance plans/programs, community groups, or other practitioners.	2 = yes 0 = no
16	Provide or promote other environmental supports for recreation or physical activity? Answer “yes” if, for example, your worksite provides trails or a track for walking/ jogging, maps of suitable walking routes, a basketball court, treadmill workstations, sit-stand workstations, lockers, a shower, or changing facility.	3 = yes 0 = no
17	Encourage stair use by posting signs and making stairwells more inviting to use? Answer “yes” if, for example, signs encouraging stair use are posted at elevators, stairwells, and other key locations; enhancements such as artwork or music are available; and stairwells are kept clean and well-lit.	3 = yes 0 = no
18	Provide and promote organized physical activity programs for employees (other than the use of an exercise facility)? Answer “yes” if, for example, your worksite organizes walking groups, stretching programs, group exercise classes, recreational leagues, or buddy systems to create supportive social networks for physical activity	3 = yes 0 = no
19	Promote the use of activity trackers to support physical activity? Answer “yes” if, for example, your worksite provides or subsidizes the cost of pedometers, wearable trackers, online tools, or mobile apps.	2 = yes 0 = no
20	Encourage active transportation to and from work? Answer “yes” if, for example, your worksite subsidizes public transportation; subsidizes a bike share program; provides secure bicycle storage, lockers and shower facilities for employees; allows for a flexible dress code; and/or organizes workplace challenges, employee recognition programs, or community events to increase active transportation.	3 = yes 0 = no
Weight Management Section (4 total points) During the past 12 months, did your worksite:		
21	Provide educational materials that address the health risks of overweight or obesity? Answer “yes” if, for example, your worksite offers brochures, videos, posters, or newsletters that address the risks of overweight or obesity, either as a single health topic or along with other health topics.	1 = yes 0 = no
22	Provide and promote interactive educational programming on weight management? Answer “yes” if, for example, your worksite offers “lunch and learns,” seminars, workshops, or classes that teach and promote weight management. These programs may be provided in group or individual settings; in-person or virtually (online, telephonically, mobile app); on or off site; through vendors, on site staff, health insurance plans/programs, community groups, or other practitioners.	3 = yes 0 = no
Nutrition Section (12 total points) During the past 12 months, did your worksite:		
23	Provide places to purchase food and beverages? Answer “yes” if, for example, your worksite provides vending machines, cafeterias, snack bars, or other purchase points. IF NO, PLEASE SKIP TO QUESTION 8	1= yes 0 = no
24	Make most (more than 50%) of the food and beverage choices available at the worksite (in vending machines, cafeterias, snack bars, or other purchase points) healthy food items? Answer “yes” if the healthy foods and beverages are items such as vegetables, fruit, unsweetened beverages, or low-sodium snacks.	3= yes 0= no
25	Provide visible nutritional information (beyond standard food labels) on sodium, calories, trans fats, or saturated fats for the food and beverages available at the worksite (in vending machines, cafeterias, snack bars, or other purchase points)?	3= yes 0= no

26	Provide educational materials that address healthy eating? Answer “yes” if, for example, your worksite offers brochures, videos, posters, or newsletters that teach and promote healthy eating, either as a single health topic or along with other health topics.	1 = yes 0 = no
27	Provide and promote interactive educational programming on nutrition? Answer “yes” if, for example, your worksite offers “lunch and learns,” seminars, workshops, or classes that teach and promote healthy eating. These sessions can be provided in-person or virtually (online, telephonically, mobile app); on or off site; in group or individual settings; through vendors, on site staff, health insurance plans/ programs, community groups, or other practitioners.	2 = yes 0 = no
28	Provide employees with food preparation/storage facilities and a place to eat? Answer “yes” if, for example, your worksite provides a microwave oven, sink, refrigerator, and a place for employees to eat other than at their workstations.	1 = yes 0 = no
29	Promote and provide access for increased water consumption? Answer “yes” if, for example, your worksite uses promotional materials and provides easy access through water bottle filling stations, water fountains, break rooms, or vending machines.	1 = yes 0 = no
Mental/Emotional Health Section (14 total points)		
During the past 12 months, did your worksite:		
30	Provide educational materials on stress management? Answer “yes” if, for example, your worksite offers brochures, videos, posters, or newsletters that address aspects of stress management, including coping skills and relaxation techniques, either as a single health topic or along with other health topics.	1 = yes 0 = no
31	Provide and promote interactive educational programming on stress management? Answer “yes” if, for example, your worksite offers “lunch and learns,” seminars, workshops, or classes on topics such as assertiveness, coping, and relaxation techniques. Answer “yes” if these programs are provided in group or individual settings; in-person or virtually (online, telephonically, mobile app); on or off site; through vendors, on site staff, health insurance plans/programs, community groups, or other practitioners	2 = yes 0 = no
32	Provide educational materials on preventing, detecting, and treating mental health disorders? Answer “yes” if, for example, your worksite offers brochures, videos, posters, or newsletters that address mental health or symptoms of a mental health disorder, either as a single health topic or along with other health topics.	1 = yes 0 = no
33	Provide and promote interactive educational programming on preventing, detecting, and treating mental health disorders? Answer “yes” if, for example, your worksite offers “lunch and learns,” seminars, workshops, or classes focused on reducing the risk factors for mental health disorders and reducing the stigma surrounding mental illness. These programs may be provided in group or individual settings; in-person or virtually (online, telephonically, mobile app); on or off site; through vendors, on site staff, health insurance plans/programs, community groups, or other practitioners.	2 = yes 0 = no
34	Provide educational materials that address sleep habits and treatment of common sleep disorders? Answer “yes” if, for example, your worksite offers brochures, videos, posters, or newsletters that address topics such as recommended sleep schedules, recognizing the signs and symptoms of fatigue or daytime sleepiness, and appropriate use of caffeine.	1 = yes 0 = no
35	Provide and promote interactive educational programming that addresses sleep habits and treatment of common sleep disorders? Answer “yes” if, for example, your worksite offers seminars, workshops, or classes that teach and promote appropriate sleep habits. These sessions can be provided in-person or online; on or off site; in group or individual settings; through vendors, on site staff, health insurance plans or programs, community groups, or other practitioners.	2 = yes 0 = no
36	Provide dedicated space that is quiet where employees can engage in relaxation activities, such as deep breathing exercises?	1 = yes 0 = no
37	Sponsor or organize social activities designed to improve engagement with others, and provide opportunities for interaction and social support? Answer “yes” if, for example, your worksite sponsors or organizes team building events, company picnics, holiday parties, or employee sports teams.	1 = yes 0 = no
38	Provide opportunities for employee participation in organizational decisions regarding workplace issues that affect job stress? Answer “yes” if, for example, your worksite provides opportunities for employees to participate in decisions about work processes and environment, work schedules, participative problem-solving, and management of work demands.	3 = yes 0 = no
Musculoskeletal Section (5 total points)		

During the past 12 months, did your worksite:		
39	Conduct ergonomic assessments of work space design and equipment when problems are identified, or anticipated, to reduce the risk of musculoskeletal disorders? Answer “yes” if, for example, the policy includes assessments of workstations, equipment, tools, manually-handled loads, or repetitive tasks conducted either on a schedule or when requested on an as-needed basis.	1 = yes 0 = no
40	Make organizational changes to job design, when appropriate, to reduce the risk of musculoskeletal disorders? Answer “yes” if, for example, your worksite has adjusted work routines and workloads, implemented job rotation, or automated previously manual tasks that pose increased risk.	2 = yes 0 = no
41	Provide educational materials on musculoskeletal disorders? Answer “yes” if, for example, your worksite offers brochures, videos, posters, or newsletters that teach and promote strategies that minimize the incidence of musculoskeletal disorders such as ergonomic design, stretching, regular breaks, and weight management, either as a single health topic or along with other health topics.	1 = yes 0 = no
42	Provide and promote interactive educational programming on musculoskeletal disorders? Answer “yes” if, for example, your worksite offers “lunch and learns,” seminars, workshops, or classes that teach strategies that minimize the risk of musculoskeletal disorders such as ergonomic design, stretching, regular breaks, and weight management. These programs may be provided in group or individual settings; in-person or virtually (online, telephonically, mobile app); on or off site; through vendors, on site staff, health insurance plans/programs, community groups, or other practitioners.	1 = yes 0 = no
Other?		
43	Is there anything else about your site you would add that was not reflected in the survey?	 Open-ended