



CDC Worksite Health ScoreCard Manual

An Assessment Tool to Promote Employee Health and Well-Being



**Centers for Disease
Control and Prevention**
National Center for Chronic
Disease Prevention and
Health Promotion

Updated January 2019

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U.S. Department of Health and Human Services
Centers for Disease Control and Prevention
National Center for Chronic Disease Prevention and Health Promotion
Division of Population Health

The *CDC Worksite Health ScoreCard* contains information that needs to be **filled out manually**: an OPTIONAL Background and Community Engagement Information form (pages 12–14), and numerous tables on the following pages used in scoring worksites.

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Foreword

The purpose of this manual is to help employers use the Centers for Disease Control and Prevention (CDC) Worksite Health *ScoreCard* (CDC *ScoreCard*) to assess their health promotion programs, identify gaps, and prioritize high-impact strategies to promote employee health and well-being. CDC believes worksite health promotion and wellness programs are essential to maintaining a healthy workforce.

This manual contains CDC guidance only. It does not establish or affect legal or administrative rights or obligations. References within this manual to any specific commercial products, processes, services by trade names, trademarks, or manufacturers do not constitute an endorsement or recommendation by CDC.

Both the *CDC ScoreCard* manual and tool, in their current forms, may be updated and revised at any time.

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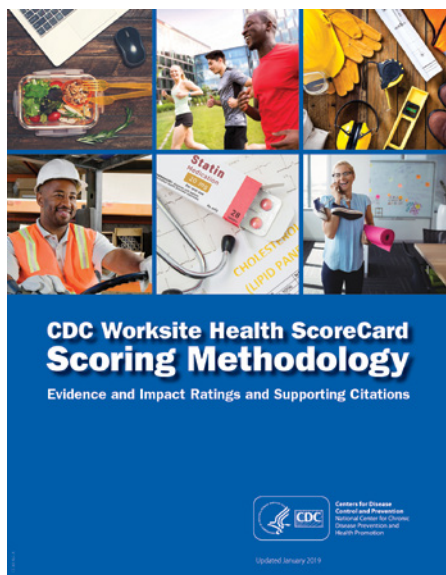
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Introduction

What is the **CDC Worksite Health ScoreCard**?

The *CDC Worksite Health ScoreCard* (*CDC ScoreCard*) is a tool designed to help employers assess whether they have implemented evidence-based health promotion strategies to improve the health and well-being of their employees. The *CDC ScoreCard* includes 154 questions about specific programs, policies, environmental supports, and health plan benefits that are effective in improving health and well-being. These questions are organized across 18 modules (topic areas) and are scored to help employers identify gaps and track improvements over time. Below are the modules in the order they appear in the *CDC ScoreCard* and the number of questions contained within each module.

- Organizational Supports (25)
- Tobacco Use (8)
- High Blood Pressure (6)
- High Cholesterol (5)
- Physical Activity (10)
- Weight Management (4)
- Nutrition (14)
- Heart Attack and Stroke (12)
- Prediabetes and Diabetes (6)
- Depression (7)
- Stress Management (7)
- Alcohol and Other Substance Use (6)
- Sleep and Fatigue (6)
- Musculoskeletal Disorders (7)
- Occupational Health and Safety (9)
- Vaccine-Preventable Diseases (7)
- Maternal Health and Lactation Support (7)
- Cancer (8)



The development and validation of the *CDC ScoreCard* are described separately in [The CDC Worksite Health ScoreCard Scoring Methodology: Evidence and Impact Ratings and Supporting Citations](#) report.

What is NEW in the 2019 version of the CDC Worksite Health ScoreCard?

Many employers may already be familiar with the *CDC Worksite Health ScoreCard* (*CDC ScoreCard*), which was first released in 2012. As part of the current update to the tool, all existing questions—wording, citations, and scoring—were re-evaluated to ensure that they reflect the best available evidence.

This process resulted in several changes to the *CDC ScoreCard*, including the addition of 20 questions into existing modules, the removal of 13 questions, and movement of three questions between modules. Other changes included the renaming of both the Maternal Health and Lactation Support and Prediabetes and Diabetes modules to reflect a broadened focus, and the combining of two modules from the 2014 version, Signs and Symptoms of Health Attack and Stroke and Emergency Response to Heart Attack and Stroke, into one comprehensive module titled Heart Attack and Stroke.

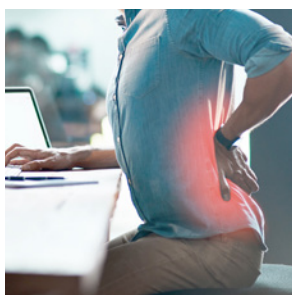
Finally, the updated *CDC ScoreCard* includes four new modules featuring evidence-based strategies on emerging worksite health topics:



Sleep and Fatigue. One-third of U.S. adults report that they usually get less than the recommended seven or more hours of sleep per night.¹ Chronic sleep deprivation is linked to many chronic diseases and conditions, including diabetes, heart disease, obesity, and depression.² Not getting enough sleep can also lead to motor vehicle crashes and mistakes at work, which may result in injury or disability.^{3,4} As such, the public health community believes that sleep is a foundational pillar for good health and should be addressed in any comprehensive health promotion program.



Alcohol and Other Substance Use. Excessive alcohol consumption is the third leading cause of preventable death in the U.S.⁵ and is associated with many negative health outcomes, including cardiovascular disease, stroke, cancer, sexually transmitted diseases, depression, and accidental injury.⁶ With the growing recognition that most illicit drug users and heavy drinkers are members of the workforce,⁷ the worksite can be an important venue for the delivery of alcohol and substance abuse prevention services in the form of lifestyle campaigns, education programs, and insurance coverage that includes screening, counseling, and treatment options.^{8,9}



Musculoskeletal Disorders. Awkward posture or repetitive tasks can cause damage to muscles, nerves, tendons, joints, cartilage, and spinal discs and can contribute to the development of musculoskeletal disorders.¹⁰ There is strong evidence suggesting that highly prevalent and costly musculoskeletal disorders, such as back pain, arthritis, and carpal tunnel syndrome, can be mitigated through worksite policy and design.¹¹



Cancer. Cancer is the second most common cause of death in the U.S., accounting for nearly one-quarter of all deaths annually.¹² American men have slightly less than a 1 in 2 lifetime risk of developing cancer; for women, the risk is a little more than 1 in 3.¹³ Previous editions of the *CDC ScoreCard* addressed some cancer risk reduction interventions (e.g., in the Tobacco Use and Weight Management modules); however, the module in the current version of the *CDC ScoreCard* includes questions to assess the use of educational materials/programming and insurance coverage to promote evidence-based cancer screenings, as well as access to vaccinations and environmental supports that may reduce the incidence of cancer.

Why use the *CDC Worksite Health ScoreCard*?

While employers have a responsibility to provide a safe and hazard-free worksite, they also have abundant opportunities and a clear incentive to promote individual health and foster a health-promoting work environment.^{14,15} CDC encourages employers to provide their employees with preventive services, training and tools, and an environment that supports healthy behaviors. By following this advice, employers can expect to reduce health care expenditures, increase productivity and engagement, and improve the general health and well-being of their employees.^{16–19}

Designing an effective workplace health promotion program can be tricky. There is no one-size-fits-all approach; a successful program needs to be tailored to employee health needs and the organization's culture and environment. To be effective, a wellness program also must be comprehensive, weaving together a coherent set of evidence-based interventions that support a culture of health and safety within the organization.^{20,21}

Comprehensive worksite wellness programs may include content (i.e., specific interventions, strategies, and behavioral interventions) that address a range of health conditions and risk factors, such as:

Programs. Opportunities available to employees at the worksite or through outside organizations to begin, change, or maintain health behaviors.

Policies. Formal or informal written statements that are designed to protect or promote employee health. They affect large groups of employees simultaneously. They can also create and foster a culture of health.

Benefits. Part of an overall compensation package including health insurance coverage and other services or discounts regarding health.

Environmental supports. Physical factors at and nearby the worksite that help protect and enhance employee health.^{22,23}

Well-designed programs incorporate interventions at three levels:

Primary prevention. Helping employees stay healthy and reduce their risk of disease (e.g., making most of the food and beverage choices that are available be healthy food items that have visible nutritional information labels).

Secondary prevention. Providing services aimed at early detection and prevention of disease (e.g., offering free or subsidized cholesterol and blood pressure screenings).

Tertiary prevention. Reducing the amount of disability caused by existing disease (e.g., providing health insurance that includes access to therapies and treatment for musculoskeletal disorders).

The *CDC ScoreCard* is designed to help employers assess their health promotion efforts and identify evidence-based strategies to improve the health and well-being of their employees over time.

Who can use the *CDC Worksite Health ScoreCard*?

Employers. Human resource managers, health benefit managers, health education staff, occupational nurses, medical directors, wellness directors, or others responsible for worksite health promotion in an organization may use the *CDC ScoreCard* to establish benchmarks, track improvements, identify areas for improving a culture of health, evaluate program successes over time, and collaborate on initiatives within their own programs or at local, state, or national levels.

State or local health departments. State or local health departments may assist employers and business coalitions in using the tool and sponsor initiatives to establish healthier worksites throughout the state. State or local health departments also can use the *CDC ScoreCard* to monitor and track improvements in workplace health promotion programs over time, establish best practice benchmarks, and guide decision-making about resources to support employers.

Completing the *CDC Worksite Health ScoreCard*



Getting Started

If you are a large organization with multiple worksites, consider completing this tool for each worksite separately, or select the particular worksite of interest. A worksite is a building, unique location, or business unit within the organization where work occurs. A worksite can include a campus of multiple buildings if all the buildings are in close proximity (e.g., walking distance) and are defined as part of the organization. For example, a shipping company should consider single retail stores, distribution centers, or a corporate office park as individual worksites unless they are geographically adjacent to one another. By completing the tool separately for each worksite, you can identify different areas of strengths and opportunities for improvement to impact the health and well-being of all employees across your organization.

Form a small team representing different organizational units to complete this survey together. A collaborative approach will allow for more accurate responses, increase ownership and involvement among the team, and decrease effort for any single team member. For example, we recommend enlisting individuals among the following roles:

- Worksite health promotion committee members
- Human resource managers
- Health benefit managers
- Health education staff
- Occupational nurses
- Medical directors
- Health promotion coordinators
- Building facilities managers

Note: If completing the *CDC ScoreCard* as a group or team, find consensus on the responses to questions before finalizing responses.

Some questions ask you to describe your health insurance plan. If your organization offers more than one health insurance option, base your responses on the health insurance plan with the highest enrollment at your worksite.

Using the CDC Worksite Health ScoreCard

There are 18 modules in the *CDC ScoreCard*; each module covers a separate topic related to worksite health. You may complete these in separate sittings and in any order. Scores for each module can be tallied for each module and combined for a total score once all modules are completed.

Scan each section before attempting to respond. Answers to most questions are readily available following a review of organizational health policies (e.g., a policy handbook), benefit plan designs, interviews with key stakeholders, and direct observation. In some cases, answers may not be immediately obvious to the person assigned to complete the section. If you do not know the answer to the question, leave the box empty, and engage others at the worksite to help you answer it.

Consult the Glossary (Appendix C) to clarify terms used in the questions.

Each question asks about a unique facet of your workplace health program. Consider only worksite practices and programs that are *currently in place* (e.g., ongoing access to health insurance, educational materials that are provided on the company intranet) or have *occurred at least once within the past 12 calendar months* (e.g., a five week walking challenge that took place in the previous quarter).

- **Answer “yes” if** the activity or service described in the question was made available to employees at your worksite *at least once within the past 12 calendar months*.
- **Answer “no” if** the activity or service described in the question *was not offered at any time within the past 12 calendar months*. Answer “no” for activities or services that have been planned but not yet made available to employees.

Note that the root question may contain **and** or **or** when presenting multiple elements.

- **And:** Worksites must have *all elements currently in place or all elements must have occurred at least once within the past 12 calendar months*.
- **Or:** Worksites must have *at least one element currently in place or at least one element must have occurred at least once within the past 12 calendar months*.

Most questions include green italicized subtext that elaborates upon the root question, including definitions or examples of program elements. Examples provided in the subtext are not exhaustive, and worksites are not required to have all examples in place to receive credit for the question.

After completing the CDC ScoreCard, score your answers using the instructions on page 41. We recommend that you convert the raw scores for each module to percentages of total possible points. If you choose to complete the *CDC ScoreCard* using the [online system](#), these metrics will be automatically included in your summary benchmarking report.

You may compare your scores to other employers who participated in the validation of the updated *CDC ScoreCard*. Do not interpret this benchmark as a recommended score. It is intended to provide a reference about where your worksite stands compared to a small sample of other worksites.



Scoring Your Survey

The *CDC Worksite Health ScoreCard* scoring system was developed to reflect the relative impact of proven health promotion strategies. Strategies are assigned a point value indicating their level of impact on health outcomes and the amount of evidence of the strategy's effectiveness, ranging from "Good" (1 point) to "Best" (3 points).

For example, awareness-building materials such as flyers or brochures (1 point) have less of an impact on employee health than lifestyle counseling or self-management programs (3 points). For more information about the evidence and impact rating systems, please see Appendix D. For the citations used as evidence to assign scores for each of the items in the *CDC ScoreCard*, please see [The CDC Worksite Health ScoreCard Scoring Methodology: Evidence and Impact Ratings and Supporting Citations](#).

The *CDC ScoreCard* shows the point value that is assigned to each strategy (question). When scoring your completed *CDC ScoreCard*, you will be able to determine two scores—a total score and a score for each of the individual 18 modules.

- To calculate your total score, add the point values of all the questions to which you responded "yes."
- To calculate scores by module, add the point values of all questions to which you responded "yes" within that module (e.g., Organizational Supports).
- Some questions may not have been applicable to your worksite (i.e., *During the past 12 months, did your worksite encourage stair use by posting signs and making stairwells more inviting to use?*). Answer "no" or skip these questions; you will receive 0 points for "no" or skipped questions.

2019 CDC Worksite Health ScoreCard

OPTIONAL Background and Community Engagement Information

This section of the tool captures background information about your worksite's population. If you are a large organization with multiple worksites, consider completing this tool for each worksite separately, or select the particular worksite of interest. A worksite is a building, unique location, or business unit within the organization where work occurs. A worksite can include a campus of multiple buildings as long as all the buildings are in close proximity (walking distance) and defined as part of the organization. If you want to skip this section, please proceed to page 16 to begin completing the *CDC ScoreCard*.

CONTACT INFORMATION

1. Name: _____

2. Job title: _____

3. Address: _____

4. Telephone number: _____

5. E-mail address: _____

EMPLOYEE CHARACTERISTICS—If exact figures are not available, please provide your best estimates.

6. Number of employees in your organization (across all U.S. locations)

☐ 1-49

☐ 100-249

☐ ≥750

☐ 50-99

☐ 250-749

7. Do you have multiple worksites/locations?

☐ Yes

☐ No

8. How many employees are at the location for which you are completing the survey?

☐ 1-49

☐ 100-249

☐ ≥750

☐ 50-99

☐ 250-749

9. Sex

% Male: _____

% Female: _____

10. Age groups

% <18 years of age: _____

% 35-44 years of age: _____

% ≥65 years of age: _____

% 18-34 years of age: _____

% 45-64 years of age: _____

11. Average age: _____

Continued

12. Racial/ethnic group

% Non-Hispanic White: _____	% American Indian/Alaska Native: _____
% Non-Hispanic Black/African American: _____	% Native Hawaiian/Pacific Islander: _____
% Hispanic/Latino: _____	% Other: _____
% Asian/Asian American: _____	

13. Work status

% Full-time: _____	% Temporary: _____
% Part-time: _____	

14. Job type

% Salaried: _____	% Hourly: _____
-------------------	-----------------

15. Education level

% Less than high school diploma: _____	% College graduate: _____
% High school graduate/GED: _____	% Post-graduate/advanced degree: _____
% Some college/technical school: _____	

ORGANIZATION AND PROGRAM BACKGROUND

16. Your Organization's Business Type

☐ For-profit ☐ Nonprofit/government ☐ Nonprofit/other

17. Your Organization's Industry Type:

<input type="checkbox"/> Agriculture, Forestry, Fishing, and Hunting	<input type="checkbox"/> Finance and Insurance
<input type="checkbox"/> Mining, Quarrying, and Oil/Gas Extraction	<input type="checkbox"/> Management of Companies & Enterprises
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Information
<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Construction
<input type="checkbox"/> Accommodation & Food Services	<input type="checkbox"/> Educational Services
<input type="checkbox"/> Professional, Scientific, and Technical Services	<input type="checkbox"/> Manufacturing
<input type="checkbox"/> Transportation and Warehousing	<input type="checkbox"/> Administrative and Support and Waste Management and Remediation Services
<input type="checkbox"/> Utilities	<input type="checkbox"/> Arts, Entertainment and Recreation
<input type="checkbox"/> Health Care and Social Assistance	<input type="checkbox"/> Other Services (except Public Administration):
<input type="checkbox"/> Real Estate Rental & Leasing	<input type="checkbox"/> Public Administration

18. Health insurance coverage provided to employees?

☐ Yes ☐ No

Continued

19. Elements of worksite health promotion programs offered at your organization: (Check all that apply)

- ☐ Health education (e.g., skills development and behavior change classes; awareness building brochures, posters)
- ☐ Links to related employee services (e.g., referral to employee assistance programs [EAPs])
- ☐ Supportive physical and social environment for health improvement (e.g., tobacco-free policies, subsidized gym memberships)
- ☐ Integration of health promotion into your organization's culture (e.g., health promotion being part of business' mission statement)
- ☐ Employee screenings with adequate treatment and follow-up (e.g., Health Risk Assessments [HRAs] and biometric screenings)

COMMUNITY ENGAGEMENT

20. Does your worksite provide employees with health-related information, programs, or resources from any of the following organizations: (Check all that apply)

- ☐ Federal, state, or local public health agencies (e.g., Centers for Disease Control and Prevention)
- ☐ Health insurance plan, broker, or workers' compensation provider
- ☐ Health management program and/or wellness program provider/vendor
- ☐ Health-related organizations (e.g., American Heart Association, American Cancer Society)
- ☐ Health care professionals (e.g., hospitals, providers, pharmacists, nutritionists)
- ☐ Faith-based and/or religious-affiliated organizations (e.g., YMCA)
- ☐ Business groups or councils (e.g., Wellness Council, Chamber of Commerce)
- ☐ Other: _____

Respond "yes" if, for example, you work with an organization not listed above such as an employee assistance program, food services vendor, foundation, etc. to provide health information, programs, or resources to employees.

21. Does your worksite receive consultation, guidance, advice, training, and/or direction from any of the following organizations related to the design and delivery of a worksite wellness program? (Check all that apply)

- ☐ Federal, state, or local public health agencies (e.g., Centers for Disease Control and Prevention)
- ☐ Health insurance plan, broker, or workers' compensation provider
- ☐ Health management program and/or wellness program provider/vendor
- ☐ Health-related organizations (e.g., American Heart Association, American Cancer Society)
- ☐ Health care professionals (e.g., hospitals, providers, pharmacists, nutritionists)
- ☐ Faith-based and/or religious-affiliated organizations (e.g., YMCA)
- ☐ Business groups or councils (e.g., Wellness Council, Chamber of Commerce)
- ☐ Other: _____

Respond "yes" if, for example, you work with an organization not listed above such as an employee assistance program, food services vendor, foundation, etc. to provide health information, programs, or resources to employees.

22. Does your worksite participate in any community coalitions focused on or targeting health, including through business and community partnerships?

- ☐ Yes ☐ No

2019 CDC ScoreCard Topic Areas



Organizational Supports



Leadership Commitment and Support

During the past 12 months, did your worksite:	Yes	No	Score
1. Demonstrate organizational commitment and support of worksite health promotion at all levels of management? <i>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.</i>	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
2. Include references to improving or maintaining employee health and safety in the business objectives, core values, or organizational mission statement?	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
3. Have a strategic plan that includes goals and measurable organizational objectives for the health promotion program? <i>Answer "yes" if, for example, your organization identifies SMART (i.e., specific, measurable, achievable, realistic, time-bound) goals and objectives.</i>	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
4. Have an annual budget or receive dedicated funding for health promotion programs?	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
5. Have an active and representative health promotion committee? <i>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).</i>	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
6. Have a paid health promotion coordinator whose job (either part-time or full-time) is to manage the worksite health promotion program? <i>Answer "yes" if the staff member is located on or off site and has responsibility for health promotion as part of his or her job description or performance expectations.</i>	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____

Measurement and Evaluation

During the past 12 months, did your worksite:	Yes	No	Score
7. Conduct an employee needs and interest survey for planning health promotion activities? <i>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.</i>	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
8. Conduct employee health risk appraisals (HRAs) or health assessments (HAs) and provide individual feedback plus health education resources for follow-up action? <i>Answer "yes" if, for example, your organization conducts HRAs through vendors, on site staff, or health plans and provides individual feedback through written reports, letters, or one-on-one counseling.</i>	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____

Continued

During the past 12 months, did your worksite:	Yes	No	Score
9. 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.	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____

Strategic Communications

During the past 12 months, did your worksite:	Yes	No	Score
10. 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."	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
11. Use tailored health promotion communications to ensure that they are accessible and appealing to employees of different ages, sexes , education levels, job categories, cultures, languages, or literacy levels?	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____

Participation and Engagement

During the past 12 months, did your worksite:	Yes	No	Score
12. Have an employee champion or network of champions who actively publicize health promotion programs?	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
13. 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.	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
14. 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.	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
15. Promote and support employee volunteerism? Answer "yes" if, for example, your organization encourages participation in volunteer activities, and allows employees the flexibility to participate during typical work hours. This may include time organizing food drives or participating in corporate walks or community clean-up days.	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
16. 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.	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
17. 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.	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____

Continued

Programs, Policies, and Environmental Supports			
During the past 12 months, did your worksite:	Yes	No	Score
18. Provide an employee assistance program (EAP)? Answer "yes" if, for example, employees have access to an EAP that offers services addressing financial health, depression, stress management, grief counseling, substance use, and other mental and emotional health issues.	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
19. Implement educational programming to improve health care consumerism? Answer "yes" if, for example, your organization provides employees with written or interactive guidance on improving doctor-patient relationships, promoting patient-centered care, and appropriate use of medical resources.	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
20. Educate employees about preventive services and benefits covered by their health insurance plan on an ongoing basis, above and beyond what occurs during annual health insurance enrollment? Answer "yes" if, for example, your worksite communicates information about benefits such as smoking cessation medication and counseling, weight management tools, or flu vaccinations through emails or newsletters that are distributed across the calendar year.	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
21. Provide and support flexible work scheduling policies? Answer "yes" if, for example, policies allow for flextime schedules, the option to work at home, or allowing time during the day for employees to engage in health promotion activities.	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
22. 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.	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
23. Make some or all company-specific health promotion programs available to family members? Answer "yes" if your organization allows employees' family members to access health promotion resources and programming, above and beyond what is provided by the health insurance plan. These resources may include fitness facilities, on site medical clinics, health fairs, or wellness competitions.	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
24. Offer all benefits-eligible employees paid time off for days or hours absent due to illness, vacation, or other personal reasons (including family illness or bereavement)? Answer "yes" if, for example, paid time off, not including paid parental leave, is provided to all benefits-eligible employees.	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
25. Coordinate programs for occupational health and safety with programs for health promotion and wellness? Answer "yes" if, for example, these departments have common strategies, routine data sharing, regular meetings across functions, or warm handoff referrals.	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
Your Worksite's Organizational Supports Score			_____
Maximum Organizational Supports Score			44

Tobacco Use



This facility is smoke free.



During the past 12 months, did your worksite:	Yes	No	Score
1. Have and promote a written policy banning tobacco use at your worksite? Answer "yes" if, for example, your policy bans cigarettes and/or other tobacco products and is communicated to employees regularly through emails, newsletters, or signage in public places.	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
2. Provide educational materials that address tobacco cessation? Answer "yes" if, for example, your worksite offers brochures, videos, posters, web-based programs, or newsletters on tobacco cessation, including referral to 1-800-QUIT-NOW or smokefree.gov, either as a single health topic or along with other health topics.	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
3. Provide and promote <u>interactive educational programming</u> on tobacco cessation? Answer "yes" if, for example, your worksite offers "lunch and learns," seminars, workshops, or classes on tobacco cessation. 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.	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
4. Provide and promote free or subsidized <u>lifestyle coaching/counseling or self-management programs</u> that equip employees with skills and motivation to quit using tobacco? 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. This may include referral to 1-800-QUIT-NOW or smokefree.gov.	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
5. Prohibit the sale of tobacco products on worksite premises?	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
6. Provide financial incentives for being a current nonsmoker and for current smokers who are actively trying to quit tobacco by participating in a free or subsidized, evidence-based cessation program? Answer "yes" if, for example, your organization provides discounts on health insurance, additional life insurance for nonsmokers, or other benefits for nonsmokers and smokers who are actively trying to quit.	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
7. Provide health insurance coverage with free or subsidized out-of-pocket costs for FDA-approved <u>prescription</u> tobacco cessation medications? Answer "yes" if, for example, your organization provides coverage for inhalers, nasal sprays, bupropion (e.g., Zyban) or varenicline (e.g., Chantix).	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
8. Provide health insurance coverage with free or subsidized out-of-pocket costs for FDA-approved <u>over-the-counter</u> nicotine replacement products? Answer "yes" if, for example, your organization provides coverage for nicotine replacement gum, patches, or lozenges.	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
Your Worksite's Tobacco Use Score			_____
Maximum Tobacco Use Score			18

High Blood Pressure



During the past 12 months, did your worksite:		Yes	No	Score
1.	Provide free or subsidized blood pressure screening (beyond self-report) followed by directed feedback and clinical referral when appropriate?	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
2.	Provide educational materials on preventing and controlling high blood pressure? <i>Answer "yes" if, for example, your worksite offers brochures, videos, posters, or newsletters that address high blood pressure/pre-hypertension, either as a single health topic or along with other health topics.</i>	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
3.	Provide and promote <u>interactive educational programming</u> on preventing and controlling high blood pressure? <i>Answer "yes" if, for example, your worksite offers "lunch and learns," seminars, workshops, or classes that address high blood pressure/pre-hypertension. 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.</i>	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
4.	Provide and promote free or subsidized <u>lifestyle coaching/counseling or self-management programs</u> that equip employees with skills and motivation to set and meet their personal blood pressure management goals? <i>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.</i>	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
5.	Make blood pressure monitoring devices available with instructions for employees to conduct their own self assessments?	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
6.	Provide health insurance coverage with free or subsidized out-of-pocket costs for blood pressure control medications?	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
Your Worksite's High Blood Pressure Score				_____
Maximum High Blood Pressure Score				16

High Cholesterol



During the past 12 months, did your worksite:		Yes	No	Score
1.	Provide free or subsidized cholesterol screening (beyond self-report) followed by directed feedback and clinical referral when appropriate?	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
2.	Provide educational materials on preventing and controlling high cholesterol? <i>Answer "yes" if, for example, your worksite offers brochures, videos, posters, or newsletters that address high cholesterol, either as a single health topic or along with other health topics.</i>	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
3.	Provide and promote <u>interactive educational programming</u> on preventing and controlling high cholesterol? <i>Answer "yes" if, for example, your worksite offers "lunch and learns," seminars, workshops, or classes that address high cholesterol. 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.</i>	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
4.	Provide and promote free or subsidized <u>lifestyle coaching/counseling or self-management programs</u> that equip employees with skills and motivation to set and meet their personal cholesterol management goals? <i>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.</i>	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
5.	Provide health insurance coverage with free or subsidized out-of-pocket costs for cholesterol or lipid control medications?	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
Your Worksite's High Cholesterol Score				_____
Maximum High Cholesterol Score				13

Physical Activity



During the past 12 months, did your worksite:		Yes	No	Score
1.	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.	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
2.	Provide and promote <u>interactive educational programming</u> 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.	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
3.	Provide and promote free or subsidized <u>lifestyle coaching/counseling or self-management programs</u> that equip employees with skills and motivation to set and meet their personal physical activity goals? 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.	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
4.	Provide an exercise facility on site?	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
5.	Subsidize or discount the cost of on or off site exercise facilities?	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
6.	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.	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
7.	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.	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
8.	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.	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____

Continued

During the past 12 months, did your worksite:		Yes	No	Score
9.	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.	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
10.	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.	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
Your Worksite’s Physical Activity Score				_____
Maximum Physical Activity Score				22

Weight Management



During the past 12 months, did your worksite:		Yes	No	Score
1.	Provide free or subsidized body composition measurement (beyond self-report) followed by directed feedback and clinical referral when appropriate? Answer "yes" if, for example, your worksite offers periodic height and weight measurement, body mass index (BMI) scores, or other body fat assessments (beyond HRAs), plus follow-up recommendations. This may be offered as part of an occasional health fair or routine care at an on site clinic.	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
2.	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.	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
3.	Provide and promote <u>interactive educational programming</u> 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.	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
4.	Provide and promote free or subsidized <u>lifestyle coaching/counseling or self-management programs</u> that equip employees with skills and motivation to set and meet their personal weight management goals? 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.	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
Your Worksite's Weight Management Score				_____
Maximum Weight Management Score				8

Nutrition



During the past 12 months, did your worksite:		Yes	No	Score
1.	Provide places to purchase food and beverages? Answer "yes" if, for example, your worksite provides vending machines, cafeterias, snack bars, or other purchase points.	<input type="checkbox"/> (0 pts.)	<input type="checkbox"/> (0 pts.)	_____
IF NO, PLEASE SKIP TO QUESTION 8				
2.	Have and promote a written policy that makes healthier food and beverage choices available in cafeterias or snack bars? Answer "yes" if, for example, your worksite has a policy or contract that makes vegetables, fruit, fish, whole grain items, nuts, and legumes available in cafeterias and limits sugary beverages, unhealthy fats (saturated or trans fats), and highly-processed or high-sodium foods. This policy can be promoted to employees regularly through emails, newsletters, or signage in public places.	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
3.	Have and promote a written policy that makes healthier food and beverage choices available in vending machines or other vending outlets? Answer "yes" if, for example, your worksite has a policy or contract that makes nuts, whole grain items, trans fat-free/low-sodium snacks, vegetables, fruit, or unsweetened beverages available in vending machines. This policy can be promoted to employees regularly through emails, newsletters, or signage in public places.	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
4.	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.	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
5.	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)?	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
6.	Identify healthier (or less healthy) food and beverage choices with signs or symbols? Answer "yes" if, for example, your worksite puts a heart (♥) next to a healthy item or uses red-yellow-green color-coding to indicate the healthfulness of items in vending machines, cafeterias, snack bars, or other purchase points.	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
7.	Subsidize or provide discounts on healthy food and beverage choices available at the worksite (in vending machines, cafeterias, snack bars, or other purchase points)?	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
8.	Have and promote a written policy making healthy food and beverage choices available in break rooms, during meetings, conferences, or company sponsored events when food is served? Answer "yes" if, for example, the policy makes vegetables, fruits, unsweetened beverages, whole grain items, or trans fat-free/low-sodium snacks available during meetings. This policy can be promoted to employees regularly through emails, newsletters, or signage in public places.	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____

Continued

During the past 12 months, did your worksite:	Yes	No	Score
9. Offer or promote an on site or nearby farmers market or other arrangement where fresh fruits and vegetables are sold? This may include coordinating Community Supported Agriculture (CSA) or vendors/venues that are or are not operated by farmers.	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
10. 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.	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
11. Provide and promote <u>interactive educational programming</u> 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.	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
12. Provide and promote free or subsidized <u>lifestyle coaching/counseling or self-management programs</u> that equip employees with skills and motivation to set and meet their personal nutrition goals? Answer "yes" if these programs are provided in group or individual settings; 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.	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
13. 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.	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
14. 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.	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
Your Worksite's Nutrition Score			_____
Maximum Nutrition Score			24

Heart Attack and Stroke



During the past 12 months, did your worksite:

Yes No Score

1. Provide educational materials that address signs, symptoms, and emergency response to heart attack?
Answer "yes" if, for example, your worksite offers employees brochures, videos, or newsletters, or posts flyers in the common areas of your worksite that teach the signs and symptoms and appropriate response to heart attack.

☐ (2 pts.) ☐ (0 pts.) _____

2. Provide educational materials that address signs, symptoms, and emergency response to stroke?
Answer "yes" if, for example, your worksite offers employees brochures, videos, or newsletters, or posts flyers in the common areas of your worksite that teach the signs and symptoms and appropriate response to stroke.

☐ (2 pts.) ☐ (0 pts.) _____

3. Provide **and** promote interactive educational programming that addresses signs, symptoms, and emergency response to heart attack?
Answer "yes" if, for example, your worksite offers "lunch and learns," seminars, workshops, or classes that teach the signs and symptoms and appropriate response to heart attack. 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 pts.) ☐ (0 pts.) _____

4. Provide **and** promote interactive educational programming that addresses signs, symptoms, and emergency response to stroke?
Answer "yes" if, for example, your worksite offers "lunch and learns," seminars, workshops, or classes that teach the signs and symptoms and appropriate response to stroke. 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 pt.) ☐ (0 pts.) _____

5. Have an emergency response plan to address acute heart attack and stroke events?

☐ (1 pt.) ☐ (0 pts.) _____

6. Have an emergency response team trained to respond to acute heart attack and stroke events?
Answer "yes" if, for example, a formal or informal team is trained to respond.

☐ (2 pts.) ☐ (0 pts.) _____

7. Offer access to a nationally-recognized training course on Cardiopulmonary Resuscitation (CPR) that includes training on Automated External Defibrillator (AED) usage?

☐ (2 pts.) ☐ (0 pts.) _____

8. Have **and** promote a written policy that requires an adequate number of employees per floor, work unit, or shift, in accordance with pertinent state and federal laws, to be certified in CPR/AED?
This policy can be promoted to employees regularly through emails, newsletters, or signage in public places.

☐ (2 pts.) ☐ (0 pts.) _____

Continued

During the past 12 months, did your worksite:	Yes	No	Score
9. Have one or more functioning AEDs in place? IF NO, PLEASE SKIP TO END OF MODULE	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
10. Have an adequate number of AED units so that a person can be reached within 3-5 minutes of collapse?	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
11. Identify the location of AEDs with posters, signs, markers, or other forms of communication other than on the AED itself?	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
12. Perform maintenance or testing on all AEDs in alignment with manufacturer recommendations?	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
Your Worksite's Heart Attack and Stroke Score			_____
Maximum Heart Attack and Stroke Score			19

Prediabetes and Diabetes



During the past 12 months, did your worksite:		Yes	No	Score
1.	Provide free or subsidized prediabetes and diabetes health risk assessment (beyond self-report) and feedback, followed by blood screening (fasting glucose or A1c) and clinical referral when appropriate?	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
2.	Provide educational materials on prediabetes and diabetes? <i>Answer "yes" if, for example, your worksite offers brochures, videos, posters, or newsletters that address prediabetes and diabetes, including topics such as diet modification, physical activity, foot exams, and eye exams, either as a single health topic or along with other health topics.</i>	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
3.	Provide and promote <u>interactive educational programming</u> on preventing and controlling diabetes? <i>Answer "yes" if, for example, your worksite offers "lunch and learns," seminars, workshops, or classes that address prediabetes and diabetes control and prevention. 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.</i>	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
4.	Provide and promote free or subsidized intensive <u>lifestyle coaching/counseling</u> and follow-up monitoring for employees with prediabetes or diabetes? <i>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.</i>	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
5.	Provide and promote self-management programs for diabetes control? <i>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.</i>	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
6.	Provide health coverage with free or subsidized out-of-pocket costs for diabetes medications as well as supplies for diabetes management (e.g., glucose test strips, needles, monitoring kits)?	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____

Your Worksite's Prediabetes and Diabetes Score _____

Maximum Prediabetes and Diabetes Score **15**

Depression



During the past 12 months, did your worksite:

- | | Yes | No | Score |
|--|--------------------------------------|--------------------------------------|-------|
| 1. Provide free or subsidized clinical assessment for depression by a provider followed by directed feedback and clinical referral when appropriate?
Answer "yes" if these services are provided directly through your organization or indirectly through a health insurance plan. | <input type="checkbox"/>
(3 pts.) | <input type="checkbox"/>
(0 pts.) | _____ |
| 2. Provide access to a self-administered depression screening tool that provides a feedback report with recommendations for clinical action as needed?
Answer "yes" if, for example, these services are provided through a health risk assessment (HRA), health insurance plan, or employee assistance program (EAP). | <input type="checkbox"/>
(2 pts.) | <input type="checkbox"/>
(0 pts.) | _____ |
| 3. Provide educational materials on preventing, detecting, and treating depression?
Answer "yes" if, for example, your worksite offers brochures, videos, posters, or newsletters that address depression or depressive symptoms, either as a single health topic or along with other health topics. | <input type="checkbox"/>
(1 pt.) | <input type="checkbox"/>
(0 pts.) | _____ |
| 4. Provide and promote <u>interactive educational programming</u> on preventing, detecting, and treating depression?
Answer "yes" if, for example, your worksite offers "lunch and learns," seminars, workshops, or classes focused on reducing the risk factors for depression and reducing the stigma surrounding depression. 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. | <input type="checkbox"/>
(2 pts.) | <input type="checkbox"/>
(0 pts.) | _____ |
| 5. Provide and promote free or subsidized <u>lifestyle coaching/counseling or self-management programs</u> that equip employees with skills and motivation to set and meet their personal goals for managing depression?
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. | <input type="checkbox"/>
(3 pts.) | <input type="checkbox"/>
(0 pts.) | _____ |
| 6. Provide training for managers that improves their ability to recognize depression and refer employees to company/community resources for managing depression?
Note: Managers are not in a position to diagnose depression, only to recognize depressive symptoms and encourage employee to seek professional assistance. | <input type="checkbox"/>
(2 pts.) | <input type="checkbox"/>
(0 pts.) | _____ |
| 7. Provide health insurance coverage with free or subsidized out-of-pocket costs for depression medications? | <input type="checkbox"/>
(3 pts.) | <input type="checkbox"/>
(0 pts.) | _____ |

Your Worksite's Depression Score _____

Maximum Depression Score 16

Stress Management



During the past 12 months, did your worksite:		Yes	No	Score
1.	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.	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
2.	Provide and promote <u>interactive educational programming</u> 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.	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
3.	Provide and promote free or subsidized <u>lifestyle coaching/counseling or self-management programs</u> that equip employees with skills and motivation to set and meet their personal stress management goals? 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.	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
4.	Provide dedicated space that is quiet where employees can engage in relaxation activities, such as deep breathing exercises?	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
5.	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.	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
6.	Provide training for managers that improves their ability to recognize and reduce workplace stress-related issues? Answer "yes" if, for example, your worksite provides training on performance reviews, communication, personnel management, assertiveness, time management, or conflict resolution.	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
7.	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.	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
Your Worksite's Stress Management Score				_____
Maximum Stress Management Score				14

Alcohol and Other Substance Use



During the past 12 months, did your worksite:

Yes

No

Score

1. Have **and** promote a written policy banning alcohol and other substance use at the worksite?

Answer "yes" if, for example, your worksite has a written policy that bans alcohol and other substance use (including opioids) at the worksite or while operating a motor vehicle, requires universal drug testing (in appropriate safety-sensitive industries), or indicates options offered for assistance and referral to behavioral health services. This policy can be communicated to employees regularly through emails, newsletters, or signage in public places.

☐

(1 pt.)

☐

(0 pts.)

2. Provide access to alcohol and other substance use screening followed by brief intervention and referral for treatment when appropriate?

Answer "yes" if, for example, these services are provided through a health risk assessment (HRA), health insurance plan, and/or employee assistance program (EAP).

☐

(3 pts.)

☐

(0 pts.)

3. Provide educational materials that help workers understand the risks of alcohol and other substance use and guide them to receive help?

Answer "yes" if, for example, your worksite offers brochures, videos, posters, or newsletters that address alcohol and other substance use such as prescription or illicit opioids, either as a single health topic or along with other health topics.

☐

(1 pt.)

☐

(0 pts.)

4. Provide **and** promote interactive educational programming that integrates health promotion with substance use prevention?

Answer "yes" if, for example, your worksite offers health promotion "lunch and learns", seminars, workshops, or classes. These may address alcohol and other substance use either directly or indirectly through topics such as stress management, conflict resolution, managing multiple priorities, personal finance planning, and team-building.

☐

(2 pts.)

☐

(0 pts.)

5. Discourage or limit access to alcohol or use of company funds for alcohol at work-sponsored events?

Answer "yes" if, for example, your worksite limits (e.g., through tickets) the consumption of alcohol at on and off site meetings and events.

☐

(1 pt.)

☐

(0 pts.)

6. Provide a health plan with insurance benefits that include substance use disorder prevention and treatment?

Answer "yes" if, for example, your worksite health plan offers coverage for medication-assisted treatment without prior authorization and lifetime limits, while preventing overuse of addictive substances such as use of prescription opioids, use of illicit opioids, and use of illicitly-manufactured fentanyl (e.g., reimbursement for non-drug treatments for pain relief as a result of an injury such as exercise, physical therapy, and psychological therapies, use of drug utilization review, and pharmacy lock-in).

☐

(1 pt.)

☐

(0 pts.)

Your Worksite's Alcohol and Other Substance Use Score _____

Maximum Alcohol and Other Substance Use Score **9**

Sleep and Fatigue



During the past 12 months, did your worksite:		Yes	No	Score
1.	Have and promote a written policy related to the design of work schedules that aims to reduce employee fatigue? <i>Answer "yes" if, for example, your worksite has a policy related to self-scheduling, limiting the number of consecutive days or hours allowed to be worked, or specifying a minimum time interval between shifts.</i>	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
2.	Provide access to a self-administered sleep screening tool that provides a feedback report with recommendations for clinical action, as needed? <i>Answer "yes" if, for example, these services are provided through a health risk assessment (HRA), health insurance plan, or employee assistance program (EAP).</i>	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
3.	Provide educational materials that address sleep habits and treatment of common sleep disorders? <i>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.</i>	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
4.	Provide and promote <u>interactive educational programming</u> that addresses sleep habits and treatment of common sleep disorders? <i>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.</i>	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
5.	Provide training for managers to improve their understanding of the safety and health risks associated with poor sleep and their skills for organizing work to reduce the risk of employee fatigue?	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
6.	Offer solutions to discourage distracted or drowsy driving? <i>Answer "yes" if, for example, employees are given realistic expectations for mileage, adequate rest breaks, overnight stays after long trips, and limited distractions and work demands (e.g., phone calls/email) while driving.</i>	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
Your Worksite's Sleep and Fatigue Score				_____
Maximum Sleep and Fatigue Score				9

Musculoskeletal Disorders



During the past 12 months, did your worksite:		Yes	No	Score
1.	Have and promote a written policy that requires regular evaluation of the design of work spaces and job requirements? <i>Answer "yes" if, for example, the policy includes assessments of workstations, workloads, or repetitive tasks. This may be promoted to employees regularly through emails, newsletters, or signage in public places.</i>	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
2.	Conduct ergonomic assessments of work space design and equipment when problems are identified, or anticipated, to reduce the risk of musculoskeletal disorders? <i>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.</i>	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
3.	Make organizational changes to job design, when appropriate, to reduce the risk of musculoskeletal disorders? <i>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.</i>	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
4.	Provide educational materials on musculoskeletal disorders? <i>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.</i>	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
5.	Provide and promote interactive educational programming on musculoskeletal disorders? <i>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.</i>	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
6.	Provide training for managers that improves their ability to recognize potential risks for musculoskeletal disorders and refer employees to company/community resources?	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
7.	Provide health insurance that includes appropriate access to therapies and treatment for musculoskeletal disorders? <i>Answer "yes" if, for example, coverage options are aligned with best practices recommended by the Occupational Safety & Health Administration (OSHA), American College of Occupational & Environmental Medicine (ACOEM), or American College of Rheumatology.</i>	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____

Your Worksite's Musculoskeletal Disorders Score _____

Maximum Musculoskeletal Disorders Score **9**

Occupational Health and Safety



During the past 12 months, did your worksite:	Yes	No	Score
1. Have and promote a written policy on injury prevention and occupational health and safety? This policy could be promoted to employees regularly through emails, newsletters, or signage in public places.	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
2. Provide opportunities for employee input on hazards and solutions, and implement these solutions when appropriate? Answer "yes" if, for example, there were all-hands meetings, surveys, or focus groups for discovering and solving job health and/or safety issues.	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
3. Encourage employees to report uncomfortable, unsafe, or hazardous working conditions to a supervisor, occupational health and safety professional or through another reporting channel? Answer "yes" if, for example, employees are directed to report workplace injuries, bullying, or sexual harassment using a designated hotline.	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
4. Carefully investigate the primary cause of any reported work-related illnesses or injuries and take specific actions to prevent similar events in the future?	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
5. Provide educational materials about health and safety at work? Answer "yes" if, for example, your worksite provides brochures, videos, posters, newsletters, or timely reminders for issues such as hand washing, taking breaks to reduce eye strain, or wearing personal protective equipment.	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
6. Provide and promote <u>interactive educational programming</u> on how to avoid accidents or injury on the job? Answer "yes" if, for example, your worksite offers "lunch and learns," seminars, workshops, or classes that address injury prevention. These sessions can be provided in-person or virtually (online, telephonically, mobile app); on or off site; through vendors, on site staff, or other practitioners.	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
7. Have a process in place for measuring and , if necessary, improving worksite air quality? Answer "yes" if, for example, your worksite routinely tests heating, ventilation, and air conditioning (HVAC) systems, vacuums carpets, and controls moisture levels to prevent mold growth.	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
8. Make adjustments or provide resources where necessary to reduce the risk of eye injury or vision impairment? Answer "yes" if, for example, your worksite provides proper lighting to work areas, protective eyewear in hazardous environments (e.g., factories, construction sites) or ergonomic setup at work stations.	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
9. Proactively support employees returning to work after illness or injury? Answer "yes" if, for example, your organization provides temporary job modifications or phased return-to-work options.	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
Your Worksite's Occupational Health and Safety Score			_____
Maximum Occupational Health and Safety Score			18

Vaccine-Preventable Diseases



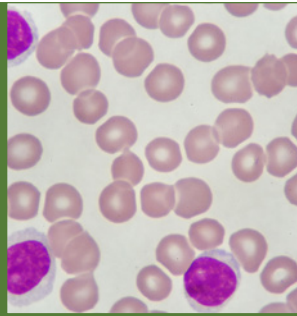
During the past 12 months, did your worksite:		Yes	No	Score
1.	Provide health insurance coverage with free or subsidized <u>influenza</u> (flu) vaccinations?	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
2.	Provide free or subsidized <u>influenza</u> vaccinations at your worksite? Answer "yes" if this is offered to employees on site, through a temporary vaccine clinic run by an outside organization, internal occupational health staff, or other arrangement.	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
3.	Conduct a seasonal <u>influenza</u> vaccination campaign that includes educational materials or programming? Answer "yes" if, for example, your worksite offers brochures, videos, posters, newsletters, timely reminders, or sessions that address the benefits of flu vaccinations, either as a single health topic or along with other health topics.	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
4.	Provide health insurance coverage with free or subsidized vaccinations for <u>illnesses other than influenza</u> ? Answer "yes" if, for example, your worksite provides coverage for pneumococcal; tetanus, diphtheria, and pertussis (Tdap); or Zoster (shingles) vaccines.	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
5.	Provide free or subsidized vaccinations at your worksite for <u>illnesses other than influenza</u> ? Answer "yes" if, for example, your worksite offers employees pneumococcal; tetanus, diphtheria, and pertussis (Tdap); or Zoster (shingles) vaccines through a temporary vaccine clinic run by an outside organization, internal occupational health staff, or other arrangement.	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
6.	Promote <u>vaccinations other than influenza</u> with educational materials or educational programming? Answer "yes" if, for example, your worksite offers brochures, videos, posters, newsletters, timely reminders, or sessions that provide information on adult vaccine requirements and benefits, either as a single health topic or along with other health topics.	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
7.	Promote good hand hygiene in the worksite? Answer "yes" if, for example, your worksite provides soap, water, hand sanitizer, and educational materials in strategic workplace locations such as bathrooms, breakrooms, doors, elevators, or other strategic workplace locations.	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
Your Worksite's Vaccine-Preventable Diseases Score				_____
Maximum Vaccine-Preventable Diseases Score				14

Maternal Health and Lactation Support



During the past 12 months, did your worksite:		Yes	No	Score
1.	Have and promote a written policy on breastfeeding for employees? Answer "yes" if, for example, this policy is communicated at the time of hiring and/or at the time of maternity leave planning.	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
2.	Provide a private space (other than a restroom) that may be used by female employees to express breast milk? Answer "yes" if, for example, your worksite has a private space with an electrical outlet, comfortable chair, and sink.	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
3.	Provide flexible break times to allow female employees to pump breast milk?	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
4.	Provide access to a breast pump at the worksite? Answer "yes" if, for example, your worksite provides on site access to a breast pump or offers insurance coverage that subsidizes the purchase of a pump for personal use.	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
5.	Provide and promote maternal health and breastfeeding support groups, educational classes, or consultations? Answer "yes" if these programs are provided in-person or virtually (online, telephonically, mobile app); on or off site; through vendors, peer and/or professional consultants, on site staff, or health insurance plans/programs.	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
6.	Offer paid parental leave, separate from any accrued sick leave, annual leave, or vacation time?	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
7.	Offer health insurance coverage with no or subsidized out-of-pocket costs for pre- and postnatal care?	<input type="checkbox"/> (3 pts.)	<input type="checkbox"/> (0 pts.)	_____
Your Worksite's Maternal Health and Lactation Support Score				_____
Maximum Maternal Health and Lactation Support Score				15

Cancer



During the past 12 months, did your worksite:		Yes	No	Score
1.	Offer free or subsidized cancer screenings on site? Answer "yes" if, for example, your worksite offered cancer screenings (e.g., stool test kits, mobile mammography vans, or skin cancer screenings) as part of a health campaign or as part of routine care at an on site clinic.	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
2.	Provide educational materials that address skin, breast, cervical, or colorectal cancer prevention? Answer "yes" if, for example, your worksite offers brochures, videos, posters, reminders, or newsletters that promote sun protection, evidence-based vaccinations, or evidence-based cancer screenings, either as a single health topic or along with other health topics.	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
3.	Provide and promote <u>interactive educational programming</u> on cancer prevention? Answer "yes" if, for example, your worksite offers "lunch and learns," seminars, workshops, or classes that address prevention, early identification, and survivorship. 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.	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
4.	Monitor and take action to reduce employee exposure to known carcinogens within the workplace? Answer "yes" if, for example, your worksite takes action to limit exposures to radon, asbestos, and other carcinogens that may exist at the worksite, and uses alternative materials (i.e., "green chemistry") wherever possible.	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
5.	Provide health insurance coverage with free or subsidized evidence-based cancer screenings and vaccinations? Answer "yes" if, for example, your insurance covers the cost of breast, cervical, and colorectal cancer screening, and HPV and Hepatitis B vaccines.	<input type="checkbox"/> (2 pts.)	<input type="checkbox"/> (0 pts.)	_____
6.	Do you have outdoor workers? IF NO, PLEASE SKIP TO THE END OF THE MODULE.	<input type="checkbox"/> (0 pts.)	<input type="checkbox"/> (0 pts.)	_____
7.	Have and promote a written policy that includes measures to reduce sun exposure for outdoor workers? Answer "yes" if, for example, the policy encourages rotation of workers in ultraviolet (UV) intense positions, scheduling of tasks to avoid high-exposure periods, and the use of sun protective clothing, hats, and sunscreen. This policy can be promoted to employees regularly through emails, newsletters, or signage in public places.	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____
8.	Provide employees working outdoors with supports for sun protection, such as shade, hats, or sunscreen?	<input type="checkbox"/> (1 pt.)	<input type="checkbox"/> (0 pts.)	_____

Your Worksite's Cancer Score _____

Maximum Cancer Score **11**

Summary of Scores

Use the following table to summarize your scores for each module of the *CDC ScoreCard*.

Module	Total Points Possible	Your Worksite's Score	Percentage of Total
Organizational Supports	44	_____	_____
Tobacco Use	18	_____	_____
High Blood Pressure	16	_____	_____
High Cholesterol	13	_____	_____
Physical Activity	22	_____	_____
Weight Management	8	_____	_____
Nutrition	24	_____	_____
Heart Attack and Stroke	19	_____	_____
Prediabetes and Diabetes	15	_____	_____
Depression	16	_____	_____
Stress Management	14	_____	_____
Alcohol and Other Substance Use	9	_____	_____
Sleep and Fatigue	9	_____	_____
Musculoskeletal Disorders	9	_____	_____
Occupational Health and Safety	18	_____	_____
Vaccine-Preventable Diseases	14	_____	_____
Maternal Health and Lactation Support	15	_____	_____
Cancer	11	_____	_____
Total	294	_____	_____

Using the CDC Worksite Health ScoreCard to Improve Your Worksite's Programs

The *CDC ScoreCard* is intended to assist you in prioritizing strategies as you set both short- and long-term goals for your worksite's comprehensive health promotion program. The following steps may assist you in evaluating your scores and taking action.

1. Use your worksite's scores as a planning tool.
 - Your scores are intended to assist you in prioritizing strategies as you set short- and long-term goals for developing your worksite's comprehensive health promotion program.
 - Review your scores to identify potential gaps in your worksite's health promotion program (that is, topic areas where your organization currently has a low score, which may indicate fewer strategies are in place).
2. Take the time to assess your employees' needs and interests to further determine what strategies to prioritize. [Assessment](#) can take many forms.
 - Learn informally through conversations with team members.
 - Send an email asking for input, opinions, and ideas.
 - Elicit information more formally by using data available from your health plan, administering surveys, or conducting audits. For example, aggregated health risk scores identify key issues facing your employee population, structured surveys can identify activities that employees would be most likely to participate in, and an audit of key work areas can identify potential health and safety risks.
3. Determine and prioritize which strategies your worksite will implement based on the needs and wants of your employees.
 - Identify the highest impact strategies not currently in place at your worksite.
 - Use this information and your scores to prioritize future strategies that are relevant, feasible, and consistent with your organization and employee needs, health issues, and health promotion budget.
 - Identify which of your priority strategies are feasible for short- or long-term accomplishments. The "Action Planning" module of the *CDC ScoreCard* [online system](#) has tools to help employers prioritize and create a plan for success.
 - Create a budget and timeline to guide implementation activities to keep your worksite on track.
4. Seek resources and technical assistance that can help you implement chosen strategies.
 - Appendix B contains a list of recommended resources organized by health topic.
 - The [CDC Workplace Health Resource Center](#) is a one-stop shop for workplace health promotion that contains credible tools and step-by-step resources employers can use to tailor a health promotion program to their unique worksite needs.
 - The [CDC Workplace Health Promotion](#) Web site has several informational resources that can help you build and maintain a comprehensive health promotion program, including a [list of organizations](#) available to provide guidance.
 - Your State Health Department may be able to provide assistance with your worksite health promotion program, including technical guidance around program design, monitoring, and evaluation. Their contact information is available in the National Association of Chronic Disease Directors' [Membership Directory](#).
5. Create a baseline report to track progress in adopting these strategies over time.
6. Inform and educate employees and management about your organization's health promotion program by presenting and disseminating your worksite's *CDC ScoreCard* scores.
7. Complete the survey again in a year to document and report progress. You also may evaluate how your *CDC ScoreCard* scores correlate with improvements in aggregated health risk scores among employees who were exposed to the new strategies.

Tracking Your Scores Over Time

As part of recent updates to the *CDC ScoreCard*, the total number and type of questions, and total number of possible points for some modules have changed. If you would like to compare your scores against your worksite's past scores, we recommend that you convert the raw scores to percentages of total possible points. The following table may assist you in this exercise.

Module	Current Total Points Possible	Your Worksite's Score	Percentage of Points Earned	Past Total Points Possible	Your Worksite's Score	Percentage of Points Earned
Organizational Supports	44	_____	_____	33	_____	_____
Tobacco Use	18	_____	_____	19	_____	_____
High Blood Pressure	16	_____	_____	17	_____	_____
High Cholesterol	13	_____	_____	15	_____	_____
Physical Activity	22	_____	_____	24	_____	_____
Weight Management	8	_____	_____	12	_____	_____
Nutrition	24	_____	_____	21	_____	_____
Heart Attack and Stroke	19	_____	_____	21*	_____	_____
Prediabetes and Diabetes	15	_____	_____	15	_____	_____
Depression	16	_____	_____	18	_____	_____
Stress Management	14	_____	_____	14	_____	_____
Alcohol and Other Substance Use	9	_____	_____	N/A	_____	_____
Sleep and Fatigue	9	_____	_____	N/A	_____	_____
Musculoskeletal Disorders	9	_____	_____	N/A	_____	_____
Occupational Health and Safety	18	_____	_____	22	_____	_____
Vaccine-Preventable Diseases	14	_____	_____	18	_____	_____
Maternal Health and Lactation Support	15	_____	_____	15	_____	_____
Cancer	11	_____	_____	N/A	_____	_____
Total	294	_____	_____	264	_____	_____

* Two sections of the tool ("Signs and Symptoms of Heart Attack and Stroke" and "Emergency Response to Heart Attack and Stroke") were combined to form the current Heart Attack and Stroke section.

Comparing Your Score with Other Employers

The size of a worksite often presents distinct differences—for example, small employers typically do not have the same resources as large employers to devote to health promotion efforts. Therefore, we present average scores according to worksite size for your reference. Your worksite should strive to achieve or exceed these scores, but also consider that our study sample may not be representative of all employers and not every strategy may be relevant or feasible for your worksite. Use the results from the *CDC ScoreCard* to identify and prioritize relevant strategies to meet the unique health and safety needs of your employee population. Refer to the Resources for Action section in Appendix B for resources to help guide the implementation of a comprehensive program.

About the Validation Study

Two knowledgeable employees (e.g., worksite wellness practitioners, human resources specialists or benefits managers) from 93 worksites across the U.S. independently completed a draft version of the updated *CDC ScoreCard*. The level of concordance (i.e., index of percentage agreement) between two survey responses from each worksite was then examined. Telephone interviews and site visits were also conducted with a random sample of 14 employers that ranged in size and industry type. Following the analysis, modifications were made to the survey items to improve comprehension and ease of use while maintaining the content validity of the original questions. More details are available in [The CDC Worksite Health ScoreCard Scoring Methodology: Evidence and Impact Ratings and Supporting Citations](#).

The table below shows the average scores from the validation study by module and worksite size.

Module	Total Points Possible	Average Score All Worksites	Average Score Very Small Worksites (≤99 employees)	Average Score Small Worksites (100-249 employees)	Average Score Medium Worksites (250-749 employees)	Average Score Large Worksites (750+ employees)
Organizational Supports	44	32.4	30.3	30.0	32.2	34.7
Tobacco Use	18	12.8	9.8	11.8	14.6	14.1
High Blood Pressure	16	11.0	10.0	9.7	11.1	12.1
High Cholesterol	13	8.7	8.3	7.6	9.3	9.0
Physical Activity	22	14.5	12.5	11.9	14.6	16.7
Weight Management	8	5.9	5.0	5.1	6.4	6.5
Nutrition	24	11.1	7.5	9.4	12.2	13.4
Heart Attack and Stroke	19	12.5	10.6	10.6	13.5	13.9
Prediabetes and Diabetes	15	11.1	10.4	10.1	11.4	11.7
Depression	16	9.6	8.0	7.6	10.6	10.9
Stress Management	14	8.7	7.9	7.2	9.7	9.3
Alcohol and Other Substance Use	9	6.1	5.4	5.3	7.4	6.2
Sleep and Fatigue	9	3.4	3.3	2.2	3.7	3.1

Continued

Module	Total Points Possible	Average Score All Worksites	Average Score Very Small Worksites (≤99 employees)	Average Score Small Worksites (100-249 employees)	Average Score Medium Worksites (250-749 employees)	Average Score Large Worksites (750+ employees)
Musculoskeletal Disorders	9	5.0	3.4	4.2	5.7	5.9
Occupational Health and Safety	18	14.3	12.4	13.7	15.3	15.3
Vaccine-Preventable Diseases	14	11.4	9.5	11.2	12.5	12.0
Maternal Health and Lactation Support	15	9.6	6.8	9.0	10.6	11.1
Cancer	11	5.7	4.5	4.7	6.5	6.3
Total*	294	194	166	172	208	212

* Note: Scores rounded to nearest whole number

References

1. Watson NF, Badr MS, Belenky G, et al. Recommended amount of sleep for a healthy adult: a joint consensus statement of the American Academy of Sleep Medicine and Sleep Research Society. *Sleep*. 2015;38(6):843–844.
2. Centers for Disease Control and Prevention (CDC). Sleep and Chronic Disease. 2013. https://www.cdc.gov/sleep/about_sleep/chronic_disease.html Accessed October 25, 2017.
3. de Mello MT, Narciso FV, Tufik S, et al. Sleep disorders as a cause of motor vehicle collisions. *Int J Prev Med*. 2013;4(3), 246–257.
4. Uehli K, Mehta AJ, Miedinger D, et al. Sleep problems and work injuries: a systematic review and meta-analysis. *Sleep Med Rev*. 2014;18(1), 61–73.
5. Centers for Disease Control and Prevention (CDC). Alcohol and public health: alcohol-related disease impact (ARDI). Average for United States 2006–2010 Alcohol-Attributable Deaths Due to Excessive Alcohol Use. 2013.
6. https://nccd.cdc.gov/DPH_ARDI/Default/Report.aspx?T=AAM&P=f6d7eda7-036e-4553-9968-9b17ffad620e&R=d7a9b303-48e9-4440-bf47-070a4827e1fd&M=8E1C5233-5640-4EE8-9247-1ECA7DA325B9&F=&D= Accessed October 25, 2017.
7. World Health Organization (WHO). Global status report on alcohol and health 2018. CC BY-NC-SA 3.0 IGO. http://www.who.int/substance_abuse/publications/global_alcohol_report/gsr_2018/en/. Accessed November 12, 2018.
8. Center for Behavioral Health Statistics and Quality. Key substance use and mental health indicators in the United States: results from the 2015 National Survey on Drug Use and Health. HHS Publication No. SMA 16-4984, NSDUH Series H-51. <http://www.samhsa.gov/data/>. 2016.
9. Ames GM & Bennett JB. Prevention interventions of alcohol problems in the workplace: A review and guiding framework. *Alc Res Health*. 2011;34(2):175–187.
10. Webb G, Shakeshaft A, Sanson-Fisher R, & Havard A. A systematic review of workplace interventions for alcohol-related problems. *Addiction*. 2009;104(3):365–377.
11. National Institute for Occupational Safety and Health (NIOSH). “Musculoskeletal Disorders.” 2015. <https://www.cdc.gov/niosh/programs/msd/> Accessed June 2016.
12. Yazdani A, Neumann WP, Imbeau D, et al. How compatible are participatory ergonomics programs with occupational health and safety management systems? *Scand J Work Environ Health*. 2015;41(2):111–123.
13. Centers for Disease Control and Prevention (CDC). Deaths and Mortality. <https://www.cdc.gov/nchs/fastats/deaths.htm>. Accessed November 12, 2018.
14. American Cancer Society. Cancer Facts & Figures 2013. Atlanta: American Cancer Society; 2013.
15. Baicker K, Cutler D, Song Z. Workplace wellness programs can generate savings. *Health Aff (Millwood)*. 2010;29(2):304–11.
16. Goetzel RZ, Ozminkowski RJ. The health and cost benefits of work site health-promotion programs. *Ann Rev Pub Health*. 2008;29:303–323.
17. Soler RE, et al. A systematic review of selected interventions for worksite health promotion: the assessment of health risks with feedback. *Am J Prev Med*. 2010;38(2):S237–S262.
18. Chapman LS. Meta-evaluation of worksite health promotion economic return studies: 2012 update. *Am J Health Promot*. 2012;26(4):1–12.
19. Cancelliere C, et al. Are workplace health promotion programs effective at improving presenteeism in workers? A systematic review and best evidence synthesis of the literature. *BMC Pub Health*. 2011;11(1):395.
20. Osilla KC, et al. Systematic review of the impact of worksite wellness programs. *Am J Managed Care*. 2012;18(2):e68–81.
21. Linnan L, Bowling M, Childress J, et al. Results of the 2004 National Worksite Health Promotion Survey. *Am J Pub Health*. 2008;98:1503–1509.
22. Goetzel RZ, Shechter D, Ozminkowski RJ, et al. Promising practices in employer health and productivity management efforts: findings from a benchmarking study. *J Occup Environ Med*. 2007;49(2):111–130.
23. Centers for Disease Control and Prevention (CDC). Workplace health program definition and description. <https://www.cdc.gov/workplacehealthpromotion/pdf/workplace-health-program-definition-and-description.pdf>. Accessed November 1, 2018.

Appendix A. Frequently Asked Questions

History and Development of the CDC ScoreCard

What is the history of the CDC ScoreCard, and how was it originally developed?

The *CDC ScoreCard* was originally developed and released by CDC's Division for Heart Disease and Stroke Prevention in 2012, in collaboration with the Emory University Institute for Health and Productivity Studies (IHPS); the Research Triangle Institute; the CDC National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP) Workplace Workgroup; and an expert panel of federal, state, academic, and private sector representatives. In developing the original tool, the following activities were conducted:

- Examined existing worksite inventories and resources that address heart disease and stroke prevention.^{1–12}
- Identified reliable and valid questions from the Heart Check^{6,13} and Heart Check Lite assessment tools for use in the *CDC ScoreCard*.
- Identified new topics and questions to add to the tool that were derived from the worksite literature and from surveys that state heart disease and stroke prevention programs had previously used in worksites.
- Pretested the tool with nine employers in 2008, nine employers in 2010, and more than 70 worksite health promotion practitioners throughout the country to help ensure that the tool was clear, easy to understand, and simple to complete (these employers were not the same as those included in the main study).
- Revised the tool on the basis of feedback from these groups.
- Weighted each question on the basis of expert ratings of the level of scientific evidence and health impact of items on health behavior.
- Field tested the tool with a new sample of 93 worksites of various sizes for validity and reliability and for the feasibility of adopting the strategies highlighted in the tool.
- Revised the tool again on the basis of feedback from the 93 employers.
- Edited and submitted the final tool and a *CDC ScoreCard* manual for public release.

Has the CDC ScoreCard been updated since its release in 2012?

Yes, the *CDC ScoreCard* was updated in 2014 using procedures similar to those used during the creation of the original scorecard. The 2014 update to the *CDC ScoreCard* included four new modules (*Vaccine-Preventable Diseases*, *Lactation Support*, *Occupational Health and Safety*, and *Community Resources*). The management and organizational home of the *CDC ScoreCard* was also moved to the Division of Population Health in CDC's National Center for Chronic Disease Prevention and Health Promotion.

How was the CDC ScoreCard updated to the current 2019 version?

An approach similar to the original method was followed to update the *CDC ScoreCard*. For the current version, the CDC Workplace Health Program in the Division of Population Health, National Center for Chronic Disease Prevention and Health Promotion collaborated with IBM Watson Health; the Johns Hopkins University Institute for Health and Productivity Studies (IHPS); and an expert panel of federal, state, academic, and private sector representatives. To update the tool, the team conducted the following activities:

- Examined the literature base underlying all questions in the 2014 *CDC ScoreCard*; documented recommendations for modifying the text, evidence rating, and impact rating of existing questions and for adding new questions within the original modules.
- Held interviews with industry experts and surveyed the literature to identify new modules and questions on topics that were not included in previous versions of the *CDC ScoreCard*. This step was conducted to ensure that the tool remains timely and addresses the current and emerging needs of the American workforce.

- Reviewed the questions for each module with a module-specific subject matter expert (SME) panel composed of federal, state, academic, and private sector representatives, and pretested the tool with nine employers.
- Revised the tool on the basis of feedback from these groups.
- Weighted each question on the basis of expert ratings of the level of scientific evidence and health impact of items on intended health behavior.
- Field tested the tool with a new sample of 93 worksites of various sizes for validity and reliability and determined the feasibility of adopting the strategies highlighted in the tool.
- Revised the tool again on the basis of feedback from the 14 worksites that participated in cognitive interviews and site visits to provide in-depth information following field testing.
- Edited and submitted the final tool and this *CDC ScoreCard* manual for public release.

Survey Completion

We target some but not all of the modules (health topics) that are listed in the *CDC ScoreCard*. Do I need to complete the whole thing?

It is not necessary to complete the entire survey. You can complete the sections that are of most interest to you at this time. However, if you are completing the *CDC ScoreCard* in the online system, you must complete all modules if you wish to receive your company's personal benchmark report. The data from your *CDC ScoreCard* and from other users in the system are used to generate the benchmarking averages. Thus, fully completed ScoreCards are needed to create accurate comparisons between employers of different sizes. Although your organization may not be addressing some of the health topics in the *CDC ScoreCard* now, you may want to in the future. The annual benchmark reports will help you track your program's growth over time.

We've taken the initial survey and our scores indicate that we're doing better in some areas than others. Where do we start?

Your *CDC ScoreCard* can help you decide which steps to take next. First, determine the areas where your worksite scores could improve the most. Once you've identified one or more areas on which to focus (e.g., tobacco use), review the point values assigned to each of the strategies. The higher point values indicate that a strategy is both effective and strongly supported by scientific evidence. These are the strategies that are likely to yield the best results. Of course, you also must consider whether a particular strategy is feasible for your organization and will address your employees' health needs and interests. Consider costs, ease of implementation, and your organization's needs. After evaluating the potential effectiveness and feasibility of each of the strategies, you will be in a better position to prioritize your next steps. The *CDC ScoreCard* Action Planning module in the [online system](#) has categorized each *CDC ScoreCard* strategy with these considerations in mind.

See the section below titled *More Information and Resources About Worksite Health Promotion* for additional suggestions.

How often should we complete the survey?

The survey is intended to help you establish a baseline for your current health promotion programs and to identify areas where it would be beneficial to add programs, policies, or practices. The survey also is intended to help you measure your progress over time, so you may want to retake it at least annually.

We had a program three years ago, but we have since discontinued it. Does that still count?

No. The *CDC ScoreCard* is designed to measure health promotion information currently in place (e.g., on a Web site) or activities that have occurred within the last 12 months (e.g., walking challenges).

I don't understand some of the terminology in the questions. Where can I go for more information?

Appendix C contains a glossary that defines the key words and phrases used in the *CDC ScoreCard*.

Comparing Results from the 2012, 2014, and 2019 Versions of the CDC ScoreCard

Some questions that were in the previous versions of the survey no longer are included, whereas others have been newly added. How do I compare my scores across versions to determine whether my worksite health program has improved?

We recommend that you convert the raw scores for each module to percentages of total possible points. The table on page 41 may assist you in this exercise. If you choose to complete the *CDC ScoreCard* using the [online system](#), these metrics will be provided in your summary benchmarking report.

More Information and Resources About Worksite Health Promotion

Are there organizations that can help me develop and improve my worksite health program?

Yes. You can contact your state health department for technical assistance with your worksite health promotion program. State health departments can be valuable resources for offering additional tools and resources as well as for providing technical guidance about program design, implementation, and evaluation. You also can check with your local health departments for more information. Contact information for your state program is found on the following Web sites:

- Public Health Resources: State or Territorial Health Departments
<https://healthfinder.gov/FindServices/SearchContext.aspx?show=1&topic=820>
- Occupational Safety and Health Contacts at State and Territorial Health Departments
www.cdc.gov/niosh/statosh.html
- National Association of Chronic Disease Directors Member Directory
www.chronicdisease.org/search/

Where else can I go for information about worksite health?

Appendix B includes links and brief descriptions of resources that can help you through the four phases of developing a workplace health program: (1) assessment, (2) planning and management, (3) implementation, and (4) evaluation.¹⁴

Additionally, the [CDC Workplace Health Resource Center \(WHRC\)](#) provides resources to support and advance workplace health promotion in organizations working to improve employee well-being. The WHRC addresses relevant and emerging topics that affect organizations' workplace health promotion programs such as leadership commitment, employee engagement, emotional health, and smoking cessation. Employers, state public health departments, business health associations, and academic communities provided input for this comprehensive online hub. The Web site offers assessment tools, step-by-step guides, visual aids, case studies, engagement strategies, and other information.

Frequently Asked Questions Supporting Citations

1. Pronk N, Allen C. A culture of health: Creating and sustaining supportive organizational environments for health. In Pronk N, ed. *ACSM's Worksite Health Handbook*. 2nd ed. Champaign, IL: Human Kinetics, Inc.; 2009:224-30.
2. Goetzel R, Kahr T, Aldana S, Kenny G. An evaluation of Duke University's Live for Life health promotion program and its impact on employee health. *Amer J Pub Health*. 1996;10(5):340-2.
3. Nyberg A, Alfredsson L, Theorell T, Westerlund H, Vahtera J, Kivimäki M. Managerial leadership and ischaemic heart disease among employees: the Swedish WOLF study. *Occup Environ Med*. 2009;66(1):51-5.
4. National Institute of Occupational Safety and Health (NIOSH). Essential Elements of Effective Workplace Programs and Policies for Improving Worker Health and Wellbeing. 2008. <http://www.cdc.gov/niosh/docs/2010-140/pdfs/2010-140.pdf>. Accessed August 15, 2017.
5. Westerlund H, Nyberg A, Bernin P, et al. Managerial leadership is associated with employee stress, health, and sickness absence independently of the demand-control-support model. *Work*. 2010;37(1):71-9.
6. Volpp KG, John LK, Troxel AB, Norton L, Fassbender J, Loewenstein G. Financial incentive-based approaches for weight loss. *JAMA*. 2008;300(22):2631-7.
7. Matson-Koffman D, Lee JW, Hopp JW. The impact of incentives and competitions on participation and quit rates in worksite smoking cessation programs. *Am J Health Promot*. 1993;7(4):270-80, 295.
8. VanWormer J, Pronk N. Rewarding change: Principles for implementing worksite incentive programs. In Pronk N, ed. *ACSM's Worksite Health Handbook*. 2nd ed. Champaign, IL: Human Kinetics, Inc.; 2009:239-247.
9. Tsai AG, Wadden TA. Systematic review: an evaluation of major commercial weight loss programs in the United States. *Ann Intern Med*. 2005;142(1):56-66.
10. Poole K, Kumpfer K, Pett M. The impact of an incentive-based worksite health promotion program on modifiable health risk factors. *Am J Health Promot*. 2001;16(1):21-26.
11. Blake S, Caspersen C, Finnegan J, Crow R, Mittlemark M, Ringhofer K. The shape up challenge: a community-based worksite exercise competition. *Am J Health Promot*. 1996;11(1):23.
12. Cahill K, Perera R. Competitions and incentives for smoking cessation. *Cochrane Database Syst Rev*. 2008;4:CD004307.
13. Westerlund H, Nyberg A, Bernin P, et al. Managerial leadership is associated with employee stress, health, and sickness absence independently of the demand-control-support model. *Work*. 2010;37(1):71-9.
14. U.S. Centers for Disease Control and Prevention. Workplace Health Model. Available at <https://www.cdc.gov/workplacehealthpromotion/model/index.html>. Accessed August 8, 2017.

Appendix B. Resources for Action

Finding Help as You Develop and Promote Your Workplace Health Program

The *CDC ScoreCard* is designed to be used in conjunction with other CDC guidance documents, such as [CDC's Successful Business Strategies to Prevent Heart Disease and Stroke Toolkit](#). This toolkit provides information, materials, tools, and resources that employers can use in developing comprehensive heart disease and stroke worksite programs and preventive services.

The National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP) [Workplace Health Promotion](#) Web site contains information, tools, guidelines, and resources to guide employers on ways to establish or improve their worksite programs for most of the health topics covered in the *CDC ScoreCard*. This includes the [CDC Workplace Health Resource Center \(WHRC\)](#), a one-stop shop that gives employers resources to create a healthy work environment. It has credible tools and step-by-step resources employers can use to tailor a health promotion program to their unique worksite needs.

Module-specific resources are recommended below. Click on the title to link to the resource itself.

Organizational Supports

[Workplace Health Promotion: Planning/Workplace Governance](#)

Developed by: Centers for Disease Control and Prevention

Resource description: This webpage describes organizational strategies that provide the infrastructure to ensure program objectives are achieved, employee health risks are appropriately managed, and the company's resources are used responsibly. It includes information on leadership support, wellness councils, and committees that can offer assistance, health improvement action plans, dedicated resources, communications, and data on existing programs.

[Making Health Communication Programs Work](#)

Developed by: National Cancer Institute

Resource description: This planning guide provides information on every phase of creating health communications programs, from initial planning steps to program evaluation and assessment.

[From Evidence to Practice: Workplace Wellness that Works](#)

Developed by: Johns Hopkins Bloomberg School of Public Health

Resource description: This report is a comprehensive, evidence-based guide to help employers design and implement a new workplace wellness program or evaluate an existing program. The guide includes real-world recommendations on the design, implementation, and evaluation of workplace health promotion programs with specific examples for common health conditions.

[Building Evidence for Health: The 9 Foundations of a Healthy Building](#)

Developed by: Harvard T.H. Chan School of Public Health

Resource description: This report describes the nine elements of healthy building design, which include ventilation, lighting, noise, and other critical design features that promote increased performance among the building's occupants.

Tobacco Use

Tips from Former Smokers

Developed by: Centers for Disease Control and Prevention

Resource description: This Web site is focused on providing tools and educational resources to help promote tobacco cessation. Links to videos, posters, and buttons are included, as well as information about the effect of smoking on other health conditions and impacts of the Tips program.

Guidance on Establishing Programs Designed to Help Employees Stop Using Tobacco

Developed by: Office of Personnel Management

Resource description: This webpage provides a comprehensive, three-part guide for employers who are interested in creating and maintaining a tobacco cessation program. The guide includes information on program funding and development, as well as a checklist for program assessment.

Tobacco Cessation

Developed by: Kaiser Permanente

Resource description: This webpage provides tips on conducting a needs assessment for tobacco cessation programming, in addition to a program implementation toolkit and links to external resources.

CEO Roundtable Playbook: Tobacco Cessation

Developed by: American Heart Association

Resource description: This informational brief provides case studies and lessons learned from organizations that have implemented various types of tobacco cessation programs.

High Blood Pressure

Blood Pressure Interventions

Developed by: Centers for Disease Control and Prevention

Resource description: This webpage provides information on high blood pressure, including trends and statistics, economic consequences, summaries of state-based programs, recommended treatment and management strategies, and links to external resources for general audiences and health professionals.

Cardiovascular Health: Action Steps for Employers

Developed by: Centers for Disease Control and Prevention

Resource description: This guide provides examples of action steps employers can take to implement programs to promote improved employee cardiovascular health.

How Addressing Hypertension Creates a Healthier, More Productive Workplace

Developed by: Benefits Magazine

Resource description: This magazine article provides information on hypertension, the impacts of hypertension on employee well-being and productivity, and potential interventions to be implemented in the workplace.

High Cholesterol

Workplace Health Resources: Cholesterol

Developed by: Centers for Disease Control and Prevention

Resource description: This webpage provides links to external resources related to employee programs that address high cholesterol such as an implementation guide, toolkits, fact sheets, and trends and statistics.

High Cholesterol

Developed by: American Heart Association

Resource description: This webpage provides information about cholesterol, including why cholesterol matters, high cholesterol risk factors, prevention and treatment of high cholesterol, and cholesterol management tools and resources.

How to Educate Your Employees About Their Cholesterol Levels

Developed by: Smart Business

Resource description: This article provides information to employers on the impact of high cholesterol on employee wellness, potential impacts of high cholesterol on productivity, and steps employers can take to encourage healthy habits among employees.

Physical Activity

Worksite Physical Activity

Developed by: Centers for Disease Control and Prevention

Resource description: This webpage provides information about integrating physical activity programming into a workplace health program, including physical activity guidelines and recommendations, data and statistics, recommended strategies, and links to other resources.

Guidelines on Improving the Physical Fitness of Employees

Developed by: World Health Organization

Resource description: This article provides information on implementing, planning, and designing a physical fitness program for employees, including examples of activities to increase employee engagement and participation in the program.

Workplace Walking Program Kit

Developed by: American Heart Association

Resource description: This webpage for the Workplace Walking Program Kit provides all of the tools and materials needed to implement a walking program at the worksite, including promotional materials and brief one-page flyers to encourage participation.

Weight Management

Maintain, Don't Gain Toolkit

Developed by: Kaiser Permanente

Resource description: This toolkit provides tips on creating and sustaining a worksite health program focused on helping employees to maintain a healthy weight through diet and exercise. The toolkit walks an employer through program development in four steps: needs assessment, planning, engaging, and measuring impact.

Weight Control and Employees: One Size Doesn't Fit All

Developed by: Northeast Business Group

Resource description: This article discusses the need for workplace weight management programs and provides examples of interventions to implement. Program evaluation and return on investment (ROI) are also discussed.

Tipping the Scales on Weight Control: New Strategies for Employers

Developed by: Northeast Business Group on Health

Resource description: This toolkit provides information on the importance of employee weight management, case studies on weight management program interventions, expert recommendations, and a framework for integrating weight management programs in the workplace.

Nutrition

Nutrition: Strategies and Resources

Developed by: Centers for Disease Control and Prevention

Resource description: This webpage provides tips on how to encourage healthy eating habits at work, including best practices from employer nutrition programs, information on guidelines and nutritional standards, and external resources that provide information on program implementation.

Healthy Workplace: Food and Beverage Toolkit

Developed by: American Heart Association

Resource description: This webpage provides free access to the Healthy Workplace Food and Beverage Toolkit, which includes guidance for organizational decisions related to procuring, providing, or planning food and beverages in the workplace. It addresses topics such as healthy eating, creating a culture of health, and how to incorporate healthier options in vending machines and corporate-sponsored events.

Heart Attack and Stroke

Moving into Action: Promoting Heart-Healthy and Stroke-Free Communities

Developed by: Centers for Disease Control and Prevention

Resource description: This report describes the Moving into Action campaign, which offers suggestions and ideas for employers on promoting employer heart health by implementing work policies that promote healthy behaviors.

Successful Business Strategies to Prevent Heart Disease and Stroke

Developed by: Centers for Disease Control and Prevention

Resource description: This toolkit provides information on the importance of heart health and stroke awareness. The page includes links to a downloadable toolkit, a toolkit guide, a six-step employer guide, and a presentation.

Massachusetts Heart Disease and Stroke Prevention and Control Program

Developed by: Massachusetts Department of Public Health

Resource description: This webpage facilitates free downloads of educational materials, such as posters, handouts, and DVD tutorials, that address heart disease and stroke prevention.

Prediabetes and Diabetes

Diabetes at Work: Living and Coping with Diabetes

Developed by: Centers for Disease Control and Prevention

Resource description: This webpage describes the Diabetes at Work program and offers background information on diabetes, guidelines to implementing a diabetes prevention worksite program, and a webinar on creating a diabetes prevention programs, among other resources.

Transforming Diabetes Management: New Directions for Employers

Developed by: Northeast Business Group on Health

Resource description: This report provides information on diabetes management program options, as well as the strengths and weaknesses of each approach. Information on fostering a company culture that promotes employee engagement is also discussed.

Stop Diabetes at Work: Resources

Developed by: American Diabetes Association

Resource description: This webpage provides links to examples of activities, lists of healthy foods to battle diabetes, and external resources to promote diabetes control and management. Resources include information on increasing employee engagement and best practices for CEOs.

Depression

Right Direction for Me

Developed by: Partnership for Workplace Mental Health

Resource description: This webpage is dedicated to spreading awareness about depression in the workplace. This webpage provides access to a depression screening tool, frequently asked questions on workplace depression, and materials to help build a workplace depression awareness and prevention program, such as a manager's toolkit, posters, logos, presentation slides, and an implementation field guide.

ICU

Developed by: Partnership for Workplace Mental Health

Resource description: This webpage provides information on ICU, a program created to reduce the stigma of mental health and depression in the workplace. Links to resources are provided, which include implementation guides, flyers, presentations, email templates, video tutorials, logos, and sample program evaluations.

Working Well: Leading a Mentally Healthy Business

Developed by: The Center for Workplace Mental Health

Resource Description: This toolkit provides human resource professionals and business leaders with practical information and strategies, assessment tools, mental health programs, and case studies to educate employers about current best practices to create supportive workplace environments.

Developing an Employee Assistance Program

Developed by: University of Michigan Depression Center

Resource description: This webpage describes why and how an employer could develop an Employee Assistance Program to improve employee well-being generally, and specifically to reduce and mitigate depression.

Stress Management

Stress At Work

Developed by: National Institute for Occupational Safety and Health

Resource description: This webpage provides information to employers on reducing stress at the worksite. Resources included on this webpage include articles on preventing stress, measurement tools, and video tutorials.

Setting up a Stress Management Program: A Checklist for Success

Developed by: Health Advocate

Resource description: This brief report provides information on creating an employee stress management program, including a checklist and tips to help an employer during each step of program implementation.

Alcohol and Other Substance Use

Making Your Workplace Drug-Free: A Kit for Employers

Developed by: Substance Abuse and Mental Health Services Administration

Resource description: This webpage provides a link to a free employer toolkit for promoting a drug-free workplace. The toolkit includes examples of written worksite policies, employee education materials, manager training tools, and brochures and fact sheets to help employers establish a substance use prevention program in the workplace.

Drug-Free Workplace Programs

Developed by: Substance Abuse and Mental Health Services Administration

Resource description: This webpage provides a Drug-Free Workplace Toolkit that provides step-by-step guidance for starting and maintaining drug-free workplace policies and programs. This includes links to sample policy documents, guidelines, and fact sheets, in addition to information about state and federal laws and regulations on drugs in the workplace. Topical areas addressed include prescription drugs, alcohol, and other substances.

SBIRT: Screening, Brief Intervention, and Referral to Treatment

Developed by: Substance Abuse and Mental Health Services Administration

Resource description: This webpage provides an overview of Screening, Brief Intervention, and Referral to Treatment (SBIRT), an evidence-based approach to identify and prevent alcohol and substance use. This includes links to other resources, such as examples of SBIRT programs and training modules.

An Employer's Guide to Workplace Substance Abuse: Strategies and Treatment Recommendations

Developed by: National Business Group on Health

Resource description: This article discusses the impact of employee substance abuse on work performance, substance abuse treatment options for employees, lists of commonly abused substances, and tips on how to spot employee substance abuse.

Sleep and Fatigue

Work Schedules: Shift Work and Long Hours

Developed by: National Institute for Occupational Safety and Health

Resource description: This webpage provides links to educational resources for promoting healthy sleep habits and educating employers about fatigue at work across many industries, including aviation, health care, and transportation, among others.

Thrive at Work: Sleep Management

Developed by: Kaiser Permanente

Resource description: This webpage provides an overview of the impact of worker fatigue and poor sleep habits on employee health and productivity. An interactive toolkit that takes an employer from program assessment to evaluation is featured on the webpage, complete with tips for implementing a sleep management program.

Musculoskeletal Disorders

Ergonomics

Developed by: Occupational Safety and Health Administration

Resource description: This webpage discusses techniques to assess ergonomics in the workplace and offers tips on implementing ergonomics programs. Employer responsibilities and workers' rights are also discussed.

Ergonomics and Musculoskeletal Disorders

Developed by: National Institute for Occupational Safety and Health

Resource description: This webpage is a centralized informational hub of resources supporting the need for interventions to address workplace-related musculoskeletal disorders. Informational resources are organized by industry and risk factor and include direct links to programs and guidelines.

The Success of an Employer on site Physical Therapy Program

Developed by: Broadway Ergonomics, LLC

Resource description: This presentation relays the importance of on site physical therapy and other ergonomics-related interventions, as well as guidance to promote worker safety and design tips to facilitate improved employee posture.

Occupational Health and Safety

Total Worker Health®

Developed by: National Institute for Occupational Safety and Health

Resource description: This webpage is dedicated to circulating tools, publications, and research programs focused on integrating protection from work-related safety and health hazards with the promotion of injury and illness prevention efforts to advance worker well-being.

Workplace Safety and Health Topics

Developed by: National Institute for Occupational Safety and Health

Resource description: This webpage provides job safety and health programming, including training resources, data and statistics, research programs, publications and products, and grants and funding.

Recommended Practices for Safety and Health Programs

Developed by: Occupational Safety and Health Administration

Resource description: This webpage provides recommendations for promoting a safe work environment. The recommended practices encompass all areas of creating a workplace health and safety program. Resources featured on the webpage include case studies describing best practices, tools, and educational information.

Nonprofit Risk Management Resource Library

Developed by: Nonprofit Risk Management Center

Resource description: This webpage provides information about workplace safety climates and cultures. It includes a checklist to guide leadership and supervisors to strengthen safety culture and climate, and access to industry-specific toolkits for creating and improving workplace safety programs.

Vaccine-Preventable Diseases

Influenza (Flu) Information for Businesses and Employers

Developed by: Centers for Disease Control and Prevention

Resource description: This webpage provides a ready-to-use toolkit for employers to promote annual flu vaccinations, which includes promotional resources including web tools, fact sheets, and e-cards, in addition to information about organizing on and off site vaccination clinics.

Immunization Schedules

Developed by: Centers for Disease Control and Prevention

Resource description: This webpage offers access to electronic resources to spread awareness about vaccination schedules, including code for webpage banners, links to quizzes, and information on the importance of adult vaccines.

Immunization Resources for the Workplace

Developed by: National Foundation for Infectious Diseases

Resource descriptions: This webpage provides links to immunization resources for the workplace, including checklists, posters, policy statements, and a toolkit.

Maternal Health and Lactation Support

The CDC Guide to Strategies to Support Breastfeeding Mothers and Babies

Developed by: Centers for Disease Control and Prevention

Resource description: This guide provides information to employers to support breastfeeding in the workplace. This includes strategies to follow to implement a breastfeeding program in the worksite, including program examples, resources, key considerations, and action steps.

Supporting Nursing Moms at Work

Developed by: Office of Women's Health

Resource description: This webpage provides a broad range of information to assist employers in implementing strategies that enable and encourage mothers to breastfeed through the Breastfeeding at Work Project. This includes a tool to help employers locate industry-specific case studies and solutions, in addition to videos and reports describing how solutions can be tailored to meet organizational needs.

Investing in Workplace Breastfeeding Programs and Policies

Developed by: National Business Group on Health

Resource description: This toolkit covers the essential information employers need to understand the components of breastfeeding programs, including how to get started and measure success. Valuable resources include breastfeeding program options, employer case studies, and program implementation materials.

Cancer

Cancer Prevention and Worksite Health Promotion: Time to Join Forces

Developed by: Centers for Disease Control and Prevention

Resource description: This article outlines cancer risk factors, recommendations for employee and community engagement, and proposed activities to promote cancer awareness and healthy living.

Occupational Cancer

Developed by: National Institute for Occupational Safety and Health

Resource description: This webpage provides information on cancer clusters, lists of carcinogens, workplace policies, and data and statistics by industry sector.

US Preventive Services Task Force Recommendations

Developed by: United States Preventive Services Task Force

Resource description: This webpage offers information on screening tools for various types of cancers and recommended preventive services. This information could be used by health benefits administrators to make decisions about program offerings.

Workplace Solutions

Developed by: American Cancer Society

Resource description: This webpage presents information for employers to address cancer awareness, preventive measures, recommended activities to increase engagement, and promotion tools.

Community Resources

Community Health in Action

Developed by: Centers for Disease Control and Prevention

Resource description: The webpage is hosted by the Division of Community Health and contains resources such as an assessment tools manual, evidence-based guides, and a sustainability guide.

The Value of Community Partnerships

Developed by: Centers for Disease Control and Prevention

Resource description: This issue brief details the importance of community partnerships and provides tips and considerations for starting an employer-community partnership.

Building the Business Case for Community Partnership

Developed by: Population Health Advisory Board

Resource description: This report provides information on the importance of business-community partnerships and discusses steps to establish partnerships to improve employee health within their communities.

General Resources

Employer Health Incentives

Developed by: Harvard T.H. Chan School of Public Health

Resource description: This article discusses trends in employee wellness programs, the impact of federal regulations on wellness programs, and different approaches to implementing interventions in the workplace.

Guide to Clinical Preventative Services, 2014

Developed by: The Agency for Healthcare Quality Research

Resource description: This webpage provides links to chapters within the Guide to Clinical Preventive Services. The guide discusses screening, counseling, and preventive measures to address a range of conditions.

Resources: Know What You Need to Know

Developed by: Wellness Council of America

Resource description: This webpage provides links to resources to help employers implement wellness interventions in the workplace. The resources provided on the webpage are arranged by topic; such as nutrition, ergonomics, and cholesterol; and type, such as posters, handouts, and health bulletins. This page also includes a link to benchmarks.

Thrive at Work

Developed by: Kaiser Permanente

Resource description: This webpage provides information on the importance of implementing successful employee wellness programs, costs of poor employee health, and a four-step process to program implementation. This webpage also provides links to specific topic areas for wellness programs, including tobacco cessation, sleep management, healthy eating, exercise, and stress management.

Work-Life: Health and Wellness

Developed by: Office of Personnel Management

Resource description: This webpage provides resources to help develop an employee wellness program. This webpage includes links to information on federal laws and regulations, program administration, program evaluation, and reference materials.

Workplace Health Playbook

Developed by: American Heart Association

Resource description: This webpage provides information to aid in the creation of an employee wellness program. Information is provided on every phase of implementation, and includes background information, tips on completing each step, and best practices from case studies.

Workplace Health: Continuous Quality Improvement for Employee Health

Developed by: American Heart Association

Resource description: This webpage provides comprehensive information to assist employers address employee health concerns in the workplace, including tools such as the Life's Simple 7 self-assessment tool that can be used to raise awareness. The webpage also features the Workplace Health Achievement Index, an evidence-based assessment tool that measures workplace program performance across several topic areas. Other resources provided on this webpage include instructional video tutorials and links to employer resources.

Worksite Wellness—Building a Healthy Missouri Workforce Toolkit

Developed by: Missouri Department of Health and Senior Services

Resource description: This comprehensive, evidence-based toolkit describes the steps an employer would take to implement and improve their worksite health program by updating and altering already existing policies and practices, environmental supports, and cultural norms.

Appendix C. Glossary

This glossary contains terms that are used across the *CDC ScoreCard*, grouped into two categories. The first set of terms is to help you use the hard copy and online versions of the *CDC ScoreCard* and get the most information possible out of the tool. The second set of terms clarifies technical terminology used in the *CDC ScoreCard*, providing brief definitions and links to more information when appropriate.

CDC Worksite Health ScoreCard Online Tool Terminology

Term	Definition
CDC Worksite Health ScoreCard (CDC ScoreCard)	A tool designed to help employers assess whether they have implemented evidence-based health promotion interventions or strategies at their worksites to improve employee health and well-being. It provides guidance on key evidence-based strategies that employers can implement to promote a healthy workforce, increase productivity, and reduce the risk and associated costs of poor employee health. The <i>CDC ScoreCard</i> is available as an online tool at http://nccd.cdc.gov/DPH_WHSC/ .
Benchmark report	Employers who register and complete the <i>CDC ScoreCard</i> in its entirety online at http://nccd.cdc.gov/DPH_WHSC/ have access to a worksite-specific report that shows how each worksite's score compares, by topic, with the worksite's score from the previous year (if available). It also compares each worksite's score with average scores from the previous year for (1) all worksites of the same size, (2) all worksites for the same employer, and (3) all worksites combined. These benchmarks comprise the individual worksite scores that were recorded during the previous year, among those who completed the <i>CDC ScoreCard</i> online in its entirety.
Employer administrator	<p>In the online CDC Worksite Health ScoreCard, a contact at the employer level or any user who logs in with an employer administrator log-in code. A user logged in as an employer administrator has full access to all profiles and ScoreCards for worksites associated with the employer account.</p> <p>An employer administrator typically has a leadership or management role for employee health across an entire organization. This person coordinates employee health and safety programs and services across multiple worksites and may be responsible for reporting program results to the organization's senior leadership. An employer administrator may be a program champion or member of a wellness committee. This person has extensive knowledge of the organization's structure and health policies and benefits.</p> <p>An employer administrator may review and submit ScoreCards on behalf of the worksites in its organization. The employer administrator also may complete one or more sections of the ScoreCard on behalf of the organization's worksites, particularly if a strategy or activity is managed or executed above the worksite level and consistently applied across all worksites.</p>
Employer ID	A unique identifier assigned to an employer who registers with CDC to gain access to the online <i>CDC Worksite Health ScoreCard</i> . An employer ID is used during worksite registration to associate the worksite to the correct employer.
Employer profile	Information for each employer <i>CDC Worksite Health ScoreCard</i> account that describes the employer in terms of workforce demographics, health program offerings, and related topics. The purpose of this information is to help employers as they tailor their worksite health strategies and interventions to support the needs of their organizations.
Resources for Action	Information in the <i>CDC ScoreCard</i> that is designed to be used with other CDC guidance documents. The ScoreCard provides information, materials, and tools that employers can use to establish or improve their comprehensive worksite health promotion programs. These Resources for Action are organized by health topic and by intervention type.
Return CDC ScoreCard for edits	After a worksite has submitted a ScoreCard to its employer, the employer administrator resets the ScoreCard status to "in progress" so that worksite team members can make additional edits or changes.

Term	Definition
Submit CDC ScoreCard to CDC	In the online <i>CDC ScoreCard</i> , the act of finalizing a ScoreCard and turning it in to CDC to produce a benchmarking report and for inclusion in the <i>CDC ScoreCard</i> database.
Submit CDC ScoreCard to employer	The act of submitting a ScoreCard to the worksite's employer administrator for review. The employer may require this review before a worksite can submit its ScoreCard to CDC.
Topics on the CDC ScoreCard	A category of questions in the ScoreCard. Eighteen topics are used to group questions that ask about related public health strategies and interventions (e.g., Nutrition, Physical Activity, and Tobacco Cessation).
Worksite profile	In the <i>CDC Worksite Health ScoreCard</i> , basic information for each worksite, including name, address, and contacts (worksite team members).
Worksite team member	<p>In the <i>CDC Worksite Health ScoreCard</i>, a contact at the worksite level or any user who logs in with a worksite login code. A user logged in as a worksite team member can create, complete, and submit ScoreCards for the worksite associated with the worksite login code.</p> <p>A worksite team member typically is responsible for creating, directing, and managing employee health and safety programs and services at one or more worksites. A worksite team member may be a program champion or member of a wellness committee. This person has extensive knowledge of the organization's worksite health activities.</p> <p>A worksite team member will be directly involved in answering the questions in one or more sections of the <i>CDC ScoreCard</i>.</p>

Other Terminology

Term	Definition
Active transportation	Forms of transportation that require a heightened level of physical activity, such as walking or biking, or partial amounts of heightened levels of activity, such as parking at a greater distance from the destination or walking or biking to public transportation.
Activity tracker	A tool used to track physical activity; it can vary in type from online forms that require manual updating to wearable devices that automatically track activity level throughout the day.
Automated external defibrillator (AED)	A portable electronic device that delivers a brief electric shock to the heart, designed to be used by individuals without substantial medical training who are responding to a cardiac emergency.
Body mass index (BMI)	A number calculated from a person's weight and height. BMI provides a reliable indicator of excess body weight for most people. It is used to screen for weight categories that may lead to health problems. For more information, visit: www.cdc.gov/healthyweight/assessing/bmi/index.html .
Carcinogens	A substance that promotes carcinogenesis, the formation of cancer.
Clinical assessment	An evaluation of a patient's condition that results in a prognosis.
Clinical referral	A recommendation from a self-assessment tool or actual medical evaluation that encourages an employee to consult with a medical professional for additional follow-up care.
Community-supported agriculture (CSA)	A mutually beneficial relationship between farmers and the community in which a particular network, or association of individuals, pays one or more local farms at the onset of the growing season for a share of the anticipated harvest; once harvesting begins, they periodically receive shares of produce that may be picked up at the farm or distributed at convenient drop-off sites such as offices, farmers' markets, and community centers or churches. For more information, visit www.nal.usda.gov/afsic/community-supported-agriculture .

Term	Definition
Comprehensive worksite health promotion programs	A coordinated and comprehensive set of strategies designed to meet the health and safety needs of all employees. These strategies include programs, policies, benefits, environmental supports, and links to the surrounding community. The five elements of comprehensive worksite health promotion programs, as defined by Healthy People, are (1) health education, (2) supportive social and physical environments, (3) integration of worksite wellness programs into organizational structure, (4) links to related programs (e.g., Employee Assistance Programs), and (5) screening programs. ¹ The Partnership for Prevention added two additional components: (1) some process for supporting individual behavior change with follow-up interventions and (2) an evaluation and improvement process to help enhance the program's effectiveness and efficiency. ² For more information about Healthy People, visit: https://www.healthypeople.gov/ .
Directed feedback	Feedback specific to your responses that enables you to take evidence-based action to make a behavioral or other change.
Educational materials	Print and other media sources of information that can be given to people to read or view at a later time. These may be brochures, videos, posters, or newsletters that address either single or multiple health topics.
Employee assistance program (EAP)	A voluntary, work-based program that offers free and confidential assessments, short-term counseling, referrals, and follow-up services to employees who have personal and/or work-related problems. EAPs address a broad and complex body of issues affecting mental and emotional well-being, such as alcohol and other substance use, stress, grief, family problems, and psychological disorders. EAP counselors also work in a consultative role with managers and supervisors to address employee and organizational challenges and needs. ³
Employee needs and interests survey	A method of assessing interest among employees prior to implementing health promotion activities. The information learned from this assessment should inform health promotion planning and assess employee readiness, motivation, and preferences for targeted activities or programs. Ways of assessing employee needs and interest may range from electronic questionnaires to in-person focus groups.
Environmental support	Refers to the physical factors at and nearby the workplace that help protect and enhance employee health.
Ergonomic assessment	Reviewing worksites' systems, processes, and equipment to ensure they fit with the human body and its cognitive abilities to prevent repetitive strain injuries and other musculoskeletal disorders.
Evidence-based intervention or strategy	An intervention or strategy that has the potential to affect employee behavior; the effects have been substantiated by evaluation and results have been published in a peer-reviewed journal.
Farmers' market	A recurring gathering of farmers selling their food products, including fruits and vegetables, directly to consumers. Farmers' markets can be held on public or private land, in temporary or permanent structures, and can be set up in community locations, health clinics, places of worship, schools, and worksites. ⁴
Fatigue	Tiredness or exhaustion.
Hazard	Anything that presents a potential threat to employee health and safety, whether physical or psychological.
Health benefits	Part of an overall compensation package including health insurance coverage and other services or discounts related to health.
Health care consumerism	A movement to personalize care to facilitate health outcomes by offering individuals choices of services and increased information and purchasing power to make decisions. This can be facilitated through health plan design.

Term	Definition
Health coaching (or counseling)	A communication process between a trained health professional and an individual or group. A patient education approach offers information and technical skills that are tailored to suit a participant's needs. The stages of counseling include (1) building a relationship, (2) making an informed assessment, (3) establishing agreed-upon goals and objectives, and (4) developing an implementation plan. This interaction can be provided in person or virtually (via a Web site, telephone, or mobile app) on or off site. Providers may be vendors, on site staff, health insurance plans or programs, community groups, or other practitioners.
Health promotion	A service, program, or environmental support designed to help employees improve their health and maintain healthy lifestyles. Also known as worksite wellness or wellness program.
Health risk assessment (HRA) or health appraisal (HA)	A health questionnaire used to provide individuals with an evaluation of their health risks and well-being.
Healthy building design	Design decisions in the worksite that are meant to promote increased performance among its occupants. Elements of healthy design may include ventilation systems, access to natural light, nature-inspired indoor designs, and designs that promote activity, such as stairwells.
Incentives	A tangible commodity or service that is given to an employee for completing a predetermined action or that is based on achievement of a goal or desired outcome. ⁵
Influenza (flu)	A contagious respiratory illness caused by influenza viruses. For more information, visit: www.cdc.gov/flu/index.htm .
Interactive educational programming	A one-time or limited set of educational offerings, typically provided in a group setting. This form of education may include seminars, workshops, or classes focused on a particular health topic(s). The sessions can be provided in person or virtually (via a Web site, telephone, or mobile app) on or off site, where there is an element of dialogue or tailored feedback. Providers may be vendors, on site staff, health insurance plans or programs, community groups, or other practitioners.
Intervention	A generic term used in public health to describe a program or policy that is designed to have an effect on a health problem. ⁶
Job design	Arrangements offered to employees with the intention of increasing job satisfaction. Arrangements may include job rotation, recognition, increased job responsibility, as well as other techniques to promote well-being.
Nicotine replacement therapy (NRT)	A method to deliver nicotine to the bloodstream that replaces nicotine from tobacco use. Several products are available, including nicotine gum, inhalers, nasal sprays, lozenges, and patches.
Occupational health and safety (OHS)	The promotion and maintenance of the highest degree of physical, mental, and social well-being of workers in all occupations by preventing departures from health, controlling risks, and facilitating the adaptation of work to people and people to their jobs. A multidisciplinary field concerned with the safety, health, and welfare of people at work with a strong focus on primary prevention of hazards. Also referred to as Occupational Safety and Health (OSH). For more information, visit: www.cdc.gov/niosh/index.htm .
Pneumonia (pneumococcal disease)	An infection of the lungs that usually is caused by bacteria or viruses. For more information, visit: www.cdc.gov/pneumococcal/index.html .
Postnatal care	Continuation of care of the woman and baby by medical professionals, families, and other support systems for a period of weeks or months immediately following birth.
Prediabetes	Diagnosed when an individual's fasting blood sugar level (HbA1c) is higher than normal (5.6–6.9 mmol/L) but not yet high enough to be classified as type 2 diabetes. ⁷ Individuals with prediabetes are at increased risk for developing type 2 diabetes, as well as for heart disease and stroke. Doctors also may refer to prediabetes as impaired glucose tolerance (IGT) or impaired fasting glucose (IFG). For more information, visit: www.cdc.gov/diabetes/basics/prediabetes.html .

Term	Definition
Quit lines	Telephone-based tobacco cessation services that usually are accessed through a toll-free telephone number. They provide callers with several services, such as educational materials, referral to local programs, and individualized telephone counseling (including a personalized plan for quitting).
Self-management programs	A collaborative, interactive, and ongoing process that involves educators and people with health problems. The educator provides program participants with the information, problem-solving skills, and tools they need to successfully manage their health problems, avoid complications, make informed decisions, and engage in healthy behaviors on their own.
Sleep disorders	Clinically diagnosed issues with sleeping patterns, such as narcolepsy, insomnia, and obstructive sleep apnea, among others.
Sleep habits	The recommended behavioral and environmental practices that are intended to promote better quality sleep. ⁸ May also be referred to as sleep hygiene.
Strategy	See the definition for evidence-based intervention.
Tdap	A vaccine that protects against tetanus, diphtheria, and pertussis (whooping cough). For more information, visit: www.cdc.gov/vaccines/hcp/vis/vis-statements/tdap.html .
Total Worker Health[®]	Policies, programs, and practices that integrate protection from work-related safety and health hazards with promotion of injury and illness prevention efforts to advance worker well-being. For more information, visit: www.cdc.gov/niosh/twh/ .
Unconventional work situations or nontraditional work arrangements	Work arrangements with temporal or spatial characteristics that may require alternative methods to extend health promotion efforts, ensuring that all employees receive equal access to benefits and services. Examples may include telecommuters (or remote workers), shift-workers, independent contractors, factory workers, or on-call workers.
Volunteerism	The act of donating one's time to benefit the community.
Work/life balance	The challenges employees face in developing a healthy balance of work productivity, personal and family responsibilities such as caregiving, and other activities such as exercise or hobbies.
Workplace health policies	Formal or informal written statements that are designed to protect or promote employee health. Supportive workplace health policies affect large groups of workers simultaneously and make adopting healthy behaviors much easier. They can also create and foster a company culture of health.
Workplace health programs	<p>Opportunities available to employees at the workplace or through outside organizations to begin, change, or maintain health behaviors. Programs and services can be:</p> <ul style="list-style-type: none"> ■ Informational approaches—directed at changing knowledge or attitudes about the benefits of and opportunities for healthy lifestyles ■ Behavior or social approaches—designed to teach employees the behavioral management skills necessary for successful adoption and maintenance of behavior change
Workplace stress	Stress related to issues stemming from work or job requirements. This could be attributed to many different origins, such as dissatisfaction with one's role, pressures and responsibilities, uncertainty in job security, work-life balance, and relationships with coworkers among others.
Worksite	A building, unique location, or business unit within an organization where work occurs. A worksite can include a campus of multiple buildings that are in close proximity (walking distance) and defined as part of the organization. For small organizations, a worksite may be one and the same as the entire company. For larger companies, a worksite may represent one of many locations.

Glossary Supporting Citations

1. U.S. Department of Health and Human Services. *Healthy People 2010: With Understanding and Improving Health and Objectives for Improving Health*. 2nd ed. Washington, DC: U.S. Department of Health and Human Services; 2000.
2. Partnership for Prevention. *Healthy People 2010: An Essential Health Promotional Sourcebook for Employers, Large and Small*. Washington, DC: Partnerships for Prevention; 2001. http://www.acsworkplacesolutions.com/documents/Healthy_Workforce_2010.pdf Accessed October 18, 2016.
3. U.S. Office of Personnel Management. Frequently Asked Questions: What is an Employee Assistance Program (EAP)? <https://www.opm.gov/FAQs/QA.aspx?fid=4313c618-a96e-4c8e-b078-1f76912a10d9&pid=2c2b1e5b-6ff1-4940-b478-34039a1e1174>. Accessed September 20, 2017.
4. U.S. Centers for Disease Control and Prevention. *Strategies to Prevent Obesity and Other Chronic Diseases: The CDC Guide to Strategies to Increase the Consumption of Fruits and Vegetables*. 2011. https://www.cdc.gov/obesity/downloads/fandv_2011_web_tag508.pdf. Accessed September 20, 2017.
5. VanWormer JJ, Pronk NP. Rewarding change: principles for implementing worksite incentive programs. In: Pronk NP, ed. *ACSM's Worksite Health Handbook*. 2nd ed. Champaign, IL: Human Kinetics; 2009:239-247.
6. Turnock BJ. *Public Health: What It Is and How It Works*. Gaithersburg, MD: Aspen Publishers; 1997.
7. Warren B, Pankow JS, Matsushita K, Punjabi NM, Daya NR, Grams M, Woodward M, Selvin E. Comparative prognostic performance of definitions of prediabetes: A prospective cohort analysis of the Atherosclerosis Risk in Communities (ARIC) study. *Lancet Diabetes Endocrinol*. 2017;5(1):34-42.
8. Irish LA, Kline CE, Gunn HE, Buysse DJ, Hall MH. The role of sleep hygiene in promoting public health: A review of empirical evidence. *Sleep Med Rev*. 2015;22:23-36.

Appendix D. Scoring Methodology: Evidence and Impact Ratings

As part of the development of the *CDC ScoreCard*, each of the strategies in the *CDC ScoreCard* was assigned a weighted score based on an expert panel's assessment of each item's evidence base and impact level. Weighting of the items on the *CDC ScoreCard* was conducted using the following three consecutive steps.

Step 1: Rating the Evidence Base for Each Survey Item

To establish the evidence base for each of the strategies, researchers from IBM Watson Health and Johns Hopkins University's Institute for Health and Productivity Studies (IHPS) conducted extensive literature searches to find the most up-to-date evidence. Information related to each item on the *CDC ScoreCard* came from review articles, Cochrane reports, Community Guide summaries, and U.S. Preventive Services Task Force recommendations. During this phase, the team also developed new questions for existing modules, as well as entirely new modules, based on the recommendations from industry experts and the findings from the literature searches for existing questions.

Module-specific panels of subject matter experts (SMEs) were convened in 2016 to review the scientific evidence and rate the evidence for each item using a 4-point scale (from 1=Weak to 4=Strong). More information about the evidence and impact rating system is presented in the table below. For the actual citations for each of the items on the *CDC ScoreCard*, please see the *CDC Worksite Health ScoreCard Scoring Methodology: Evidence and Impact Ratings and Supporting Citations* [document](#).

Evidence Rating	Definition of the Rating Categories
Weak (1)	Research evidence supporting the relationship is fragmentary, nonexperimental, or poorly operationalized. There is debate among experts in the field as to whether a causal impact is plausible or exists.
Suggestive (2)	Two or more studies (e.g., pre-post evaluations) support the relationship, but no studies reported using control groups (e.g., randomized control groups, quasi-experimental studies). Most experts believe that causal impact is plausible and consistent with knowledge in related areas, but some experts see the support as limited or acknowledge plausible alternative explanations.
Sufficient (3)	The relationship is supported by at least two well-designed, quasi-experimental studies containing comparison groups, but no randomized control groups. Experts believe that the relationship is likely causal, and studies have eliminated most alternative confounding variables or alternative explanations.
Strong (4)	A cause-effect relationship is supported by at least one well-designed study with randomized control groups or three or more well-designed, quasi-experimental studies. There is little or no debate among experts regarding a causal relationship.

Step 2: Rating the Impact Level for each Survey Item

Using the evidence base gathered during Step 1, the SMEs rated each item for the modules in which they had expertise in terms of its estimated impact on health behaviors or outcomes (i.e., effect size) using a 3-point scale, as defined in the table below.

Impact Rating	Definition of the Rating Categories
Small (1)	0 to 1 percentage point improvement in 1 year
Sufficient (2)	>1 to 2 percentage point improvement in 1 year
Large (3)	>2 or more percentage point improvement in 1 year

For example, promotion of stair use may get a Strong (4) rating on strength of evidence and a Large (3) impact rating for its potential impact on physical activity (i.e., it is expected to increase physical activity of the employees by more than 3 percentage points).

Step 3: Assigning a Weighted Score to each Survey Item

The weighted score for each item was calculated by adding the item's Evidence-Base Score to the item's Impact Score and adjusting the value on the basis of the criteria below.

Evidence Base	PLUS	Item Impact	EQUALS	Weighted Score	Weighted Score Value	EQUALS	Final Health Impact Point Value
1=Weak	<i>Plus</i>	1=Small	<i>Equals</i>	Total Pts.=2 or 3	Value=1	<i>Equals</i>	1=Good
2=Suggestive	<i>Plus</i>	2=Sufficient	<i>Equals</i>	Total Pts.=4 or 5	Value=2	<i>Equals</i>	2=Better
3=Sufficient	<i>Plus</i>	3=Large	<i>Equals</i>	Total Pts.=6 or 7	Value=3	<i>Equals</i>	3=Best
4=Strong							

Each item on the *CDC ScoreCard* has an associated health impact point value between 1 and 3, where 1=Good, 2=Better, and 3=Best. This point value reflects the impact (i.e., observable change elicited in a 1-year period) that the strategy has on health outcomes and the strength of scientific evidence supporting this impact, as determined by SMEs.

Appendix E. Sample Materials

This appendix contains the following sample materials *(blank cells to be filled out manually)*:

- Annual Worksite Health Improvement Plan Template
- Sample Annual Worksite Health Improvement Plan
- Worksite Health Budget Template
- Sample Worksite Health Budget

Annual Worksite Health Improvement Plan Template

Objective: _____

Intervention Strategies (What)	Process Evaluation Measures (How, When, Who)	Communications (Frequency, Methods, Modalities)	Outcome Evaluation Measures (Success Metrics)



Sample Annual Worksite Health Improvement Plan

Developing a Worksite Health Improvement Plan is one of the most critical steps in building a comprehensive worksite health program. The plan, which is guided by the assessment and data-collection process, ensures that the right intervention strategies are chosen for priority health issues. Further, it serves as a road map for acting on those interventions.

The following are key components in the worksite health improvement plan:

1. Develop specific, measurable goals and objectives to address key health needs or priorities.
2. Determine the core set of intervention strategies designed to change the work environment and individual behavior to improve health. This should include a mixture of programs, policies, and environmental supports targeting priority health issues (e.g., stress, nutrition, and physical activity).
3. Identify the detailed action steps and timeline for implementation, including dates and responsible staff.
4. Determine what communications strategies will be used for each intervention strategy.
5. Determine the evaluation plan for each intervention strategy, objective, and the overall program.
6. Develop an itemized budget for the work plan.

The following is a sample worksite health plan that incorporates these components.

Goal 1: Support ABC Company Employees in the Prevention and Control of High Blood Pressure

Objective 1: By 12/31/2020, 80% of ABC Company employees will know their blood pressure number.

Evaluation Measure: Conduct baseline and end-of-year surveys to determine whether objective was met.

Intervention Strategies (What)	Process Evaluation Measures (How, When, Who)	Communications (Frequency, Methods, Modalities)	Outcome Evaluation Measures (Success Metrics)
Make blood pressure monitoring devices and instructions available to all employees to conduct self-assessments.	Sharon will identify space to store units, research types and prices, and purchase electronic and manual blood pressure monitoring devices.	CEO letter and email announcing goal that every employee will know their blood pressure numbers by 12/1/19.	Was strategy fully implemented? Status: Yes. Electronic devices purchased. Manual devices with multiple-sized cuffs purchased. Blood pressure information provided. Space dedicated.
	Ed will set up training for wellness team members on proper blood pressure measurement.	Regular (monthly) communication on this topic via email, newsletters, and company meetings.	Track the type, number, and reach of promotional communications. Status: CEO letter to all employees. Email announcement reached 50% of employees. Displayed on digital ticker and with posters.
	Ashley will work with county health department to compile information for employees, including guidelines.		End-of-year assessment to determine whether goal was met. Status: 86% of employees reported they know their number. Late start held us back.
	Announce by 7/1/20.		
Offer free, on site blood pressure screening with directed feedback and clinical referral when appropriate.	Kendra will reach out to local health care practitioners and find qualified nurse/clinician to conduct clinics. (8/1/20)	Announce and continue to promote on a weekly basis checking blood pressure using email, newsletter, and company meeting.	Was strategy fully implemented?
	Janelle to coordinate logistics, including space, sign-ups, and announcements.		Track the type, number, and reach of communications.
	Conduct first screening in September.		Track participation and tie in with 80% goal.
Provide a series of educational workshops on preventing and controlling high blood pressure.	Develop action steps accordingly.	Identify communication strategy.	Determine how intervention strategy will be measured.

Goal 1: Support ABC Company Employees in the Prevention and Control of High Blood Pressure (continued)

Objective 2: By 12/31/2020, 25% of ABC Company employees with existing high blood pressure will control their blood pressure.

Evaluation Measure: Conduct baseline and end-of-year surveys to determine whether objective was met.

Intervention Strategies (What)	Process Evaluation Measures (How, When, Who)	Communications (Frequency, Methods, Modalities)	Outcome Evaluation Measures (Success Metrics)
Provide access to group lifestyle counseling and follow-up. Monitor employees with high blood pressure or prehypertension.	Develop action steps accordingly.	Identify communication strategy.	Determine how intervention strategy will be measured.
Modify health insurance coverage to have no or low employee out-of-pocket costs for blood pressure control medications.	Develop action steps accordingly.	Identify communication strategy.	Determine how intervention strategy will be measured.

Goal 2: Increase the Number of ABC Company Employees Who Get at Least 30 Minutes of Physical Activity Every Day

Objective 1: By 12/31/20, increase the percentage of employees who meet the Surgeon General's Guidelines for Physical Activity (at least 30 minutes every day) from 22% to 26%.

Evaluation Measure: Conduct baseline and end-of-year surveys to determine if objective was met.

Intervention Strategies (What)	Process Evaluation Measures (How, When, Who)	Communications (Frequency, Methods, Modalities)	Outcome Evaluation Measures (Success Metrics)
Post signs at elevators, stairwell entrances and exits, and other key locations that encourage employees to use the stairs.	Lisa to review plans with Joe from maintenance to improve lighting and paint stairwells by 4/30.	Announce using email, newsletter, and company meeting.	Was strategy fully implemented? Status: Yes, on 6/10/20.
	Anthony will obtain "point of decision prompt" signs from CDC or elsewhere and post them in key places by 5/15/20.	Hold stairwell walk kickoff.	Track the type, number, and reach of promotional communications. Status: Five communications received via email by 100% of employees. Promoted during company meetings. Kickoff walk held.
	Complete work by 6/15/20.	Post signs in other key spots, (e.g., bathroom stalls, break rooms) encouraging stair use.	Baseline and end-of-year assessment to determine whether stair use increased. Status: Both assessments completed; 10% increase in stair use.
Provide environmental supports for recreation or physical activity.	Sheila to work with Joe to determine location for covered bike parking. (3/1/20)	Announce using email, newsletter, and company meeting.	Was strategy fully implemented?
	Dean to purchase bike rack. (3/15/20)		Track the type, number, and reach of communications.
	Danielle to purchase bikes, helmets, and pedometers, and set up check-out process for pedometers. (4/15/20)	Promote availability, sign-out process, and location to employees to ride at breaks and lunch.	Baseline and end-of-year assessment to measure use.
	Marissa to station bikes at parking rack and create sign-out procedure. (5/1/20)		
	Mary Cay to organize a lunchtime ride on National Employee Health and Fitness Day.	Co-promote the lunchtime ride, bike check-out, and bike rack.	
	Create walking path and mileage markers on property. (5/15/20)		
Develop and promote flexible work scheduling policy to support increased physical activity.	Offer extended lunch breaks for physical activity.	Identify communication strategy.	Determine how intervention strategy will be measured.

Goal 3: Decrease the Number of Lower Back Injuries Among ABC Employees

Objective 1: By 12/31/20, decrease the number of annual employee low back claims from 20 to fewer than 10.

Evaluation Measure: Conduct baseline and end-of-year surveys to determine if objective was met.

Intervention Strategies (What)	Process Evaluation Measures (How, When, Who)	Communications (Frequency, Methods, Modalities)	Outcome Evaluation Measures (Success Metrics)
Implement mandatory pre-shift employee stretching program.	Nick will work with Human Resources to develop a written policy. (6/10/19)	Reference safety or injury prevention in Worksite Health Team communications.	Was program fully developed?
	Suzanne will research and obtain job-specific stretching routines. (6/1/19)		Employee survey to determine participation and satisfaction.
	Tim will work with managers to identify space, train stretching leaders, post stretching routines, and so forth by 7/12/19.		
Conduct job design analysis and develop stretching programs to fit job design.	Lisa will interview and hire an ergonomist or physical therapist to conduct job design analysis and design stretching program to fit job design. (2/25/19)	Worksite Health Team, Safety Coordinator, Human Resources announcements about strategies to make the work environment safer.	Number of job design analyses performed.
Number of employee-specific stretching programs developed.			
	Kevin to train employees on proper job-specific stretching techniques, (3/12/19)		
	Display posters with proper lifting technique in key places in the worksite. (3/12/19)		
Modify the work environment to support safe work practices.	Jermaine to conduct NIOSH lifting equation evaluation for high-strain jobs.		Document number and type of changes made to the work environment.
Eliminate any regular lifting of over 50 pounds; conduct NIOSH lifting equation evaluation for any jobs that do not meet that goal.	Human Resources to coordinate with Operations to cross-train staff and rotate job functions to limit repetitive motion injuries.	Worksite Health Team, Safety Coordinator, Human Resources announcement about making the work environment safer.	Track the type, number, and reach of communications.
Eliminate all lifts from the floor over shoulder height	Display posters with proper lifting technique in key places in the worksite.		Review workers' compensation claims to determine changes in annual low back claims.

Abbreviation: NIOSH, National Institute for Occupational Safety and Health.

Total Worksite Health Program Budget

A detailed line item budget should be developed with the final worksite health plan. See the Sample Worksite Health Budget for an example. \$44,395

Worksite Health Budget Template *(blank cells to be filled out manually)*

ABC Company—Worksite Health Budget, 2020

Category	Item	Subtotal (in dollars)	Total Cost (in dollars)
Wages/Benefits			
Materials and Supplies			
Memberships/Affiliations			
Subscriptions and Publications			
Health Education Materials			
Health Assessment & Screenings			
Health Coaching			
Health Plan Changes			
Health Education Programs			
Equipment			
Incentives			
Miscellaneous			
Total			

Sample Worksite Health Budget

The following is a sample budget justification form for a company of 300 employees, allowing for worksite health intervention strategies to be categorized and budgeted. This form should accompany the worksite health plan in seeking financial support for the worksite health program.

ABC Company—Worksite Health Budget, 2020

Category	Item	Subtotal (in dollars)	Total Cost (in dollars)
Wages/Benefits	Part-time Wellness Director	\$20,000	\$20,000
Materials and Supplies	Lighting and paint for stairwell project Printing for posters, flyers, etc. Supplies for Healthy Pot-Luck lunch series	\$300 \$500 \$150	\$950
Memberships/Affiliations	Wellness Council of Greater Cornville National Network of Wellness Councils	\$500 \$50	\$550
Subscriptions and Publications	Electronic newsletter service Various health publications	\$175 \$150	\$325
Health Education Materials	Blood pressure log-books Blood pressure literature and DVD	\$500 \$300	\$800
Health Assessment & Screenings	Currently planned for Year 2	\$0	\$0
Health Coaching	Currently planned for Year 2	\$0	\$0
Health Plan Changes	Currently planned for Year 2	\$0	\$0
Health Education Programs	Blood pressure educational workshops Blood pressure literature and DVD	\$250 \$250	\$500
Equipment	Blood pressure monitoring equipment Bike rack Pedometers Bike parking structure Bicycles/helmets for sign-out program (2)	\$800 \$450 \$2,200 \$1,500 \$500	\$5,450
Incentives	Gift cards and prizes for contests, raffles, and similar items. Gym reimbursement	\$1,000 \$6,000	\$7,000
Miscellaneous	Contract with landscaper to create walking paths on property Gym reimbursement	\$8,000 \$820	\$8,820
Total			\$44,395

