Worksite Wellness: How to Walk the Walk

How can you make sure your company or institution walks the walk when it comes to creating and aligning policies that make health and wellness a reality for all?
Recap of webinar #2

- In our last webinar we recapped the fundamental definition of worksite wellness and launched into a discussion of general benefits, incentives and value-based benefits.

- We emphasized the importance of active and engaged leadership and revisited the structural model for constructing a wellness program.
The Employee

Work Factors

Structural Factors

General Factors

Adaptive Leadership

Employee Health/Work Performance

Employee Health Cost Variables/Employee Productivity
Today, we will very briefly review the Introductory webinar and then reiterate the key elements of Value-based Insurance/benefits design.

That will lay the foundation for our next topic area—policy.
Introduction
What, then, is “worksite wellness”?

“A comprehensive worksite health program is a planned, organized and coordinated set of programs, policies, benefits and environmental supports designed to meet the health and safety needs of all employees”

Such a program puts in place:

- Interventions that address multiple risk factors and health conditions
- Interventions and strategies that can target the employee at the individual level and the employer at the organizational level
Health and Wellness Benefits

- **Illness benefits**
  - Outpatient care, hospitalization, pharma

- **Wellness benefits**
  - Gym membership, education, cash rewards for specific behaviors such as taking an HRA or gaining points through some wellness program structure that allows forgiveness of premiums, copays, deductibles, etc.

- **Cross over benefits**
  - Benefits where wellness and illness are linked. A good example would be dental insurance that only pays for repair if preventive visits occurred on schedule
Description of Value Based Benefits (VBB): The Components

- 1. Appropriate use of high value services, including certain prescription drugs and preventive services.
- 2. Adoption of healthy lifestyles, such as smoking cessation or increased physical activity
- 3. Use of high performance providers who adhere to evidence-based treatment guidelines.
Consumer

- Preventive Medical and Diagnostic Services
- Prescription Drug Options
- Health Coaching and Treatment Option Support
- Health Promotion and Disease Mgmt
- Benefit Plan Selection
- Provider Selection
## Strategic Framework

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<thead>
<tr>
<th></th>
<th>Physical Activity</th>
<th>Healthy Foods</th>
<th>Tobacco</th>
<th>Mental Health &amp; Stress Management</th>
<th>Chronic Disease</th>
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<td>Environment</td>
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### Building a Foundation

- **Communications**
- **Data**
- **Incentives**
- **Wellness Committee**
- **Leadership**

*Good Health is Good Business*
### Strategic Framework

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**BUILDING A FOUNDATION**

- Communications
- Data
- Wellness Committee
- Leadership
- Incentives

Good Health is Good Business
Definition of policy

- A definite course or method of action selected from among alternatives and in light of given conditions, to guide and determine present and future decisions.
- A high-level overall plan embracing the general goals and acceptable procedures.

- Webster’s Dictionary
For the purposes of this Web site, policies shall be interpreted in a broad manner, and shall include laws, regulations, and rules, both formal and informal, that are adopted on a collective basis to guide individual and collective behavior.
Types of Policies

- Legislative/regulatory – formal policies, have been written into laws, impacts the general public
  - Regulations requiring sidewalks in new community developments

- Organizational - defined appropriate behavior within the organization, impacts those who frequent the location
  - Worksite policies reducing fat in lunches

Matson-Koffman et al., 2005
Culture of community, state and nation

- Environment
- Policies
- VBB

Culture
“Environment is the Visual Policy of an organization”

“policy = talking the talk
environment = walking the walk”
Where to we start?

- The key is to develop policies and create an environment that can enhance the “health culture” of the organization and improve the health and productivity of the workforce.
- To accomplish this the challenge again falls, as it did with benefits, to the leadership and the wellness committee.
- There is good reason to argue that policy level decisions around the formation of the wellness leadership committee are among the first policies/policy decisions to be made!
Cultural Factors

Structural Factors

Work Factors

General Factors

Adaptive Leadership

The Employee

Exogenous Factors

Employee Health/Work Performance

Employee Health Cost Variables/Employee Productivity
Establishing an Organizational Health Supporting Structure

- Create administrative structure
- Measure support of the current workplace
- Adopt policies that are health supporting
- Communicate Awareness of program initiative and identified health issues
- Provide services that are health supportive and positive change agents
- Enhance facilities to promote health
- Modify benefit plan to support health
- Promote all parts of the initiative vigorously!
The First Step

- Create a health initiative **administrative structure/wellness committee**
  - Part of the overall corporate mission and vision statement
  - Standing committee status
  - Senior management representation
  - Stakeholder representation
  - Employee representation
  - Operating budget
  - Accountability/recognition
  - Data access
Perhaps no area in health and wellness has had more policy and regulation than the use of tobacco.

One way to get a grasp of the overall influence of policy is to trace tobacco through the maze of politics and government regulation right down to organizational policy and its effect on the individual employee.
PUBLIC POLICY
national, state, local laws

COMMUNITY
relationships among organizations

ORGANIZATIONAL
organizations, social institutions

INTERPERSONAL
family, friends, social networks

INDIVIDUAL
knowledge, attitudes, skills
<table>
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<th>Event</th>
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<td>1936</td>
<td>Milwaukee, Wisconsin becomes the first U.S. city to make all forms of public transportation (street cars, buses, etc.) completely smokefree.</td>
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<td>1964</td>
<td>U.S. Surgeon General’s Report identifies smoking as a cause of increased mortality and as a contributing factor in a host of diseases.</td>
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<td>1964</td>
<td>Nonsmoking sections on airplanes.</td>
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<td>1976</td>
<td>Regulations are passed to restrict smoking on trains to separate cars; and dining cars are made smokefree.</td>
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<td>1982</td>
<td>Muse Air (a Texas intrastate airline) opens its doors for business as a smokefree airline.</td>
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A grassroots campaign to eliminate smoking in airlines is initiated with the publication of a front-page story in the Fall issue of ANR UPDATE. Entitled, “Where There’s Smoke, There’s Fire: Banning Smoking on Airplanes,” the article states: “ANR feels it is essential that the federal government quickly implement the proposed ban....”

**February** – The U.S. Department of Transportation rejects the recommendation of the NAS to make domestic commercial flights smokefree. Secretary Elizabeth Dole states that no new regulations are necessary because the market will accommodate demand.

**July** – By a vote of 198 to 193, the U.S. House of Representatives passes the Durbin Amendment to the Federal Aviation Act of 1958, making domestic flights of two hours or less smokefree. ANR’s swift national grassroots campaign plays a critical role in securing the passage.

**September 27th** – California Governor George Deukmejian signs S.B. 1067 into law, making all in-state flights, trains, buses and other forms of public transportation 100% smokefree. State
Senator Nicolas Petris (D-Oakland) authored the measure after reading about the adverse health effects of passive smoking exposure in the 1986 U.S. Surgeon General’s Report.

Southwest Airlines buys out Muse Air and revokes its 100% smokefree policy. Smoking is permitted on Southwest Airline flights, exposing airline employees and passengers to secondhand smoke again.

**1988** President Ronald Reagan signs the Federal Aviation Act, with the Durbin Amendment, into law, making domestic flights of two hours of less smokefree. Air Canada and Canadian Airlines International make all their intracontinental flights smokefree.

percent of respondents indicate they would fly with an airline they didn’t usually fly if it went completely smokefree.

*April 23rd* – The federal law making all domestic flights of two hours or less smokefree is made effective on April 23rd. The law is designed to sunset in two years.

On the same day, Northwest Airlines goes one step further than the federal law and adopts a company policy making all its domestic flights 100% smokefree.

*October* – In an open letter, Representative Durbin attributes the smokefree victory to the “strong grassroots support” generated by groups like ANR and states that “hard work on the local level is what led to an unprecedented public health victory in Congress.”

**1989**

*June* – The American Association for Respiratory Care (AARC) releases results of a public attitudes survey about smoking on airlines. The national survey shows that 92.8% of nonsmoking and the majority of smoking (58.1%) airline travelers polled approve of the current smokefree law on flights of two hours or less.

*September* – The House approves the language of H.R. 160, extending the two-hour smokefree policy beyond two years. The battle shifts to the Senate, where Senator Lautenberg fought for S. 519 to make longer flights smokefree.

*October* – British Airways makes all domestic flights smokefree.

*October 21* – Representative Durbin publishes an acknowledgment piece regarding smokefree flights in the Congressional Record. ANR is thanked for being “particularly active.”

*November 8* – The Senate gives final approval to a smokefree policy on all domestic and domestic overseas flights, of six hours or less.

*November 16* – The House and Senate Conference Committee adopt a “compromise” that makes flights operating within the 50 states and its territories of six hours or less smokefree.
1990  Federal law making all domestic airline flights of six hours or less smokefree takes effect on February 25th. The law affects all but 28 of the 16,000 domestic flights in the U.S. Interstate buses also become smokefree.

1992  The International Civil Aviation Organization passes a resolution urging its 132 member countries to go completely smokefree by July 1, 1996.

1993  Amtrak makes most of its trains smokefree, but still maintains “smoking cars.”

1995  Delta Airlines goes smokefree worldwide on January 1st.

1997  TWA, United, and American all announce plans to fly smokefree by July 1st. Northwest and Continental remain the only two major United States airlines that do not adopt smokefree policies for international flights.

1998  On March 29th, Air France makes all its trans-Atlantic flights smokefree. British Airways and Virgin Atlantic make all their flights worldwide 100% smokefree by April 1st. The two join a list of other completely smokefree European airlines, including Lufthansa, Er Lingus, Finnair, Icelandair and Scandinavian Airlines.

1999  On October 5th the Senate passes a Federal Aviation Administration bill which includes a

2000  April 5 – President Clinton signs the Wendell H. Ford Aviation Investment and Reform Act of the 21st Century into law, making all flights to and from the U.S. smokefree.

June 4 – The Wendell H. Ford Aviation Investment and Reform Act becomes effective, making all flights between the U.S. and foreign destinations go 100% smokefree. In a press release issued by the U.S. Department of Transportation, Transportation Secretary Rodney E. Slater says, “Protecting the health of Americans includes ensuring their right to breathe smoke-free air when they travel.”
Smoke-free Locations
Effective July 1, 2010, smoking is prohibited in most of the following indoor locations in Kansas:

- Public places
- Places of employment
- Restaurants
- Bars
- Within 10 feet of any doorway, open window or air intake where smoking is prohibited

4. Ask any person violating the law to stop smoking. Remind your customers of the law and politely explain they must step outside to smoke. Also train your staff regarding what to say to customers, for example, “We’re now smoke-free, you’ll have to put out your cigarette,” or “The new law prohibits smoking indoors. Thanks for your cooperation.”
5. Refuse service to any person who continues to violate the law.
6. Ask any person violating the law to leave.
7. Notify law enforcement if the person refuses to comply.

Fines, for owners/operators and smokers:

- 1st violation = not more than $100
- 2nd violation within 1 year = not more than $200
- 3rd and additional violations within 1 year = not more than $500 per violation
- Each individual smoking in an establishment where smoking is prohibited is a separate violation for the business.
The following is provided for general informational purposes only and is not to be used as a defense in any proceeding related to enforcement. Persons wanting legal advice as to the specific application of the law to their situation should contact their legal counsel and or local authorities who are charged with enforcement.

SAMPLE BUSINESS SMOKING POLICY

[INSERT BUSINESS NAME] Smoking Policy

Smoking shall not be permitted in any enclosed company facility. This includes common work areas, auditoriums, classrooms, conference and meeting rooms, private offices, elevators, hallways, cafeterias, employee lounges, stairs, restrooms, and all other enclosed facilities. This policy applies to all employees, clients, contractors, and visitors. Smoking shall be permitted only at a reasonable distance of 10 feet outside entrances, operable windows, and ventilation systems of enclosed areas where smoking is prohibited, so as to insure that tobacco smoke does not enter those areas.

Copies of this policy shall be distributed to all employees. No Smoking signs shall be posted in all company facilities.

Those employees who smoke and would like to take this opportunity to quit are invited to call the free Kansas Tobacco Quitline (1-800-QUIT-NOW) for telephone cessation counseling and support. [INSERT any additional cessation resources the company provides.]

The success of this policy will depend on the thoughtfulness, consideration, and cooperation of both smokers and nonsmokers. All employees share in the responsibility for adhering to and enforcing this policy.

____________________________________________________________________________________
Signature of CEO or President                                          Date
When we think of organizational wellness policies the first areas that come to mind are:
- Physical activity
- Nutrition/foods
- Smoking

Thinking more globally, policy and regulation at the organizational level can be much broader and include such issues as:
- Breastfeeding
- Sick leave/FMLA etc.
- Availability of breaks/exercise periods at work
- Flex time and job sharing and working from home or off-site
- Benefit additions or exclusions based on such issues as the wearing of seatbelts, helmets, etc. (policy/benefits crossover)
- Harassment and discrimination
- Safety and working environment
Alternate work schedule policy

ALTERNATIVE WORK SCHEDULES

Sections:
I. PURPOSE
II. INTRODUCTION
III. REFERENCES
IV. REQUIREMENTS
V. ALTERNATIVE WORK SCHEDULE OPTIONS

I. PURPOSE
This chapter establishes policies and procedures for the CDC's Alternate Work Schedules (AWS) program in cooperation with Labor Management Cooperation Council (LMCC).

II. INTRODUCTION
The Federal Employees Flexible and Compressed Work Schedules Act of 1978 (PL 95-396) authorized AWS as an experimental program in 1978. In 1985, legislation providing permanent authorization for agencies to use AWS was enacted (PL 99-198). The act authorizes Federal agencies to allow employees the flexibility to vary their daily arrival and departure times and, under some options, to vary the length of their workday or workweek. Supervisors are encouraged to provide maximum flexibility for their employees. However, because of specific job requirements in the Centers, Institute, or Offices (CIOs) of CDC, the same degree of personal choice may not be possible for all employees. Supervisors have the authority and responsibility to require work hour adjustments to meet special work situations and the responsibility to account for the overall performance of the organization.

Employee participation in AWS is subject to management approval. In addition, supervisors may require an employee’s presence during specific hours for a certain period or a particular meeting. Management may at any time alter a previously approved schedule to accommodate the requirement for meetings, travel, training, conferences, and other essential work-related activities.

The EPC supports the concept of AWS which includes the use of all of the approved options listed in Section V below. The needs of the employees must be balanced with the ability of CDC to accomplish its mission. Supervisors are expected to work with employees to allow maximum flexibility utilizing AWS, while at the same time ensuring the mission is accomplished. The EPC encourages managers and supervisors to utilize a team-based approach in establishing AWS.

U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

When we think of policies it is easy to confuse policies, regulations and environmental changes.

For example, when we change the content of vending machines we change the environment. There can be a policy governing this or it can simply be done.

Many positive changes can either be established to promote continuing a positive change; or a positive change can be the result of new policy.

In either case, the buy-in of the employees and the commitment of the leadership are likely to be the factors that permit positive changes to become permanent.
Tobacco, nutrition and exercise

- We covered the flow of policy and regulation for tobacco from the Federal Government to policy at the organizational level.
- Let’s look at some of the kinds of policies and procedures that can be instituted.
Nutrition

- Healthy foods policies
  - Foods at meetings/seminars/catered events
    - Including guidelines for offering healthful food alternatives
  - Vending machine and cafeteria standards
  - Breast feeding
Welcome!

Eat Well Work Well is a Minnesota coalition that strives to help employers make eating well at work the easiest choice for their employees.

Why worksites?

Employers have a unique opportunity to influence the health of their employees. Most working individuals eat at least one meal or snack at work every day. Many times this food comes from catered meetings, vending machines, candy dishes or other sources that are supplied by the company, organization or employees.

This makes the workplace an ideal setting to influence healthier food choices through adopting worksite policies, providing healthier options, leading by example, working with vendors and more.
Why Worksites
Food at Work
Policies
Education and Tools
Resources

Policies
Below are sample policies aimed to establish healthy food guidelines for catering, vending, cafeteria, or for a company-wide healthy food policy.

Organization Healthy Catering Policy
Sample 1
Sample 2

Organization Vending Policy
Sample 1 - Healthy Vending Machines
Sample Policy
Sample 2 - Vending Policy Template
Organization Healthy Catering Policy

Sample Catering Policy Template

[COMPANY NAME] is dedicated to providing a work environment that supports employee and workplace health. There is a general consensus among scientists that certain dietary factors are associated with the prevention of chronic diseases such as heart disease and cancer.

In light of this consensus, [COMPANY NAME] believes that through food service offered on the premises, it is important to provide employees with healthy food choices that support their efforts to prevent disease and attain optimum health.

Therefore, [COMPANY NAME] will provide fruit and vegetable food choices that are low in fat at company meetings and functions. At functions which offer a selective menu or buffet, one or more healthful entrees, side dishes or desserts will be served [OPTION: only healthful foods will be served]. When non-selective menu is served, healthful selections will be offered [OPTION: only healthful snacks will be offered].

The attached [5 A Day Recipe and Products Promotable Criteria and the Food Service] Guidelines for Healthy Menu Items can be used in menu planning. Please contact your [WORKSITE WELLNESS COORDINATOR or STATE 5 A DAY COORDINATOR, include name and phone number] for further assistance.

From "Treatwell 5 A Day worksite nutrition intervention", a 5 A Day research study funded by the NCI. Additional credit: Dana-Farber Cancer Institute, Grant Number: 5RO1CA59728
SAMPLE VENDING POLICY

EXAMPLES OF HEALTHY VENDING ITEMS
Lowfat granola bars
Baked chips
Pretzels
Trail mix
Dried fruit
Fat-free popcorn
Beef jerky - 95% fat free
Whole-grain fruit bars
Animal crackers
Graham crackers
Plain & salted nuts
Fruit leather
Whole grain crackers
Low fat Chex mix
Rice cakes
Sunflower kernels
Water
Whole fruit juices

This policy template is available to download at www.activatedsolutions.org

Information adapted from the California 5-a-Day – Be Active! Worksite Program.

FOR USE WITHIN ANY WORKPLACE WHERE FOODS OR BEVERAGES ARE SERVED

Whereas: (your organization name here) is concerned about the health of our (employees, members);

Whereas: People have become more and more interested in eating smart and moving more;

Whereas: Heart disease, cancer and stroke are largely affected by what we eat and how active we are;

Whereas: Snack food products that are lower in fat and sugar are better choices for preventing many diseases;

Therefore: Effective (today’s date), it is the policy of (your organization) that all snack and beverage vending offered by this organization will always include items that meet the following standards:

Nutrition Standards
At least _____% of foods served in vending machines should meet these standards:
• Have no more than 35% of its calories from total fat (not including nuts and seeds)
• Have no more than 10% of its calories from saturated fat
• Contain no trans fats
• Have no more than 35% sugar by weight (not including dried fruits, NO candy)

In addition, all efforts will be made to include the following:
• Items that have no more than 360 mg of sodium per serving
• Items that contain at least 2 grams of dietary fiber per serving

Beverage Standards
At least _____% of beverage vending machine offerings must include
• Beverages that contain 100% fruit or vegetable juice with no added sweeteners
• Water
• Nonfat or 1% lowfat milk
• Beverages that are limited to a portion size no greater than 12 ounces (no limit on water). If juices are available in smaller-sized portions (6 oz.) they would be preferred.

Pricing/Placement Standards
• Beverage and food items meeting the mandatory standards must be sold at a price that is equivalent to or lower than the price of items in the vending machine that do not meet these nutrition standards.
• Items meeting the mandatory standards must be placed in the top third of the vending machine so that they are visible at eye level.

Signature
Title

Name of Organization
Date
Guide

Building a Healthy Worksite

A Guide to Lower Health Care Costs and More Productive Employees

http://health.utah.gov/hearthighway
Appendix H – 2: Healthy Food Policy Example

Instructions
- In the left column, itemize all food and beverage items to be offered.
- In the right column, explain how each menu item is healthy (i.e., sandwich bread is whole wheat, no cheese on the sandwiches, chips are baked, etc.).
- Review your menu and this form with your program Office Technician (OT) for compliance with the Healthy Food Policy. The OT will veto your menu if it does not comply with the policy.
- Include the two completed pages of this Checklist with your Food Request Memo and PO. Your OT and Division Manager must sign below before the memo is considered approved.
- File this form with the copy of your Food Request Memo.
- Include food evaluation questions on your event evaluation forms.

Helpful Hints
- Food Request Memos without this form will be denied.
- See Healthy Food Policy Guidelines for healthy menu ideas.
- Include “per diem exception” language in your Food Request Memo if necessary. Note: Most caterers can offer healthy substitutions within the per diem price.
- Discuss healthy options with your caterer before submitting this form.
- Offer vegetarian alternatives for all meals.
- Contact _____ for assistance with this form or to help determine healthy menu options.

Employee name: ___________________________ Email: ___________________________

Phone: ___________________________

Program: ___________________________

Event: ___________________________

Location: ___________________________ Date: ___________________________

Catering Company: ___________________________

Primary Contact: ___________________________ Phone: ___________________________
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Office Technician ___________________________ Date ____________
Division Manager ___________________________ Date ____________
Appendix H – 3: Healthy Worksite Nutrition Guidelines

Note: These Guidelines include the accompanying “Recommendations for Cafeteria, Vending, and Break Room Food Standards in Utah Workplaces” document.

General Definition of Healthy Food Options (Per Serving)
- A minimum of two of the five following criteria must be met for a food item to be considered a healthy option:
  - Has 30% or less of its total calories from fat.
  - Has 10% or less of its total calories from saturated and trans fats combined.
  - Has 35% or less of its weight from sugars, excluding sugars occurring naturally in fruits, vegetables, and dairy ingredients.
  - Has no more than 700 mg of sodium.
  - Has at least 3-5 grams of fiber.

General Tips for Planning Healthy Work Events
- Offer healthy food choices at work functions as per the COMPANY’s Healthy Food Policy, which includes meetings, conferences, and receptions.
- Consider not offering food at mid-morning or mid-afternoon meetings, presentations, and seminars, or at breaks during day-long conferences and events.
- If you choose to serve food at mid-morning and mid-afternoon breaks, offer fruit and/or vegetable trays instead of cookies, pastries, doughnuts, and other foods with minimal nutritional value.
- Speak to the caterer/vendor about making healthier substitutions on “set” menus. Most caterers are willing to accommodate requests as long as they can keep them in a similar price range.

Healthy Suggestions for Meals, Snacks, and Beverages
- Beverages
  - Water
  - 100% fruit and vegetable juices
  - Fat-free and light (1%) milk
  - Coffee and tea
  - Fat-free milk in addition to half-and-half or creamer for coffee and tea
  - Fat-free or low-fat fruit smoothies or frozen yogurt-based milkshakes
**Breakfast and Brunch**
- Fruit
- Whole wheat breads and cereals
- Toast, bagels, fruit breads, and muffins instead of doughnuts, biscuits, and pastries
- Fruit spreads in addition to butter for toast and bagels
- Fat-free and light (1% milk fat) yogurt
- High-fiber cereals like bran flakes and low-fat granola
- Fruit toppings (raisins, dried fruit mix, fresh strawberries, bananas, blueberries, peaches) for hot and cold cereals
- Pancakes, waffles, and crepes with fruit toppings
- Vegetables like mushrooms, red peppers, onions, tomatoes, green peppers, and spinach for omelet fillings or added to scrambled eggs
- Plain eggs or omelets made with egg substitute or without yolks
- Canadian bacon instead of high-fat meats like sausage or bacon
- Baked hash browns instead of fried hash browns

**Lunch and Dinner**
- Whole grain breads in addition to white
- Salad dressings on the side, including a light version
- Broth or vegetable-based soups instead of cream soups
- Fruit as a side item
- Vegetables as a side item, seasoned with fresh herbs instead of butter or cream sauces
- Brown rice instead of white rice
- Pastas with tomato or other vegetable-based sauces, instead of cream sauces
- Chicken, turkey, and fish instead of beef, pork, and lamb
- Limit red meat (beef, pork, and lamb) to 3-4-ounce servings
- Offer a vegetarian alternative to all meals
- Steamed, poached, baked, and broiled meats instead of fried
- Avoid fried foods like French fries, onion rings, and fried chicken
- Reduced-fat cheese in menu items requiring cheese, like lasagna
- Fruit desserts in addition to other desserts
- Salads made with pasta, vegetables, chicken, or tuna
- Vegetable and/or chicken pizza on English muffins
- Baked potato with toppings such as assorted vegetables, beans, and low-fat cheeses, sour cream or plain yogurt
- Bean burritos
- Grilled vegetable quesadillas
- Veggie burgers
- Tortilla wraps with vegetables, tuna, and/or chicken
<table>
<thead>
<tr>
<th><strong>SNACKS, SWEETS, SIDE DISHES</strong></th>
<th><strong>Portion Size:</strong></th>
<th><strong>Larger serving sizes can lead to over-consumption</strong></th>
<th><strong>Out:</strong> All large-sized portions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fat:</td>
<td>No more than 30% of total calories from fat</td>
<td>High-fat foods add unnecessary calories to the diet</td>
<td>In: Baked potato chips, pretzels, some popcorn, some granola bars, some baked French fries, chocolate-covered peppermint candy, candy bars labeled “lite” or “lowfat,” fruit chews or hard candy</td>
</tr>
</tbody>
</table>

| Saturated Fat:                | No more than 10% of calories from saturated fat plus trans fat | Foods that are high in saturated fat increase the risk of coronary artery disease by raising blood cholesterol | |
| Sugar:                       | No more than 35% by weight (excluding sugars occurring naturally in fruits, vegetables, and dairy ingredients) | Eliminate foods that (1) are high in calories and low in nutrients, and (2) promote dental caries | In: Some granola bars, trail mix, animal crackers, Devil’s food cookies, gelatin desserts, fat-free fudge bar, frozen fruit bar | Out: Some granola bars, some cookies, all candy |

| **ENTREE ITEMS and SIDE DISHES** | **Portion Size:** | **Extra-large-sized portions add unnecessary calories, including calories from fat, especially saturated fat** | **In:** Reasonable portions of pizza, hamburgers, burritos, luncheon meats, chicken nuggets | **Out:** All oversized portions |

| VEGETABLES and FRUITS         | Require the availability of quality vegetables and fruits at all meal purchase points and at all conferences or meetings | Vegetables and fruits provide needed nutrients without adding low-nutrient dense calories | **In:** All vegetables and fruits: fresh, cooked, dried, and canned without additional sweeteners |
Lactation policies

LACTATION SUPPORT PROGRAM

Date of Issue: 08/08/2005 Proponent: Atlanta Human Resources Center

Sections:
I. PURPOSE
II. ACRONYMS AND DEFINITIONS
III. INTRODUCTION
IV. POLICY
V. PROCEDURES
VI. RESPONSIBILITIES
VII. REFERENCES

I. PURPOSE
This document describes the Centers for Disease Control and Prevention (CDC) policy and procedures for the agency’s nationwide (headquarters and field sites) Lactation Support Program which provides education and support to CDC employees who are pregnant or breastfeeding. Guidance from the U.S. Office of Personnel Management provides agencies the authority to establish employee health programs that foster healthy lifestyles and support a healthy working environment.

II. ACRONYMS AND DEFINITIONS
A. For the purposes of this policy, the following acronyms apply:
1. AHRC – Atlanta Human Resources Center
2. CDC – Centers for Disease Control and Prevention
3. FDA – Food and Drug Administration
4. FPPO – Facilities Planning and Management Office
5. HHS – Department of Health and Human Services
6. MSDS – Material Safety Data Sheets

B. For the purposes of this policy, the following definitions apply:
1. Contractor – Personnel performing specific contractual services on-site or off-site in the furtherance of CDC’s mission.
2. Employees – Persons who are employed by CDC, including both civil servants and Commissioned Corps officers.
3. Lactation program coordinator – Human resource specialist responsible for coordinating the agency’s nationwide lactation support program.
4. Lactation consultant – Person certified by the International Board of Lactation Consultant Examiners and is contracted to support various components of the lactation support program. Please refer to Section VI., paragraph F., for a list of responsibilities.

Physical Activity Policy

- Organizations exist within communities and if there are not safe ways for workers to get to work, there is little benefit of having bike racks, for example.
Regardless of a policy’s form, the National Complete Streets Coalition has identified ten elements of a comprehensive complete streets policy, as discussed below. For examples of strong policy language, see our report Complete Streets Policy Analysis 2010: A Story of Growing Strength (.pdf), that assessed the strength of policies adopted through the end of 2010.

An ideal complete streets policy:

- Includes a vision for how and why the community wants to complete its streets
- Specifies that ‘all users’ includes pedestrians, bicyclists and transit passengers of all ages and abilities, as well as trucks, buses and automobiles.
- Applies to both new and retrofit projects, including design, planning, maintenance, and operations, for the entire right of way.
- Makes any exceptions specific and sets a clear procedure that requires high-level approval of exceptions.
- Encourages street connectivity and aims to create a comprehensive, integrated, connected network for all modes.
- Is adoptable by all agencies to cover all roads.
- Directs the use of the latest and best design criteria and guidelines while recognizing the need for flexibility in balancing user needs.
- Directs that complete streets solutions will complement the context of the community.
- Establishes performance standards with measurable outcomes.
- Includes specific next steps for implementation of the policy.
Sample Physical Activity Policies

DOH EXERCISE AND HEALTH ACTIVITY POLICY

A. PURPOSE:

Aerobic exercise and other health improvement activities can be a

1. The Utah Department of Health encourages all of its employees to engage in a regular program of exercise and health improvement (unless existing medical conditions make such a program inadvisable).

2. With the written approval of Bureau/Unit Director, employees who wish to exercise during the work day may be granted thirty minutes per day, for a maximum of three times per week (See Attachment #1 - Employee Request for Exercise Time). The time

| 3. Exercise programs, such as structured aerobics, walking, jogging, swimming, and bicycling, and weight control programs, are examples of programs that qualify for approval. However, other appropriate exercise programs may be approved. |
| 4. Supervisors are encouraged to contact the Healthy Utah Program if there is some concern regarding the appropriateness of activities for which approval is requested. |
| 5. The immediate supervisor must approve schedule modifications or variations to the original Employee Request for Exercise and Health Activity Release Time. |
| 6. Renewal or continuation of approval to participate in exercise and/or health activities subject to this policy shall be reviewed |

A GUIDE TO IMPROVING WORKSITE STAIRWELLS

Wouldn’t it be great if there was a way for you and your coworkers to be active during the day without having to pay for a gym membership or even having to leave your worksite? Well, there is. Surprisingly enough, those underutilized stairwells at your worksite are an inexpensive and effective way to add physical activity into anyone’s daily routine. By simply climbing up or down a few flights of stairs every day on your way to lunch or in between meetings, you will strengthen your heart, muscles, and bones without having to miss a beat during your busy workday.

To help your worksite’s stairwells improve overall health:

- Use them for enjoyable passage for all employees;
- Install non-slip or non-skid floor mats;
- Equip stairwells with non-slip or non-skid floor mats;
- Provide employees with non-slip or non-skid floor mats.

Now that you are familiar with the basics, it is time to explore ways of making the stairs more appealing and inviting to employees. Implementing any or all of these ideas can encourage employees to take the stairs. Here are a few examples below:

No waiting one door over.

How do you write policy?

http://www.publichealthlawcenter.org
Drafting effective public health policies is a critical component of achieving policy, systems and environmental change. The purpose of the following checklists is to provide useful tools to assist in the policy drafting and review process. The first checklist contains the steps in policy planning and drafting. The second checklist contains the elements that should be included in a policy. The final checklist contains questions for review of the policy to ensure that it is effective and comprehensive. Not every item will be relevant to every policy, but all should be considered. The order in which each item is carried out may vary and some items may need to be repeated.

**Policy Planning / Drafting Process Checklist**
This checklist contains the steps that should be used to plan for a policy, to develop the policy and ensure effective implementation.

<table>
<thead>
<tr>
<th>Step</th>
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<tbody>
<tr>
<td>Identify and clarify the issue that the policy is addressing</td>
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<tr>
<td>Determine if the organization has authority to enact the policy</td>
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<tr>
<td>Identify person(s) responsible for drafting the policy</td>
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<tr>
<td>Identify and involve key stakeholders</td>
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<tr>
<td>Identify sample or model policies</td>
</tr>
<tr>
<td>Draft policy (use Policy Elements Checklist)</td>
</tr>
<tr>
<td>Review policy (use Policy Review Checklist)</td>
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<tr>
<td>Check for conflicts with existing policies or laws</td>
</tr>
<tr>
<td>Review draft policy with stakeholders</td>
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<tr>
<td>Review draft policy with legal counsel or legal technical assistance</td>
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<tr>
<td>Review and finalize policy</td>
</tr>
<tr>
<td>Complete the approval process for the policy</td>
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<tr>
<td>Publicize and implement the policy</td>
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</tbody>
</table>
Policy Elements Checklist
This checklist contains the elements of an effective policy. The scope of each section will depend on the nature of the policy.

<table>
<thead>
<tr>
<th>Findings</th>
<th>Findings are brief statements of fact and/or statistics that outline the issue being addressed and support the need for the policy.</th>
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</thead>
<tbody>
<tr>
<td>Purpose</td>
<td>The purpose is a statement that explains the goal(s) the policy is intended to achieve.</td>
</tr>
<tr>
<td>Definitions</td>
<td>The definitions are detailed explanations of the key terms in the policy.</td>
</tr>
<tr>
<td>Main policy provisions</td>
<td>The main policy provisions state the prohibitions and/or requirements of the policy and identify the parties to whom the provisions apply.</td>
</tr>
<tr>
<td>Exceptions / Exemptions</td>
<td>This section contains any exemptions or exceptions to the prohibitions or requirements that are necessary to achieve the purpose of the policy.</td>
</tr>
<tr>
<td>Enforcement</td>
<td>The enforcement section identifies the parties responsible for enforcement, outlines the enforcement procedures, any penalties or fines that may be imposed, and any appeal process.</td>
</tr>
<tr>
<td>Implementation</td>
<td>The implementation section states the effective date for the policy and the steps to disseminate and publicize the policy.</td>
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</tbody>
</table>
**Policy Review Checklist**

This checklist should be referred to throughout the policy development process to ensure that the policy is comprehensive, understandable and will achieve the policy goals.

**Structure**

| Are all the key elements included? |
| Are the elements in order? |

**Findings**

| Are the findings evidence-based? |
| Do the findings support the purpose of the policy? |
| Do the findings anticipate challenges? |

**Purpose**

| Does the purpose explain the goal(s) of the policy? |

**Definitions**

| Are all the key terms defined? |
| Are any unnecessary terms defined? |
| Do the definitions anticipate new concepts or products? |

**Main Policy Provisions**

| Are all the requirements and prohibitions reasonable? |
| Do the provisions address the purpose? |
| Are the provisions consistent with other policies and laws? |
| Are the provisions clearly stated? |
| Is it clear who the policy applies to? |

**Exceptions**

| Are the exceptions or exemptions limited and written as narrowly as possible? |

**Enforcement**

| Does the policy state who is responsible for enforcing the policy? |
| Does the policy state the consequences for violating the policy? |
| Does the policy explain any appeal procedures? |

**Stylistic Considerations**

| Are the same terms used for the same concepts consistently throughout the policy? |
| Is the policy clear and concise? |
| Is the tone consistent? |
| Is the person consistent? |
| Is active voice used throughout? |

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For related publications, visit [www.publichealthlawcenter.org](http://www.publichealthlawcenter.org)

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The Public Health Law Center provides information and technical assistance on issues related to tobacco and public health. The Public Health Law Center does not provide legal representation or advice. This document should not be considered legal advice. For specific legal questions, consult with an attorney.
Caution!

- The issue of safety is always of concern.

- When writing policies and guidelines for food/nutrition and physical activity always remember the potential for illness or injury when introducing any new methodology for preparation (food-borne illness) and usage (use of exercise equipment)!
Summary

- The area of policy and environment is an evolving one.
- Everyone from city planners to green architects are looking at the environment and its effect on health.
- Organizations are getting serious about matching the talk and the walk.
- We hope this webinar and some of the ideas and links provided will help as you embark on the path to corporate wellness!
<table>
<thead>
<tr>
<th>Strategic Framework</th>
<th>Physical Activity</th>
<th>Healthy Foods</th>
<th>Tobacco</th>
<th>Mental Health &amp; Stress Management</th>
<th>Chronic Disease</th>
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<tbody>
<tr>
<td>Environment</td>
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<td>Benefit Design</td>
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<td>Information</td>
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**communications**  **data**  **wellness committee**  **leadership**  **incentives**

**Building a Foundation**

*Good Health is Good Business*
We have made the case for constructing a solid foundation of communication, leadership, benefits, and policies that can allow the programs that you build and projects that you undertake to work and flourish!
Next in our series...

- We have now completed the third in our series of Worksite Wellness Webinars; the next in our series is #4: **Worksite Wellness: Making It Come Alive**!
- It will deal with the programs and projects that can jump start individual change and help to bring employees together for shared healthy experiences at the worksite.
Want more information?

http://wichita.kumc.edu/kansas-worksite-wellness.html