



Healthy Worksite Commitment Form

Please complete this form regarding your organization's activities to make your worksite a healthier place for your employees, partners, families and the community you serve. These completed forms will help the Licking County Wellness Coalition recognize organizations for their worksite wellness efforts. Thank you!

Agency/Organization: _____

Name: _____ **Title:** _____

Address: _____

Phone: _____ **Email:** _____

Signature: _____ **Date:** _____

Please check any items your worksite is currently doing and at least one item you plan to accomplish over the next year.

Already Doing	Plan to Do in next year	1. To Improve Physical Activity
		Transform and clearly label stairwells to encourage employees and visitors to use the stairs.
		Implement activity breaks for meetings that last longer than one hour.
		Implement wellness challenges for employees, including nutrition and physical activity classes and activities, with an incentive, such as a reduced-price gym membership, as a reward for completing the challenge.
		Provide on-site fitness classes available for free to all staff and volunteers.
		Create a walkable environment and promote indoor and outdoor walking routes.
		Create a written policy allowing employees to exercise during work hours or allowing them to flex time to exercise before or after work hours.

Already Doing	Plan to Do in next year	2. To improve nutrition and access to healthy food choices and limit access to unhealthy food and beverages.
		Create a written policy of nutrition standards to ensure the availability of healthy choices in cafeterias or food service operations.
		Use vending machine snack analysis and ranking programs (e.g., <i>Snackwise</i> - www.snackwise.org) to educate staff and patients about the nutritional quality of the options available.
		Maximize the use of fresh, local foods in food service operations.
Already Doing	Plan to Do in next year	3. To reduce tobacco use and exposure to tobacco use.
		Extend 100% <i>smoke-free</i> worksite policy to include all outdoor spaces.
		Implement 100% <i>tobacco-free</i> worksite policy.
		Health insurance coverage includes tobacco use cessation counseling program.
		Health insurance coverage includes all seven FDA-approved cessation aids at reduced cost or no cost.
		Tobacco cessation program offered at the worksite.
Already Doing	Plan to Do in next year	4. To promote breastfeeding
		Support new mothers in prolonged and exclusive breastfeeding.
		Written policy supporting breastfeeding in the workplace.
		Designation of a comfortable lactation room for breastfeeding mothers.
		Health insurance coverage includes lactation support services and breast pump equipment and supplies for all participants.

Please list any additional wellness activities your organization is currently doing or plans to do in the next year:

Please email or fax completed form to:
 Nicole Smith
 Licking County Health Department
 675 Price Road, Newark, OH 43055
nsmith@lickingcohealth.org
 (740) 349-6510 (Fax)