



Worksite
Wellness
Challenge

Participant Checklist 2018

A healthy workforce is a healthy community.

2018 Worksite Wellness Challenge

Review survey results with Coach

○ Positives:

- _____
- _____
- _____

○ Challenges:

- _____
- _____
- _____

○ Goals:

- _____
- _____
- _____

Create / organize Wellness Committee

Contact insurance representative for employee wellness offerings, services, and assistance

○ Company: _____

○ Company: _____

○ Name: _____

○ Name: _____

○ Phone/Email: _____

○ Phone/Email: _____

2018 Worksite Wellness Challenge

Wellness Committee:

| Name | Department | Contact | Attendance | | | | | | | |
|-------|------------|---------|------------|-------|-------|-----|------|------|-----|------|
| | | | Feb | March | April | May | June | July | Aug | Sept |
| _____ | _____ | _____ | | | | | | | | |
| _____ | _____ | _____ | | | | | | | | |
| _____ | _____ | _____ | | | | | | | | |
| _____ | _____ | _____ | | | | | | | | |
| _____ | _____ | _____ | | | | | | | | |
| _____ | _____ | _____ | | | | | | | | |
| _____ | _____ | _____ | | | | | | | | |
| _____ | _____ | _____ | | | | | | | | |
| _____ | _____ | _____ | | | | | | | | |
| _____ | _____ | _____ | | | | | | | | |
| _____ | _____ | _____ | | | | | | | | |
| _____ | _____ | _____ | | | | | | | | |
| _____ | _____ | _____ | | | | | | | | |
| _____ | _____ | _____ | | | | | | | | |
| _____ | _____ | _____ | | | | | | | | |
| _____ | _____ | _____ | | | | | | | | |
| _____ | _____ | _____ | | | | | | | | |
| _____ | _____ | _____ | | | | | | | | |
| _____ | _____ | _____ | | | | | | | | |

2018 Worksite Wellness Challenge

February 2018: Coach / Team Meeting

- Email / phone / in-person contact with Coach – Date(s): _____
- Wellness Committee meeting(s) (weekly, 2x/month, monthly) - Date(s): _____
- Contacted insurance representative re: services, support, etc. - Date(s): _____
 - _____
 - _____
- Policy** changes updated, planned, and / or initiated (written organizational principles) (4 points.):
 - _____
 - _____
 - _____
- Environment** changes updated, planned, and / or initiated (physical changes, e.g., walkway, bike rack, exercise room, garden) (3 points):
 - _____
 - _____
 - _____
- Program** changes updated, planned, and / or initiated (ongoing events, e.g. stress management classes, tobacco cessation) (2 points):
 - _____
 - _____
 - _____
- Activity / Small** changes updated, planned, and / or initiated (e.g., one-time event, signage, brochures) (1 point):
 - _____
 - _____
 - _____
- Challenges identified:
 - _____
 - _____
- Next month's goals:
 - _____
 - _____

2018 Worksite Wellness Challenge

March 2018: Coach / Team Meeting

- Email / phone / in-person contact with Coach – Date(s): _____
- Wellness Committee meeting(s) (weekly, 2x/month, monthly) - Date(s): _____
- Contacted insurance representative re: services, support, etc. - Date(s): _____
 - _____
 - _____
- Policy** changes updated, planned, and / or initiated (written organizational principles) (4 points.):
 - _____
 - _____
 - _____
- Environment** changes updated, planned, and / or initiated (physical changes, e.g., walkway, bike rack, exercise room, garden) (3 points):
 - _____
 - _____
 - _____
- Program** changes updated, planned, and / or initiated (ongoing events, e.g. stress management classes, tobacco cessation) (2 points):
 - _____
 - _____
 - _____
- Activity / Small** changes updated, planned, and / or initiated (e.g., one-time event, signage, brochures) (1 point):
 - _____
 - _____
 - _____
- Challenges identified:
 - _____
 - _____
- Next month's goals:
 - _____
 - _____

2018 Worksite Wellness Challenge

April 2018: Coach / Team Meeting

- Email / phone / in-person contact with Coach – Date(s): _____
- Wellness Committee meeting(s) (weekly, 2x/month, monthly) - Date(s): _____
- Contacted insurance representative re: services, support, etc. - Date(s): _____
 - _____
 - _____
- Policy** changes updated, planned, and / or initiated (written organizational principles) (4 points.):
 - _____
 - _____
 - _____
- Environment** changes updated, planned, and / or initiated (physical changes, e.g., walkway, bike rack, exercise room, garden) (3 points):
 - _____
 - _____
 - _____
- Program** changes updated, planned, and / or initiated (ongoing events, e.g. stress management classes, tobacco cessation) (2 points):
 - _____
 - _____
 - _____
- Activity / Small** changes updated, planned, and / or initiated (e.g., one-time event, signage, brochures) (1 point):
 - _____
 - _____
 - _____
- Challenges identified:
 - _____
 - _____
- Next month's goals:
 - _____
 - _____

2018 Worksite Wellness Challenge

May 2018: Coach / Team Meeting

- Email / phone / in-person contact with Coach – Date(s): _____
- Wellness Committee meeting(s) (weekly, 2x/month, monthly) - Date(s): _____
- Contacted insurance representative re: services, support, etc. - Date(s): _____
 - _____
 - _____
- Policy** changes updated, planned, and / or initiated (written organizational principles) (4 points.):
 - _____
 - _____
 - _____
- Environment** changes updated, planned, and / or initiated (physical changes, e.g., walkway, bike rack, exercise room, garden) (3 points):
 - _____
 - _____
 - _____
- Program** changes updated, planned, and / or initiated (ongoing events, e.g. stress management classes, tobacco cessation) (2 points):
 - _____
 - _____
 - _____
- Activity / Small** changes updated, planned, and / or initiated (e.g., one-time event, signage, brochures) (1 point):
 - _____
 - _____
 - _____
- Challenges identified:
 - _____
 - _____
- Next month's goals:
 - _____
 - _____

2018 Worksite Wellness Challenge

June 2018: Coach / Team Meeting

- Email / phone / in-person contact with Coach – Date(s): _____
- Wellness Committee meeting(s) (weekly, 2x/month, monthly) - Date(s): _____
- Contacted insurance representative re: services, support, etc. - Date(s): _____
 - _____
 - _____
- Policy** changes updated, planned, and / or initiated (written organizational principles) (4 points.):
 - _____
 - _____
 - _____
- Environment** changes updated, planned, and / or initiated (physical changes, e.g., walkway, bike rack, exercise room, garden) (3 points):
 - _____
 - _____
 - _____
- Program** changes updated, planned, and / or initiated (ongoing events, e.g. stress management classes, tobacco cessation) (2 points):
 - _____
 - _____
 - _____
- Activity / Small** changes updated, planned, and / or initiated (e.g., one-time event, signage, brochures) (1 point):
 - _____
 - _____
 - _____
- Challenges identified:
 - _____
 - _____
- Next month's goals:
 - _____
 - _____

2018 Worksite Wellness Challenge

July 2018: Coach / Team Meeting

- Email / phone / in-person contact with Coach – Date(s): _____
- Wellness Committee meeting(s) (weekly, 2x/month, monthly) - Date(s): _____
- Contacted insurance representative re: services, support, etc. - Date(s): _____
 - _____
 - _____
- Policy** changes updated, planned, and / or initiated (written organizational principles) (4 points.):
 - _____
 - _____
 - _____
- Environment** changes updated, planned, and / or initiated (physical changes, e.g., walkway, bike rack, exercise room, garden) (3 points):
 - _____
 - _____
 - _____
- Program** changes updated, planned, and / or initiated (ongoing events, e.g. stress management classes, tobacco cessation) (2 points):
 - _____
 - _____
 - _____
- Activity / Small** changes updated, planned, and / or initiated (e.g., one-time event, signage, brochures) (1 point):
 - _____
 - _____
 - _____
- Challenges identified:
 - _____
 - _____
- Next month's goals:
 - _____
 - _____

2018 Worksite Wellness Challenge

August 2018: Coach / Team Meeting

- Email / phone / in-person contact with Coach – Date(s): _____
- Wellness Committee meeting(s) (weekly, 2x/month, monthly) - Date(s): _____
- Contacted insurance representative re: services, support, etc. - Date(s): _____
 - _____
 - _____
- Policy** changes updated, planned, and / or initiated (written organizational principles) (4 points.):
 - _____
 - _____
 - _____
- Environment** changes updated, planned, and / or initiated (physical changes, e.g., walkway, bike rack, exercise room, garden) (3 points):
 - _____
 - _____
 - _____
- Program** changes updated, planned, and / or initiated (ongoing events, e.g. stress management classes, tobacco cessation) (2 points):
 - _____
 - _____
 - _____
- Activity / Small** changes updated, planned, and / or initiated (e.g., one-time event, signage, brochures) (1 point):
 - _____
 - _____
 - _____
- Challenges identified:
 - _____
 - _____
- Next month's goals:
 - _____
 - _____

2018 Worksite Wellness Challenge

September 2018: Coach / Team Meeting

- Email / phone / in-person contact with Coach – Date(s): _____
- Wellness Committee meeting(s) (weekly, 2x/month, monthly) - Date(s): _____
- Contacted insurance representative re: services, support, etc. - Date(s): _____
 - _____
 - _____
- Policy** changes updated, planned, and / or initiated (written organizational principles) (4 points.):
 - _____
 - _____
 - _____
- Environment** changes updated, planned, and / or initiated (physical changes, e.g., walkway, bike rack, exercise room, garden) (3 points):
 - _____
 - _____
 - _____
- Program** changes updated, planned, and / or initiated (ongoing events, e.g. stress management classes, tobacco cessation) (2 points):
 - _____
 - _____
 - _____
- Activity / Small** changes updated, planned, and / or initiated (e.g., one-time event, signage, brochures) (1 point):
 - _____
 - _____
 - _____
- Challenges identified:
 - _____
 - _____
- Next month's goals:
 - _____
 - _____

2018 Worksite Wellness Challenge

October 2018: Coach / Team Meeting

- Email / phone / in-person contact with Coach – Date(s): _____
- Wellness Committee meeting(s) (weekly, 2x/month, monthly) - Date(s): _____
- Contacted insurance representative re: services, support, etc. - Date(s): _____
 - _____
 - _____
- Policy** changes updated, planned, and / or initiated (written organizational principles) (4 points.):
 - _____
 - _____
 - _____
- Environment** changes updated, planned, and / or initiated (physical changes, e.g., walkway, bike rack, exercise room, garden) (3 points):
 - _____
 - _____
 - _____
- Program** changes updated, planned, and / or initiated (ongoing events, e.g. stress management classes, tobacco cessation) (2 points):
 - _____
 - _____
 - _____
- Activity / Small** changes updated, planned, and / or initiated (e.g., one-time event, signage, brochures) (1 point):
 - _____
 - _____
 - _____
- Challenges identified:
 - _____
 - _____
- Next month's goals:
 - _____
 - _____