



Missouri Workplace Wellness Award

Recognition Available for Worksites Promoting Wellness

The Missouri Department of Health and Senior Services (DHSS) in partnership with the University of Missouri Extension (MU EXT) has launched the *Missouri Workplace Wellness Award* program, which recognizes employers that invest in creating a working environment that supports healthy behaviors. Employers are recognized based on criteria for their level of support: Gold, Silver and Bronze.

The minimum criteria for recognition at the Bronze level are:

- Assessment of employer and employee needs interests, health risks and existing capacity.
- Planning process resulting in a workplace health improvement plan to guide the worksite through program development. Includes measurable objectives, interventions, and outcomes.
- Implementation of programs and practices to address employee lifestyle risk factors related to physical activity, nutrition, tobacco use and stress relief. Program infrastructure is built within the worksite for long-term sustainability including wellness committee and leadership support. Participation in programmatic activities, training, and technical assistance.
- Evaluation of data and organizational changes.
- Worksites will be asked to meet other minimum criteria on the topics of Policy & Education, Facilities, and Resources.

Benefits of Workplace Wellness Support for Employers

Adult Americans spend a significant amount of the day at the worksite, so it is a logical place to find new ways to encourage and promote physical activity and other factors that promote health. Workplace wellness programs are designed by companies to support employees in their health decisions. These programs focus on areas such as nutrition, stress reduction, tobacco cessation, breastfeeding, health screening, weight loss and physical activity. The return-on-investment for establishing wellness programs in the workplace can be significant. Find out more about cost savings by visiting the Centers for Disease Control and Prevention's (CDC) website at <https://www.cdc.gov/workplacehealthpromotion/index.html>

Instructions & More Info

Applications for the award maybe downloaded from <https://extension2.missouri.edu/programs/worksites-wellness> Applications are accepted on a rolling basis and reviewed by MU EXT and MOCAN's Worksite Workgroup. Employers who meet the qualifications will be notified and receive a framed certificate and window clings to inform current and potential employees and visitors about their designation. Recognized businesses will also be listed on DHSS' website, receive a template for announcements on social media, and the opportunity to connect with a worksites workgroup member in person to receive their award.

Free resources (posters, campaigns, links, etc.) can be downloaded from the DHSS website at <http://health.mo.gov/living/wellness/worksiteswellness/index.php>. The [WorkWell Missouri Toolkit](#) is a comprehensive guide for developing a well-organized worksite wellness committee. This toolkit developed by the University of Missouri Extension provides step-by-step instructions for developing and planning a wellness program that supports healthy eating, physical activity, tobacco cessation and stress management. Worksites may re-apply for designation every 2 years. For more information about the award program, please contact Kelsey Weitzel at workwellmissouri@missouri.edu or 573-882-2799.



APPLICATION FOR THE MISSOURI “Workplace Wellness Award”

The Missouri Department of Health and Senior Services (DHSS) and the University of Missouri Extension would like to recognize employers in Missouri that provide worksite support of healthy behaviors to their employees through the “**Workplace Wellness Award.**” Employers are evaluated based on criteria for three levels of support: **Gold, Silver, and Bronze.** When one of the levels is reached, they will be recognized with a framed certificate, window cling, and recognition on DHSS’ website. All forms of recognition are voluntary.

Name of Employer: _____

Type of Business: _____ # of Employees: _____

Address: _____

Contact Person’s Name: _____

Phone: _____ Email: _____

Person who assisted employer (if applicable): _____

Requirements:

- Check list of worksite wellness accommodations provided by the employer (see next page)
- Copy of written company policies supportive of wellness (if applicable)
- Photos of worksite wellness accommodations

Minimum Criteria for any Level

Check box if business meets criteria

- Assessment** of employer and employee needs, interests, health risks and existing capacity.
- Planning** process resulting in a workplace health improvement plan to guide the worksite through program development. Includes measurable objectives, interventions, and outcomes.
- Implementation** of programs and practices to address employee lifestyle risk factors related to physical activity, nutrition, tobacco use and stress relief. Program infrastructure is built within the worksite for long-term sustainability including wellness committees and leadership support. Participation in programmatic activities, training, and technical assistance.
- Evaluation** of data and organizational changes.

Name of resource used to assist with this process (i.e. WorkWell Missouri Tool Kit, CDC scorecard): _____



Check List of Worksite Wellness Accommodations

Check box if business meets criteria

Criteria	Bronze Must have above and all of the following:	Silver Meets Bronze requirements plus one or more of each topic:	Gold Meets Silver requirements plus two or more of each topic:
Policy & Education	<input type="checkbox"/> Management encouragement of healthy behaviors shown by letter of support	<input type="checkbox"/> Written worksite wellness support policies <input type="checkbox"/> Verbal information provided to all employees about worksite wellness support <input type="checkbox"/> Educational packet about worksite wellness given to all employees	<input type="checkbox"/> Written worksite wellness policy with education provided for all employees <input type="checkbox"/> Smoke/Tobacco free campus policy <input type="checkbox"/> Completed other benchmarking tool such as CDC Worksite Health ScoreCard or American Heart Association's Workplace Health Achievement Index (attach benchmark report if applicable)
Facilities	<input type="checkbox"/> Encourages employees to use breaks for healthy choices <input type="checkbox"/> Encourages employees to use sick/wellness leave and vacation leave to support overall wellness	<input type="checkbox"/> Private, secure area for breastfeeding mothers to express milk** if requested <input type="checkbox"/> Provides kitchen supplies such as microwave, refrigerator, etc.	<input type="checkbox"/> Received a <i>Missouri Breastfeeding Friendly Workplace</i> award*** <input type="checkbox"/> Has exercise area onsite <input type="checkbox"/> Has area onsite for wellness such as stress relief, taking blood pressure, weight, etc. <input type="checkbox"/> Policy for healthy food choices during meetings, celebrations, cafeteria/vending, etc.
Resources	<input type="checkbox"/> Health is promoted to staff through newsletters, bulletin boards, etc.* <input type="checkbox"/> Formal wellness committee composed of 2 or more staff	<input type="checkbox"/> Employee Assistance Program is available <input type="checkbox"/> Formal health insurance provided to staff <input type="checkbox"/> Other benefit options that support wellness (please list) _____	<input type="checkbox"/> Exercise/tobacco cessation or other health services provided for employees (via insurance or paid by employer) <input type="checkbox"/> Formal health insurance provided to staff and families <input type="checkbox"/> Wellness committee is representative of all work units

* Free materials can be found at <http://health.mo.gov/living/wellness/worksitewellness/displays.php>

** "...a place, other than a bathroom, that is shielded from view and free from intrusion from coworkers and the public..." Fair Labor Standards Act, Sec. 4207

*** Missouri "Breastfeeding Friendly Workplace" award: <http://health.mo.gov/living/families/wic/breastfeeding/support.php>

Mail or Email this completed form to:

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