



APPLICATION PACKAGE

HARC's Workplace Wellness Awards

Awards Luncheon to be held:
June 6th, 2019 from 11:30am to 1:30pm
The Classic Club in Palm Desert



APPLICATION FOR THE COACHELLA VALLEY WORKPLACE WELLNESS AWARDS

Thank you for your interest in HARC's 4th Annual Coachella Valley Workplace Wellness Awards. Employers like you are leading the way to creating a healthier Coachella Valley.

About the Awards

Applications will be judged in two separate groupings: small workplaces (1 to 100 employees) and large workplaces (100+ employees). For each of these groups, HARC will recognize a winner for each of the following categories: Nutrition, Fitness, & Health; Safety & Environment; Mental Health & Wellness; and an overall Grand Prize Winner. Thus, a total of eight awards will be granted.

Applications will be judged via a blind process by a panel of volunteer judges knowledgeable in workplace wellness. Winners will be announced on June 6, 2019 during the awards luncheon.

About the Application

This application is an initial assessment of your workplace wellness program(s) and should be completed by someone who is highly knowledgeable about health promotion in your workplace and your general work environment (for example, CEO, human resources manager, safety manager, etc.). **All workplaces are welcome to apply except previous Grand Prize Winners in the Large Organization Category.** Feel free to complete one or all sections of this application that relate to your particular workplace. You may leave any questions blank.

There are sections of this application related to each of the three categories:

1. **Nutrition, Fitness, & Health** (12 questions)
2. **Safety & Environment** (11 questions)
3. **Mental Health & Wellness** (11 questions)

Please submit your completed application by email to jquintana@HARCdata.org or by mail to 41550 Eclectic Street Suite B100, Palm Desert, CA 92260. All applications must be received by April 26th, 2019 at 5pm. All workplaces that apply will be given **two free tickets** to the awards luncheon.

After completing the application, a HARC staff member will arrange a follow-up phone call to obtain additional details.

Questions or Concerns

If you have any questions or concerns, please feel free to contact HARC at 760-404-1945 or via email at jquintana@HARCdata.org.

About Your Workplace

Workplace Name (as you wish to be acknowledged):

Address:

Contact Name:

Contact Title:

Contact Email Address:

Contact Phone Number:

Number of Employees:

- Part-time:
- Full-time:

Please share your mission, vision statement, or core values that support employee health.

Nutrition, Fitness, and Health

1. Does your workplace provide health insurance to employees?
 - Yes, for both full-time and part-time employees
 - Yes, only for full-time employees and NOT part-time employees
 - No

2. Does your workplace provide health insurance to employees' family-members (such as spouses and children)?
 - Yes
 - No

3. Does your workplace have an active health promotion staff member, department, committee or team?
 - Yes
 - No

4. Does your workplace provide free health screenings for your employees (for example, cholesterol screening, diabetes screening, etc.)?
 - Yes
 - No
 - Not applicable

5. Does your workplace offer free flu shots to your employees?
 - Yes
 - No
 - Not applicable

6. Does your workplace offer incentives to employees for behavior change (for example, incentives for weight loss or smoking cessation)?
 - Yes

- No
- Not applicable

7. Does your workplace have any of the following policies to support employee health?

- Make work time (paid) for physical activity
- Require healthy vending options (for example, water, unsweetened flavored drinks, fresh fruit, low-fat and low-sodium snacks) or freely accessible healthy snacks
- Require healthy food options at meetings or employee gatherings
- Tobacco-free worksite
- Not applicable

8. Does your workplace provide employees with food preparation and storage facilities? (for example, a microwave oven, a refrigerator, a sink, etc.)

- Yes
- No
- Not applicable

9. Does your workplace provide an exercise facility for employees on-site or provide a space for recreation or physical activity for employees? For example: gym, walking route, bike racks, basketball courts, open space for exercise, etc.

- Yes
- No
- Not applicable

10. Does your workplace discount or subsidize the cost of an off-site exercise facility for employees? For example, gym discount or reimbursement for gym membership

- Yes
- No
- Not applicable

11. Does your workplace post signs next to the elevators encouraging employees to take the stairs instead?

- Yes
- No
- Not applicable, my workplace only has a ground floor.

12. Does your workplace provide any other programs to address employee nutrition, fitness, and health?

- Yes
- No

If yes, please describe:

Safety & Environment

13. Does your workplace have an active safety staff member, department, committee or task force?

- Yes
- No
- Not applicable

14. Are there incentives/rewards for employees who report unsafe working conditions or suggest changes to improve safety?

- Yes
- No
- Not applicable

15. Does your workplace conduct regular walk-throughs scheduled and conducted to examine workplace safety (for example, checking whether shelves are anchored to the wall, whether extension cords are daisy-chained, whether people are wearing their personal protective equipment as recommended, etc.)?

- Yes
- No
- Not applicable

If yes, how often?

16. Does your workplace offer safety training to more than just new employees (for example, annual refresher courses, etc.)?

- Yes
- No
- Not applicable

17. Does your workplace offer training courses about workplace violence/how to diffuse angry customers safely?

- Yes
- No
- Not applicable

18. Does your workplace offer CPR training?

- Yes
- No
- Not applicable

19. Does your workplace offer ergonomic assessments for your employees?

- Yes
- No
- Not applicable

20. Does your workplace provide ergonomic adjustments, such as standing desks, for your employees?

- Yes
- No
- Not applicable

21. Does your workplace offer training to employees on how to avoid repetitive stress injuries (for example, stretching suggestions, “every 20 minutes, look away from your screen for 20 seconds at something 20 feet away to protect your eyes from screen fatigue”, etc.)?

- Yes
- No
- Not applicable

22. Does your workplace or any of your employees participate in group stretching activities before physical labor?

- Yes
- No
- Not applicable

23. Does your workplace offer any other programs to address employees' safety and environment?

- Yes
- No

If yes, please describe.

Mental Health and Wellness

24. Does your workplace have any of the following policies to support employee health?

- Use work time (paid) for stress management
- Tobacco counseling or cessation classes
- Mental health programming
- Personal day leave policy
- Parental leave policy for men and women
- A return to work program for new parents
- Provide financial education

25. Does your workplace provide relaxation programs/resources for your employees (for example, massage, yoga, meditation, etc.)?

- Yes
- No
- Not applicable

26. Does your workplace have a flexible work schedule policy for employees? (for example, flextime or work-from-home arrangements)

- Yes
- No
- Not applicable

27. How does your workplace incorporate flexible work scheduling with employees?

- Flexible time off
- Job sharing arrangements
- Telecommuting opportunities
- Time agnostic work
- N/A
- Other (please specify):

28. Does your workplace provide employees with on-site childcare, or stipends for childcare?

- Yes
- No
- Not applicable

29. Does your workplace provide opportunities for employees to interact and bond together as a team (for example, holiday parties, birthday parties, staff bonding activities, etc.)?

- Yes
- No
- Not applicable

30. Does your workplace have a mentoring program for new employees?

- Yes
- No
- Not applicable

31. Which practices does your organization have in place to ensure safe, respectful and/or engaged work environments?

- Equal pay assessments and policy
- Personality and behavioral self-assessments
- Educational group training across all levels
- Employee developmental opportunities
- Career development coaching and planning
- Career satisfaction surveys
- Regular cultural and employees' feedback/surveys
- Accounting for generational differences in your workplace policies
- Other (please specify):
- Not applicable

32. Does your workplace provide rewards and recognition for high performing employees (for example, “staff member of the month” recognition, performance bonuses, etc.)?

- Yes
- No
- Not applicable

33. Are supervisors at your workplace provided with training on how to be a supportive leader?

- Yes
- No
- Not applicable

34. Does your workplace offer any other programs to address employees’ mental health and wellness?

- Yes
- No

If yes, please describe.

End of Application

Our organization will make every effort to send at least one authorized representative to the awards ceremony on June 6th, 2019.

- Yes
- No

I acknowledge that HARC may ask for additional follow-up information to ensure accuracy of this completed application.

Note: All workplaces that apply will be awarded two free luncheon tickets.

- Yes
- No

Please attach your company logo for us via email along with your application. Please upload in .png or .jpg format. **By uploading your company logo, you agree to granting HARC full authorization to use your company logo only for promotional purposes of the 2019 Coachella Valley Workplace Wellness Awards.**

Please attach 2-5 photos to show your wellness programs in action via email along with your application. Please provide high-resolution files that are suitable for printed materials. **By uploading your company pictures, you agree to granting HARC full authorization to use your photos only for promotional purposes of the 2019 Coachella Valley Workplace Wellness Awards.**

How did you hear about the Workplace Wellness Awards?

- I was a participant
- Press Release
- Constant Contact

- Social Media
- News media outlets
- Other (please specify)

Thank you for completing the initial application for the Coachella Valley Workplace Wellness Awards. A HARC staff member will be in touch with your contact person to schedule a call to discuss the great programs at your workplace. This call will help us to understand the amazing programs you provide for your employees.