



# Creating a Culture of Wellness

## *WELCOA Quick Culture Inventory*

### TOBACCO USE

In addition to our tobacco policy, our organization also (check all that apply)

<input type="checkbox"/>	Reimburses for tobacco cessation courses
<input type="checkbox"/>	Prohibits the hiring of tobacco users
<input type="checkbox"/>	Offers peer support groups, mentoring/coaching opportunities
<input type="checkbox"/>	Promotes community resources
<input type="checkbox"/>	Provides or employees with an Internet/Intranet site that includes Tobacco Use educational information

### NUTRITION/WEIGHT MANAGEMENT

Our organization (check all that apply)

<input type="checkbox"/>	Offers healthy food options in vending machines
<input type="checkbox"/>	Offers healthy food options at all company meetings/functions
<input type="checkbox"/>	Has an onsite cafeteria that offers health food options
<input type="checkbox"/>	Offers peer support groups, mentoring/coaching opportunities
<input type="checkbox"/>	Promotes community resources
<input type="checkbox"/>	Provides our employees with an Internet/Intranet site that includes Nutrition/Weight Management educational information

### WORKSTATION/ERGONOMICS

Our organization (check all that apply)

<input type="checkbox"/>	Provides our employees with information on ergonomic issues
<input type="checkbox"/>	Provides ergonomic information for home or remote offices
<input type="checkbox"/>	Provides employees information regarding posture and eye-strain
<input type="checkbox"/>	Ensures all workstations are ergonomically sound
<input type="checkbox"/>	Monitors our facility's heating, lighting, and ventilation
<input type="checkbox"/>	Incorporates stretch and fitness breaks and exercises throughout the day
<input type="checkbox"/>	Utilizes community resources
<input type="checkbox"/>	Provides our employees with an Intranet/Internet site that includes Workstation/Ergonomics educational information

### ALCOHOL/DRUGS

In addition to our formal/alcohol/drug policy, our organization (check all that apply)

<input type="checkbox"/>	Offers peer support groups and mentoring opportunities
<input type="checkbox"/>	Offers employee counseling for alcohol or drug related problems
<input type="checkbox"/>	Require a drug test prior to employment
<input type="checkbox"/>	Promotes community resources
<input type="checkbox"/>	Provided our employees with an Internet/Intranet site that includes Alcohol/Drugs educational information



### FINANCIAL WELLNESS

Our organization (check all that apply)

<input type="checkbox"/>	Offers training to teach about financial literacy and build wealth
<input type="checkbox"/>	Provides financial milestone training (retirement, college, etc.)
<input type="checkbox"/>	Provides our employees with an Internet/Intranet site that includes Financial Wellness educational information
<input type="checkbox"/>	Provides community resources

### STRESS MANAGEMENT

Our organization (check all that apply)

<input type="checkbox"/>	Offers assistance to help employees address issues on stress management
<input type="checkbox"/>	Offers peer support groups, mentoring/coaching opportunities
<input type="checkbox"/>	Offers “Well Days” off for our employees
<input type="checkbox"/>	Provides our employees with an Internet/Intranet site that includes Stress Management educational information
<input type="checkbox"/>	Offers employee counseling for other work/family issues
<input type="checkbox"/>	Promotes community resources
<input type="checkbox"/>	Provides subscription or reimbursement to employees to access wellness-based apps

### ORGANIZATIONAL BENEFITS

Our organization offers the following benefit options (check all that apply)

<input type="checkbox"/>	Health Insurance
<input type="checkbox"/>	Disability
<input type="checkbox"/>	Work at Home/Telecommuting
<input type="checkbox"/>	Sick Leave/Well Days Off
<input type="checkbox"/>	Leave of Absence
<input type="checkbox"/>	Compensatory Time Off
<input type="checkbox"/>	Vacation
<input type="checkbox"/>	Flex Time
<input type="checkbox"/>	Retirement/Investment Plan
<input type="checkbox"/>	Maternal/Paternal Leave
<input type="checkbox"/>	Family Leave
<input type="checkbox"/>	Tuition or Continuing Education Reimbursement
<input type="checkbox"/>	Job Sharing
<input type="checkbox"/>	Employee Assistance Program
<input type="checkbox"/>	Flexible Spending Account or Health Saving Account
<input type="checkbox"/>	Child Care
<input type="checkbox"/>	Financial Wellness
<input type="checkbox"/>	Life Insurance
<input type="checkbox"/>	Health Promotion Program Prepayment or Reimbursement
<input type="checkbox"/>	Recognition Programs
<input type="checkbox"/>	Other:

**ORGANIZATIONAL POLICIES**

Our organization has the following policies established (check all that apply)

<input type="checkbox"/>	Workplace Tobacco Policy
<input type="checkbox"/>	Alcohol/Drug Policy
<input type="checkbox"/>	Seatbelt Policy
<input type="checkbox"/>	Safety/Emergency Procedures Policy
<input type="checkbox"/>	Organizational Statement on Mental Health
<input type="checkbox"/>	Other: