



MAYOR'S HEALTH & FITNESS COUNCIL
To make Austin the healthiest, fittest city in the US.

Mayor's Health and Fitness Awards - Healthiest Workplaces

Is your workplace the healthiest place to work in Austin? The most innovative? Compete to find out! To compete for any of the following awards, workplaces must first be Mayor's Health and Fitness Council Certified (Bronze, Silver, or Gold certification levels qualify).

Award Categories

- ❖ Mayor's Healthiest Workplace: For-profit or Non Profit*
- ❖ Mayor's Healthiest Workplace: School District or Government Organization
- ❖ Most Innovative Wellness Program

*This award will be provided in each of the following size categories:

- Under 50 (less than 50 employees)
- Small (50-249 employees)
- Medium (250-499 employees)
- Large (500 - 4999 employees)
- Extra Large (>5000 employees)

How are awards determined?

The Mayor's Healthiest Workplace Awards will be determined by combining the following scores:

- ❖ Most recent partner certification score the worksite received. Must have been received within 2 years. Up to 100 points possible
- ❖ Bonus points. Workplaces that are certified at the Silver level receive 10 bonus points and workplaces at the Gold level receive 20 points
- ❖ Community engagement and Innovation question points. Up to 35 points possible
- ❖ The Innovation Award is determined by Question #4 on the Community engagement and Innovation Questionnaire.

When will awards be given out?

Awards will be given out at a yearly awards ceremony.

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Community Engagement and Innovation Questionnaire

1. Community Health Events – Please list the health events* your organization formerly participated in (registered as a team) and fill in the matrix with the details of this event. (10 points total)

For example:

- Runs & Walks (e.g. Capital 10K, Austin Heart Walk, Komen for the Cure)
- Health Challenges (e.g. It's Time Texas Community Challenge, Million Mile Month, Walk Texas & More 10 week challenge)
- A one-day health event hosted by your organization with a community health focus (i.e. can't just be for employees)

*Note: a health event is defined as a distinct event which may occur more than once.

List Event Name	How many times did this event happen (use whole number from 1-10)	Type of participation (indicate all that apply) <ul style="list-style-type: none"> - Fundraising/send team or individuals to the event - Promote internally - Promote externally - Host - Sponsor 	What percentage of the employees participated? (choose from the following) <ul style="list-style-type: none"> - Less than 25% - 25% - 50% - 75% - 100%
Event 1			
Event 2			
Event 3			

2. Partnerships for Health - List the partnerships your worksite has with health and wellness groups (for-profit or non-profit) in the community to make healthy eating and physical activity opportunities available to your employees (NOT otherwise listed in the Partner Certification Application) (10 Points Total)

For example, this could be

- Organizational-level partner for **physical activity**:
 - Gym memberships or membership discounts (e.g. YMCA, Lifetime Fitness)
 - Personal trainers
- Organizational-level partner for **individual nutrition support**:
 - Weight management (e.g. Weight Watchers, dietitian, nutrition counseling)
- Organization-level partner for other **individual lifestyle management**:
 - Sleep, stress, financial, or work/life integration
- Organizational-level partner for **healthy eating in the workplace**:
 - Healthy catering or healthy vending

List Community Partner	What type of partnership is this? - Physical Activity - Nutrition Support (Individual) - Lifestyle Management (Individual) - Healthy Eating in the Workplace	How did you establish this partnership? (indicate only one) - Vendor contacted our organization - Our organization contacted vendor	Does this partnership offer an ongoing health opportunity for your employees: (indicate only one) - Yes - No	Are these services offered: (indicate only one) - Onsite - Offsite	Did the employer make a monetary investment (i.e. partially or fully pay membership fees for employees) - Yes - No
Partner 1					
Partner 2					
Partner 3					

3. Giving Opportunities – Supporting Other Health & Wellness Non-Profits

List the worksite giving opportunities that your organization provides to its employees. These giving opportunities are specifically for health and wellness non-profits and community organizations. (5 Points)

For example,

- **Combined giving campaign** for a specific health and wellness organization;
- **Donation drive** for school supplies, coats and jackets, eyeglasses, turkeys, etc.;
- Capital Area Food Bank **food drive**;
- **Volunteering or mentoring** at local schools or organization;
- Meals on Wheels, Habitat for Humanity, United Way **individual or group volunteerism**;
- **Blood Drive**;
- **Awareness Campaign** (e.g. Alzheimer’s Awareness month and fundraiser).

List Giving Opportunity	Indicate whether employees/organization participated or volunteered, made a monetary donation, and/or made a material donation (indicate all that apply) - Participated/volunteered - Made a monetary donation - Made a material donation
Giving Opportunity 1	
Giving Opportunity 2	
Giving Opportunity 3	

4. Innovation - Please briefly describe how your wellness program is innovative using the following question prompts. (10 points total)
- Provide specific examples of innovative programs or practices that you have implemented.
 - How does each of the programs or practices listed above address innovation specifically?
 - What were the outcomes* that your programs or practices achieved? (*Note: an outcome is a change that came about in thinking, behavior, or health because of the program. Outcomes can be measured quantitatively or qualitatively.)
 - How did you measure the outcomes* listed above and track progress? (Note: an outcome is a change that came about in thinking, behavior, or health because of the program. Outcomes can be measured quantitatively (e.g. program evaluation survey) or qualitatively (e.g. employee success stories).)
 - Describe how the innovative wellness program(s) or practice(s) is/are evidence-based*? (*Note: Evidence-based includes intervention programs or practices that are:
 - supported by scientific research;
 - recommended by the Centers for Disease Control or other health governing body;
 - promising practice from another organization; OR internally-evaluated approach or change in program/practice based on internal lessons learned (i.e. organization has implemented, tested and modified the program or practice).

Innovation #1:

Specific example of Innovative Program or Practice:	
Innovation:	
Outcomes:	
Measure:	
Evidence-based program:	

*Note: Copy and Paste this table as many times as needed to fully list innovative programming in your organization.

5. Organizations entering the Mayor's Health and Fitness Awards are eligible to receive a grant up to \$1,000 to support health and wellness initiatives. If your organization were to win, how would the grant be used?

Supporting which initiative:

- a. Tobacco-Free Living
- b. Physical Activity
- c. Nutrition
- d. Health Education & Preventive Services (including Mother Friendly Worksites)
- e. Other (please list) –

Please provide a brief description:

*Note: To share your success, MHFC asks that winners submit a brief description of how your organization utilized the awarded funds within 6 months. At the point of submitting in your information, you are encouraged to provide any photographs or video that depict how funds enhanced your wellness program. More details will be provided if you are selected as a Mayor's Healthiest Workplace.