

Blue Edge ROADMAP TO A HEALTHY ORGANIZATION

Organization Name: _____

Date: _____

- Click on the **blue** circles to mark each action your organization supports

				Comments/Next Steps:			
				BUILDING FOUNDATIONS	CREATING HEALTHY HABITS	SUSTAINING CHANGE	
				Incorporate at least 1 action item	Incorporate 1-2 action items	Incorporate 3+ action items	
LEADERSHIP SUPPORT		Leadership engages through any of the following:		<input type="radio"/> Written and/or verbal communication <input type="radio"/> Leaders highlight and celebrate wellness <input type="radio"/> Part of a corporate strategic plan <input type="radio"/> Wellness is part of the company's vision/mission	<input type="radio"/> Wellness participation is supported as schedule allows <input type="radio"/> Leadership participates in the wellness program and community <input type="radio"/> Blue Edge funds, in-kind contributions, and additional financial contributions		
WELLNESS TEAM DESIGN		Incorporate at least 1 team element		Required for all levels: <input type="radio"/> Regularly scheduled wellness team meetings	Enhancing team elements: <input type="radio"/> Lead has employee wellness efforts as part of their job description or annual performance goal	<input type="radio"/> Dedicated wellness contact <input type="radio"/> Has a formal wellness committee or team with diverse representation, responsible for planning and promoting wellness	
DATA		Utilize 1-2 sources of data		Use data from any of the following sources:	<input type="radio"/> Health assessment/biometric screenings <input type="radio"/> Health interest survey or focus group to assess employees' wants, needs and feelings <input type="radio"/> Vendor data (EAP, WC, dental, etc.)	<input type="radio"/> Blue Cross VT analytic data <input type="radio"/> Culture/engagement survey	
PREVENTIVE CARE		<input type="radio"/> Launch "Make the Most of Your Health Plan" campaign <input type="radio"/> Establish current preventive care visit rate		<input type="radio"/> Offer Preventive Care Letter with optional incentive <input type="radio"/> Promote <i>My Care Checklist</i> <input type="radio"/> Share <i>Find a Doctor Tool</i> <input type="radio"/> Aim for a rate of 35-45%	<input type="radio"/> Offer on-site screenings <input type="radio"/> Promote telemedicine services <input type="radio"/> Launch <i>Know Before You Go</i> <input type="radio"/> Encourage completion of age-appropriate screenings and other relevant screenings (vision, dental, vaccines, etc.) <input type="radio"/> Aim for a rate of 45% or higher		
INITIATIVES TO SUPPORT THE WHOLE EMPLOYEE		The goal is for the organization to support the full spectrum of health and wellness: <input type="radio"/> Physical <input type="radio"/> Mental/emotional <input type="radio"/> Social <input type="radio"/> Spiritual <input type="radio"/> Work/career <input type="radio"/> Community <input type="radio"/> Financial					
TYPES OF PROGRAMMING		<input type="radio"/> Awareness and/or education		<input type="radio"/> Awareness <input type="radio"/> Education <input type="radio"/> Behavior change	<input type="radio"/> Awareness <input type="radio"/> Education <input type="radio"/> Behavior change	<input type="radio"/> Cultural enhancement <input type="radio"/> Facilitating connection	
WELLNESS PROGRAMMING		<input type="radio"/> Implement a minimum of one program that addresses BEC's top conditions (Musculoskeletal, Mental Health, and Circulatory)		<input type="radio"/> Implement a minimum of two programs that support behavior change and address BEC's top conditions		<input type="radio"/> Offer a minimum of three programs that address all top conditions <input type="radio"/> Programming type to include awareness, education, behavior change, cultural and environmental enhancements	
WELLNESS FUNDING							

Questions? Contact your Health and Wellness Consultant, or click [here](#) for more information.