

This tool was created with a manufacturing environment in mind. For use in other environments, adaptations may need to be made to adjust for the unique setting.

EAT Scoring Guide

The Environmental Assessment Tool (EAT) is a comprehensive tool assessing the physical work environment and policies as they relate to health promotion. Pages one through four describe the scoring scheme used for the EAT tool. The tool can be found beginning on page five.

EAT Components

1.	<u>Physical Activity Assessment</u>		
	a. Parking/bike assessment	4 points	
	b. Stairs/elevator assessment	4	
	c. Shower/changing facilities	6	
	d. Signs/bulletin boards (PA)	4	
	e. Physical activity/fitness facilities	14	
			Total 32
2.	<u>Nutrition and Weight Management</u>		
	a. Signs/bulletin boards	4	
	b. Vending	12	
	c. Cafeterias/food services	16	
			Total 32
3.	<u>Organizational Characteristics and Support</u>		
	a. Site characteristics	4	
	b. Work rules	6	
	c. Written policies	6	
	d. HP Programs		
	physical activity	7	
	diet/nutrition	7	
	weight management	6	
			Total 36

Note: **Blue** text indicates section where scoring component can be found within the EAT.

1. Physical Activity Assessment

a. Parking/Bike Assessment – 4 points total

What is the distance from the main buildings to the main parking area? **(II H 1)**

=> 500 ft = 1 point

Number of signs in parking area encouraging drivers to park farther from building entrances **(II H 2)**

Any = 1

Number of bike rack spaces on grounds **(II H 4)**

Any = 1

Number of bikes parked in spaces on grounds: **(II H 5)**

Any = 1

b. Staircase Use/Elevator Assessment – 4 points total

Sign encouraging use of stairs at building entrance or at elevators **(II I 6)**

Any = 1

Stairway Characteristics **(II I 7)**

Staircase not enclosed in stairwell	Average of 6 or more “yes” responses for all stairs assessed = 3 points
Able to see stairs from entrance	
Door marked "stairs" (not just exit)	Average of 5 “yes” responses for all stairs assessed

Door is unlocked on most floors No warnings or cautions on door Floor number labeled inside of stairway No restricted exit (locked from inside) Signs encouraging use of stairs	= 2 Average of 3 “yes” responses for all stairs assessed = 1
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c. Changing Facility – 6 points total

Does the worksite provide a shower/changing facility for employees who want to engage in physical activity while at work? **(II J 1)**

Yes = 3 points

If yes, is the facility easily accessible to most employees within a 10 minute walk from the work area or workstation? **(II J 4)**

Yes = 3

d. Signs and Bulletin Boards – 4 points total

Physical Activity **(II K 1)**

Signs encouraging PA in all 4 areas assessed = 4 points

Signs encouraging PA in 3 areas assessed = 3

Signs encouraging PA in 2 areas assessed = 2

Signs encouraging PA in 1 area assessed = 1

e. Physical Activity and Fitness Facilities – 14 points total

Exercise facility onsite (in the building or on the grounds)? Yes = 2 points **(II L 1 / I G 1)**

Is the fitness facility staffed with credentialed instructors or trainers? Yes = 1 **(II L 4 / I G 2)**

Size of workout area **(II L 5)**

=> 600 square feet per 500 employees = 1

Hours available **(II L 7)**

Before and after work = 1 point

During work = 1 point

Equipment **(II L 8)**

Aerobic and strength equipment and => 6 stations per 500 employees = 2

Aerobic and strength equipment and 4 stations per 500 employees = 1

Other workout Areas **(II L 9)**

<input type="checkbox"/> Outdoor exercise areas or playing fields <input type="checkbox"/> Area inside facility for aerobics, dance, stretching, or other activity <input type="checkbox"/> Racquetball courts <input type="checkbox"/> Track or walking/running paths <input type="checkbox"/> Basketball courts (indoor or outdoor) <input type="checkbox"/> Volleyball courts (indoor or outdoor) <input type="checkbox"/> Tennis courts (indoor or outdoor) <input type="checkbox"/> Other (specify)	Three or more areas = 2 points Two areas = 1 point
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Sport teams sponsored by worksite. Yes = 1 **(II G 4)**

Flextime to accommodate PA. Yes = 1 **(II G 4)**

Subsidize memberships in off-site facilities. Yes = 2 **(II G 5)**

2. Nutrition and Weight Management

a. Signs and Bulletin Boards – 4 points total

Nutrition **(II K 2)**

Signs encouraging healthy eating/weight mgmt in all 4 areas assessed = 4

Signs encouraging healthy eating/weight mgmt in 3 areas assessed = 3

Signs encouraging healthy eating/weight mgmt in 2 areas assessed = 2

Signs encouraging healthy eating/weight mgmt in 1 area assessed = 1

b. Vending Machine Assessment – 12 points total

Beverage Machines (II N)

Average % slots devoted to healthy items (use total # of slots in machine data)

50% = 3 points

30 to 49% = 2

20 to 29% = 1

Average pricing of healthy and unhealthy items

3 or more healthy items prices less than comparable unhealthy item = 3 pts

2 healthy items prices less = 2 points

1 healthy items prices less = 1 item

Food/Snack Machines (II N)

Average % slots devoted to healthy items (use total # of slots in machine data)

=> 50% = 3 points

30 to 49% = 2

20 to 29% = 1

Average pricing of healthy and unhealthy items

Any 3 or more healthy items prices less = 3 points

Any 2 healthy items prices less = 2

Any healthy item prices less = 1

c. Cafeteria/Food Services – 16 points total (II O)

Nutritional information clearly labeled and positioned. Any = 2 points

Healthy items priced lower than less healthy. Any = 1

Baked/broiled options/entrees; steamed vegetables. Any = 1

Salad bar = 1

Low cal. Salad dressings = 1

Fresh fruit = 1

Food available in smaller or half-sized portions. Any = 1

Vegetarian, low-fat, diet, or heart healthy options/entrees. Any = 2

Reduced/low fat milk, diet soft drinks, light/low cal fruit drinks, or bottled water. 3 of these = 2; 2 = 1

No soft drinks larger than 16 oz and no free refills on soft drinks = 1

Low fat snack items (e.g., pretzels, baked chips, dried fruit). Any = 1

Weekly or monthly menus displayed or distributed in advance. Yes = 1

Menus planned or reviewed by a registered dietician. Yes = 1

3. Organizational Characteristics and Support

a. Site Characteristics – 4 points total

Pleasant and safe walkways on and/or near site; accessible open space; fitness/recreational facilities onsite; fitness/recreational facilities nearby (I C / I G)

Three of above = 2 points

At least two of the above = 1

None of above = 0

Location within two miles of restaurants and grocery store, and within 10 miles of town or city (I C 7)

All three = 2

At least one of the above = 1

None of above = 0

b. Work Rules – 6 points total

In general, do employees “punch in” a time clock when they enter or leave work? (I D 1)

No = 1 point

Are employees permitted to leave company property during their work shift? **(ID 3)**

Yes = 1

Do employees have access to their lockers during the workday? **(ID 4)**

Yes = 1

Does the site provide employees with food preparation facilities such as a microwave oven, sink, and/or kitchen? **(ID 8)**

Yes = 2

Does the site provide employees with a refrigerator? **(ID 9)**

Yes = 1

c. Written Policies – 6 points total

Written policy statement supporting employee physical fitness? Yes = 1 **(IF 1)**

Policy posted or otherwise communicated to employees? Yes = 1 **(IF 3)**

Written policy statement requiring healthy food options be served at business activities (e.g., meetings, receptions, etc.) Yes = 1 **(IF 4)**

Policy posted or otherwise communicated to employees? Yes = 1 **(IF 6)**

Worksite has a written policy statement healthy food preparation in cafeterias? Yes = 1 **(IF 7)**

Policy posted or otherwise communicated to employees? Yes = 1 **(IF 9)**

d. Current HP Programs

Physical Activity – 7 points Total (IE 1)

- Educational/Awareness Activities – 1 point
- Organized Physical Activity Classes – 1
- Special Programs/Promotions – 1
- Time off for Exercising – 1
- Financial Incentives or Reimbursement – 2
- Other evidence of Management Support/Involvement - 1

Diet/Nutrition – 7 points total (IE 2)

- Educational/Awareness Activities – 1 point
- Individual Consultations – 1
- Food labels - POP Prompts - 1
- Healthy Food Choices – vending or cafeteria – 1
- Financial Incentives – 2
- Other Evidence of Management Support/involvement – 1

Prevention and Management of Obesity/Overweight – 6 points total (IE 3)

- Educational/Awareness Activities – 1 point
- Organized weight loss programs onsite or in community - 1
- Cooking classes/demonstrations - 1
- Financial Incentives or Reimbursement – 2
- Other Evidence of Management Support/involvement – 1

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**WORKSITE HEALTH PROMOTION
ENVIRONMENTAL ASSESSMENT TOOL**

Instructions: If you are unable to answer any question, please write “N/AP” if the information is not applicable or “N/AV” if the information is not available.

SITE CHARACTERISTICS:

Date: Person completing assessment:

Worksite:

Building/Address:

City/State/Zip:

Site Contact:

Phone: Site description: Rural Suburban Urban

Briefly describe the business of the site (e.g., what types of products are manufactured; what services are provided; what business units are located at the site; are there unions at the site; anticipated changes at the site):

SECTION I: TO BE COMPLETED BY SITE REPRESENTATIVE

A. SIZE OF WORKFORCE

A1. How many employees work at the site?

A2. Shift work: What is your estimate of the percentage of workers who work on each shift?

Day shift: %

Evening shift: %

Night shift: %

Rotating shifts: %

Estimate the percentage of workers who work offsite %

B. EMPLOYEE CHARACTERISTICS

B1. Percent male: %

B2. Percent female: %

B3. Average age: years

B4. Percent hourly wage earners: %

B5. Race/ethnicity (indicate percent):

White: %

Black/African American: %

Hispanic: %

American Indian/Alaskan Native: %

Native Hawaiian/Asian/Pacific Islander: %

Other: %

B6. Job type (indicate percent):

Production/manufacturing: %

Administrative/clerical: %

Managerial/technical: %

Maintenance: %

Other: %

B7. Estimate the percent of employees who spend more than half of their work time off site (e.g., truck drivers, delivery personnel, sales and marketing staff; telecommuters): %

B8. Estimate of the percent of employees travel to and from work using:

Private cars	%
Feet (walk)	%
Bicycles	%
Public transportation	%
Van pools, company vehicles	%

C. SITE CHARACTERISTICS

C1. Approximate size of site: acres

 Total land: acres

C2. Number of buildings (separate structures):

C3. Please complete the following table by indicating the name of six (6) main buildings located at this site and providing the requested information regarding each building.

Name of Building	Number of Employees	Number of Floors	Distance from nearest employee parking lot (in yards)	Bicycle racks/ bicycle lockers available? (Y/N)	Number of minutes needed to walk to next nearest building

C4. Are any of the buildings connected by walkways: Yes No

C5. If yes, are walkways covered? Yes No

C6. What is the total distance of sidewalks or other pedestrian walkways within site property?
miles

What percent are lit at night?
%

C7. What is the approximate distance from the site (in miles) to nearest?

Town, downtown or city:	miles
Restaurants or fast food outlets:	miles
Convenience stores:	miles
Super market or grocery store:	miles
Park or other natural area:	miles
Athletic fields or other sports facilities (including swimming facilities):	miles

D. WORK RULES

D1. In general, do employees “punch in” a time clock when they enter or leave work?
 Yes No Only certain employee groups;
specify:

D2. How long are employee breaks and meal periods (for typical work shift)?
Number of breaks:
Duration of break: minutes
Duration of meal period: minutes

D3. Are employees permitted to leave company property during their work shift?
 Yes No Only under certain circumstances; specify:
specify:

D4. Do employees have access to their lockers during the workday?
 Yes No Only under certain circumstances; specify:
specify:

D5. Do employees have access to vending machines on site during the workday?
 Yes No Only under certain circumstances; specify:
specify:

D6. Do employees have access to cafeterias and/or other food services on site during the workday?
 Yes No Only under certain circumstances;
specify:

D7. On average, what percentage of employees purchase lunch in company sponsored cafeterias or food services?

% Not applicable

D8. Does the site provide employees with food preparation facilities such as a microwave oven, sink, and/or kitchen?

Yes No Only under certain circumstances;
specify:

D9. Does the site provide employees with food storage (e.g. refrigerator, cupboards)?

Yes No Only under certain circumstances;
specify:

D10. Does the site provide shower facilities?

Yes No Only under certain circumstances;
specify:

E. CURRENT HEALTH PROMOTION PROGRAMS OFFERED AT THIS SITE

Below is a list of health promotion programs offered by some employers. Check the box next to each program listed where you currently offer this benefit at your worksite.

E1. Physical Activity

<input type="checkbox"/>	Distribute educational information on physical activity through print, web, video, audio media (e.g., brochures in common areas, links from company website, video or audio library)
<input type="checkbox"/>	Post signs at elevators and entrances/exits that encourage employees to use the stairs
<input type="checkbox"/>	Provide bicycles free of charge for traveling between buildings and sites
<input type="checkbox"/>	Distribute free pedometers
<input type="checkbox"/>	Offer financial incentives to use fitness center and/or exercise classes
<input type="checkbox"/>	Offer time off for physical activity during work hours
<input type="checkbox"/>	Install fitness equipment at the workstation (e.g., cardio equipment, hand weights/dumb bells, stretching mats, exercise balls)
<input type="checkbox"/>	Install sport-specific exercise areas (e.g., basketball, volleyball, racquet ball or tennis courts)
<input type="checkbox"/>	Offer sports team sponsorship or organized physical activities
<input type="checkbox"/>	Publish a newsletter or column for physical activity related information (print or computer-based: providing information on programs, feature articles, high-risk targeted messaging, etc.)
<input type="checkbox"/>	Install posters/bulletin boards designated for physical activity information
<input type="checkbox"/>	Other:
<input type="checkbox"/>	Other:
<input type="checkbox"/>	Other:
<input type="checkbox"/>	Other:

E2. Diet/Nutrition

<input type="checkbox"/>	Distribute educational information on diet/nutrition using print, web, video, audio media (e.g., brochures in common areas, links from company website, video or audio library)
<input type="checkbox"/>	Offer individual consultation with health educator/nutritionist
<input type="checkbox"/>	Provide healthy cafeteria food options (low/reduced fat, low/no sugar, fiber-rich, whole grain, low sodium, low calorie, etc.)
<input type="checkbox"/>	Provide nutritional labeling on unpackaged/unlabeled cafeteria foods (e.g., cold/hot bar foods, sandwiches, salads)
<input type="checkbox"/>	Develop identification system for marking more nutritious food/beverage items in cafeteria (e.g., “healthy heart” tags identifying healthier food/beverage options for employees)
<input type="checkbox"/>	Offer full and half-size portions of food/beverage items in cafeteria (e.g., ½ sandwich and ½ c. soup, ½ size cans/bottles of soda and juice, mini-size bag of nuts/trail mix)
<input type="checkbox"/>	Offer healthy vending machine snack food options (low fat, lower-sugar, fiber-rich foods; e.g., whole wheat pretzels, whole grain crackers, low fat granola)
<input type="checkbox"/>	Offer healthy vending machine cold food options (low/reduced fat, low/no sugar, fiber-rich foods; e.g., fresh and canned in own juice fruit, fresh vegetables, salads with low/reduced fat dressing, low fat/low-sugar yogurt, reduced-fat cheese, low fat/whole grain bagels)
<input type="checkbox"/>	Offer healthy vending machine beverage options (bottled water, sugar-free flavored seltzer water, 100% juices, low fat milk)
<input type="checkbox"/>	Develop identification system for marking more nutritious food/beverage items in vending machines (e.g., “healthy heart” tags identifying healthier food/beverage options for employees)
<input type="checkbox"/>	Install water coolers (e.g., next to vending machines, in break/lunch room, lounges)
<input type="checkbox"/>	Have a newsletter or column for diet/nutrition related information (print or computer-based; providing information on programs, feature articles, high-risk targeted messaging, etc.)
<input type="checkbox"/>	Install posters/bulletin boards designated for diet/nutrition information
<input type="checkbox"/>	Other
<input type="checkbox"/>	Other:
<input type="checkbox"/>	Other:
<input type="checkbox"/>	Other:

E3. Prevention & Management of Obesity/Overweight

<input type="checkbox"/>	Distribute educational information on preventing/managing overweight and obesity using print, web, video, audio media (e.g., brochures in common areas, links from company website, video or audio library)
<input type="checkbox"/>	Offer on-site self-paced weight management groups (e.g., Weight Watchers, Weight 4 Me)
<input type="checkbox"/>	Provide reimbursement for healthy lifestyle activities
<input type="checkbox"/>	Offer prizes, awards, and recognition to employees or managers who can demonstrate significant health improvements
<input type="checkbox"/>	Make referral to community resources
<input type="checkbox"/>	Offer overweight/obesity seminars, lunch 'n learns
<input type="checkbox"/>	Provide management training on the importance of employee health promotion
<input type="checkbox"/>	Have a program theme or logo for health improvement and weight management
<input type="checkbox"/>	Provide regular messages from senior managers supporting health promotion
<input type="checkbox"/>	Provide managers with performance objectives related to worksite health improvement
<input type="checkbox"/>	Install scales in bathrooms
<input type="checkbox"/>	Encourage use of community weight management programs through subsidies/reimbursement
<input type="checkbox"/>	Offer time off for weight management programs during work hours
<input type="checkbox"/>	Offer financial incentives for weight management
<input type="checkbox"/>	Other:
<input type="checkbox"/>	Other:
<input type="checkbox"/>	Other:
<input type="checkbox"/>	Other:

E4. Other Health Promotion Programs Offered at the Site

<input type="checkbox"/>	Smoking cessation
<input type="checkbox"/>	Stress management/dealing with emotional health
<input type="checkbox"/>	Alcohol/drug education, EAP
<input type="checkbox"/>	Motor vehicle and home safety
<input type="checkbox"/>	Other:
<input type="checkbox"/>	Other:
<input type="checkbox"/>	Other:
<input type="checkbox"/>	Other:
<input type="checkbox"/>	Other:

F. CURRENT HEALTH PROMOTION POLICIES

F1. Does the worksite have a written policy statement supporting employee physical fitness?

Yes No

F2. If yes, what is that policy?

F3. Is the policy posted or otherwise communicated to employees?

Yes No

F4. Does the worksite have a written policy statement requiring healthy food options be served at business activities (e.g., meetings, receptions, etc.)

Yes No

F5. If yes, what is that policy?

F6. Is the policy posted or otherwise communicated to employees?

Yes No

F7. Does the worksite have a written policy statement on healthy food preparation in cafeterias?

Yes No

F8. If yes, what is that policy?

F9. Is the policy posted or otherwise communicated to employees?

Yes No

G. PHYSICAL ACTIVITY & FITNESS FACILITY

G1. Does the worksite provide an exercise facility onsite (in the building or on the grounds)?

Yes No

G2. If yes, is the fitness facility staffed with credentialed instructors or trainers?

Yes No

G3. Does the worksite provide any of the following activities and how often are they offered?

Activity	Offered	Mark how frequent the activity is offered		
		Daily	Weekly	Monthly
Aerobics classes	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Running groups	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walking classes	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spinning classes	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yoga classes	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tai Chi classes	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self Defense classes	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fitness classes	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal training	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Swimming classes	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Water aerobics	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dancing classes	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Racquetball classes	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other activities:	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

G4. Does the worksite offer any of the following?

- Sports teams sponsored by the worksite
- Organized physical activities during work time
- Physical activity during work hours
- Flex time to accommodate physical activity not during work hours (e.g., before, after, or during unpaid lunch time)

G5. Does the worksite subsidize a membership to an offsite exercise facility?

Yes No

G6. If yes, how much of the cost is subsidized?

- 100%
- 50% - 99%
- 10%- 49%

G7. Does an employee have to do something to be eligible for the subsidy?

- Yes
- No

G8. If yes, what does the employee have to do? (Please describe)

SECTION II: TO BE COMPLETED BY THE RESEARCH TEAM

Observer:

When conducting a tour of the site, name and title of person at worksite assisting with the assessment:

Name:

Title:

IMPORTANT: Please specify next to each assessment area the specific location, building or location within a building where the assessment is taking place.

H. PARKING/BIKE ASSESSMENT

H1. Is the distance from the main buildings to the main parking area \geq 500 ft?

H2. Number of signs in parking area encouraging drivers to park farther from building entrances:

Tally: _____ Total No. =

H3. Are bikes provided for employee use between buildings?

Yes No

H4. Number of bike rack spaces on grounds:

Tally: _____ Total No. =

H5. Number of bikes parked in spaces on grounds:

Tally: _____ Total No. =

I. STAIRCASE USE/ELEVATOR ASSESSMENT (Mark \checkmark if “yes” or present or “N/A” if not applicable)

I1. Total number of floors used in the building

I2. Do stairs exist in the building that employees could use on a daily basis?

Yes No

I3. Total number of elevators:

I4. Total number of stairwells:

I5. Total number of entrances:

16. Sign encouraging use of stairs at building entrance or at elevators

- Yes N/A Entrance/Elevator 1 Yes N/A Entrance/Elevator 2
 Yes N/A Entrance/Elevator 3 Yes N/A Entrance/Elevator 4
 Yes N/A Entrance/Elevator 5 Yes N/A Entrance/Elevator 6

17. Stairway characteristics

	Stairwell #					
	1	2	3	4	5	6
Staircase not enclosed in stairwell	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to see stairs from entrance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Door marked "stairs" (not just exit)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Door is unlocked on most floors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No warnings or cautions on door	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Floor number labeled inside of stairway	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No restricted exit (locked from inside)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Signs encouraging use of stairs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

18. Is there a scale in the building that employees can use?

- Yes No

19. If so, how many scales are in the building?

J. CHANGING FACILITY

J1. Does the worksite provide a shower/changing facility for employees who want to engage in physical activity while at work (both usable and unusable)?

- Yes No

usable

J2. Do all groups of employees in the building have access to the facilities?

- Yes No

J3. Are both men's and women's facilities available/

- Yes No

J4. If yes, is the facility easily accessible to most employees within a 10 minute walk from the work area or workstation?

- Yes No

K. SIGNS AND BULLETIN BOARDS

For the following assessment, identify six representative areas at the site.

K1. Physical Activity:

Number of signs/posters/notices at the worksite encouraging physical activity, exercise classes, and sport activities. Include onsite, offsite, work-sponsored, and sponsored by another organization.

Area 1:

Total signs tally: _____

Signs with physical activity message tally: _____

Total No. =

PA Message No. =

Area 2:

Total signs tally: _____

Signs with physical activity message tally: _____

Total No. =

PA Message No. =

Area 3:

Total signs tally: _____

Signs with physical activity message tally: _____

Total No. =

PA Message No. =

Area 4:

Total signs tally: _____

Signs with physical activity message tally: _____

Total No. =

PA Message No. =

Area 5:

Total signs tally: _____

Signs with physical activity message tally: _____

Total No. =

PA Message No. =

Area 6:

Total signs tally: _____

Signs with physical activity message tally: _____

Total No. =

PA Message No. =

K2. Nutrition:

Number of signs/posters/notices about dietary information, weight loss, encouraging or promoting programs about dietary fat reduction or more fruits and vegetables.

Area 1:

Total signs tally: _____

Signs with nutrition message tally: _____

Total No. =

Nutrition Msg No. =

Area 2:

Total signs tally: _____

Signs with nutrition message tally: _____

Total No. =

Nutrition Msg No. =

Area 3:

Total signs tally: _____

Signs with nutrition message tally: _____

Total No. =

Nutrition Msg No. =

Area 4:

Total signs tally: _____

Signs with nutrition message tally: _____

Total No. =

Nutrition Msg No. =

Area 5:

Total signs tally: _____

Signs with nutrition message tally: _____

Total No. =

Nutrition Msg No. =

Area 6:

Total signs tally: _____

Signs with nutrition message tally: _____

Total No. =

Nutrition Msg No. =

L. PHYSICAL ACTIVITY & FITNESS FACILITY

L1. Does the worksite provide an exercise facility onsite (in the building or on the grounds)?

Yes

No

L2. Do all employees have access to the facility?

Yes

No

L3. If not, which groups have access?

L4. If yes, is the fitness facility staffed with credentialed instructors or trainers?

Yes

No

L5. What is the size of the workout area?

Workout Room 1 feet X feet

Workout Room 2 feet X feet

Workout Room 3 feet X feet

L6. What are the hours of operation?

Workout Room 1 to

Workout Room 2 to

Workout Room 3 to

L7. Do the hours of operation allow employees to access the facility before, during, and/or after work? (Check all that apply)

before work

during work

after work

L8. Does the fitness facility offer any of the following equipment in the workout area?
Please mark and specify the number of each in the space provided.

- Treadmills (No. =)
- Bikes (No. =)
- Rowing Machines (No. =)
- Stepper Machines (No. =)
- Elliptical Machines (No. =)
- Free Weights (No. =)
- Resistance Equipment (No. =)
- Other Machines (No. =)

L9. Does the fitness facility offer any of the following types of workout areas?

- Outdoor exercise areas or playing fields (specify size ft x ft)
- Area inside facility for aerobics, dance, stretching, or other activity
- Racquetball courts
- Track or walking/running paths
- Basketball courts (indoor or outdoor)
- Volleyball courts (indoor or outdoor)
- Tennis courts (indoor or outdoor)
- Other (specify _____)

L10. Has a walking path or route been implemented?

Yes No

L11. Is the walking path/route marked?

Yes No

L12. Is the length communicated on the signs?

Yes No

L13. How many signs are there?

L14. Where are the signs located?

L15. Is PPE required to use the walking paths?

Yes No

M. FOOD PREPARATION

M1. Does the worksite provide facilities for employees to prepare food and/or beverages?

Yes No

M2. Are full kitchens provided, including stoves, refrigerators, sinks, microwave ovens, food storage, and food preparation areas?

Yes No

M3. If yes,

How many kitchens are in the building?

Are seating areas provided (table and chairs)?

Yes

No

Are the facilities available to all employees?

Yes

No

If only available to certain employees, please specify.

Note: Buildings on site that offer full kitchens include

M4. Are kitchenettes provided, including refrigerators, sinks, and microwave ovens?

M5. If yes,

How many kitchenettes are in the building?

Are seating areas provided (table and chairs)?

Yes

No

Are the facilities available to all employees?

Yes

No

If only available to certain employees, please specify.

Note: Buildings on site that offer kitchenettes include

M6. Are coffee bars or similar areas provided (coffee makers, microwaves, small refrigerators)?

M7. If yes,

How many coffee bars are in the building?

Are seating areas provided (table and chairs)?

Yes

No

Are the facilities available to all employees?

Yes

No

If only available to certain employees, please specify.

Note: Buildings on site that offer coffee bars include

M8. Are there posters and/or table tents posted in the cafeterias and food areas?

Yes

No

Is calorie information listed?

Yes

No

Is portion information listed?

Yes

No

Is fiber information listed?

Yes

No

N. VENDING MACHINE ASSESSMENT

N1. Does the worksite have vending machines for employees to access beverages and/or food during work hours?

Yes No

N2. If yes, complete the following beverage and snack/meal vending machine assessment(s) below:

Beverage Machines

From observation of the beverage vending machines, for each machine, please indicate the location (worksite or grounds), type (soft drink or hot drink), total number of slots, and if healthy beverage items are marked or priced differently than less healthy options, then mark the number of healthy beverage options available.

	Beverage Vending Machine #					
	1	2	3	4	5	6
Location (W= worksite, G= grounds)						
Type (SD = soft drink, HD = hot drink)						
Total number of slots						
Total number of healthy items						
Are healthy items priced lower than less healthy items (Y/N)						
<u>Beverage options</u> (indicate number)						
100% juice						
Bottled water						
Diet soft drinks (sugar free, sweetened artificially with no calorie sweetener)						
1%, skim, or low fat chocolate milk						
Other beverage (specify _____)						

Snack/Meal Machines

From observation of the snack/meal vending machines, for each machine, please indicate the location (worksite or grounds), type (snack or meal), total number of slots, and if healthy food items are marked or priced differently than less healthy items, then mark the food options available.

	Snack/Meal Vending Machine #					
	1	2	3	4	5	6
Location (W= worksite, G= grounds)						
Type (S= snack, M= hot/cold meals)						
Total number of slots						
Total number of healthy items						
Are healthy items priced lower than less healthy items (Y/N)						
<u>Food options</u> (indicate number)						
"Lite" popcorn						
Pretzels						
Low Fat or Non-Fat Yogurt						
Fresh Fruit						
Chicken, Turkey, Ham or Lean Roast Beef sandwiches (w/out mayonnaise or cheese)						
Sandwiches made with whole grain bread						
Low calorie/Low fat pre-packaged meals						
Bagels with "Lite" cream cheese						
Tossed salad with reduced or nonfat dressing						
Tuna (water packed) with "Lite" mayonnaise						
Baked chips						
Low fat cereal						
Low fat granola bars						
Raisins and dried fruit						
Trail mix						
Other, specify _____						

O. CAFETERIA ASSESSMENT

From observation of the cafeterias, for each cafeteria, please indicate if nutritional information is clearly labeled and positioned, healthy food items are marked or priced differently than less healthy items, then mark the types of food options available.

No cafeteria at site:

	Cafeteria #					
	1	2	3	4	5	6
Is nutritional information clearly labeled and positioned (Y/N)						
Are healthy items priced lower than less healthy items (Y/N)						
Are healthy food items priced less than less healthy items (Y/N)						
<u>Food menu offers the following options</u> (Y/N)						
Food in smaller or half-sized portions						
Baked and broiled foods (e.g., fish, chicken)						
Low fat nutritious side items (e.g., steamed vegetables, salads, fruit)						
Low fat snack items (e.g., pretzels, baked chips, dried fruit)						
Low fat dairy products (e.g., yogurt, milk, cheese)						
Chicken, turkey, ham or lean roast beef sandwiches (w/out mayonnaise or cheese)						
Tuna (water packed) with "lite" mayonnaise						
Sandwiches made with whole grain bread						
Low calorie/low fat pre-packaged or microwavable meals						
Low fat breakfast foods (e.g., cereal, granola bars, bagels with lite cream cheese)						
Other, specify _____						