



Feature C01: Health and Wellness Awareness

Part 2: Promote Health and Wellness Education

WELL v2™ pilot
Q1 2020 addenda

How to use this document:

This document is intended to serve as a guide on how to create educational materials required for Part 2: Promote Health and Wellness Education of Feature C01: Health and Wellness Awareness. This document is meant to demonstrate an acceptable degree of detail for a documentation submission. The level of detail is up to the discretion of the project team, as long as Part 2a, b, and c are all sufficiently addressed.

- Part 2a, b, c: A professional narrative and examples have been provided to demonstrate how to create the educational materials to meet feature requirements.
- Part 2a, b: Instructions have been provided to demonstrate how to create an Educational Materials narrative to meet the feature requirements.

Note: The variable items are highlighted in yellow throughout the document.

The text is updated to the Q1 2020 addenda of WELL v2 pilot, which may vary from future versions of WELL v2.

Disclaimer

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FEATURE C01: HEALTH AND WELLNESS AWARENESS

PART 2a, b, c: PROMOTE HEALTH AND WELLNESS EDUCATION EXAMPLE PROFESSIONAL NARRATIVE

All occupants are offered a digital and/or physical library of health and wellness educational materials that meets the following requirements (Part 2a-c):

- A. *Example: We offer a physical library of health and wellness educational materials accessible to all occupants and visitors in the entranceway of the office.*
- B. *Example: All occupants have 24/7 access to the online health and wellness education library on the company health benefits site at <<INSERT LINK>>.*

Part 2b. The library covers ten unique evidence-based health topics. (Note: Projects should use [Appendix C1](#) for guidance on which unique evidence-based health topics may be covered in the educational materials.)

- A. *Example: Our library of health and wellness educational materials includes resources on the following 11 evidence-based primary prevention topics:*
 - a. *Cardiovascular health*
 - b. *Emergency preparedness and response*
 - c. *Employment readiness*
 - d. *Financial education or health*
 - e. *Noncommunicable and chronic disease prevention (heart disease, stroke, cancer, diabetes, obesity, asthma, etc.)*
 - f. *Nutrition*
 - g. *Maternal and child health*
 - h. *Mental health and mental health crisis*
 - i. *Parenting and caregiving*
 - j. *Vaccines and immunization*
 - k. *Workplace safety*

Part 2b. Topics in the library are tailored to the health concerns of building occupants (based on available regional, local and building-level demographic and health-related data) and should focus on primary prevention (defined in WELL as “Activities or measures aimed at promoting health and well-being and reducing susceptibility to a risk factor or health determinant.”). Topics can include any aspect of health and wellness covered in WELL in addition to any other health topic relevant to the occupant population.

- A. *Example: We consulted employee demographic and health-related data based on anonymous data collected through our annual employee survey, and consulted local*

demographic and health-related data from the most recent census and the City Department of Health. From this information, we identified the key health issues that likely impact our employees include: cardiovascular health, nutrition, tobacco use, stress management, vaccines and immunization, substance use (especially opioid use and emergency response), emergency preparedness and response, chronic disease prevention, workplace safety, and maternal and child health. These topics are covered by resources in the health and wellness education library.

- B. Example: We consulted building-level demographic and health-related data from anonymous employee surveys to understand broad employee demographics and related health needs, and local health-related data from trusted local news and research sources to understand key local health issues that likely impact occupants in the building. All educational materials are checked annually to confirm information is relevant and up-to-date.*

Part 2c. If physical, library is open during regular business hours.

- A. Example: The office library containing our health and wellness educational materials is open during regular business hours from 8am - 7pm.*
- B. Example: The health and wellness educational materials are offered online and are therefore accessible at any time.*

Note: Education must be culturally appropriate and literacy level appropriate. Education can come in the form of trainings, brochures, videos, posters, pamphlets, newsletters and/or other written or online information. All educational materials must be checked annually to confirm information is relevant and up-to-date.

Note: If creating original educational resources, the project should ensure they are based on established industry research that is cited and that they are formatted clearly.

PART 2a, b: PROMOTE HEALTH AND WELLNESS EDUCATION EXAMPLE EDUCATION MATERIALS

INSTRUCTIONS FOR CREATING EDUCATIONAL MATERIALS NARRATIVE

All occupants are offered a digital and/or physical library of health and wellness educational materials that meets the following requirements:

Part 2a. Covers ten unique evidence-based health topics. Projects should use [Appendix C1](#) for guidance on which unique evidence-based health topics may be covered in the educational materials.

A. Example:

- a. Adolescent health*
- b. Cardiovascular health*
- c. Emergency preparedness and response*
- d. Employment readiness*
- e. Financial education or health*
- f. Noncommunicable and chronic disease prevention (heart disease, stroke, cancer, diabetes, obesity, asthma, etc.)*
- g. Nutrition*
- h. Maternal and child health*
- i. Mental health and mental health crisis*
- j. Vaccines and immunization*

Part 2b. Topics are tailored to the health concerns of building occupants (based on available regional, local and building-level demographic and health-related data) and should focus on primary prevention (defined in WELL as “Activities or measures aimed at promoting health and well-being and reducing susceptibility to a risk factor or health determinant.”) Topics can include any aspect of health and wellness covered in WELL in addition to any other health topic relevant to the occupant population.

- A. Example: Consulting building-level demographic and health-related data from anonymous employee surveys to understand broad employee demographics and related health needs, and local health-related data from trusted local news or research sources to understand key local health issues that likely impact occupants in the building.*

Education must be culturally appropriate and literacy level appropriate.