

SABGH Healthy Workplace Recognition Program - 2017 Application

Introduction and Instructions

What is the Healthy Workplace Recognition Program?

The Healthy Workplace Recognition Program is an initiative of the San Antonio Business Group on Health (SABGH) in collaboration with the Mayor's Fitness Council. The program was designed to recognize local employers who create or maintain a culture of wellness within their organizations and make a commitment to support their employees' health and wellness needs. The SABGH is an organization of local employers and providers of workplace wellness programs.

The SABGH aims to improve the health of the San Antonio workforce by providing the business community with opportunities to network, discuss best practices, promote workplace wellness initiatives, and recognize local employers for their efforts to improve employee health and wellness.

The Mayor's Fitness Council is engaging non-profits, businesses, city government, health systems, schools, and universities in order to serve as a conduit and advocate for stakeholders working to reduce obesity in San Antonio. The mission of the Mayor's Fitness Council is to transform San Antonio into a healthier and more active community.

Who should apply for recognition through the Healthy Workplace Recognition Program?

Employers who actively promote a culture of wellness within their organizations should apply for recognition through the Healthy Workplace Recognition Program.

Who is eligible to apply for recognition?

Employers can apply for recognition if they:

- Are located in Bexar County; and
- Meet the minimum requirements for bronze-level recognition, to include the ability to demonstrate senior management support of health and wellness initiatives.

How does my organization participate?

To apply for the Healthy Workplace Recognition Program, review the recognition criteria on the following pages and complete the appropriate information regarding your wellness initiatives.

Next, complete the employer profile information, and then proceed to each of the seven content areas and check off the health and wellness initiatives that your workplace implements.

Applications must be signed and certified by the owner, chief executive officer, administrator, board chair, or human resources manager. Incomplete applications will not be considered.

Only one application per employer will be accepted. Employers with multiple sites or offices should apply with one application highlighting how wellness initiatives have the potential to impact their workforce overall.

The designations will be awarded based on the wellness efforts in place the calendar year prior to application acceptance.

What are the recognition levels?

There are four (4) levels of recognition. The Healthy Workplace Recognition Program is designed for beginning to advanced wellness programs.

Award Levels:

Bronze
Silver
Gold
Platinum

What's new for 2017?

- This year's application includes a new, optional section on the Active Living Plan.
- Program/Initiative overview forms will now be reviewed using a structured matrix (the matrix can be viewed [here](#)).
- Platinum applicants will be required to submit supporting documentation for one of their Programs/Initiatives. This supportive information may be shared at the December 1 recognition event as one of the top 3 innovative programs in an effort to help share programming ideas and efforts.

Deadline to submit completed application for 2017 Awards: October 16, 2017

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Introduction & Instructions (Continued)

Applicants will select activities in each of the following categories outlining their program meeting the minimum eligibility requirements. The seven categories include:

- (1) Culture
- (2) Health Promotion & Education
- (3) Physical Activity/Active Living
- (4) Nutrition
- (5) Smoking & Tobacco Cessation
- (6) Value-based Benefits & Design
- (7) Active Living Plan Recognition (*optional section*)

Each category is divided into three lists of activities that can be selected from to meet the minimum eligibility requirements:

- (1) Methods
- (2) Support Structure
- (3) Results

MINIMUM ELIGIBILITY REQUIREMENTS

Applicants must meet the minimum eligibility requirements to apply for each level of award by checking the following number of boxes in each category.

BRONZE

- Company currently has a health promotion program with employee health & wellness as the underlying goal
- Within each category, has achieved **three (3)** activities from the lists provided
- A minimum of **eighteen (18)** total activities must have been achieved from any of the six categories

SILVER

- Company program, available to all employees, in operation a minimum of **1 year**
- Within each category, has achieved **five (5)** activities from the lists provided
- A minimum of **thirty (30)** total activities must have been achieved from any of the six categories
- Complete **one (1)** Program/Initiative Overview Form

GOLD

- Company program, available to all employees, in operation a minimum of **three (3)** years
- Has achieved **eight (8)** activities from the lists provided within each category
- A minimum of **forty-eight (48)** total activities must have been achieved from any of the six categories

- Complete **two (2)** Program/Initiative Overview Forms

PLATINUM

- Program is available to all employees and has been in operation for a minimum **offive (5)** years
- Program has a mission statement and a budget
- Within each category, has achieved **twelve (12)** activities from the provided lists
- A minimum of **seventy-two (72)** total activities must have been achieved from any of the six categories
- Complete **three (3)** Program/Initiative Overview Forms
- Submit supporting documentation

How are awardees of the Healthy Workplace Recognition Program selected?

Eligible applications will be reviewed by a neutral committee formed by the SABGH. Committee members will review applications for completeness, minimum eligibility requirements for requested award level, and assessment of Program/Initiative Overview Forms.

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Employer Profile

Please note that you may stop and restart this application after any page by clicking on the NEXT button to save your answers - however, to access saved information, you must use the same computer that was used to start the application.

You may go back and forth in your application and make changes until the SUBMIT button has been selected at the end of the survey.

Once the SUBMIT button has been clicked, you will no longer be able to make changes or additions to your application.

1

Contact Information

| | |
|--------------------------------------|---|
| Employer Name (as listed for award) | <input type="text"/> |
| Name of Employer Contact (for award) | <input type="text"/> |
| Department | <input type="text"/> |
| Employer Address | <input type="text"/> |
| City/Town | <input type="text"/> |
| State/Province | <input type="text" value="-- select state --"/> |
| ZIP/Postal Code | <input type="text"/> |
| County | <input type="text"/> |
| Email Address | <input type="text"/> |
| Phone Number | <input type="text"/> |

2

Company Information

Website Address

Years of Wellness
Program in Place

Total Number of
Employees in
Organization

Mission of Wellness
Program (*required for
Platinum applicants
only*)

Budget of Wellness
Program (*required for
Platinum applicants
only*)

3

Total Number of Employees in Bexar County:

4

Certification:

As the Company Designated Representative, I certify that my organization implements the following health and wellness initiatives and these initiatives are currently in place and were all implemented within the previous calendar year.

Please type your full name in the text box below to certify your understanding and agreement to the above statement:

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Category #1: Culture

Select all boxes that apply under each list of activities (Methods, Support Structure, and Results).

The following are the minimum required activities to be checked (achieved) in this total category to be eligible under each Award level. The total number of activities includes boxes checked from all three lists (Methods, Support Structure, and Results).

3 = Bronze

5 = Silver

8 = Gold

12 = Platinum

1

Methods – Processes, Procedures, and Practices Established

- Worksite has an established wellness program with a name, logo, slogan, etc. that is unique to the employer.
- Program offered to all employees.
- Senior Management supports and promotes the employee wellness initiatives of your workplace.
- Workplace has a dedicated wellness website to communicate initiatives to employees.
- Formal budget for employee wellness programs established.
- Formal communication and support from Senior Management within award period.
- Senior Management participates in wellness activities.

2

Support Structure – Facilities, Equipment, Resources, and Services Provided

- Workplace provides an annual influenza vaccine to employees at no- or reduced-cost.
- Workplace has a wellness committee with representation from a variety of departments/levels.
- Workplace has a dedicated, full-time wellness program manager or equivalent to oversee the workplace wellness initiatives/program.
- Workplace provides preventative wellness screenings onsite (i.e. blood pressure, cholesterol, glucose, BMI).
- Offers an Employee Assistance Program (EAP) as an employee benefit.
- Workplace offers an incentive program or rewards employees for participation in wellness initiatives.
- Workplace offers health insurance as an employee benefit.

3

Results – Expected Changes That Will Result from the Implementation of the Program or Activity

- Offers employees an annual health risk assessment/appraisal (HRA) and provides feedback to employees regarding their individual results.
- Uses a Health Risk Appraisal (HRA) tool to measure the health status of employees on a corporate level a minimum of annually.
- Conducts needs assessment survey as appropriate.
- Utilizes annual wellness reports to determine effectiveness of programs.
- Reports wellness results to Senior Management and/or employees.
- Completes at least one type of impact measurement of programs (i.e. claims data, risk factors or other measures).

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Category #2: Health Promotion & Education

Select all boxes that apply under each list of activities (Methods, Support Structure, and Results).

The following are the minimum required activities to be checked (achieved) in this total category to be eligible under each Award level. Total number of activities includes boxes checked from all three lists (Methods, Support Structure, and Results).

3 = Bronze

5 = Silver

8 = Gold

12 = Platinum

1

Methods – Processes, Procedures, and Practices Established

- Workplace communicates wellness information to employees at least on a quarterly basis.
- Workplace communicates wellness information to employees on a monthly basis.
- Workplace offers an employee newsletter that includes articles and information on wellness initiatives.
- Workplace provides health education information to employees through any variety of resources.
- Workplace provides information to employees regarding seasonal health issues (i.e. flu, safety or emergency preparedness).

2

Support Structure – Facilities, Equipment, Resources, and Services Provided

- Offers regular health education presentations on various wellness-related topics (i.e. lunch & learn, webinars, etc.).
- Provides self-care resources to help employees manage their health, healthcare, address common illnesses, or living well.
- Has a wellness library of books, materials, or resources on various wellness topics.
- Has an online wellness resource center with wellness materials, books, classes, or other support documents.
- Workplace offers a healthy pregnancy program through health insurance carrier, third-party administrator, or other vendor.
- Workplace offers a breast feeding friendly environment - policy, private area to pump or breastfeed (not a bathroom) with accessibility to a sink to wash hands/clean pump, dedicated refrigerator for breast milk storage, allowing sufficient break time for mothers to breastfeed or express milk.
- Offers training in CPR, first aid and/or the use of an Automated External Defibrillator (AED).
- Provide financial education resources to employees.

3

Results – Expected Changes That Will Result From the Implementation of the Program or Activity

- Utilizes annual wellness reports to determine effectiveness of communication and educational programs.
- Reviews reports on healthcare management usage and how educational information impacts total claims.
- Improved measures on major illnesses or conditions.
- Year to year improvement in overall participation levels.

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Category #3: Physical Activity

Select all boxes that apply under each list of activities (Methods, Support Structure, and Results).

The following are the minimum required activities to be checked (achieved) in this total category to be eligible under each Award level. Total number of activities includes boxes checked from all three lists (Methods, Support Structure, and Results).

3 = Bronze

5 = Silver

8 = Gold

12 = Platinum

1

Methods – Processes, Procedures, and Practices Established

- Actively promotes tools to motivate employees to participate in regular amounts of physical activity (i.e. walking programs, newsletters, educational materials, etc.).
- Encourages physical activity challenges.
- Promotes "walk and talk" meetings with participation from Senior Management.
- Encourages employees to take stretch breaks or participate in other physical activities during the work day to reduce sitting time.
- Reimburses employees for expenses related to the purchase of personal fitness tools, programs, or memberships; or provides discounts.

2

Support Structure – Facilities, Equipment, Resources and Services Provided

- Workplace has clean, safe, well-lit and attractive stairwells accessible to employees during the workday and actively promotes their use with posters or prompts.
- Indoor walking routes with distance(s) marked off, provided map for safe and convenient walking outside the office, or has access to indoor/outdoor facilities that allow walking or jogging.
- Workplace offers physical activity classes onsite (i.e. yoga, kickboxing, aerobics).
- Offers onsite recreation or fitness facilities for employees or negotiated discounts for offsite recreation or fitness facilities.
- Workplace offers or contracts with local providers to offer training programs for employees in or negotiated discounts for walks, runs or marathons or other races.
- Encourages or offers participation in intramural and recreational sports, leagues or physical activity events (employer- or community-based).

3

Results – Expected Changes That Will Result From the Implementation of the Program or Activity

- Behavior change as measured by employee survey or observational survey (i.e. increased physical activity levels of employees).
- Measure number of employees who participate in fitness center.
- Measure number of employees who use gym memberships.
- Measure number of employees who utilize other subsidized fitness programs.

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Category #4: Nutrition

Select all boxes that apply under each list of activities (Methods, Support Structure, and Results).

The following are the minimum required activities to be checked (achieved) in this total category to be eligible under each Award level. Total number of activities includes boxes checked from all three lists (Methods, Support Structure, and Results).

3 = Bronze

5 = Silver

8 = Gold

12 = Platinum

1

Methods – Processes, Procedures, and Practices Established

- Workplace provides general nutrition education and/or healthy eating information to the employee population.
- Workplace cafeteria offers a minimum of one "healthy" food option and one "healthy" beverage option at each meal served and promotes these healthier options to employees.
- Workplace policies or practices require meetings and events to offer a minimum of one "healthy" food option and one "healthy" beverage option when meals are served.
- Workplace requires on-site vending machines to label "healthy" food/beverage options.
- Workplace implements the standards established through the San Antonio Healthy Vending Guidelines.
- Workplace promotes health food and snack options in break rooms to employees.

2

Support Structure – Facilities, Equipment, Resources, and Services Provided

- Workplace provides on-site healthy cooking demonstrations with taste tests.
- Holds healthy potlucks or cook-off contests among employees.
- Has water available throughout the day for employees.
- Offers discounts that encourage the purchase of "healthy" foods and/or beverages.
- Provides microwaves, refrigerators, etc.
- Provides educational information, classes or programs on weight control, portion sizes, healthy eating, etc.
- Promotes or utilizes an online nutrition or meal mapping app.

3

Results – Expected Changes That Will Result From the Implementation of the Program or Activity

- Behavior change as measured by employee survey or observational survey (i.e. increased fruit/vegetable consumption).
- Employee participation in nutrition programs are measured.
- Data collected from employee or observational surveys show healthier options are being offered at work meetings.
- Data collected from onsite cafeteria, break areas, snack machines, or other offered meal or snacks area show healthier options are being selected.

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Category #5: Smoking & Tobacco Cessation

Select all boxes that apply under each list of activities (Methods, Support Structure, and Results).

The following are the minimum required activities to be checked (achieved) in this total category to be eligible under each Award level. Total number of activities includes boxes checked from all three lists (Methods, Support Structure, and Results).

3 = Bronze

5 = Silver

8 = Gold

12 = Platinum

1

Methods – Processes, Procedures, and Practices Established

- Workplace has a smoking and tobacco use policy that is clearly communicated to all staff throughout company.
- Workplace has an established, written, workplace-wide Tobacco-Free Policy that applies to inside and outside the facilities, rental space, and off-site locations.
- Workplace offers educational resources to staff on smoking and tobacco use.
- Promotes the services of the Texas state quitline: 1-877-YES-QUIT.
- Contracts directly with a vendor to provide a company-sponsored quitline for employees.

2

Support Structure – Facilities, Equipment, Resources, and Services Provided

- Offers a smoking cessation program.
- Workplace offers a smoking cessation program with over the counter nicotine replacement therapy - including patch, gym, and lozenge.
- Workplace promotes a tobacco use counseling program, such as through an Employee Assistance Program (EAP) or other means.
- Workplace offers a smoking and tobacco use support group.
- Smoking and tobacco programs or services are available to dependents and/or retirees.

3

Results – Expected Changes That Will Result From the Implementation of the Program or Activity

- HRA data or tobacco specific survey on changes in tobacco use rates.
- Reports or data shows that employees are utilizing tobacco cessation programs.
- Behavior change as measured by employee or observational survey.
- Year to year improvement in overall participation levels of educational or other offered smoking programs.

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Category #6: Value-Based Benefits & Design

Select all boxes that apply under each list of activities (Methods, Support Structure, and Results).

The following are the minimum required activities to be checked (achieved) in this total category to be eligible under each Award level. Total number of activities includes boxes checked from all three lists (Methods, Support Structure, and Results).

3 = Bronze

5 = Silver

8 = Gold

12 = Platinum

1

Methods - Processes, Procedures, and Practices Established

- Allows flex-time, administrative leave, or work time to receive recommended preventative services or health screenings.
- Flu shots are covered and/or provided at the workplace.
- Recommended preventative services are promoted.
- Health plan benefits include prescription drug coverage for smoking cessation medications.
- Health plan benefits include a disease management program through health insurance carrier, third party administrator, or another vendor.

2

Support Structure - Facilities, Equipment, Resources, and Services Provided

- Provide benefit disincentives for unhealthy behaviors.
- Provide financial or award incentives to employees who participate in health and wellness programs and initiatives (i.e. flexible spending dollars).
- Provide financial or award incentives to employees who complete an annual HRA or biometric screenings.
- Health plan benefits include 100% coverage of annual preventative care services.
- Provide room or space for employees with special health care needs - monitor blood pressure, test or administer medicines, etc.

3

Results - Expected Changes That Will Result from the Implementation of the Program or Activity

- Evaluate employee wellness efforts and benefit design on employee health and make changes as necessary.
- Reduce barriers, such as money, time and distance, to increase employee utilization of services.
- Use data and risk assessment to tailor health benefit design.
- Review data on a quarterly to semi-annual basis to determine health risks of employee population.
- Collect data in multiple areas of wellness and health benefits to assess and change programs (i.e. medical and pharmacy claims data, health risk assessments, biometric screenings, disability, workers compensation, etc.).
- Review data on employee engagement to determine productivity, absenteeism, interest, etc.

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Category #7: Active Living Plan Recognition (*new optional section*)

The Active Living Plan is a living document that localizes strategies from the National Physical Activity Plan in 9 societal sectors—Business and Industry; Community, Recreation, Fitness, and Parks; Education; Faith-Based Settings; Healthcare; Mass Media; Public Health; Sport; and Transportation, Land Use, and Community Design. Physical activity behavior is influenced by a broad set of factors working at the personal, family, institutional, community, and policy levels. Sustainable behavior change is most likely when all levels of influence are aligned.

The following are the minimum required activities to be checked (achieved) in this total category to be eligible for Active Living Plan recognition.

1 SABGH Participation

- Actively participates in the SABGH as a regular or alliance member and by attending quarterly forums. (Business & Industry)

Implementation of the Active Living Plan – Implements at least 2 of the following activities or other strategies promoted in the Active Living Plan.

- Offers/maintains physical activity facilities or programs that are open to the public at no charge, e.g., walking trails, exercise classes. (Community, Recreation, Fitness, and Parks)
- Sponsors fund-raising activities that are physical activity related, e.g., walks, races, dances, etc., or uses physical activity related equipment or items as incentives or promotional items. (Cross-sectoral)
- Partners with schools or youth organizations to promote active living—provides donations to related school programs and events, especially after school programming, provides volunteers for events or programs that include physical activity/active living, provides or sponsors related speakers, pays for related facility improvements or equipment (e.g., SPARK Parks), etc. (Education; Community, Recreation, Fitness, and Parks)
- Partners with churches to promote active living—provides donations to related school programs and events, especially after school programming, provides volunteers for events or programs that include physical activity/active living, provides or sponsors related speakers, pays for related facility improvements or equipment (e.g., playgrounds, fellowship sport courts), etc. (Faith-Based Settings)
- Sponsors sport teams, especially youth teams or provides youth sport scholarships--advertisements and personal membership fees excluded. (Sports)
- Pays for related public service announcements in various mass media venues.
- Building or campus designed to promote active living, active transportation, or pedestrian safety, e.g., walking tracks, sidewalks from parking areas and bus stops, stairs as or more prominent than elevators, etc. (Transportation, Land Use, and Community Design)
- Advocates for policies at organizational, institutional, or governmental levels that promote active living. (Cross-sectoral)
- Partners with academic and public health institutions to track physical activity data or to conduct related research. (Education, Public Health)
- Other: please describe related Active Living Plan strategy [URL to new plan]

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Award Levels

Thank you for completing the categories requirement of the application.

You will now need to share with the award selection committee a few details about some of the elements and initiatives of your company's wellness program.

You will be asked to complete the appropriate number of Program/Initiative Overview Forms based on the award level you are applying for. Each Program/Initiative Overview Form should provide the committee with a brief overview, result, and/or achievements of specific initiatives of your program for the award year.

Bronze Applicants - Will not be asked to complete an overview form.

Silver Applicants - Please complete one form outlining one project, initiative, or component of your wellness program you found highly successful or wish to share.

Gold Applicants - Please complete two forms outlining two projects, initiatives, or components of your wellness program you found highly successful or wish to share.

Platinum Applicants - Please complete three forms outlining three projects, initiatives, or components of your wellness program you found highly successful or wish to share. ***New for 2017:** Platinum applicants will be required to select **one** of their programs to be highlighted and submit documentation of the program's (1) communication plan, (2) incentives, and (3) evaluation plan. Documentation is due at time of application submission. Please note that any submitted documentation may be shared at the awards ceremony.

1

By selecting the award level you are applying for below, you will be prompted to answer the appropriate number of Program/Initiative Overview forms.

Please select your award application level:

- Bronze - No program/initiative overview forms are required; you will be sent to the final application page.
- Silver - One (1) Program/Initiative Overview Form required.
- Gold - Two (2) Program/Initiative Overview Forms required.
- Platinum - Three (3) Program/Initiative Overview Forms and supporting documentation required.

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Program/Initiative Overview Form #1

The following form must be completed regarding information on one of the company's wellness programs, components, or initiatives that were completed at your workplace during the previous calendar year. This information will assist the committee in selecting award level.

Silver - Form #1 must be completed.

Gold - Forms #1 and #2 must be completed.

Platinum - Forms #1, #2, and #3 must be completed along with submission of supporting documentation.

Please keep your responses brief and results-oriented. You may cut and paste into the answer boxes from Microsoft Word.

1 Program/Initiative Information

Program/Initiative
Name

Type of Program

Program Start Date

Program End Date

Program Goal

Target Population

% Employees
Completing the
Program

2 Program Description

Provide a brief description of the aspects of the program or initiative including how you communicated the program, incentives, materials, etc.

3

What aspects of the program would you recommend as a best practice to other workplaces?

4

What aspects of the program, if any, will you change for any future program offerings?

5

Please provide a success story from this program (800 characters or less). This can include an individual or company-wide success story.

6

Are you applying for Gold or Platinum Awards?

- Yes- Complete the next Program/Initiative Overview Form #2
- No

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Program/Initiative Overview Form #2

The following form must be completed regarding information on one of the company's wellness programs, components or initiatives that were completed at your workplace during the previous calendar year. This information will assist the committee in selecting award level.

Silver - Form #1 must be completed.

Gold - Forms #1 and #2 must be completed.

Platinum - Forms #1, #2, and #3 must be completed along with submission of supporting documentation.

Please keep your responses brief and results-oriented.

1

Program/Initiative Information

Program/Initiative
Name

Type of Program

Program Start Date

Program End Date

Program Goal

Target Population

% Employees
Completing the
Program

2

Program Description

Provide a brief description of the aspects of the program or initiative including how you communicated the program, incentives, materials, etc.

3

What aspects of the program would you recommend as a best practice to other workplaces?

4

What aspects of the program, if any, will you change for any future program offerings?

5

Please provide a success story from this program (800 characters or less). This can include an individual or company-wide success story.

6

Are you applying for Platinum Awards?

- Yes- Complete the next Program/Initiative Overview Form #3
- No

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Program/Initiative Overview Form #3

The following form must be completed regarding information on one of the company's wellness programs, components or initiatives that were completed at your workplace during the previous calendar year. This information will assist the committee in selecting award level.

Silver - Form #1 must be completed.

Gold - Forms #1 and #2 must be completed.

Platinum - Forms #1, #2, and #3 must be completed along with submission of supporting documentation.

Please keep your responses brief and results-oriented.

1

Program/Initiative Information

Program/Initiative
Name

Type of Program

Program Start Date

Program End Date

Program Goal

Target Population

% of Employees
Completing the
Program

2

Program Description

Provide a brief description of the aspects of the program or initiative including how you communicated the program, incentives, and materials, etc.

3 What aspects of the program would you recommend as a best practice to other workplaces?

4 What aspects, if any, will you change for any future program offerings?

5 Please provide a success story from this program (800 characters or less). This can include an individual or company-wide success story.

6 Out of the three programs/initiatives that were described, please select one of these programs/initiatives to highlight with supporting documentation. Which program/initiative will you highlight with supportive documentation?

7 Submit supporting documentation

This documentation must include (1) program/initiative communication plan, (2) incentives that were used, and (3) how the program/initiative was evaluated.

Only PDF, DOC, DOCX, PNG, JPG, JPEG, GIF files are supported. File size limit is 16 MB. If you are experiencing issues with submitting your files, please email us at info.sabgh@gmail.com.

Choose File

No file chosen

8 Additional documentation

Choose File

No file chosen

9 Additional documentation

Choose File

No file chosen

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SABGH Membership

1 Is your company currently a member of the San Antonio Business Group on Health (SABGH)?

[Click Here](#) to apply to become a member today!

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Thank you for completing the

2017 SABGH Healthy Workplace Recognition Application!

Your application will be reviewed by the SABGH Healthy Workplace Recognition Program Committee. Award recipients will be notified via email.

Mark your calendar for the Healthy Workplace Recognition Program awards ceremony, scheduled for December 1, 2017. Details will be posted online at FitCitySA.com.