**Grant Requirements Questionnaire**

1. Designate a Health Promotion Champion. **Date Completed:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. The designated Health Promotion Champion must attend one of the High Impact Health Promotion Champion Training Workshops.

**Date Completed:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Management will: (a) Distribute an initial Grant Press Release to local media and all employees announcing support of the program and (b) Implement at least two communications to employees promoting the *BlueCross BlueShield*  *of Georgia 24/7 NurseLine* and four other BCBSGA health communications during the year.

Grant Press Release to local media and all employees – **Date Completed:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

24/7 NurseLine Communication 1 – **Date Completed:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

24/7 NurseLine Communication 2 – **Date Completed:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BCBSGA Health Communication1:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Date Completed:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BCBSGA Health Communication2**:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Date Completed:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BCBSGA Health Communication3**:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Date Completed:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BCBSGA Health Communication4**:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Date Completed:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4.  Complete Health Risk Assessment (HRA) with onsite counseling.

**Date Completed:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Implement a Workplace Wellness Policy. **Date Completed:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participate in Wellbeing Committee Meetings. **Date Completed:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Offer at least two other of several approved health promotion programs to all employees: immunization program (flu shots), health care consumerism training to employees, cancer screenings, CPR/First-Aid training, tobacco use reduction program, nutrition-weight programs, stress management programs, etc.

Program 1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date Completed:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program 2:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date Completed:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7. At the High Impact Health Promotion Champion Training Workshops, the designated Health Promotion Champion must complete a Workplace Health Promotion Action Plan to include awareness, communication, prevention programs, behavior change, HIPAA, etc.

**Date Completed:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8. The designated Health Promotion Champion must complete and submit a Mid-Point Check, Year-End Activity Report, and a Grant Requirement Questionnaire on the health promotion activities conducted.

Mid-Point Check (*Due January 1)* – **Date Completed:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Year-End Report *(Due June 1)* – **Date Completed:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Receipts *(Due June 1)* – **Date Completed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grant Requirements Questionnaire *(Due June 1)* – **Date Completed:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_