

MANAGEMENT SERVICES MEMORANDUM
#6-2019

DATE: May 13, 2019
TO: Honorable Mayor Carol Dodge and City Council Members
THROUGH: Heather Geyer, City Manager *Hmg*
FROM: Paula Jensen, Director of Management Services *PJensen*
SUBJECT: CR-48 – Acceptance of Grant from Tri-County Health Department

PURPOSE

To consider CR-48, regarding a grant acceptance from Tri-County Health Department's Worksite Wellness Initiative in the amount of \$700.00.

BACKGROUND

The City of Northglenn has been awarded \$700.00 through Tri-County Health Department's Worksite Wellness Initiative to support the city's employee wellness activities. The City has achieved the following required benchmarks to be eligible for funds to aid in implementation of the best practices in employee wellness.

- ✓ Active participation in worksite wellness employer coalition
- ✓ Executive Management support for employee wellness initiatives
- ✓ Employee wellness committee
- ✓ Health Links certification
- ✓ Exploring employees' wellness needs and interests
- ✓ Created a strategic action plan to support employee wellness initiatives

Grant funds will be used toward the Employee Benefits and Wellness Fair in June. We will promote a healthy food and beverage environment in the workplace during the fair, emphasizing our Healthy Meeting Guidelines.

STAFF RECOMMENDATION

Staff recommends approval CR-48, accepting a grant from Tri-County Health Department.

BUDGET/TIME IMPLICATIONS

None.

STAFF REFERENCE

If Council members have any comments or questions they may contact Paula Jensen, Director of Management Services at pjensen@northglenn.org or 303.450.8877.

ATTACHMENTS

1. Funding Application/Approval

CR-48 – Acceptance of Grant from Tri-County Health Department



Employer Funding Request Form

Contact Name: Christine Rucobo

Organization: City of Northglenn

Funding Amount Requested: \$700

Review funding guidelines on the reverse side before completing this form.

*Please note that in order to be eligible for the current round of funding; you will need to have completed the following milestones by April 1, 2019. All funding must be used by **June 15, 2019**.*

- ✓ Completed Commitment Letter
- ✓ Completed Health Links Assessment: <https://www.healthlinkscertified.org/get-started>
- ✓ Completed Policy Form (this provides us with a snapshot of your current policy activities)

1. Please indicate (highlight) which strategy you are requesting funding for.

- Creating a Breastfeeding Friendly Environment
- **Creating a Healthy Food and Beverage Environment**

2. Please describe what you intend to use the funding for?

In order to reignite our employee's attention to our healthy meeting guidelines/policy -we will focus our annual Wellness/Benefits Fair during Open Enrollment (June 2019) to promote it. The use of funds will increase the amount and quality of the education materials and the promotion/visibility of the policy and guidelines during the fair. In addition, funds will be used to update and market our permanent messaging of the policy to all our staff.

3. Please share your strategy for successfully reaching all staff, including those who are hourly, part-time, and/or serve in administrative support roles.

For the fair, all employees will receive an individual invitation and each supervisor will strongly encourage employees to attend; including allotting work time during the day, department announcements, shift switches, etc. At all our locations, we provide positive messaging and regular marketing of the policy. Depending on the job description/office location, materials are created to specifically to reach every employee where they work.



Initiative for workplace health and well-being

By signing below, I acknowledge I am informed of the workplace wellness funding requirements and expectations. I understand that if I have questions regarding the funding opportunity, I can contact Tri-County (Jennifer Tellis, 720-200-1521 jtellis@tchd.org or Michele Haugh, 720-200-1518 mhaugh@tchd.org)

Christine Rucobo Christine Rucobo Sr HR Analyst

Employer Liaison Name/Signature

Title

4/4/2019

Date

Paula Jensen Director of Management Services

Employer Executive Management Name/Signature

Title

4/4/19

Date

Approved by:

Jennifer Tellis, Workplace Policy Specialist, 4/30/2019

Name/Signature, Tri-County Health Department

Title

Date



Workplace Wellness Funding Guidelines:

- All items purchased through the funding opportunities need to support breastfeeding friendly and/or healthy food and beverage initiatives.
- All purchases must be completed by the date noted on the first page of this form.
- All purchases must be tracked, documented, and available for review by TCHD at their request, up to four (4) years after award is received.

Prohibited expenses include, but are not limited to, the following:

- Lobbying – no grant funds may be used to influence state law makers
- Out-of-state travel
- Capital improvement/Construction
- Equipment – defined as nonexpendable, tangible personal property valued at \$5000 or more and having a useful life of more than one year
- Subscriptions and professional organization membership fees. This includes membership fees to warehouse stores (e.g., Costco, Sam's Club)
- Sugar-sweetened beverages – While grant funds may purchase healthy foods and refreshments, these funds may not be used for soda, sports drinks, energy drinks, or other sugar-sweetened beverages
- Tobacco products – No grant funds may be used to purchase tobacco products such as cigarettes, cigars, cigarillos, e-cigarettes, chew, snuf, or any other tobacco/nicotine product
- Alcohol

Guidelines for the purchase of incentives:

- Incentives (e.g. gift cards, t-shirts, water bottles) may be used sparingly to promote participation
- Incentives are not considered tax-exempt and may not exceed a \$25 value per person
- A record of incentive recipients must be maintained

Examples of Approved Funding:

1. Policy roll-out activities
2. Breast pump
3. Updates to lactation rooms
 - a. Lamp
 - b. Mini refrigerator
 - c. Privacy shield
4. Signage and/or messaging
5. Water bottles
6. Water filling stations
7. Healthy refreshments
8. Staff education

Let's Get Started!

Organization: City of Northglenn Contact Person: Christine Rucobo

Date: 3/14/2019

By participating in this free initiative your organization will see results from your wellness efforts!

- Have opportunities to connect with peers that share your vision
- Receive one-on-one advising to better engage your employees
- Learn evidence-based practices and real world strategies
- Receive funding opportunities to support your work

The initiative brings together organizations of all sizes with the end goal of improving the health of Colorado's workforce.

The project is based on a peer-mentoring network to safely share ideas and work together through organizational milestones (attached). By completing this form, you agree to support Christine Rucobo [Contact Person], to participate in this initiative, on behalf of your organization.

We are confident that our work together will result in lasting health impacts for your employees.

X  Christine Rucobo Sr. HR Analyst
Organizational Contact (Please sign then print your name and title)

X  PAULA JENSEN, DIRECTOR OF MGMT. SERVICES
Management Representative (Please sign then print your name and title)

Please submit form to Michele or Jennifer:

Michele Haugh
Worksite Wellness Coordinator
Email: mhaugh@tchd.org

Jennifer Tellis
Worksite Wellness Specialist
Email: jtellis@tchd.org

SPONSORED BY: MAYOR DODGE

COUNCILMAN'S RESOLUTION

RESOLUTION NO.

No. CR-48
Series of 2019

Series of 2019

A RESOLUTION ACCEPTING A GRANT AWARD FROM THE TRI-COUNTY HEALTH DEPARTMENT

BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF NORTHGLENN, COLORADO, THAT:

Section 1. The City Council of the City of Northglenn hereby accepts a grant award from the Tri-County Health Department in the amount of \$700 for the Worksite Wellness Initiative Program to support employee wellness activities.

DATED, at Northglenn, Colorado, this _____ day of _____, 2019.

CAROL A. DODGE
Mayor

ATTEST:

JOHANNA SMALL, CMC
City Clerk

APPROVED AS TO FORM:

COREY Y. HOFFMANN
City Attorney