

# **City of Camas**

## **Wellness Program Guidelines and Committee requirements**

### **MISSION STATEMENT**

The City of Camas Wellness program will promote good health habits and educate its employees in a fun and rewarding way, stressing lifestyle changes and self-education in order for employees to establish lifelong healthy habits.

### **PROGRAM GOALS**

- Improve overall wellness in all aspects of life: emotional, intellectual, physical, social, spiritual, occupational and environmental
- Provide opportunities for employees on and off work time to improve their wellness
- Improve morale and personal well-being at work through fun and rewarding activities

### **WELLNESS PROGRAM**

The Wellness Program is administered through the City's Administrative Services Department and has a dedicated budget.

The City provides workout facilities at the City Hall and Police Department locations. These are available free of charge to all regular City employees and their spouse and eligible dependents (only if accompanied by employee and only during certain hours).

All regular City employees may participate and receive incentives for all sponsored Wellness Program events. Seasonal and temporary employees are eligible for participation but not incentives.

City employees are permitted to participate in some wellness programs (health screenings, health education) during work hours with approval from their supervisor so as not to affect City operations.

The Wellness Committee promotes program activities through awareness and change.

### **WELLNESS COMMITTEE**

Participation on the Wellness Committee is voluntary with a good representation of all departments. Below is a description of how the committee assists with the planning, oversight, management, promotion and execution of program activities.

#### *General requirements:*

The Committee will have a total of not more than six members. The City Administrative Services Director is a permanent member of the committee.

The Committee will select a chair or co-chairs. It is the responsibility of the chair or co-chairs to set the time and place of meetings, communicate said time and place to all members, prepare an agenda and facilitate the meeting. It is also the chair or co-chair's responsibility to report to the City Administrator and Council, as needed or required, on Wellness activities.

The term for members will be a goal of two years with rotations occurring every other year and a goal that no more than half of the committee members will change in the same year.

The Committee will consist of members from different City departments with no more than two members from the same City department.

Meetings will occur every two months or more frequently as needed. Meetings are expected to last about one hour.

All committee members are allowed 1-2 hours/month to attend meetings and work on programs.

*Members are responsible for:*

Attending wellness meetings

Serve on the committee for at least one year

Leading at least one wellness activity/program per year

Assisting (as needed) other members with their events

Representing your department and keeping them aware of the various activities

Sharing ideas, concerns, objections, and solutions when decisions are being reached

1.1

Resolution No. 896

A RESOLUTION of the CITY OF CAMAS Council supporting  
The Camas Employee Wellness Program.

WHEREAS, the Camas City Council has determined that it is an advantage to the City to have an employee wellness program; and

WHEREAS, this program educates and reinforces employee health awareness and healthful lifestyle choices; and

WHEREAS, the fitness and good health of the City's employees insures that our citizens receive the benefit of more productive employees with fewer illnesses in the workplace;

NOW THEREFORE, the City Council of the City of Camas here by resolves:

Section 1.

The City Council of the City of Camas hereby expresses their support of the Camas Employee Wellness Program.

ADOPTED by the Council at a regular meeting this 8th day of May 2000.

Signed [Signature]

ATTEST: [Signature]

APPROVED as to form:

[Signature]  
City Attorney