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INTRODUCTION
ABOUT EXERCISE & SPORTS SCIENCE AUSTRALIA (ESSA)

Exercise & Sports Science Australia (ESSA) is a professional organisation representing over 3,000 prominent exercise physiologists, sports scientists, exercise scientists and academics (researchers). Established in 1991, ESSA is the leading authority on physical activity and exercise in Australia. Its vision is to enhance the health and performance of all Australians by supporting exercise and sports science professionals. ESSA provides national leadership and advocacy on key issues and supports its members and the community by fostering excellence in professional practice, education and training, and research.

ESSA is proud to be a major partner in developing Physical Activity in the Workplace: A Guide.

For more information, visit www.essa.org.au or contact (07) 3862 4122.

What is an Accredited Exercise Physiologist (AEP)?

An Accredited Exercise Physiologist (AEP) is a 4-year university-qualified allied health professional who specialises in exercise and lifestyle management services for the prevention and management of chronic disease, injury and disability. Many AEPs are employed in the workplace wellness sector, designing and implementing workplace physical activity and exercise programs, as well as providing occupational rehabilitation services.

ESSA provides the national accreditation program for exercise physiologists. As allied health professionals, AEPs are eligible to register with Medicare Australia, the Department of Veterans’ Affairs, and state and territory WorkCover bodies, and are recognised by private health insurers.

To find an AEP in your area, visit the ‘Find an exercise physiologist’ national search directory online at www.essa.org.au or contact (07) 3862 4122.

ABOUT EXERCISE IS MEDICINE® (AUSTRALIA)

Exercise Is Medicine® (Australia) is a national initiative coordinated by ESSA that aims to make physical activity and exercise a standard part of a disease prevention and treatment medical paradigm in Australia. In line with the Australian Government’s recent focus on preventative health, Exercise Is Medicine® (Australia) aims to combat the rising tide of preventable disease and health care costs by establishing a national action plan through health industry stakeholder engagement.

The Exercise Is Medicine® (Australia) National Taskforce is listed below:

- Australian Medicare Local Alliance (AMLA)
- Royal Australian College of General Practitioners (RACGP)
- Australian Practice Nurses Association (APNA)
- Consumers Health Forum of Australia
- Australian Government’s Lifescripts program
- Australian Food and Grocery Council (AFGC)

Exercise Is Medicine® (Australia) has three guiding principles:

- Physical activity and exercise and are important to health and the prevention and treatment of many chronic diseases.
- More should be done to address physical activity and exercise in health care settings.
- Further efforts are required to bring a greater focus on physical activity and exercise in health care settings.

Supporting physical activity friendly environments in the workplace, schools and local communities remains a key objective of Exercise Is Medicine® (Australia).

For more information, visit www.exerciseismedicine.org.au, call (07) 3862 4122 or email info@exerciseismedicine.org.au.

HEALTHIER AUSTRALIA COMMITMENT

The Healthier Australia Commitment is an industry led, multi-year strategy to assist Australians to improve their health and wellbeing. The commitment brings together major Australian food and grocery industry players in partnership with not-for-profit and other organisations with the aim of building healthier families and educating Australians about the importance of energy balance. The Healthier Australia Commitment promotes ways to help people achieve a healthy lifestyle by promoting energy balance – balancing the quality and quantity of foods and increasing physical activity.

For more information, visit the Healthier Australia Commitment website at www.togethercounts.com.au.

AIM OF THE GUIDELINES

These guidelines and their accompanying resources have been developed by Exercise & Sports Science Australia (ESSA) and supported by the Healthier Australia Commitment (HAC). They are intended to
support organisations in the promotion of physical activity in the workplace and to reduce sedentary (inactive) behaviour.

Physical activity levels are recognised as a major risk factor for chronic disease and ill-health in Australia, however increasing evidence suggests that health authorities should also consider the sedentary (sitting) habits of individuals when assessing their health risks. Consequently, a workplace activity program should include interventions targeting both of these behaviours to achieve significant health benefits.

The targeted audience of this guide includes senior management, human resource units, health promotion units and workplace health committees, and its content and recommendations are applicable to small-, medium- and large-sized organisations.

Why promote physical activity in the workplace?
Physical inactivity is one of the biggest global public health problems of the 21st century – with low cardio-respiratory fitness (CRF) accounting for significantly more deaths than other risk factors (see graph below).

![Graph showing attributable fractions of major health risks](source: S. Blair 2010)

Physical inactivity is the second highest lifestyle-related cause of disease and illness in Australia, only behind smoking. Inactivity doubles the risk of heart disease, type 2 diabetes and obesity, and increases the risk of stroke, various cancers, depression, anxiety and falls as well as contributing to over 13,000 premature deaths annually in Australia. Although physical activity is an essential component of weight management, it is very beneficial to an individual’s health – independent of weight loss. Structured physical activity is highly effective in preventing and/or treating most of the major diseases of modern society including diabetes, heart disease, depression and cancer. Yet despite this evidence, almost 70% of Australian adults are not active enough to achieve the preventive health benefits.

The workplace is recognised as a priority setting for health promotion by the World Health Organization and the Australian Government. Sixty-five per cent of the Australian population aged over 15 years are in the labour force, with 68.5% of the workforce classified as sedentary or engaging in low-level activity. Related to this, the cost of absenteeism in Australia is estimated at $7 billion each year. Recent research has shown that workplace health programs resulted in, on average, a 25.3% decrease in sick leave absenteeism, 40.7% decrease in workers compensation costs, 24.2% decrease in disability management costs and $5.81 of savings for every $1 invested in employee wellbeing.

PRESENTEEISM: COST OF INACTIVITY
Presenteeism is the loss of productivity that occurs when employees come to work but are not fully functioning because of illness or injury. More work performance is lost from presenteeism than from absenteeism, with the cost of presenteeism estimated at almost $26 billion per year (more than four times the cost of absenteeism). The largest contributors to presenteeism are: depression, allergies, hypertension, type 2 diabetes.

Physical activity is a proven treatment for three of the four major contributors to presenteeism and can therefore play a major role in improving productivity within the Australian workforce.
GUIDELINES
DEFINITIONS OF PHYSICAL ACTIVITY

Physical activity may be incidental or structured – as defined below:

**Incidental (physical) activities** (often referred to as ‘activities of daily living’ or ADLS) are activities that are undertaken as part of normal daily tasks. They include walking up the stairs or to the bus stop, household chores and running errands. Although each incidental activity in isolation may be viewed as only a small amount of time (generally less than 10 minutes), when combined, the sum of all ADLS in a given day add up to a significant portion of an individual’s overall activity levels. Moreover, incidental activity has gained greater recognition in recent years for its health benefits in interrupting sedentary (sitting) time – a independent risk factor for chronic disease and all-cause mortality (see ‘Sedentary Behaviour’, page 9).

**Structured physical activity** (otherwise referred to as exercise) is a planned activity that is usually performed for an extended period (i.e. beyond 10 minutes) and is purposeful in the sense that the objective is the improvement of health and fitness. Exercise includes routine jogging, swimming, or cycling to work.

Both incidental and structured physical activity can produce similar health benefits when performed in adequate amounts. The aim of these guidelines is to support employees to achieve the national physical activity recommendations by either increasing the amount of incidental activity and/or structured activity performed by employees.

In later sections in this guide, we outline the following two models (or frameworks) that serve as the foundations for a successful workplace activity initiative:

- barriers and enablers to increasing physical activity (4-category activity-barrier model)
- stages of change (transtheoretical model).

RECOMMENDED LEVELS OF PHYSICAL ACTIVITY FOR HEALTH

A summary of the recommendations by the World Health Organization (WHO) for adults aged 18 to 64 years – including the amount and intensity of each activity – is provided below.21 It must be noted that the recommendations outline the minimum activity required for health benefit, and the WHO advises that many adults should exceed the minimum recommended amount of activity.

**Aerobic Activity**

Aerobic activity (also known as endurance activity) improves cardio-respiratory fitness and has three defining characteristics:

- it is a continuous activity, lasting more than 10 minutes
- it is rhythmic in nature
- it uses large muscle groups.

Examples of aerobic activity include: walking, jogging, swimming, cycling, rowing, tennis, volleyball, basketball and soccer, particularly when performed as endurance activities.

To promote and maintain health, adults should perform:

- moderate-intensity aerobic physical activity for a minimum of 30 minutes on five days each week (i.e. a total of 150 minutes of moderate-intensity aerobic activity each week); or
- vigorous-intensity aerobic activity for a minimum of 25 minutes on three days each week (i.e. a total of 75 minutes of vigorous-intensity activity each week); or
- a combination of moderate and vigorous intensity activities can be performed to meet this recommendation.

For additional health benefits, adults should increase their moderate-intensity aerobic physical activity to 300 minutes per week, or engage in 150 minutes of vigorous-intensity aerobic physical activity per week, or an equivalent combination of moderate- and vigorous-intensity activity.

On a 10-point scale – where sitting is 0 and an all-out or maximal effort is 10 – moderate-intensity activity is a 5 or 6 and results in a noticeable increase in heart rate and breathing. On the same scale, vigorous-intensity activity is a 7 or 8 and produces dramatic increases in heart rate and breathing.

**Muscle-strengthening activity**

Adults should perform strength training activities for a minimum of 2 days each week. The recommendations include 8–10 exercises using major muscle groups performed on two or more non-consecutive days per week.

A weight should be used that allows 10–15 repetitions per exercise. The level of effort for strength training should be moderate to high. On a 10-point scale – where no movement is 0 and maximal effort is
10 – moderate effort is a 5 or 6, and high intensity is a 7 or 8.

**Activity plan**
Adults with a chronic health issue or injury should have an activity plan developed to ensure that the program works optimally as a treatment or therapy. Certain risks including falls, injury and other adverse events need to be addressed with specific tailored exercise prescribed by an appropriately qualified allied health professional (i.e. an Accredited Exercise Physiologist).

**SEDENTARY BEHAVIOUR**
Sedentary behaviour is used to describe activity of low energy expenditure and is typically characterised by sitting which can occur at work, in transit, at home and during leisure time. Technological change and labour-saving devices in the workplace mean that prolonged sitting has become an ever-present part of adults’ working lives.

**Effects of prolonged sitting on health**
While posture at work is recognised as a potential occupational hazard, research now links prolonged sitting with premature mortality, heart disease and diabetes. The potential adverse health risk of sedentary time needs to be considered separately to the lack of physical activity outside work hours. This follows recent evidence that (as a population health risk) reducing total time spent sitting may be at least as important as increasing participation in physical activity – in fact, 30 minutes of physical activity is as protective an exposure as 10 hours of sitting time is a harmful one. For instance, an employee may meet the minimum recommendations for physical activity by doing regular structured physical activity (such as a brisk walk or cycling for at least 30 minutes at 5 sessions per week) but typically sit for prolonged periods of the day – still placing the individual at risk. The evidence is sufficiently strong that:

- adults who sit less throughout the day have a lower risk of death – particularly from cardiovascular disease; and
- regardless of total sitting time, regular interruptions from sitting (even standing up) may assist in reducing risk factors for developing coronary artery disease and diabetes.

Prolonged sitting is becoming an increasingly important factor in both workplace health and productivity, since chronic disease is associated with reduced productivity through absenteeism and presenteeism.

**Implications for organisations**
Organisations should focus not just on increasing physical activity levels amongst the workforce but also on reducing sitting time, especially in individuals who do not meet the physical activity recommendation – currently representing 68.5% of the Australian workforce. Furthermore, encouraging high-risk groups (such as individuals with cardiovascular disease or diabetes, or those who are overweight or obese) to sit less and be more physically active should be an absolute priority.

Research has shown that interrupting sitting-time with light-intensity activity (e.g. standing or casual-paced walking) offers significant health benefits and should be actively promoted within workplaces. Encouraging employees to move should be the primary focus for the workplace – even ‘non-sweaty’ light-intensity activity. While promoting this type of activity poses fewer challenges than engaging employees in moderate-to-vigorous activity, effective intervention nonetheless requires a strong commitment coupled with a strategic approach. Recommendations for actively promoting reduced sitting time include:

- Incorporate prolonged-sitting within occupational health and safety policies, just like other elements of ergonomics and posture.
- Determine the levels of prolonged sitting among employees during work hours through audit. This information can be obtained through the online ‘EIM Be Active at Work Survey’ – which features a series of questions including sitting time and average frequency of interruptions to sitting every hour.
- Explore opportunities to reduce sitting time in the workplace through interventions, for example:
  - Encourage staff to interrupt their sitting time every 30 minutes for 2 minutes – or at least every hour for 2–4 minutes. The interruption in sitting time need not necessarily be a break from work-related activity; it may be an opportunity to discuss matters or deliver items to another colleague, or any other work-related task.
Introduce height-adjustable desks to promote standing.

Promote and support standing or walking meetings. At the very least, incorporate short breaks during prolonged sit-down meetings (e.g. 2 minutes standing/walking every 30 minutes or at least 2–4 minutes standing/walking every hour).

Introduce extra-long telephone cords or telephone headsets to enable employees to stand during phone calls.

Re-organise work tasks to enable employees to stand or sit as they choose.

Organisations should be encouraged by the fact that replacing prolonged sitting-time with light-intensity activity is a feasible goal for employees and offers significant health benefits – independent of moderate to vigorous activity levels.

**BARRIERS TO INCREASING PHYSICAL ACTIVITY**

There are multiple influences on an individual that may act to support (enablers) or hinder (barriers) their physical activity behaviours. Barriers to increasing physical activity in individuals can be divided into 4 categories:

- intra-personal
- inter-personal
- environmental
- organisational.

The (4-category) activity-barrier model provides an excellent framework to conduct a comprehensive investigation and identify all potential barriers that may arise for each individual. Subsequently, strategies can be co-developed to counter these barriers – assisted by using the same model to identify all the enablers that support the individual.

**Intra-personal**

Intra-personal barriers refer to barriers within the individual. They may include:

- psycho-social issues (e.g. self-efficacy, motivation)
- physical issues (e.g. movement limitations, health status)
- cultural issues (e.g. conforming to ‘social-age’, or perceiving exercise as inappropriate).

**Inter-personal**

Inter-personal barriers refer to barriers arising from the individual’s relationship with others. This may include:

- at home (e.g. an unsupportive partner, child-minding responsibilities and/or household-tasks)
- the workplace (e.g. an unsupportive employer, constantly working over-time)
- other (extracurricular activities).

**Environmental**

Environmental barriers include:

- weather
- physical environment (e.g. uneven footpaths, inadequate lighting, unsafe area for exercise)
- area lacks infrastructure for various physical activities (e.g. no bicycle paths or parks).

**Organisational**

Organisational barriers refer to the obstacles arising from the proposed activity itself, demonstrated in the following examples:

- frequenting a fitness centre – the financial cost of the membership may be a barrier, or the location of the centre may require excess travel time
- attending an aquarobics class – the time the class is hosted may clash with other commitments, or the location of the class may be difficult to organise transport to.

**Implications for organisations**

The broad nature of the above model enables an organisation to identify where in its capacity it can support its employees to increase or maintain their activity levels. The appropriate strategies for each category of barriers are outlined below:

**Intra-personal barriers**

- Psycho-social, physical and cultural issues are more effectively addressed through individual counselling and/or group counselling approaches (see ‘Group counselling versus individual counselling’ on page 15).

**Inter-personal barriers**

- Individual counseling and/or group counseling approaches may also assist in addressing barriers arising from an individual's relationships with others (see ‘Group counselling versus individual counselling’ on page 15).
• Organisations should also seek to play a direct role in addressing inter-personal barriers arising in the workplace (e.g. unsupportive management; inflexible working hours) to support employees.  
An Organisational Policy and Support Audit Tool (Appendix B) provides a policy review checklist for organisations to ensure a supportive culture.

Environmental barriers
• Organisations should provide the optimal physical environment (and infrastructure) to support physical activity amongst its employees.
• Where possible, this should also address barriers arising from the weather or climate. A (Workplace) Environmental Audit Tool (Appendix C) provides a checklist for organisations to ensure a supportive environment.

Organisational barriers
• All potential barriers arising from events or activities hosted or coordinated by the workplace should be considered and addressed. For example, subsidising part or all of the costs of an activity overcomes the barriers associated with affordability and scheduling frequent activity classes throughout the day address the barriers associated with accessibility.
• Individual counselling and/or group counselling approaches may also assist in minimising organisational barriers by working with employees to determine alternative and more feasible options, given their unique constraints (see ‘Group counselling versus individual counselling’ on page 15).

STAGES OF CHANGE: TRANSTHEORETICAL MODEL
The main driver behind a positive return on investment (ROI) in a workplace physical activity promotion campaign is change. Well-grounded behaviour-change strategies are fundamental to health and wellness improvements, providing increased productivity and health risk reduction in the long term. Given that approximately 68.5% of the workforce are inactive or engage in low-level physical activity, emphasis should be given to effecting a change in this cohort to reduce sedentary time and increase activity levels. The most effective strategies identified to engage individuals in this cohort are health education and increasing awareness. This is because two psychological states contribute to an individual’s readiness for change: perceived importance and confidence in ability to change (or self-efficacy). Behaviour change can be measured on a ‘scale of change’, from ‘awareness’ to ‘sustainability’.

The transtheoretical model (or stages of readiness) proposes that an overall change in an individual’s health-behaviour involves them progressing through five well-defined stages: pre-contemplation, contemplation, preparation, action and maintenance. The premise of the model is that each stage of readiness requires a specific support strategy to advance an individual into the next stage, with the ultimate goal of progressing to ‘action’ or ‘maintenance’. Therefore, it is important to evaluate the stage of readiness for physical activity for each individual within an organisation before they are given the challenge to change their behaviour.

1. Pre-contemplation
Individuals in the pre-contemplation stage are not thinking about or intending to change a problem behaviour (or initiate a healthy behaviour) in the near future – usually quantified as the next 6 months. Pre-contemplators are usually not armed with the facts about the risks associated with their current behaviour (inactivity) and in many instances, can be unaware that it is a problem. Additionally, many individuals make unsuccessful attempts to change, becoming discouraged and regressing back to the pre-contemplation stage. It is important to ascertain why individuals in this stage are resistant and/or unmotivated, rather than ignoring them.

2. Contemplation
An individual enters the contemplation stage when he or she becomes aware of a desire to change a particular behaviour – typically defined as within
the next 6 months. In this stage, individuals weigh
the pros and cons of changing their behaviour – a
process known as decisional balance. Typically these
include past experience (e.g. discomfort may be a
con; reduced stress and more energy may be a pro),
motivation (e.g. losing weight could be a pro), exercise
knowledge, program convenience, financial cost or
time allocation. Contemplators also represent a large
proportion of individuals with regards to physical
activity behaviours, as ambivalence between the pros
and cons of change keeps many people immobilised
in this stage. Resolving this ambivalence is one way to
help contemplators progress toward taking action to
change their behaviour.

3. Preparation
By the time individuals enter the preparation stage,
the pros in favour of attempting to change a problem
behaviour outweigh the cons, and action is intended
in the near future, typically within the next 30 days.
Many individuals in this stage have made an attempt
to change their behaviour in the past year, but have
been unsuccessful in maintaining that change.
Preparers often have a plan of action, but may not be
entirely committed to their plan. Traditional action-
oriented behaviour-change programs are appropriate
for individuals in this stage.

4. Action
The action stage marks the beginning of actual
change in the specific behaviour – typically within the
past 6 months. By this point, where many theories
of behaviour change begin, an individual is half way
through the process of behaviour change. This is also
the point where relapse, and subsequently regression
to an earlier stage, is most likely. If an individual has
not sufficiently prepared for change, and committed to
their chosen plan of action, relapse back to sedentary
behaviour is likely.

5. Maintenance
Individuals are thought to be in the maintenance stage
when they have successfully attained and maintained
behaviour change for at least 6 months. While the
risk for relapse is still present in this stage, it is less
so, and as such individuals need to exert less effort in
engaging in change processes.

Relapse
Whereas a lapse is defined as a (brief) interruption
in a current positive behaviour (e.g. missing one
or two exercise sessions), a relapse is a return to
former behaviour patterns (e.g. being inactive for
an extended period). Persons should be counselled
to deal with lapses or relapses, and to recognise
that these behaviours are not tantamount to
failure. The most effective approach for preventing
relapses is to anticipate potentially high-risk
situations and devise strategies to cope with (and
even avoid) these situations. A high-risk situation
is one that people find challenging to manage
without resorting to old behaviours (e.g. heavy
work schedules are often cited by previously
sedentary persons as a high-risk situation).
Within that situation will be specific triggers,
which include things such as stress and anxiety,
changes in availability times and discouragement
from peers. High-risk situations and their triggers
are unique to each person, so it is important to
ascertain both of these through consultation.
interventions lead to forward progression in the stages of change model, which is important given the largest portion of the workforce are in pre-contemplation or contemplation stages for physical activity.

**APPLYING THE TRANSTHEORETICAL MODEL: STAGE-MATCHED INTERVENTIONS FOR ORGANISATIONS**

Traditionally, workplace health programs targeted their initiatives at the minority of employees already in the latter preparation through to maintenance stages, without enough focus on the individuals who stood most to benefit significantly but require more support. Moreover, it is the pre-contemplation and contemplation cohorts that provide an organisation with its greatest return on investment with regards to productivity (presenteeism and absenteeism).

This section outlines recommended behaviour-change strategies for implementation by organisations that are stage-matched to enable maximal impact across the entire workplace. The aim of an organisation should be to advance its employees to the next stage of their physical activity related behaviour.

**Pre-contemplators (no intent and inactive)**

The pre-contemplation stage includes individuals who are not active and are not thinking about becoming active. Consequently, the goal at this stage is to engage individuals to begin thinking about physical activity (i.e. advance the individual to contemplation stage). Uninvited or aggressive methods of persuasion typically elicit a resistant response. Criticism of their current behaviour may escalate the response with defensiveness and irritation, feeding a determination to remain inactive. A more effective approach is to arouse interest by raising awareness of both the benefits of physical activity and the hazards of inactivity. Known as ‘planting the seed’, the strategy is to first raise awareness of the issues surrounding the current (problem) behaviour and its consequences, and then provide resources and support in a subtle manner to nurture an interest. There are several methods to support this outcome, although the effectiveness is increased when they are delivered in combination:

1. **Awareness raising through health assessment.**
   The online ‘EIM Be Active at Work’ employee survey comprises questions to prompt reflection of current physical activity behaviours – providing an ideal opportunity to facilitate awareness raising in pre-contemplative employees. Requiring less than 10 minutes to complete, the survey provides employees instantaneous feedback including evaluation of their overall activity level and recommendations to reduce their health-risk profile. Developed with a subtle educational intent, the survey concludes with a short quiz as an additional awareness-raising activity (see ‘EIM Be Active at Work employee survey’ – page 23).

2. **Information materials.**
   Provide subtle informative materials (e.g. physical activity information brochures) that allow the individual to browse at their own discretion. Materials should be brief and comprise a balance between highlighting the benefits of being active and the hazards of inactivity. The information should be accompanied with clear, achievable advice on how to bring about change, including a few self-reflective questions to prompt engagement. Information brochures can be ordered through the Exercise Is Medicine (Australia)® office at info@exerciseismedicine.org.au.

3. **Information seminars.**
   Schedule information seminars with anecdotes to arouse the interest of, and engage, employees.

4. **Providing role-models: employee testimonials.**
   Provide testimonials from people who have made the change from a sedentary lifestyle to a regularly active one. Acting as role models, their testimonials should highlight all the benefits leading to an enhanced quality of life. Other considerations are:
   - include an honest account of the obstacles and challenges in maintaining the change and the successful strategies that maintained their motivation
   - where possible, select an individual representing the typical profile of the workforce
– preferably an employee
- outline the things that made physical activity appealing for the person, and how it has improved their quality of life.

Real stories resonate with people and can provide a source of inspiration. More importantly, a well-structured testimonial can build the reader’s trust in the intended message regarding physically active lifestyles, and provoke thought into action. An effective strategy to capture the attention of the reader, it not only targets the pre-contemplator to encourage a shift to contemplation, but also targets the contemplator to encourage a shift to preparation.

5. **Self-monitoring activities: pedometer**
Self-monitoring can be used to identify unhelpful patterns and/or sedentary activities. A simple method effective in engaging those who are sedentary is to provide an inexpensive pedometer to track step-count for walking and related physical activities. Pedometers are a cost-efficient, valid and reliable means for providing motivational feedback. A simple step-count diary that enables a long-term analysis of activity levels is available on the Exercise Is Medicine (Australia)® website at www.exerciseismedicine.org.au.

**Contemplation (intent, but inactive)**
The contemplation stage includes individuals who are not physically active but are considering making a change. There are two primary aims for this stage:
- Address ambivalence; help tip the decisional balance in favour of the pros (over the cons) for becoming more active.
- Provide support in the form of advice and education focused on getting started; goal setting, and establishing support networks.

**Preparation (intent and occasional activity)**
The preparation stage includes individuals who are committed to make a change within the next 30 days. The may be sedentary, or engaging in some physical activity but not at the recommended level, and are at risk of regression if not supported within the period they intend to make a change. The goal in this stage is to support the individual to engage in regular activity, applying the following strategies:
- Identify and address all potential barriers to increasing physical activity, applying the 4 category barrier model (see ‘Barriers to increasing physical activity’ – page 10). Most often, emphasis is on addressing inter-personal barriers (e.g. self-efficacy and motivation).
- Co-develop an action plan, including the design of a tailored physical activity program addressing the barriers.
- Co-develop tailored relapse prevention strategies as a supplement to the action plan (see ‘Relapse prevention’ – page 15).

**Action (consistently active for less than 6 months)**
The action stage includes individuals who are physically active at the recommended level but have been so for fewer than 6 months. The goal of this stage is to make physical activity a routine and sustainable part of the individual’s lifestyle, applying the following strategies:
- **Provide support for self-management of physical activity.**
  Empowering the employee to become independent in managing their physical activity behaviour or routine can be achieved by periodically providing education on the principles of physical activity, including self-monitoring techniques.
- **Build self-efficacy.**
  Through a process of guided enactive mastery – achieved by establishing and achieving sub-goals will increase an individual’s self-efficacy and reinforce their current behaviour.
- **Reinforce relapse prevention strategies.**
  Re-visit relapse prevention strategies and refine where necessary to ensure continuity of behaviour (see ‘Relapse prevention’ – page 15).

**Maintenance (consistently active for 6 months or more)**
The maintenance stage includes individuals who have been physically active at the recommended level for more than 6 months. Although this behaviour can now be considered a routine part of the individual’s lifestyle, there always remains a risk of relapse. Consequently, the goal for this stage is to prepare for future setbacks and sustain motivation, applying the following strategies:
• **Highlight the rewards.**
  Reflect on the benefits derived from increasing activity levels with an overall focus on quality of life as reward.

• **Review activity program or routine.**
  Refine the current activity program subject to individual needs. These needs may be based on seeking new challenges or goals, variety of activities or changes in the individual’s circumstances.

• **Reinforce relapse prevention strategies.**
  Re-visit relapse prevention strategies and refine where necessary to ensure continuity of behaviour (see ‘Relapse prevention’ – page 15).

**Relapse prevention**

Relapse prevention strategies are most effective when developed in the preparation stage of readiness, allowing for refinement during advanced stages of readiness: forewarned is forearmed. Such a strategy may involve a process similar to that described below:

1. Help employees to recognise that maintaining change is challenging, and that they should anticipate high-risk situations and occasional lapses.

2. Have person identify their enablers (i.e. the things that help maintain the change).

3. Have person identify the things likely to trigger a relapse and note these in a list. Careful consideration should be given to their perceived barriers in maintaining their physical activity routine (see ‘Barriers to increasing physical activity’ – page 10) as well as the high-risk situations that may arise. This will help develop an accurate forecast of the most likely events or issues causing lapses to their routine. Reflecting on their enablers, guide the individual to develop strategies to counter each barrier.

4. Develop a (pre-emptive) action plan for each barrier/scenario. The action plan should include:
   - accessing/notifying sources of support to assist a return to active behaviour
   - developing a contingency plan comprising alternative options for each scenario. For example, adjusting the volume and frequency of the activity plan to accommodate a busy period or devising an activity routine during interstate or overseas trips.

5. Discourage (warn) individuals from adopting the ‘all or nothing’ rule, which is one’s tendency to give up even if a small lapse has occurred. Reassure them that lapses are a normal occurrence in routine physical activity, and encourage them to view lapses as a fork in the road that could either lead to maintaining activity or reverting to earlier behaviour patterns.

6. Practice cognitive behavioural approach (cognitive restructuring) to overcome unhelpful or negative thought patterns (e.g. low self-efficacy).

7. Apply periodic positive reinforcement for employees

**Group counselling versus individual counselling**

Many of the support strategies mentioned earlier require face-to-face consultation, leaving organisations with the choice of providing group interventions or more intensive individual counselling sessions for its employees. Group counselling (seminars and workshops) is an alternative or supplement to individual counselling. Groups can be designed specifically for the efficient conveyance of information or for a combination of information and social support. Small-group formats offer several advantages over individual counselling. First and foremost is social support: participants sometimes receive information and advice better from other participants than from health professionals. They may also see themselves in other participants and begin to understand their own issues (behaviours and barriers). Participants can also offer important feedback to other group members in a way that health professionals cannot. Additionally, a small group allows participants to provide support, encouragement, feedback, etc. in an altruistic manner – a gesture that has significant psychological benefit. Notwithstanding, the most important ingredient for a successful group counselling intervention is the quality of the facilitator. The facilitator should be an allied health professional with proven expertise in health-behaviour change counselling for physical activity and exercise.

Individual (personalised) consultations with a
qualified health professional (e.g. an Accredited Exercise Physiologist) are necessary when motivational interviewing strategies and other client-centred approaches are required for counselling more resistant, inactive individuals and those struggling with ambivalence concerning being more active.

The summary table below outlines the various stage-matched behaviour-change strategies that may be implemented by organisations:

<table>
<thead>
<tr>
<th>STAGE-MATCHED BEHAVIOUR-CHANGE STRATEGIES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-contemplation (no intent and inactive)</td>
</tr>
<tr>
<td>• awareness raising through health assessment</td>
</tr>
<tr>
<td>• information materials</td>
</tr>
<tr>
<td>• information seminars</td>
</tr>
<tr>
<td>• providing role models: employee testimonials</td>
</tr>
<tr>
<td>• self-monitoring activities: pedometer.</td>
</tr>
<tr>
<td>Contemplation (intent, but inactive)</td>
</tr>
<tr>
<td>• address ambivalence and influence decisional balance</td>
</tr>
<tr>
<td>• provide advice and education: goal setting and establishing support networks.</td>
</tr>
<tr>
<td>Preparation (intent and occasional activity)</td>
</tr>
<tr>
<td>• identify and address all potential barriers to increasing physical activity</td>
</tr>
<tr>
<td>• co-develop an action plan</td>
</tr>
<tr>
<td>• co-develop relapse prevention strategies.</td>
</tr>
<tr>
<td>Action (consistently active for less than 6 months)</td>
</tr>
<tr>
<td>• provide support for self-management of physical activity</td>
</tr>
<tr>
<td>• build self-efficacy</td>
</tr>
<tr>
<td>• reinforce relapse prevention strategies.</td>
</tr>
<tr>
<td>Maintenance (consistently active for 6 months or more)</td>
</tr>
<tr>
<td>• highlight the rewards</td>
</tr>
<tr>
<td>• review activity program or routine</td>
</tr>
<tr>
<td>• reinforce relapse prevention strategies.</td>
</tr>
</tbody>
</table>

PROMOTING ACTIVE MODES OF TRANSPORT: WALKING AND CYCLING

Initiatives that promote incidental physical activity can increase overall levels of physical activity in inactive populations. In addition, the health and environmental benefits of such physical activity are now well established. Consequently, many health advocates argue that efforts should be directed at increasing physical activity as part of regular travel behaviour. Replacing private cars for transportation by walking, cycling and public transport (which often involves walking or cycling to transport interchanges) is an effective and equitable means of increasing participation in physical activity. This concept, referred to as active transport, includes a variety of self-propelled modes of transportation that use on- and off-road facilities such as footpaths, shared pathways and dedicated bicycle lanes. Walking, jogging and bicycling are typically considered the principal modes of active transportation, with the average distances and (typical) threshold distances travelled by employees to work indicated below:

<table>
<thead>
<tr>
<th>Walking</th>
<th>Cycling</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average distances for active modes</td>
<td>1.0 km</td>
</tr>
<tr>
<td>Threshold distances for active modes (typical)</td>
<td>2.5 km</td>
</tr>
</tbody>
</table>

Promoting walking to work

Walking to work for health benefits is a feasible option for those employees who:

- live within a reasonable distance to the worksite – as indicated by the average and threshold distance for walking (see table above)
- travel to work by private vehicle and are able to park a reasonable distance from the worksite (at least 10 minutes walking distance away)
- travel to work by public transport and alight at a reasonable distance from the worksite (at least 10 minutes walking distance away).

Strategies to promote walking to work for employees in the above categories are outlined below:

1. **Create an information pack.**
   Develop an information pack, including a map outlining safe walking routes to and from the worksite, with estimated walking times (as well as distances) to local facilities, such as shops and bus stops (people often miscalculate the walking duration to specific locations).
   Include in the information pack:
   - testimonials from employees who routinely walk to work (see ‘Providing role-models: employee testimonials’, page 13).
   - ‘Walk to work tips’ such as leaving work shoes at the workplace and wearing sneakers for walking. For self-conscious employees, there are a range of (black) soft shoes (or sneakers)
designed for recreational walking that give the appearance of formal wear.

2. **Promote walking events and pedometer use.**
   Promoting walking events such as ‘National Walk to Work Day’, using the ‘Physical Activity Calendar of Events’ (PACE) resource to identify upcoming events (see ‘Using the PACE Resource’ page 25).

   The use of pedometers is an effective strategy to engage those employees at pre-contemplation and contemplation stages. Pedometers with company logos can be issued to employees for free or at a subsidised fee. The pedometers should be accompanied with a ‘step–count diary’ in the walking information packs to encourage employees to monitor their activity levels and increase their walking. (‘EIM step count diary’ can be accessed at [www.exerciseismedicine.org.au](http://www.exerciseismedicine.org.au)).

3. **Create an online forum for employees.**
   Promote the above initiatives through the organisation’s intranet, including an online tool whereby interested employees can search for walking companions. Establish and support online (intranet) forums as a means of centralised communication between interested employees and those currently walking to work.

   Promote the information pack on the intranet, bulletins and staff newsletters, as well as recruitment packs for new employees.

4. **Other.**
   - provide shower facilities with personal lockers for employees
   - provide a towel service, ironing facilities and hair dryers
   - provide a dry-cleaning service (where possible)
   - allow more flexible dress codes to enable employees to reduce their travel load and facilitate ease of dress
   - provide umbrellas with the company logo in the foyer or reception area
   - implement flexi-time to enable active travel to and from work

**Promoting cycling to work**

Workplaces seeking to encourage employees to cycle to and from work as a means of promoting physical activity need to consider the most commonly cited barriers for cycling, in order to support employees with enabling strategies:

<table>
<thead>
<tr>
<th>Intra-personal</th>
<th>• concerns for personal safety</th>
</tr>
</thead>
<tbody>
<tr>
<td>Environmental</td>
<td>• climate (weather)</td>
</tr>
<tr>
<td></td>
<td>• topography (challenging terrain)</td>
</tr>
<tr>
<td></td>
<td>• infrastructure (lack of quality facilities during travel and at destination)</td>
</tr>
<tr>
<td>Organisational</td>
<td>• travel time</td>
</tr>
<tr>
<td></td>
<td>• travel distance</td>
</tr>
</tbody>
</table>

There are several strategies to address each category of barriers and support employees to cycle, as outlined below:

1. **Road-safety cycling instruction**
   Providing road-safety cycling instruction assists to increase the self-efficacy of employees for independent cycling. As well as teaching valuable riding skills and bicycle maintenance, it also serves as an ideal forum to meet fellow cyclists, increasing motivation and engagement. Group classes can be coordinated from the workplace and should be delivered by an experienced cycling instructor (not an employee of the organisation).

   National accredited cycle-skills training courses (e.g. Austcycle) are provided in various regions throughout Australia, and are tailored to suit one of 3 levels: beginner, intermediate or advanced cyclists (see Appendix C, page 44).

2. **Route-finding**
   Providing a variety of safe and direct route options assists in motivating employees in pre-contemplation and contemplation stages for active transport. Identify the safest places to cycle between locations – covering at least a 10 kilometre radius from the workplace in each of the major directions. This resource should be provided to employees as a regional map outlining safe cycling routes, and can be developed in consultation with the local roads and transport authorities and local council.

3. **Bike-bus**
   A bike-bus is a group of people who cycle to work in a group. It’s called a ‘bus’ because there is a set route and timetable so it can pick up more passengers along the way. Apart from offering
Security in numbers by increasing visibility, it also adds sociability for more enjoyable travel. A Bike-bus initiative can only be successful if it is supported by the organisation – it must be proactive in finding a champion to facilitate the initiative, as well as recruiting group members. Once established, Bike-bus committees generally become self-driven entities, establishing terms of reference and membership rules, ensuring safer travel (visit http://www.bikebus.org.au/index.html for additional details).

4. **Bike-buddy system**

A bike-buddy is an experienced rider who is paired with a less experienced rider to provide guidance and support in developing their road-cycling skills. It is an ideal opportunity for inexperienced riders to develop greater confidence by riding with a mentor to support them in maintaining their active mode of transport. Similar to the Bike-bus initiative, the bike-buddy system can only be successful if it is supported by the organisation - it must be proactive in finding a champion to promote the initiative. A steering committee should be established within the workplace to develop guidelines for the bike-buddy system, including roles and responsibilities of both cyclists (mentor and novice) and compulsory orientation and induction meetings for the following purposes:

- To establish the meeting location points for supervised travel and to exchange contact details (e.g. mobile phone numbers) in cases of emergency.
- To ascertain one another’s cycling experience and identify areas for further skill development in the novice cyclist.
- To establish agreed hand-signals for various actions and warnings.

5. **Electric bicycles (e-bikes)**

An electric bicycle – also known as an e-bike – is a bicycle with an electric motor used to power the vehicle. Electric bicycles use rechargeable batteries and maximum speeds range from 20 km/h to 80 km/h, depending on the model. Maximum travelling ranges on a fully-charged battery vary between 35 km to 90 km. In some markets they are rapidly replacing traditional bicycles and motorcycles.

Electric bicycles work by assisting the cyclist’s pedal movement as they are riding – known as ‘pedal assist’, it cuts in when the speed drops below a certain level. For safety, pedal assist is not provided beyond a certain speed. Some e-bikes have a throttle, so pedalling may not be required at all, and some have both throttle and pedal assist. E-bikes provide the following advantages:

- Enables long-distance travel for people who lack the fitness or capacity (due to movement limitation, injury etc.) to travel the entire distance by pedal power alone.
- Overcomes topography that may be too challenging for purely pedal-powered bicycles (e.g. hilly terrain).
- Enables the cyclist to travel the same distance in a shorter time-period.
- Reduces the physical effort required to travel the same distance, particularly if the cyclist is wearing business attire (e.g. workplace does not have showering facilities) or if the cyclist is carrying a significant load (laptop, books, etc.).

For more information including the product range on electric bicycles, see Appendix C, page 44.

6. **Secure bicycle storage at work**

A secure and adequate bicycle parking facility is essential for employees to engage in active transport. There are various storage options enabling functional access for both internal and external locations. These include:

- bicycle racks – the low-cost form of storage. Ideal when located within workplace buildings, away from public view. A weather shelter is required for outdoor locations.
- bicycle cages – ideal for outdoor storage, providing all-round security. Each user is provided with a unique access card.
- bicycle lockers – one of the most secure forms of outdoor bicycle storage, providing each employee with their own storage facility.

The use of electric bicycles will also be encouraged with the provision of recharge facilities (i.e. E-bike charging station). Provision of more expensive facilities (e.g. individual bicycle lockers, electronic entry, CCTV) may be partially subsidised by the workplace, with the employee contributing a modest fee through salary-sacrifice.
7. **Other**

- Provide shower facilities with personal lockers for employees.
- Provide a towel service, ironing facilities and hair dryers.
- Offer access to a dry cleaning service (where possible).
- Allow more flexible dress codes to enable employees to reduce their travel load and facilitate ease of dress.
- Appoint a bicycle coordinator/consultant on a part-time casual basis: A designated bicycle coordinator may serve multiple roles, including promoting cycling activities and events in the workplace, acting as an on-site service-person (bicycle mechanic), providing cycling advice to employees, and acting as a conduit for feedback to the organisation.

Promoting cycling for active transport requires a proactive, innovative and well-coordinated approach. The following initiatives will enhance opportunities for employee engagement:

- Provide employees with an information pack including a map outlining the safe cycling routes, with accompanying information on road-safety cycling instruction – highlighting that the sessions will be subsidised by the organisation.
- In the information pack, include testimonials from employees who travel to work by bicycle and e-bike (see ‘Providing role models: employee testimonials’, page 13).
- Host information sessions during lunch periods or at other events, with on-the-spot registration for employees interested in the road-safety cycling instruction classes. Such promotional strategies are effective in disseminating information through word-of-mouth.
- Host an ‘Active-transport Day’ at the worksite and invite bicycle and e-bike retail agencies to host an exhibition or display of their product range. The ‘at-your-doorstep’ convenience enables all employees to view the bikes, have a test-ride, discuss options and have their questions answered by experts. Moreover, the exhibition/display is an effective strategy to engage those at pre-contemplation and contemplation stages. As an added incentive for employees, their organisation may negotiate discounted prices with the bicycle and e-bike retail agencies.
- Include information on carrying/storage accessories for bicycles (e.g. cargo-basket or rear-carrier) to make active transport easier.
- Promote the above initiatives through the organisation’s intranet, including an online tool whereby interested employees can search for cycling companions. Establish and support online (intranet) forums as a means of centralised communication between interested employees and current cyclists.
- Implement flexi-time to enable active travel to and from work. This may be negotiated for the entire working schedule or for specific days of the working week.
- Introduce a salary sacrifice facility for employees on the purchase of bicycles or E-bikes used for work travel.
- Collaborate with neighbouring organisations (workplaces) to adopt similar initiatives. This approach provides two major advantages. Firstly, it provides a greater pool of cycling companions for employees to engage with, enhancing motivation and increasing the likelihood of success of the active transport initiative. Secondly, a unified group of organisations (workplaces) enables greater visibility and lobbying power with local and state government. This is particularly important when working with municipal planners to develop safe and efficient routes to work and to campaign for better infrastructure.
- Beginners are more likely to commence cycling on weekends to increase their confidence before routinely cycling to work. Organisations can support this behaviour by promoting bicycle events to employees, using the Physical Activity Calendar of Events (PACE) resource (see page 25). These events also serve as an opportunity for weekday cycling companions to gather for social interaction and increase motivation to sustain the cycling.

**Case Study: Royal Brisbane Women’s Hospital (RBWH) Cycle Centre**

The RBWH Cycle Centre is a state-of-the-art end-of-trip facility for cyclists, pedestrians and joggers. As a benchmark facility supporting active transport, it may provide ideas for organisations interested in establishing similar centres: [www.health.qld.gov.au/rbwh_cycle_centre/](http://www.health.qld.gov.au/rbwh_cycle_centre/)
ORGANISATION POLICY AND SUPPORT: MAKING PHYSICAL ACTIVITY A CULTURAL FIT
(Note: This section is adapted from the Alberta Centre for Active Living (2003) ‘Workplace physical activity framework’ – www.centre4activeliving.ca).

A supportive culture and environment are imperative for a workplace physical activity program to have a successful impact. Embedded within the culture of an organisation are its (formal and informal) policies, which translate to the level of support provided.

The ‘Organisational Policy and Support Audit Tool’ (Appendix A) will establish a baseline for measuring improvements in the health and wellbeing culture of an organisation. It is intended to be used by those individuals in the workplace responsible for coordinating the physical activity initiative. The preparedness of an organisation to undertake a physical activity promotion campaign will be determined by its cultural elements outlined below (as assessed in the audit tool):

A. Management and leadership within the workplace.

A successful workplace physical activity program requires the involvement and commitment from the following personnel:

• Senior management (e.g. CEO, General Manager, or Board of Directors).

• An individual or group of individuals to champion the initiative. These people are responsible for initiating the process in the workplace and provide the motivation and drive to meet the goals of a program once it is in place.

• A representative committee to develop a policy on physical activity in the workplace.

One of the committee’s main functions is to create a physical activity policy that contains:

• a written declaration of the organisation’s commitment to physical activity;

• realistic and measurable goals and objectives for the organisation’s physical activity program;

• an outline of the responsibilities of management, employees, and contractors regarding physical activity initiatives in the workplace.

The policy document should be signed by senior management, and all employees should be made aware of the policy and its meaning. A copy of the policy should be included in the company management systems or other policy manual. This policy can incorporated into the existing occupational health and safety policy.

B. Employee physical activity and health: Knowledge and characteristics

A workplace physical activity program must provide employees with the knowledge and skills to begin and maintain physical activity. The program also needs to promote a positive attitude toward physical activity.

• Knowledge includes what people know about the benefits of physical activity and how to attain these benefits. A program that promotes individual knowledge provides appropriate (i.e stage-matched) and accurate physical activity information through educational seminars and materials.

• Attitude refers to how people feel about physical activity. Do they consider physical activity important? Do they feel able to be active (i.e self-efficacy)? Do they want to be active?

• Skills are the tools people need to begin and sustain being physically active. These skills may go beyond the ability to perform specific physical activities (e.g. road cycling or Aus-tag) to include time-management strategies and the ability to make physical activity a priority during the workday.

The EIM ‘Be Active at Work’ employee survey can be used to assess (across the organisation) the attitudes of employees towards physical activity. Notwithstanding, an employee’s knowledge and attitude towards physical activity is largely influenced by their health literacy. As such, an organisation should aim to improve employee health literacy – particularly to understand the personal health risks and consequences of physical inactivity.

C. Social level – Relationships

Providing the arena for inter-personal barriers and enablers, the social level includes both the relationships in existing social groups and the building of new groups. This level takes into account relationships within the workplace, as well as those outside (e.g. friends and family). In the workplace, the supportive climate within individual departments, among departments, and between employees and
Additionally, the interactions between the program providers and the individual must be positive. Champions have a key role to play in setting positive examples and recognising successes. Outside the workplace, social demands may also influence behaviour. For example, consider the influence of family members on participation in a physical activity program (such as the need for child care).

Physical activities that can work at a social level (e.g. walking events and corporate challenges) should be promoted by the organisation. The online PACE resource enables organisations to identify appropriate physical activity events to accommodate all fitness levels (see ‘Promoting physical activity events: Using the PACE resource’ – page 25).

D. Organisational level: Workplace leadership, infrastructure and capacity

The organisational level refers to the influence of the organisational structure on current and ongoing participation in physical activity. This level includes management leadership, support, and participation, as well as physical activity champions who will lead from the ‘bottom-up’. Champions at the management level help to ensure that a program is maintained and sustained, even in times of cutbacks. The organisation must also be able to implement and sustain a physical activity program. In other words, organisational capacity is defined through its commitment and infrastructure. This includes the human, technical, and support resources in place within the organisation.

Workplace integration and equity are included in this category. Physical activity program policies and procedures should ensure that all employees have equal access to appropriate program opportunities. For example, night-shift workers may have different needs than day-shift workers. Supervisors should be active alongside employees, rather than being segregated. Organisations with many different work locations need to assess each workplace separately to make sure that the program is fair for all workplaces.

E. Community involvement

The community level refers to relationships among:
- different departments in one organisation;
- multi-sites of the same organisation;
- the organisation and other organisations;
- the organisation and outside groups.

A large organisation needs to recognise the different needs of its various departments. For example, programs may require different schedules so that each group can be active during work. The same may be true for an organisation with multiple locations. Additionally, the needs of one geographical location may differ from those in another location (e.g. urban versus rural). Each organisation should examine ways to connect with other organisations and community-based services to provide physical activity or even the space to be physically active. Collaborations among government agencies, other corporations, and unions can also help support the program. For example, organisations could work with town-planners to develop shared (walking/cycling) pathways and/or work to change union policies as well as organisational policies.

F. Policy

The policy level includes the organisational policies related to supporting and facilitating workplace physical activity. Policies may include:
- allowing time for physical activity (e.g. ‘no meetings at lunchtime’ policy, flexi-time);
- formally recognising participation in programs;
- active transport policies;
- requiring qualified personnel to coordinate programs and services (e.g. Accredited Exercise Physiologist);
- designing physical activity friendly office environments (e.g. adjustable/standing workstations);
- targeting all employees (full-time, part-time and contract/casual staff).

On a broader level, all legislations (e.g. WorkCover, Privacy Commission, State and Federal Health agencies) that may impact on workplace physical activity should be considered during planning, implementation, and evaluation stages.

G. Program administration

Good program administration ensures quality and makes it possible to measure successes. Program administration includes the program’s design, implementation, and evaluation. A key strategy is to empower employees by inviting them (through focus groups or surveys) to provide feedback, as well as maintaining transparency in the progress of the reporting of the key measures.
- Design: Refers specifically to the tailoring
of a variety of physical activity options and interventions to accommodate employees needs (e.g on-site exercise facility, active transport initiative).

- **Implementation**: Coordination and delivery of the physical activity options and interventions, with an emphasis on employee participation (engagement).
- **Evaluation**: Includes individual evaluations (e.g. attitudinal changes; improvements in physical fitness), satisfaction levels, indicators of productivity gains (e.g. decreases in absenteeism due to injury and illness, increased morale) and attendance statistics.

The EIM ‘Be Active at Work’ employee survey can be applied periodically to monitor changes in the physical activity habits of the organisation – with graphical displays enabling pre- and post- analysis (see EIM ‘Be Active at work’ employee survey – page 23).

### H. Safety and risk management

Developing safety and emergency policies and procedures is important so that every physical activity program can anticipate and respond to any emergency. Risk management plans are not necessarily complicated or expensive. For example, part of the plan may require that employees complete a Pre-Exercise Screening Questionnaire as well as sign an Informed Consent form pertaining to specific physical activity programs and services. An interactive Adult Pre-Exercise Screening System (APSS) tool can be accessed at www.exerciseismedicine.org.au.

It is imperative that program staff are adequately trained and that necessary first-aid supplies and services are available to ensure safe activity. In addition, regular assessment of the physical environment to identify potential hazards (e.g broken equipment and unsafe facilities).

### ORGANISATION INFRASTRUCTURE: WORKPLACE ENVIRONMENT

The workplace environment (i.e infrastructure) will play a part in the types of activities promoted by the organisation. A **(Workplace) Environmental Audit Tool** (Appendix B) has been developed to assess the physical characteristics of the workplace environment that are known to influence health behaviours relating to physical activity. It assists an organisation to benchmark its physical resources and infrastructure and determine its immediate capabilities in accommodating employee needs. Where an organisation has more than one worksite, a separate environmental audit should be completed for each worksite.

The EIM (Workplace) Environmental Audit Tool includes a review of the following physical resources:

- worksite shower and changing facilities.
- worksite exercise facilities.
- outdoor exercise areas or playing fields.
- secure bicycle storage facilities.
- stairwells within building(s) to promote walking.
- dedicated walking and/or cycling paths within the workplace precinct.
- other facilities or resources accessible within (or immediately adjacent to) the workplace grounds.

### EMPOWERING EMPLOYEES: NEEDS ASSESSMENT

For a workplace physical activity initiative to be successful, it is essential that all employees are engaged in the program. Understanding employee needs is the first step in creating a successful workplace activity program and a ‘participatory’ needs assessment will determine the scope, content and approach of health initiatives. By reviewing all physical activity options, it will ensure organisations are investing in the most feasible programs. Additionally, it will provide the baseline from which the impact of specific initiatives and programs can be determined. Groups will invariably differ depending on the nature of the organisation and the type of work performed (e.g. blue collar or white collar). Social and cultural differences will also play a role. As risks are not static, the needs assessment should then be conducted on an ongoing basis as part of the program management and evaluation process.

Depending on the size of the organisation, employee needs can be determined through the use of **focus groups** or **surveys**:

1. **Focus groups**

Focus groups are ideal for gathering information surrounding employee needs in small, medium and large organisations. It will help to identify current issues, ideas and preferences for physical activity options in the workplace. Focus groups can also provide valuable information that would not otherwise be obtained through less personal methods such as survey, by enabling the interviewer to further explore
specific feedback and identified issues. The interviews should be conducted with focus groups comprising a diverse range of employees in terms of demographics (for example, age, gender, physical activity habits and cultural background). Focus groups should number 8-10 people, however it is recommended that several focus groups be conducted in larger organisations to ensure an accurate reflection of employee diversity and needs.

2. Surveys
Surveys are very useful for accessing a much larger employee base than focus groups. They are also an efficient way to identify specific health behaviours, interests and preferences for activities within the workplace. They can be conducted electronically (online) – enabling ease of access and collation of results, or by hardcopy (i.e paper-based versions) – which may require significant manual effort in the distribution and collection of the surveys as well as collation of the responses. It is recommended that organisations host focus groups following collation of the responses from the surveys. This enables a more personal consultation approach and the opportunity to obtain further information. Moreover, it provides employees with a sense of empowerment through inclusion and consultation in the initiative.

EIM ‘BE ACTIVE AT WORK’ EMPLOYEE SURVEY
The EIM ‘Be Active at Work’ survey is an online resource that conducts a comprehensive needs assessment of employees and collects demographic information, including:
- age, gender and employment status (full-time, part-time, casual)
- current physical activity behaviours (physical activity levels, sedentary levels and stages of readiness amongst the employee base)
- physical activity preferences and interests
- perceived barriers to increasing physical activity levels

Additionally, the survey provides the participant (employee) with immediate feedback including recommendations and options regarding their physical activity behaviours.

The survey overcomes the many challenges with which organisations are faced in conducting surveys and needs assessments including:
- the development of validated questions to obtain an accurate assessment of the physical activity habits of employees;
- the logistical issues associated with the distribution of the survey and the implementation of privacy and confidentiality processes;
- obtaining a high response rate
- the collection and collation of the data (responses)
- the interpretation of the data in terms of both recognising key indicators (for example, barriers and enablers within the organisation) and the most appropriate actions to be taken.

The survey’s uniqueness is centred on the following attributes:
- as an online resource, it is quick and convenient for organisations to administer to employees;
- it is a multi-purpose resource - incorporating a needs assessment and physical activity behavior assessment in one survey, with immediate feedback to the participant.
- it is user-friendly – enabling completion within ten (10) minutes and ensuring a high response rate;
- it is comprehensive – investigating all broad key influences of physical activity behaviours in the workplace;
- it collates all the responses and presents it in a neat format for organisations to interpret the data, including frequency tables (histograms) and diagrams;
- it provides accurate assessment and overview of the key areas for promoting physical activity in the workplace;
- it can be applied periodically to monitor changes in the physical activity habits of the organisation – with graphical displays enabling pre- and post-analysis.

In particular, the survey is an effective awareness-raising activity for employees who are at ‘pre-contemplation’ and ‘contemplation’ stages - relating to their physical activity behaviours (see ‘Stages of change: Transtheoretical model’ – page 11). This is achieved through tailored questions designed to prompt self-reflection of current physical activity behaviours – combined with the immediate feedback and recommendations to the employee - designed to stimulate further consideration. The survey provides an ideal opportunity for organisations to capitalise on the awareness-raising activity by maintaining immediate follow-up through communications. For example,
sharing the overall results of the survey (of the organisation as a whole) with employees, and advising them that they will be consulted in the proposed outcomes of the survey towards developing a healthier working environment.

For more information on the Exercise Is Medicine ‘Be Active at Work’ employee survey, contact Exercise Is Medicine (Australia) at info@exerciseismedicine.org.au or (07) 3862 4122.

TIPS TO PROMOTE THE (ONLINE) EIM BE ACTIVE AT WORK EMPLOYEE SURVEY

A well-prepared and coordinated approach in promoting the survey will ensure a good response rate. The plan should highlight every opportunity and method available to promote the survey. The following tips will assist organisations to achieve a successful response:

• Information posters should be displayed in prominent areas outlining the objectives and purpose of the survey, the importance of staff response, the period of survey administration and contact details of relevant personnel for staff seeking further information. It should be emphasised that the survey is user-friendly and can be completed within 10 minutes.

• As an incentive and recompense for their participation, advise employees that they will be provided with immediate and personalised feedback.

• It is important that employees feel empowered in this initiative, so provide them with some ownership of the survey by sharing the overall survey results (of the organisation as a whole), and advise them that they will be consulted in the proposed outcomes of the survey towards developing a healthier working environment.

• Release an announcement outlining the same information above (via email or company newsletter) by the CEO or General Manager or equivalent will provide further promotion.

• Publish an article in the employee newsletter by a senior manager in support of the survey.

• Provide electronic prompting for staff when logging on their computers.

• Promote the survey at company social events, staff meetings, in newsletters or pay envelope inserts, etc.

• Demonstrate a consistent and visible commitment and support for the survey from all levels of management.

• Encourage managers to prompt staff to participate in the survey.

• Inform staff of the survey well in advance so that they are prepared.

• Inform staff regularly of the benefits of the survey for them and that everyone’s participation is essential to identify the true needs of the organisation’s workforce.

• Ensure confidentiality is guaranteed. Staff will only be honest in their responses if anonymity is ensured.

• Enable staff to complete the survey during office hours, which will result in a better response rate.

• Issue constant reminders through the usual channels of communication to prompt staff to return the surveys.

• Introduce a countdown to the deadline to remind staff and to inform them of the percentage of surveys that have been returned to date.

• Finally, send a ‘thank you’ note to all staff for participating in the survey.

Additional tips for surveys administered by hardcopy (i.e. paper versions):

• Offer simple incentives for returning the survey forms.

• Attach a cover letter from the committee to every survey that informs staff of the deadline, including details that staff can use about 10 minutes during office hours to complete the survey (if applicable) and the incentives for returning the survey form (if applicable).

Surveys delivered to staff personally are far more likely to receive attention than those simply sent through in-house mail channels, especially when the distributor promotes it verbally. Personal distribution also gives employees an opportunity to ask questions about the survey.

A sample invitation to participate in the survey (by email correspondence) is provided below:

Dear Janet,

We are seeking ways to support improved health and wellbeing amongst our staff. To help us understand your needs and our (organisation’s) needs as a whole, we invite you to participate in a short online survey. The survey
specifically focuses on physical activity habits and will ask you questions such as general physical activity levels, time spent sitting at work, physical activity interests, and work-related travel. There is also a short quiz and a section for your comments and suggestions. The survey is user-friendly and can be completed within 10 minutes. The information will be gathered to create a general report to help us identify changes that we can make to the workplace to support improved health and wellbeing. The developers of this survey – Exercise Is Medicine (Australia) – take your confidentiality very seriously:

- The survey does not request your name or address.
- All information collected will be treated as private and confidential, in accordance with current privacy legislation.
- No group information which could be used to identify individual respondents will be provided to the organisation.

As recompense for your participation, the survey will provide you with immediate and personalised feedback regarding your physical activity patterns. We also endeavour to report to you the overall survey results (of the organisation as a whole), and consult all of our staff in developing a healthier working environment.

Yours in health,
Sharon Smith

PROMOTING PHYSICAL ACTIVITY EVENTS: USING THE PACE RESOURCE

Organisations who actively encourage both senior management and employees to participate in physical activity related events demonstrate a strong commitment to workplace health. The benefits of these events are not restricted to improved physical and psychological health – but as social functions - improve camaraderie amongst employees and management.

The Physical Activity Calendar of Events (PACE) is an online resource that lists all known corporate and public physical activity and exercise events scheduled within each state in Australia. It includes both charity-related and non-charity events (corporate or public). The events range from light walking and bicycle activities through to higher challenging activities to accommodate all fitness levels and ages – from beginners to advanced exercisers. The resource can be accessed on the Exercise Is Medicine (Australia) website at www.exerciseismedicine.org.au

The following tips will assist organisations who seek to use this resource to promote physical activity and exercise within their workforce:

- Determine the number of events the organisation should promote each calendar year. For example, an organisation may want to promote one event each month, or it may seek to promote all events that are deemed appropriate and matched to the staff demographic (i.e. fitness levels and age groups).
- Since approximately 68.5% of the workforce is sedentary or engages in low-level exercise, limiting your selection of events to those requiring higher fitness levels will discourage the majority of the employees from participating. Target events ranging from walking to higher challenging activities to accommodate the various fitness levels and ages within the workforce.
- Most events are hosted during the weekends, so they may not pose a disruption to the working week, however it may be beneficial to promote and support the occasional weekday event to increase the likelihood of employee participation.
- For events that occur during work-periods, consider offering staff the time off during that period, or at the very least time in lieu.
- Advise staff as early as possible of the events that will be hosted during the year. Provide them details of the events (date, location, etc.) towards the Christmas break and/or at the beginning of the year to enable all staff to plan and organise their preferred events into their schedule.
- Contact the organisers of each event and request promotional material (e.g. posters,) to provide in the workplace and to employees.
- Ensure senior management personnel (CEO, General Manager or equivalent) also participate in the event. Senior leadership support is critical to building and sustaining successful workplace health initiatives – lead by example!
Charity-related events: sponsoring individual participants

- Sponsoring an event and/or participating employees can bring multiple benefits to an organisation. Firstly, it fosters a supportive environment for staff by subsidising their participation in the event as a reward for their efforts. Secondly, it enhances corporate image through the philanthropic gesture of supporting the charity.

- Participating employees should be sponsored for at least 50% of the entry fee (100% subsidy for entry fee in most instances) and/or for a fixed amount where large fundraising quotas are sought by each participant on behalf of the charity.

Hosting an event

Aside from the events listed in this calendar, organisations may choose to host their own event, as it provides the following advantages:

- The venue can be at or near the workplace for employee convenience;
- The event can be hosted on a day and time that is convenient for most employees;
- The activities can be tailored to accommodate the various fitness levels and ages of the organisation’s workforce;
- If it seeks to include fundraising in the event, the organisation can dedicate the proceeds to its charity of choice.

Activities that increase the likelihood of participation can precipitate long-term adoption of physical activity amongst staff, resulting in a good return on investment (ROI) for the organisation through employee wellness. The following tips will assist in achieving this:

- Ensure the event includes several activities, which can accommodate all fitness levels and ages. For example, the event may include various activities such as a 2 km, 5 km and 10 km walk.
- Promote the event to all staff, and advise staff that participation is free. If the event is linked to a charity, advise staff that the organisation has committed to donating a fixed amount per participant to motivate more employees.
- Consider opening the event to include immediate family members of employees. This will increase the support base and enhance motivation within the workforce for participation.

If the event is linked to a charity, contact the charity and seek their advice for hosting the event. Ascertain how the charity may be able to support the organisation for their event (e.g. issuing promotional material, delivering information seminars at the worksite, etc.).

After the event

- A congratulatory note (via email or company newsletter) from the CEO or General Manager (or equivalent) to all staff after each event demonstrates the organisation’s commitment to creating a healthier workplace. Include images/photos of the event and its participants (e.g. group photos) to promote the fun and social elements and to encourage increased participation in future events.
- Host an awards gathering within a week of the event and provide a token gift or reward to all participants. This will increase the social support within the organisation and strengthen camaraderie amongst the staff, resulting in increased participation in future events.
- Obtain testimonials from participating staff and promote in future staff communications (e.g. emails or newsletters) to promote future physical activity or exercise events.

Please note: Exercise Is Medicine (Australia)® aims to update this calendar periodically. If you know of a physical activity or exercise event (corporate or public) that is not listed in this resource, please contact the ESSA office at (07) 3862 4122 or email: info@exerciseismedicine.org.au
REFERENCES


12. Australia. Aligning actions with aims: optimising the benefits of workplace wellness. PWC, Melbourne, Victoria


APPENDIX A

Organisation Policy & Support Audit Tool
INTRODUCTION
The aim of this audit tool is to establish a baseline to measure improvements in the organisation’s health and wellbeing culture. The tool has been developed to be used by those individuals in the workplace responsible for managing the physical activity program.

The preparedness of an organisation to undertake a physical activity promotion campaign will be determined by the number of ‘yes’ responses in this audit. It is recommended that the audit be completed annually or whenever the organisation undergoes a significant transition (e.g. recruitment of significant number of new employees, or significant changes in physical environment or policies.

This audit tool represents a high standard based on documented best practices. Every workplace is different, and not everything in this tool applies to all workplaces. This audit can assist the organisation to develop and maintain its physical activity program by facilitating a cycle of continuous improvement. This process is not about passing or failing, but about continuous improvement through periodic evaluation. (Note: Where an organisation has more than one worksite, a separate organisation policy and support audit tool should be completed for each worksite).

This audit tool, used in conjunction with the EIM Be Active at Work employee survey and the EIM (Workplace) Environmental Audit Tool can guide your organisation to plan, design, implement and evaluate programs tailored to the needs of your organisation and employees.

HOW TO USE THIS AUDIT TOOL

Step 1
Review the audit for the information required in order to validate the questions. There are three techniques to validate your answer beside each audit question (Circling the method used for each question is required for comparison with future audits). These techniques include:
• Reviewing documentation (D);
• Conducting interviews (I);
• Carrying out observations of the workplace (O).
These techniques may need to be combined in order to validate some of the questions. The validation method underlined and in bold is the suggested best practice for that specific question.

The interviews should be conducted with focus groups comprising a diverse range of employees in terms of demographics (age, gender, physical activity habits and cultural background). Focus groups should number 8-10 people.

Step 2
• Identify the specific documents required to validate the responses to the questions in the audit.
• Determine the number of interviews and the people to be interviewed in order to validate the responses to the audit questions.
• Identify the areas related to physical activity that you will observe in order to validate the responses to the audit questions.

Step 3
Answer the audit questions with a ‘yes’ or a ‘no.’ Mark the answer as a ‘no’ if you are unable to validate the question using the suggested technique(s) or are uncertain regarding the response to the question. Total the number of ‘yes’ responses at the end of each section.

Step 4
Record the action required for each ‘no’ response in the space provided at the end of each section. Identify the person responsible for the action and the date the action must be completed.

Step 5
Answer all the audit questions and then total the number of ‘yes’ responses in the ‘Totalling Your Answers’ section at the end of this audit.

Step 6
Discuss the results of the audit and action plan with management and employees and collate their feedback.

Step 7
Prepare a summary for senior management.
SECTION A: MANAGEMENT AND LEADERSHIP WITHIN THE WORKPLACE

THE RECOMMENDED BEST PRACTICE IS UNDERLINED IN BOLD.

<table>
<thead>
<tr>
<th>THE RECOMMENDED BEST PRACTICE IS UNDERLINED IN BOLD.</th>
<th>PLEASE CIRCLE ANSWER</th>
<th>VALIDATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Has physical activity been included in an organisational policy? (Supporting documentation should include a policy statement.)</td>
<td>Y / N</td>
<td>Document, Interview, Observation</td>
</tr>
<tr>
<td>2. Has senior management signed the policy?</td>
<td>Y / N</td>
<td>Document, Interview, Observation</td>
</tr>
<tr>
<td>3. Is the policy placed where all employees can view it?</td>
<td>Y / N</td>
<td>Document, Interview, Observation</td>
</tr>
<tr>
<td>4. Is the policy covered in staff induction practices?</td>
<td>Y / N</td>
<td>Document, Interview, Observation</td>
</tr>
<tr>
<td>5. Does the management system manual contain a copy of the physical activity policy?</td>
<td>Y / N</td>
<td>Document, Interview, Observation</td>
</tr>
<tr>
<td>6. Has the organisation established measurable and achievable goals and objectives for the physical activity program? (Supporting documentation should include a planning document.)</td>
<td>Y / N</td>
<td>Document, Interview, Observation</td>
</tr>
<tr>
<td>7. Does management communicate the following to employees at least once annually? • Why physical activity is important in the workplace. • The organisation’s commitment to physical activity.</td>
<td>Y / N</td>
<td>Document, Interview, Observation</td>
</tr>
</tbody>
</table>

Total no. of ‘Yes’ Answers

Action Plan (Record the action required to address each ‘no’ response in the space provided below.)

By whom ______________ Date for completion ______________
SECTION B: EMPLOYEE PHYSICAL ACTIVITY AND HEALTH - KNOWLEDGE AND CHARACTERISTICS

Has the organisation assessed the following in developing its physical activity program?
(Supporting Documentation may include evidence of conducting the ‘EIM Be Active at Work’ survey.)

<table>
<thead>
<tr>
<th>THE RECOMMENDED BEST PRACTICE IS UNDERLINED IN BOLD.</th>
<th>PLEASE CIRCLE ANSWER</th>
<th>VALIDATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Employee’s current level of physical activity?</td>
<td>Y / N</td>
<td><img src="document" alt="Document" /></td>
</tr>
<tr>
<td>(This criteria may be satisfied by evidence of conducting the ‘EIM Be Active at Work’ employee survey.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Characteristics of employees (e.g. age, gender, employment status)?</td>
<td>Y / N</td>
<td><img src="document" alt="Document" /></td>
</tr>
<tr>
<td>(This criteria may be satisfied by evidence of conducting the ‘EIM Be Active at Work’ employee survey.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Employees’ preferences in physical activity?</td>
<td>Y / N</td>
<td><img src="document" alt="Document" /></td>
</tr>
<tr>
<td>(This criteria may be satisfied by evidence of conducting the ‘EIM Be Active at Work’ employee survey.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Physical activity knowledge, attitudes, and skills?</td>
<td>Y / N</td>
<td><img src="document" alt="Document" /></td>
</tr>
<tr>
<td>(e.g Stage of readiness, Barriers to physical activity). (This criteria may be satisfied by evidence of conducting the ‘EIM Be Active at Work’ employee survey.)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total no. of ‘Yes’ Answers

Action Plan (Record the action required to address each ‘no’ response in the space provided below.)

By whom Date for completion
# SECTION C: SOCIAL LEVEL – RELATIONSHIPS

The recommended best practice is underlined in bold. Please circle answer validation.

<table>
<thead>
<tr>
<th>The recommended best practice is underlined in bold.</th>
<th>Please circle answer validation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Does the workplace exhibit a positive social climate that encourages employees participating in physical activity and active recreation?</strong></td>
<td>Y / N</td>
</tr>
<tr>
<td><strong>2. Do employees perceive support for physical activity from co-workers - including managers?</strong></td>
<td>Y / N</td>
</tr>
<tr>
<td><strong>3. Do managers demonstrate support for employees participating in physical activity initiatives?</strong></td>
<td>Y / N</td>
</tr>
<tr>
<td><strong>4. Does the physical activity program include partners or families (or was this considered during the planning process)? Supporting documentation should include a policy or planning document.)</strong></td>
<td>Y / N</td>
</tr>
</tbody>
</table>

Total no. of ‘Yes’ Answers __________________________________________

Action Plan (Record the action required to address each ‘no’ response in the space provided below.)

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

By whom ____________________________ Date for completion ____________________________
## SECTION D: ORGANISATIONAL LEVEL – WORKPLACE LEADERSHIP, INFRASTRUCTURE AND CAPACITY

**The recommended best practice is underlined in bold.**

<table>
<thead>
<tr>
<th>Question</th>
<th>Please Circle Answer</th>
<th>Validation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Does the workplace infrastructure (e.g. resources) support employee physical activity? (Supporting Documentation should include an organisation chart, policy, position descriptions.)</td>
<td>Y / N</td>
<td>Document, Interview, Observation</td>
</tr>
<tr>
<td>2. Does the workplace leadership promote physical activity for employees? (Supporting Documentation should include a policy Document.)</td>
<td>Y / N</td>
<td>Document, Interview, Observation</td>
</tr>
<tr>
<td>3. Does the workplace possess a desire to promote physical activity for employees?</td>
<td>Y / N</td>
<td>Document, Interview, Observation</td>
</tr>
<tr>
<td>4. Is there at least one physical activity champion who can motivate action and support and promote activities?</td>
<td>Y / N</td>
<td>Document, Interview, Observation</td>
</tr>
<tr>
<td>5. Are the physical activity champions recognised? (Examples may include employee newsletters, acknowledgement letters, appreciation lunches and other promotional events, different forms of recognition and rewards.)</td>
<td>Y / N</td>
<td>Document, Interview, Observation</td>
</tr>
<tr>
<td>6. Are opportunities for physical activity available to all employees (including shift workers, part-time workers and workers at different locations)? (Supporting Documentation should include a program guide or policy Documents.)</td>
<td>Y / N</td>
<td>Document, Interview, Observation</td>
</tr>
<tr>
<td>7. Are employees with special needs accommodated (e.g. people with visual impairment, people who speak English as second language)? (Examples include promotional information, signs, and policy Documents.)</td>
<td>Y / N</td>
<td>Document, Interview, Observation</td>
</tr>
</tbody>
</table>

**Total no. of ‘Yes’ Answers**

Action Plan (Record the action required to address each ‘no’ response in the space provided below.)

By whom Date for completion
### SECTION E: COMMUNITY INVOLVEMENT

**THE RECOMMENDED BEST PRACTICE IS UNDERLINED IN BOLD.**

<table>
<thead>
<tr>
<th></th>
<th>PLEASE CIRCLE ANSWER</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Have the needs of each workplace location been considered in planning the physical activity program? (Supporting Documentation should include a completed ‘EIM Workplace Environmental Audit Tool’.)</td>
<td>Y / N</td>
<td>Document</td>
</tr>
<tr>
<td>2. Has the organisation accessed any community-based services to support the physical activity program? (e.g. an exercise physiology consultancy or a local fitness centre.) (Supporting Documentation should include a completed ‘EIM Workplace Environmental Audit Tool’.)</td>
<td>Y / N</td>
<td>Document</td>
</tr>
<tr>
<td>3. Does the workplace use physical activity information from external resources? (e.g Exercise Is Medicine information brochures.) (Supporting Documentation should include physical activity information brochures.)</td>
<td>Y / N</td>
<td>Document</td>
</tr>
<tr>
<td>4. Does the organisation promote and encourage employees to participate in physical activity events in the community? (e.g fun-run/walks, active community events.) (Supporting Documentation may include evidence of the promotion of activities within the ‘Physical Activity Calendar of Events’ (PACE) resource.)</td>
<td>Y / N</td>
<td>Document</td>
</tr>
</tbody>
</table>

**Total no. of ‘Yes’ Answers**

**Action Plan** (Record the action required to address each ‘no’ response in the space provided below.)

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**By whom**                                    **Date for completion**
### SECTION F: POLICY

**THE RECOMMENDED BEST PRACTICE IS UNDERLINED IN BOLD.**

<table>
<thead>
<tr>
<th>1. Does the organisation provide information to educate employees about the benefits of physical activity? (Supporting Documentation may include EIM physical activity brochures and other resources.)</th>
<th>Y / N</th>
<th>![Document] ![Interview] ![Observation]</th>
</tr>
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<tbody>
<tr>
<td>2. Are there a variety of physical activity program options? (Supporting Documentation should include evidence of current programs.)</td>
<td>Y / N</td>
<td>![Document] ![Interview] ![Observation]</td>
</tr>
<tr>
<td>3. Do the organisation’s policies/procedures promote and/or support physical activity for employees (e.g. flexi-time policy, no scheduled meetings during lunch periods)? (Supporting Documentation should include a policy and procedures manual.)</td>
<td>Y / N</td>
<td>![Document] ![Interview] ![Observation]</td>
</tr>
<tr>
<td>4. Does the organisation formally recognise employees who participate in physical activity? (Examples may include a rewards and recognition program.)</td>
<td>Y / N</td>
<td>![Document] ![Interview] ![Observation]</td>
</tr>
<tr>
<td>5. Do the organisation’s policies encourage active transport to and from work? (See ‘Promoting Active Modes of Transport’ section in the EIM Physical Activity in the Workplace: A Guide). (Supporting Documentation should include a policy and procedures manual.)</td>
<td>Y / N</td>
<td>![Document] ![Interview] ![Observation]</td>
</tr>
<tr>
<td>6. Is it company policy to hire qualified and experienced people to manage the physical activity program (i.e. accredited exercise physiologists)? (Supporting Documentation may include evidence of qualifications and human resources Documents.)</td>
<td>Y / N</td>
<td>![Document] ![Interview] ![Observation]</td>
</tr>
</tbody>
</table>

**Total no. of ‘Yes’ Answers**

Action Plan (Record the action required to address each ‘no’ response in the space provided below.)

<table>
<thead>
<tr>
<th>Action Plan</th>
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By whom __________________________ Date for completion __________________________
### SECTION G: PROGRAM ADMINISTRATION

**THE RECOMMENDED BEST PRACTICE IS UNDERLINED IN BOLD.**

<table>
<thead>
<tr>
<th><strong>THE RECOMMENDED BEST PRACTICE IS UNDERLINED IN BOLD.</strong></th>
<th><strong>PLEASE CIRCLE ANSWER</strong></th>
<th><strong>VALIDATION</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Does the organisation record workplace physical activity initiatives? (Supporting Documentation should include these records.)</td>
<td>Y / N</td>
<td>□ Document □ Interview □ Observation</td>
</tr>
<tr>
<td>2. Does the organisation evaluate the physical activity program at least once every two years? (Note: This criteria may be satisfied by evidence of conducting the ‘EIM Be Active at Work’ employee survey.)</td>
<td>Y / N</td>
<td>□ Document □ Interview □ Observation</td>
</tr>
<tr>
<td>3. Is there an action plan to deal with the results of this evaluation? (Supporting Documentation should include this action plan.)</td>
<td>Y / N</td>
<td>□ Document □ Interview □ Observation</td>
</tr>
<tr>
<td>4. Are employees invited to provide feedback on the physical activity initiatives? (Note: This criteria may be satisfied by evidence of conducting the ‘EIM Be Active at Work’ employee survey.)</td>
<td>Y / N</td>
<td>□ Document □ Interview □ Observation</td>
</tr>
<tr>
<td>5. Does the organisation distribute the evaluation results to all employees and management? (Supporting Documentation should include the evaluation report.)</td>
<td>Y / N</td>
<td>□ Document □ Interview □ Observation</td>
</tr>
</tbody>
</table>

**Total no. of ‘Yes’ Answers**

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**Action Plan (Record the action required to address each ‘no’ response in the space provided below.)**

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**By whom**

**Date for completion**
## SECTION H: SAFETY AND RISK MANAGEMENT

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>ANSWER</th>
<th>VALIDATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Does the organisation have a risk management plan? (Supporting Documentation should include the risk management Document.)</td>
<td>Y/N</td>
<td>Document, Interview, Observation</td>
</tr>
<tr>
<td>2. Are all staff familiarised with emergency response procedures? (Supporting Documentation should include emergency response procedures.)</td>
<td>Y/N</td>
<td>Document, Interview, Observation</td>
</tr>
<tr>
<td>3. Do the first-aid supplies/services and facilities meet the requirements of Occupational Health and Safety regulations? (e.g defibrillator)</td>
<td>Y/N</td>
<td>Document, Interview, Observation</td>
</tr>
<tr>
<td>4. Does the organisation have an incident reporting procedure? (Supporting Documentation should include incident report templates.)</td>
<td>Y/N</td>
<td>Document, Interview, Observation</td>
</tr>
<tr>
<td>6. Does the organisation carry out periodic inspections of equipment and facilities? (Supporting Documentation should include maintenance records.)</td>
<td>Y/N</td>
<td>Document, Interview, Observation</td>
</tr>
</tbody>
</table>

Total no. of 'Yes' Answers

Action Plan (Record the action required to address each ‘no’ response in the space provided below.)

By whom

Date for completion
# SCORING THE AUDIT

<table>
<thead>
<tr>
<th>SECTION OF THE AUDIT</th>
<th>NUMBER OF ‘YES’ RESPONSES</th>
<th>NUMBER OF QUESTIONS</th>
<th>TOTAL SCORE</th>
<th>PREVIOUS AUDIT SCORE</th>
</tr>
</thead>
<tbody>
<tr>
<td>SECTION A: Management and leadership within the workplace</td>
<td></td>
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<tr>
<td>SECTION B: Employee physical activity and health knowledge</td>
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<tr>
<td>SECTION C: Social level - Relationships</td>
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<tr>
<td>SECTION D: Organisational level – Workplace leadership, infrastructure and capacity</td>
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<tr>
<td>SECTION E: Community Involvement</td>
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<tr>
<td>SECTION F: Policy</td>
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<tr>
<td>SECTION G: Program Administration</td>
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<tr>
<td>SECTION H: Safety and Risk Management</td>
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<tr>
<td>(Workplace) Environmental Audit Tool *</td>
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</tbody>
</table>

Name of auditor:  
Signature of auditor:  
Date of audit:
APPENDIX B

(Workplace) Environmental Audit Tool
Your existing workplace environment (ie infrastructure) will play a part in the types of activities promoted by the organisation. The purpose of this audit tool is to assess the characteristics of the workplace environment that are known to influence health behaviours relating to physical activity.

Where an organisation has more than one worksite, a separate environmental audit should be completed for each worksite.

Organisation name:  
Site location/address:  
Number of staff: Number of remote staff:  
Number of work locations: Number of staff with a disability:  
Number of floors occupied by staff/organisation in building(s):

<table>
<thead>
<tr>
<th>1. Does the worksite provide a shower and changing facility for employees?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>• Is it accessible for all employees (ie &lt; 10 minute walk)?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>• Are the facilities separate for males and females?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>• Does it contain:</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>&gt; Individual showers</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>&gt; Lockers</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>&gt; Mirrors</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>&gt; Benches</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>&gt; Hair dryers</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>&gt; Towel services</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>• Can the facilities accommodate at least 5% of the workforce at one time (based on the number of locker and showers available)?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>• Does the worksite actively promote the availability of showers and changing facilities?</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. Does the worksite provide an exercise facility on-site?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>• Is it accessible for all employees (ie &lt; 10 minute walk)?</td>
<td>☐</td>
<td>☐</td>
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<tr>
<td>• Is it open before, during, and after normal work hours, including lunch (ie at least 10 hours total per working day)?</td>
<td>☐</td>
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<tr>
<td>• Does the exercise facility provide:</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>&gt; Aerobic equipment (stationary bicycles, treadmills, cross-trainers/elliptical runners, etc)?</td>
<td>☐</td>
<td>☐</td>
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<tr>
<td>&gt; Strength training equipment (free weights or machines)?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>&gt; Group Exercise Area/Room (for group activities such as yoga, pilates, stretching classes etc)?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>• Is the facility and its activities supervised by credentialed staff 1 (ie an ESSA Accredited Exercise Physiologist)?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>• Can the facility accommodate at least 5% of the workforce at one time (based on the space and exercise resources)?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>• Does the worksite actively promote the availability of the exercise facility?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>• Does the facility have adequate ventilation and air-conditioning? (i.e. Is the temperature regulated between 18ºC and 22ºC, with humidity between 40% to 60%?).</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>
### 3. Does the worksite provide or maintain outdoor exercise areas or playing fields for employee use?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>'No'→go to question 4</th>
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<tbody>
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</table>

- Does it enable the provision of outdoor team activities (eg Austag, touch football, Frisbee throwing, etc)?
- Is it accessible for all employees (ie < 10 minute walk)?
- Is it open before, during, and after normal work hours, including lunch (ie at least 10 hours total per working day)?
- Is the ground surface of the outdoor exercise area safe (ie grass or synthetic floor/rubber matting)?
- Does the worksite actively promote the availability of the exercise facility?

### 4. Does the worksite provide and maintain secure bicycle storage facilities (eg bike racks)?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>'No'→go to question 5</th>
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<tbody>
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</table>

- Type of storage facility:
  - Bike rails/racks (with covers/shelters if outside)
  - Bike cages
  - Bike lockers (enclosed)
- Does it have recharge facilities for electric bicycles (ie E-Bike charging station)?
- Is it accessible for all employees (ie < 10 minute walk)?
- Is it accessible before, during, and after normal work hours, including lunch (ie at least 10 hours total per working day)?
- Can the secure storage facilities accommodate at least 5% of the workforce bicycling to work at one time?
- Does the worksite actively promote the availability of the secure bicycle storage facilities?

### 5. Does the organisation comprise stairwells in its building(s) that can be used by staff regularly to promote walking?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>'No'→go to question 6</th>
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</table>

- Are the doors unlocked on most floors, including no restricted exit (ie not locked from inside)?
- Do the stairwells have adequate lighting?
- Do the stairwells have adequate ventilation?
- Are the stairwells carpeted?
- Are the doors to the stairwells marked ‘Stairs’ (not just ‘Exit’)?
- Are the floor numbers labelled inside the stairwell(s)?
- Are the utilities hidden (ie electrical wiring/plumbing not exposed)?
- Is the interior of the stairwell finished (ie painted/decorated)?
- Does the worksite actively promote the use of the stairs (ie signs adjacent to elevators or periodic emails encouraging the use of stairs)?
6. Are there dedicated walking and/or cycling paths within the workplace precinct?

- Is the footpath:
  > immediately adjacent to the road? □ □
  > separated from the road (ie more than 3 metres)? □ □

- Is the bicycle lane:
  > on the road? □ □
  > immediately adjacent to the road? □ □
  > separated from the road (ie more than 3 metres)? □ □

- Are the footpath and bicycle lanes shared (ie a share path)? □ □

- Does the worksite actively promote the use of the walking and/or cycling paths? □ □

7. Other

- Are any of the following accessible within (or immediately adjacent to) the workplace grounds:
  > Fitness Centre? □ □
  > Grass playing field (minimum dimensions: 24m x 11m)? □ □
  > Swimming pool? □ □
  > Tennis courts? □ □
  > Squash courts? □ □
  > Basketball courts? □ □

- Other physical activity spaces accessible within (or immediately adjacent) to the workplace grounds (please list below):

Audit performed by (full name):
Signed: ___________________________ Date: ___________________________
The following website directory provides information regarding:

- walking, running and cycling maps and information
- electric bicycle (e-bike) retailers.
- bicycle storage facilities.
- road-safety instruction providers.
- national and state-based agencies and resource centres.

**BICYCLE STORAGE FACILITIES (BIKE RAILS/ RACKS, BIKE CAGES AND BIKE LOCKERS)**

It should be noted that the following bicycle storage retailers are only an example of the many current suppliers in the market. For the purposes of ensuring an informed decision, it is advised that all suppliers of bicycle storage facilities are researched and compared.

www.cora.com.au

www.securabike.com.au

**CYCLING INSTRUCTION PROVIDERS**

AustCycle is the national leader in providing cycle training to people of all ages and skill levels throughout the Australian community.

www.austcycle.com.au

**ELECTRIC BICYCLES (E-BIKES)**

It should be noted that the following e-bike retailers are only an example of the many current suppliers in the market. For the purposes of ensuring an informed decision, it is advised that all suppliers of e-bikes are researched and compared.


www.electricbicycle.com.au (traditional designs)

www.reefbikes.com.au (hybrid designs)

**NATIONAL INFORMATION**

**10,000 Steps**

10,000 Steps is a free health promotion program that encourages the use of step-counting pedometers to monitor daily physical activity levels.

http://www.10000steps.org.au/

**Australian Bicycle Council (ABC)**

The Australian Bicycle Council’s role is to:

- maintain an archive of information and resources to promote increased cycling in Australia.
- provide a forum for the sharing of information between stakeholders involved in the implementation of the Strategy.


**Bike bus**

A bike bus is a group of people who cycle to work in a group. It’s called a ‘bus’ because there is a set route and timetable so it can pick up more passengers along the way.


**Cycling Australia**

Cycling Australia conducts a range of training activities and cycling events nationally through local clubs.

www.cycling.org.au

**Cycling Promotion Fund**

The Cycling Promotion Fund promotes cycling for all Australians.


**Cycling Resource Centre**

The Cycling Resource Centre is an Australian cycling information hub.

www.cyclingresourcecentre.org.au/

**MapMyFitness**

The MapMyFitness suite of website and mobile applications use GPS technology to help you to map, record and share exercise routes and workouts in an online database.

www.mapmyfitnessinc.com

**Pedestrian Council of Australia**

The Pedestrian Council of Australia runs the annual Walk to Work Day and other activities.

www.walk.com.au

**AUSTRALIAN CAPITAL TERRITORY**

Pedal Power ACT has a ride to work web-page:

www.pedalpower.org.au/
The ACT Department of Territory and Municipal Services provide cycling and walking resources and a comprehensive road rules handbook:
www.tams.act.gov.au/move/cycling

NEW SOUTH WALES
The Bicycle NSW website has news, events and resources:
www.bicyclensw.org.au

The RTA website for information on commuting including cycle-ways and handbooks:

Transport NSW has an active transport toolkit:

NORTHERN TERRITORY
The NT Cycling Association is the peak body for organised competitive and recreational cycling within the Northern Territory:
www.nt.cycling.org.au/

The NT Department of Infrastructure, Planning and Environment:

QUEENSLAND
The Bicycle Queensland website:
www.bq.org.au/

The QLD government has a comprehensive active transport website:

SOUTH AUSTRALIA
The Bicycle Institute of SA has a commuter page:
www.bisa.asn.au/

The SA Transport Dept bike site has maps and info for commuters:

TASMANIA
Bicycle Tasmania has a booklet on all aspects of commuting:
www.biketas.org.au/

The Tasmanian Department of Infrastructure, Energy and Resources has a cycling and walking section:

VICTORIA
Bicycle Network Victoria (Enter ‘ride to work’ in the search function for great resources):

Vic Roads website for cyclists includes a great cycling map facility:

Victoria Walks has information and resources for walking, and has recently developed Walking Maps to help you to map your walks:
walkingmaps.com.au

WESTERN AUSTRALIA
The Bicycle Transportation Alliance has a range of information available on its website:
www.btawa.org.au/

The WA Department of Transport active transport site outlines its innovative cycling and walking promotion programs and comprehensive resources: