Take it to heart

80% of Heart Disease and Stroke Can Be Prevented

- A positive attitude lowers the risk of heart disease
- Pet a dog, it lowers blood pressure
- Get at least 30 grams of fiber a day
- Eat more vegetables
- Exercise for 30 minutes a day
- Quit Smoking

For more information, go to the American Heart Association. Register for a LIVEwell Healthy Heart Class at kp.org/wellnessevent, signup code LIVEwell
The American Heart Association Recommendations for Physical Activity in Adults

For Overall Cardiovascular Health:

At least 30 minutes of **moderate-intensity aerobic activity** per day for a total of 150 minutes per week OR

At least 25 minutes of **vigorous aerobic activity** per day for a total of 75 minutes per week OR a **combination of the two**

**AND**

**HIGH INTENSITY**

Moderate muscle-strengthening activity at least 2 days per week for additional health benefits

For Lowering Blood Pressure and Cholesterol:

An average of 40 minutes of **moderate- to vigorous-intensity aerobic activity** per week for 3 or 4 days
Did you know... a positive attitude can help lower your risk of heart disease?

Learn easy tips like this and build an action plan to keep your heart healthy for life during the webinar at 12:00 p.m. today.

Registration is not required. Just click here and enter password livewell2018 to join the session.

I ❤️ MY HEART
Get a step ahead!

Know your diabetes risk and solutions.

Are you at risk? This interactive, Diabetes Prevention Class will help you understand your risk and provide tips on how to minimize your risk.

<table>
<thead>
<tr>
<th>Building &amp; Address</th>
<th>Date</th>
<th>Room</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>City Hall East</td>
<td>2/21/2018</td>
<td>Controller Room 351</td>
<td>12:00 p.m. - 1:00 p.m.</td>
</tr>
</tbody>
</table>

Register at kp.org/wellnessevent, signup code LIVEwell

*This is not a Kaiser Health Plan site or account. All Anthem and Kaiser members are eligible to attend.*
## February Wellness Classes

**Healthy Heart**

Heart health is important at every age. Learn easy tips and build an action plan to keep your heart healthy for life.

**Healthy Habits**

Healthy living is achievable! Learn how to set realistic goals, strengthen your motivation and make lasting changes.

**Stress Reduction**

Stressed out? Learn how to identify sources of stress and coping skills to manage and reduce your stress.

**Physical Activity**

Get active - it's one of the most important things you can do for wellness. Learn practical ways to move more.

**Diabetes Prevention**

Are you at risk? Learn how to build an action plan to minimize your risk and prevent diabetes.

<table>
<thead>
<tr>
<th>Building &amp; Address</th>
<th>Room</th>
<th>Time</th>
<th>Date</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>City Hall East</td>
<td>Controller Room 350/351</td>
<td>12:00 p.m. - 1:00 p.m.</td>
<td>2/15/2018</td>
<td>Controller Room</td>
</tr>
<tr>
<td>Figueroa Plaza</td>
<td>5th Floor</td>
<td>12:00 p.m. - 1:00 p.m.</td>
<td>2/8/2018</td>
<td>Conference Center</td>
</tr>
<tr>
<td>Garland Building</td>
<td>1st Floor</td>
<td>12:00 p.m. - 1:00 p.m.</td>
<td>2/13/2018</td>
<td>Auditorium</td>
</tr>
<tr>
<td>Hyperion Plant</td>
<td>Multipurpose Room, SMF</td>
<td>12:00 p.m. - 1:00 p.m.</td>
<td>2/7/2018</td>
<td>Multipurpose Room, SMF</td>
</tr>
<tr>
<td>LAWA Admin West</td>
<td>Room 7301-T</td>
<td>10:30 am - 11:30 a.m.</td>
<td>2/22/2018</td>
<td>Room 7301-T</td>
</tr>
<tr>
<td>LAWA Skyview</td>
<td>Room 211-B2</td>
<td>12:30 pm - 1:30 p.m.</td>
<td>2/22/2018</td>
<td>Room 211-B2</td>
</tr>
<tr>
<td>Marvin Braude Building</td>
<td>Conference Room 1A &amp; B</td>
<td>12:00 p.m. - 1:00 p.m.</td>
<td>2/7/2018</td>
<td>Conference Room 1A &amp; B</td>
</tr>
<tr>
<td>Personnel Building</td>
<td>MSD Training Rooms A/B</td>
<td>12:00 p.m. - 1:00 p.m.</td>
<td>2/28/2018</td>
<td>MSD Training Rooms A/B</td>
</tr>
<tr>
<td>Police Admin Building</td>
<td>Compstat Room</td>
<td>12:00 p.m. - 1:00 p.m.</td>
<td>2/6/2018</td>
<td>Compstat Room</td>
</tr>
<tr>
<td>Public Works</td>
<td>Sub-Basement Room 7</td>
<td>12:00 p.m. - 1:00 p.m.</td>
<td>2/8/2018</td>
<td>Sub-Basement Room 7</td>
</tr>
</tbody>
</table>
COUNTYWIDE
FITNESS CHALLENGE 2017

DANCE MANIA!
Get your groove on and join us for a day of family fun.

GROOV3 DANCE PARTY
2-MILE HIKE
BEGINNER FITNESS WALK
CHAIR MASSAGE
YOGA
NUTRITIONAL COUNSELING
FREE GIVEAWAYS
DRAWING PRIZES

Griffith Park
Crystal Springs Picnic Area
4730 Crystal Springs Drive
Los Angeles, CA 90027
3rd Supervisorial District

Saturday,
September 23, 2017
8:00 a.m. – Noon

RSVP to secure your giveaways at
http://employee.hr.lacounty.gov/countywide-fitness-challenge-2/

EVENT SPONSOR

Anthem
BlueCross
## BUDGET FOR PROPOSED
### JOINT CITY - COUNTY WELLNESS EVENT
#### GRIFFITH PARK

13-Oct-18

### TASKS / ITEMS / STAFF

<table>
<thead>
<tr>
<th>Tasks / Items / Staff</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SET UP AND TAKE DOWN</strong></td>
<td></td>
</tr>
<tr>
<td>Tents, equipment, sound, DJ</td>
<td><strong>TOTAL $12,000</strong></td>
</tr>
</tbody>
</table>

**MISC EXPENSES**

<table>
<thead>
<tr>
<th>Task</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Park Permit/Rental</td>
<td>$1,545</td>
</tr>
<tr>
<td>Videographer/Photographer</td>
<td>$1,200</td>
</tr>
<tr>
<td>Contractor staff to assist with event</td>
<td>$490</td>
</tr>
</tbody>
</table>

**TOTAL $3,235**

**GIVEAWAYS**

<table>
<thead>
<tr>
<th>Item</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wacky Wheel and other Prizes</td>
<td>$3,100</td>
</tr>
<tr>
<td>Water (bottled and in igloos)</td>
<td>$700</td>
</tr>
<tr>
<td>Booth SWAG giveaways</td>
<td>$4,500</td>
</tr>
<tr>
<td>Bags (Anthem brand, to hold giveaways)</td>
<td>$1,500</td>
</tr>
</tbody>
</table>

**TOTAL $9,800**

**WELLNESS SERVICES**

<table>
<thead>
<tr>
<th>Service</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chair Massage (5 therapists)</td>
<td>$3,400</td>
</tr>
<tr>
<td>Nutritional Counseling</td>
<td>$600</td>
</tr>
<tr>
<td>30 minute Yoga Sessions &amp; Exercise Leader</td>
<td>$980</td>
</tr>
<tr>
<td>Flu Vaccinations (estimated 15% participation)</td>
<td>$6,000</td>
</tr>
</tbody>
</table>

**TOTAL $10,980**

**OTHER SERVICES**

<table>
<thead>
<tr>
<th>Service</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kids Game Zone</td>
<td>$3,750</td>
</tr>
<tr>
<td>Groov3 Dance</td>
<td>$1,080</td>
</tr>
</tbody>
</table>

**TOTAL $4,830**

**COMBINED LA CITY / COUNTY GRAND TOTAL**

| Total         | $40,845.00 |

**L.A. City TOTAL**

| Total         | $20,422.50 |

**L.A. County TOTAL**

| Total         | $20,422.50 |
Employee Wellness Survey
April 2018

Is the City wellness program meeting your needs? As we continue to build the wellness program, we would like to get your feedback on the activities and tools from the past year, as well as learn more about your interests.

Please complete the survey by April 22nd. The survey will take no more than 15 minutes to complete, and is completely voluntary and confidential. However, there is the option to provide contact information if you are interested in helping plan and promote wellness activities. Thanks for your participation.

BACKGROUND INFORMATION

These background questions help us develop targeted program activities. As a reminder, your responses are totally anonymous.

1. What is your age? (Choose one)
   - 21 or under
   - 22-34
   - 35-44
   - 45-54
   - 55-64
   - 65 or older
   - I prefer not to answer.

2. What is your marital status? (Choose one)
   - Single, Never married, Widowed, Divorced, or Separated
   - Married or domestic partnership
   - I prefer not to answer.

3. Do you have children? (Choose one)
   - Yes
   - No
   - I prefer not to answer.

4. With which ethnicity do you most identify? (Check all that apply)
   - White
   - Black or African American
   - Hispanic or Latino
   - Asian
   - American Indian or Alaska Native
   - Native Hawaiian or Other Pacific Islander
   - Other
   - I prefer not to answer.
5. With which gender identity do you most identify? (Choose one)
   o Female
   o Male
   o Non-binary/third gender
   o Other
   o I prefer not to answer.

6. What City Department do you presently work for? (Choose one by clicking on the arrow)
   o DROP DOWN MENU

7. What shift or schedule do you work? (Choose one)
   o 1st Shift (daytime)
   o 2nd Shift (evening)
   o 3rd Shift (overnight)
   o Rotating

8. Which Employee Labor Organization (MOU#) are you currently represented by? (Choose one by clicking on the arrow)
   o DROP DOWN MENU

9. How do you access the Internet? (Check all that apply)
   o Computer or tablet
   o Mobile phone
   o Wristwatch
   o Other
   o I don’t use the Internet.

10. Which of these statements describes your interests? (Check all that apply)
    o I would like to reduce my stress.
    o I would like to improve my eating habits.
    o I would like to improve my health.
    o I need to get more sleep.
    o I would like to lose some weight.
    o I would like to get more physical activity.
    o None of these

11. Which of these statements best describes your health status? (Choose one)
    o I am satisfied with my current state of health.
    o I have been thinking about changing some of my health practices.
    o I am in the process of making changes in my health practices.
    o I need help changing some of my health practices.
    o I may have health issues but I am not interested in making changes.

12. Which of these statements best describes exercise for you? (Choose one)
Employee Wellness Survey
April 2018

- I usually get at least 20 minutes of exercise, at least three days per week.
- I exercise but not regularly.
- I have physical challenges that keep me from exercising.
- I don’t have the time to exercise.
- I don’t have the money to join a gym.
- I don’t feel supported by my family when it comes to exercise.

13. I usually eat: (Choose one)
   - Less than 1 cup of fruits and vegetables per day.
   - 1-2 cups of fruits and vegetables per day.
   - More than 2 cups of fruits and vegetables per day.
   - I don’t eat fruits or vegetables.
   - Other

14. I usually get: (Choose one)
   - More than 9 hours of sleep per night.
   - 7-9 Hours of sleep per night.
   - Less than 7 hours of sleep per night.

15. I get a physical exam at the doctor: (Check one)
   - Once a year [Skip to #17]
   - Less than once a year
   - Never

16. Why don’t you get a physical exam (most often)? (Check one)
   - I forget.
   - I’m healthy.
   - There’s nothing wrong.
   - I don’t have time.
   - I’m afraid.
   - I don’t need one.
   - It’s too expensive.
   - It’s too much of a hassle.
   - Other: please specify: __________________________

17. I get a dental exam: (Check one)
   - Twice a year [Skip to #19]
   - Once a year
   - Less than once a year
   - Never

18. Why don’t you get a dental exam (more often)? (Check one)
   - I don’t have time.
Employee Wellness Survey
April 2018

- I’m afraid of the pain or something else.
- I don’t need one.
- It’s too expensive.
- It’s too much of a hassle.
- I forget.
- I’m healthy.
- There’s nothing wrong.
- Other: please specify: __________________________

19. I get a vision exam: (Check one)
   - Once a year [Skip to #21]
   - Less than once a year
   - Never

20. Why don’t you get a vision exam (more often)? (Check one)
   - I don’t wear glasses.
   - There’s nothing wrong.
   - My prescription doesn’t change that often.
   - I don’t have time.
   - I’m afraid.
   - It’s too expensive.
   - It’s too much of a hassle.
   - I forget.
   - Other: please specify: __________________________

21. How familiar are you with the City’s wellness program? (Choose one)
   - I don’t know anything about it.
   - I may have heard of the program, but I’m not sure.
   - I have heard of it but I can’t remember the name.
   - I have heard of the program and I know the name of it.

22. What is the City’s wellness program name? (Choose one)
   - CityWell
   - Keeping LAWell
   - WellNow
   - LiveWell
   - BeWell
   - None of the above
   - I don’t know.

23. Have you read any wellness education emails? For example, Park & Recreation Month, Getting Outdoors, Back to School, Diabetes Awareness, or Help for Holiday Stress. (Check all that apply)
Employee Wellness Survey
April 2018

24. What is the main reason why you didn’t read any wellness emails? (Choose one)
   - I didn’t receive the emails. [Skip to #26]
   - The topics didn’t appeal to me. [Skip to #26]
   - I get too many emails to read them all. [Skip to #26]
   - I am too busy. [Skip to #26]
   - I’m not interested in wellness. [Skip to #26]
   - Other: please specify: __________________________ [Skip to #26]

25. Overall, how helpful is the wellness education email content? (Choose one)
   - Very helpful
   - Helpful
   - Somewhat helpful
   - Not at all helpful

26. How many wellness classes have you attended? (Check all that apply) [If any responses are chosen, skip to #28]
   - More than 8 [Skip to #28]
   - 5-8 [Skip to #28]
   - 1-4 [Skip to #28]
   - None

27. What is the main reason why you didn’t attend a wellness class? (Choose one)
   - I didn’t know about the classes.
   - The locations weren’t convenient.
   - The classes were full so I couldn’t sign up.
   - The class topics didn’t appeal to me.
   - The time wasn’t convenient.
   - I was too busy with work.
   - Other: please specify: __________________________

28. Did you participate in the WalkPlus Walking Program? (Choose one)
   - Yes [Skip to #30]
   - No

29. What is the main reason that you didn’t participate in the WalkPlus Walking Program? (Choose one)
   - I didn’t have a team.
   - I’m too out of shape.
   - I didn’t know about the program.
Employee Wellness Survey
April 2018

30. Did you get a health screening at a wellness clinic? (Choose one)
   - Yes [Skip to #32]
   - No

31. What is the main reason that you didn’t get a health screening at a wellness clinic? (Choose one)
   - The day or time wasn’t convenient.
   - I don’t get health screenings.
   - I get my health screenings elsewhere.
   - I didn’t know about the health screening clinics.
   - The location wasn’t convenient.
   - The clinic was full so I couldn’t sign up.
   - I was too busy.
   - Other: please specify: __________________________

32. How likely are you to participate in the City wellness program? (Choose one) [If not likely, proceed]
   - Very likely [Skip to #32]
   - Somewhat likely [Skip to #32]
   - Somewhat unlikely [Skip to #32]
   - Not at all likely

33. Why aren’t you interested in participating in the City wellness program? (Fill in the blank)

34. What type of wellness activity are you most likely to participate in? (Fill in the blank)

35. If the topic was of interest to you, what is your preference when it comes to wellness education classes? (Choose one)
   - Attend an in-person class.
   - Attend a live webinar.
   - Watch a recording (such as a webinar or instruction video).
   - I am not interested in education classes.

36. Optional: Would you be willing to help plan and promote wellness activities at your worksite? If you’re interested but haven’t signed up before, please fill out your information below.
   Name: _________________________
   Email: _________________________
   Phone: _________________________