

# LOCAL UNIT REPORT: How Healthy is Your Local Unit?

## Local Unit Annual Report Form



Return to District Health Care Committee Chairman by February 15

(Information to be gathered from January to December)

Local Unit \_\_\_\_\_ District \_\_\_\_\_

Local Unit Health Care Committee Chairman \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Approximate number of members in your local unit \_\_\_\_\_ Date \_\_\_\_\_

Complete the following items about your local unit.

\_\_\_\_ 1) Does your unit publicize health tips at every meeting/newsletters?

\_\_\_\_ 2) Does your unit include a program on health care?

List program/speaker: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_ 3) Does your unit provide health care materials/resources to members?

\_\_\_\_ 4) Does your unit follow "Guidelines for Healthy Meetings?"

\_\_\_\_ A) Are low-calorie and low-fat foods available?

\_\_\_\_ B) Is water available?

\_\_\_\_ C) Are stretch breaks encouraged?



BrainFood



5) How does your local unit encourage its members to exercise regularly?

\_\_\_\_\_



6) Was the Health Care Committee Resource Guide helpful? \_\_\_\_\_

▪ Do you access the online version of the guide? \_\_\_\_\_

▪ Do you find the Health Care Committee webpage helpful? \_\_\_\_\_

Comments: \_\_\_\_\_

Your feedback is appreciated!

**District Health Care Chairman, please include this form with your district report.**