**[COMPANY ABC] HEALTHY WORKPLACE PLAN**

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| **Overall program goal:****Program objectives:** |
| **Priority area** | **What is the activity?** | **What budget/resources are needed** | **Who will do this?** | **What are the timelines?** | **How will it be evaluated?** ***(during and after)*** | **Progress notes** |
| Description of priority area:Priority area objectives:Avenues of influence 🞎 Physical environment🞎 Psychological environment🞎 Personal health resources🞎 Community involvement | Individual *(awareness and skill-building)* |  |  |  |  |  |
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| Organizational *(environment, policy)* |  |  |  |  |  |
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