

HEALTHY WORKPLACE PARTICIPATORY PROGRAM

Facilitator Manual



Acknowledgements

The Healthy Workplace Participatory Program 2.0 Edition (2019) Facilitator Manual and website (www.uml.edu/cphnewtoolkit) were created by the Center for the Promotion of Health in the New England Workplace at the University of Massachusetts Lowell and the University of Connecticut.

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HOW TO USE EACH SECTION OF THE FACILITATOR MANUAL

This manual provides detailed information useful for implementing the Healthy Workplace Participatory Program (HWPP), a research-based, Total Worker Health program.

The manual contains Sections I, II, and III. Use all three sections to maximize the program benefits for your organization. You can access the materials in this manual plus new or updated materials by visiting the HWPP website: www.uml.edu/cphnewtoolkit

Section I: Getting Ready for Program Start-up



Read Section I thoroughly to learn how to implement the core elements of the program, and customize the program fit to your organization.

Content: About the HWPP and Total Worker Health

Getting Ready for Program Start-up – assessing organizational readiness, gathering management support, identifying health and safety priorities Forming Programs Teams – Design Team and Steering Committee Customizing the HWPP to Fit your Organization

Take steps to prepare the organization for program start-up. Use the online resources described in this section to build management support and designate necessary staff resources. Once these are in place, recruit employees to serve on key **program teams.**

Section II: Design Team Start-up



Use the materials in Section II to help you facilitate the initial three meetings of a Design Team.

Content: Facilitator Manual for Design Team Start-up Sessions 1, 2, and 3

- Facilitator Preparation
- Facilitator Agenda
- Design Team Agenda and Handouts

A Design Team is a group of front-line employees who will develop solutions to specific health and safety concerns. The Start-up session materials will help you establish a strong foundation for how your team will work together. They will learn their roles, form agreements, and explore and prioritize topics for interventions.

Section III: Generate Solutions Using the Intervention, Design, and Analysis Scorecard (IDEAS) Tool



Use the materials in Section III to help you facilitate IDEAS Steps 1 through 7. You will craft interventions and develop a business case for each one to improve worker safety and well-being while supporting key organizational goals.

Content: Facilitator Manual for IDEAS Steps 1 to 7

- Facilitator Preparation
- Facilitator Agenda
- Design Team Agenda and Handouts

The intervention design process involves front line employees (Design Team) and organizational leaders (Steering Committee) at specific time points. The process is designed to encourage communication, mutual learning, and a shared commitment to employee safety, health and well-being.

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HEALTHY WORKPLACE PARTICIPATORY PROGRAM

Section I. Get Ready for Program Start-up

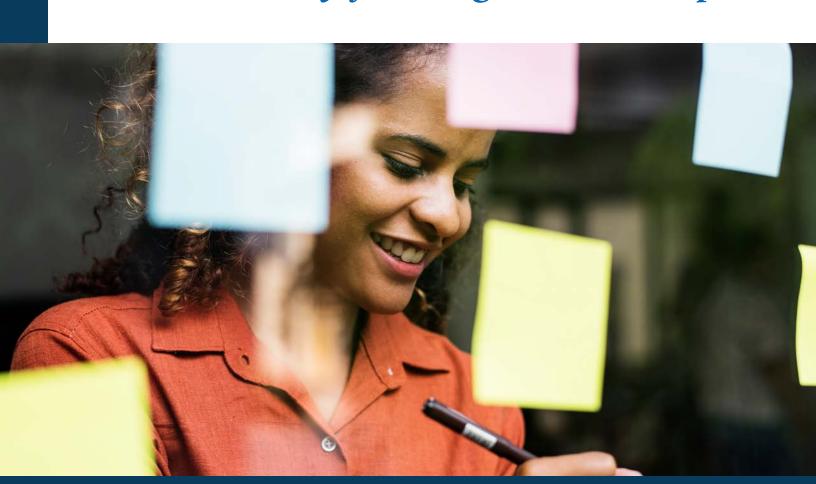


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Section I. Get Ready for Program Start-up

OVERVIEW OF THE HEALTHY WORKPLACE PARTICIPATORY PROGRAM

The Center for the Promotion of Health in the New England Workplace (CPH-NEW) is a NIOSH funded Center of Excellence for Total Worker Health® (TWH). CPH-NEW developed the Healthy Workplace Participatory Program (HWPP) Toolkit specifically to help employers and organizations adopt and implement a participatory, TWH program approach.



The HWPP Toolkit was developed to engage employees in designing comprehensive solutions to a wide range of issues related to work environment, work organization, safety, and employee health.

The core elements of the program include a Steering Committee, a Design Team, a trained program facilitator, and the use of the IDEAS Tool (Intervention, Design and Analysis Scorecard) to design interventions with a strong business case.

Goals of the HWPP

ENGAGE

front-line employees in setting priorities and developing solutions to advance Total Worker Health®

IMPROVE

organizational culture, communication and collaboration about health, safety, well-being

ESTABLISH

a sustainable process for continuous improvement of health, safety, and well-being

DEVELOP

a business case for specific health and safety interventions

Key Principles Underlying the HWPP

- It is a program to advance Total Worker Health®
- It relies on participation from front-line employees to develop interventions to improve employee health, safety, and well-being
- It relies on a facilitator to coordinate the program activities
- It uses a two-committee structure: A Steering Committee made up of manager-level employees, and a Design Team of front-line employees. Each committee is facilitated by an individual (or pair of individuals)
- It utilizes the Intervention, Design, and Analysis Scorecard (IDEAS) Tool to plan and implement interventions

The IDEAS Tool provides a structured process for intervention planning; it is described in detail in Section III of this manual. It helps a team of employees uncover root causes to poor health and injuries so they can develop complete and sustainable solutions. Most importantly, it engages and empowers employees by providing a structure for meaningful input. This structure builds a culture of health in the organization and confidence to change unhealthy behaviors and conditions.

Read about the case studies and the science behind this program on the HWPP website: https://www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/Benefit/

A TOTAL WORKER HEALTH® APPROACH TO HEALTH, SAFETY, AND WELL-BEING IN THE WORKPLACE

What is Total Worker Health®?

Total Worker Health® (TWH) is a new and developing program concept that takes occupational safety and health to the next level to also address other workforce health concerns such as stress, chronic diseases, and working and living well into older age.

TWH is a holistic approach to worker well-being. It acknowledges risk factors related to work that contribute to health problems previously considered as separate from the workplace. This is why TWH programs focus on making working conditions conducive to health, which can lead to health benefits on and off the job.

The National Institute for Occupational Safety and Health (NIOSH) defines *Total Worker Health*® as policies, programs, and practices that integrate protection from work-related safety and health



Fig. 1. Total Worker Health Model of Worker Well-Being.

hazards with injury and illness prevention efforts to advance worker well-being. The NIOSH TWH website provides a wide array of resources on this topic (www.cdc.gov/niosh/twh).

Examples of an Integrated, Total Worker Health Program Approach

Example: Respiratory illnesses from poor workplace air quality can be more serious for workers who are smokers.

A TWH program deals with air quality AND smoking cessation.

Example: Job stress increases the risk factors for heart disease such as high blood pressure and smoking and low physical activity. Job stress also contributes to anxiety/ depression.

 A TWH program reduces job stressors AND addresses exercise, diet, stress management.

Example: Physically demanding work can lead to feeling too fatigued to exercise after work or to prepare healthy meals.

 A TWH program addresses equipment to reduce bodily forces AND work schedules that allow for rest and recovery.

What is a Participatory Program? Why a Participatory Program?

With Total Worker Health, it is assumed that workers need to be active participants in making the working environment conducive to safety and health. Participatory programs engage employees in all levels of the organization in the design of interventions to create a healthy work environment.

Research shows that when front-line employees have a central role in designing workplace interventions, they provide valuable insights on how to improve health, safety and well-being in the workplace. Engaging in participatory design efforts itself is also known to alleviate stress because it gives workers a sense of job control. A participatory program approach offers the following advantages:

- Front-line employees are usually more familiar than upper level managers with the day-today operational aspects of their jobs and the physical design factors in their workplace.
- Front-line employees are able to develop solutions that address a range of factors (physical, social, environmental, and behavioral), in keeping with the TWH concept.
- Participatory design efforts are health promoting. Employees who are engaged in the organization's improvement process feel a sense of control and reward. Employee participation is considered a key component of a healthy organization.
- Employee innovation improves health and safety practices. Employees can offer creative ideas for interventions to benefit their own health and safety if given the opportunity to do so, and if provided with some help in prioritizing and developing their ideas.
- Interventions designed by employees are more willingly accepted than those imposed from the top down. When employees themselves design workplace solutions to problems, they assume "ownership," making it more likely that workplace changes will be promoted, accepted and supported by employees.



GET READY FOR PROGRAM START-UP

Setting up a participatory program requires some preparation. Every organization is different. Your organization may already have well-established programs for engaging employees in work quality improvement, or safety and health. Or, your organization may just be starting out with this approach. Before you start to implement the Healthy Workplace Participatory Program, take the time to assess your organization's readiness and build management support.

Assess Organizational Readiness

Research in the field of participatory ergonomics has identified key factors that enhance the success of participatory programs. For example, participatory programs work best when

- teams are formed in a way that involves members from multiple levels of the organization (workers, supervisors, managers, etc.),
- teams have access to experts with content knowledge (e.g. technical advisors),
- teams are trained in key content areas (safety, ergonomics, health, well-being), and
- the program addresses key implementation facilitators and barriers (e.g., management support, access to budget and personnel resources).

The HWPP online toolkit provides an interactive Survey on Organizational Readiness to make it easy to assess whether your organization has the necessary resources, knowledge and competencies to successfully implement a participatory, Total Worker Health program. The survey is available in an online or paper format. The online survey generates a customized report that will guide you through the entire process of getting ready to implement the program. The paper survey provides a similar, printed response guide.

You can use the Organizational Readiness Survey as a tool to gain management support for implementing the HWPP (see below). By inviting key organizational leaders to participate in the survey, you can bring attention to the program and the resources and skills needed for successful program implementation. The Organizational Readiness Survey report will describe what your organization needs to do to prepare for the Participatory Program. It will also suggest ways to link the Participatory Program with existing organizational resources.

Visit the HWPP Assess Organizational Readiness and Resources page:

<u>www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/get-ready/assess-readiness/readiness.aspx</u>

Gather Management Input and Support

The successful initiation and maintenance of a Healthy Workplace Participatory Program depends on management support at all levels. Support from senior leaders is crucial for obtaining sufficient resources and aligning the new program with key organizational goals. Middle management support is needed to help ensure that employees can take the time needed to attend Design Team meetings, and for supporting implementation of any new programs or policies recommended. Organizational leaders can help ensure that the program teams have the support and resources they need to fulfill their roles.

How you build management support will depend on how things are done at your organization. For example, you may meet with key leaders one-on-one, or make a group presentation. However you choose to introduce the HWPP to management, we recommend that you cover the following topics:

- Introduce the HWPP, its goals and purpose, and how the company would benefit from the program.
- Invite leaders to discuss their views on the usefulness and feasibility of a participatory program within your organization.
- Emphasize the value of engaging front-line employees in helping meet organizational goals relating to health, safety and well-being.

 Discuss next steps for program initiation (assuming there is interest)

Visit the HWPP Gather Management Input and Support page:

www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/get-ready/gather-input/management-support.aspx

This page provides useful communication tools such as a program marketing flyer, sample PowerPoint presentation materials, talking points, and a training video.

Assess Health and Safety Priorities

One of the ways the Steering Committee can support the participatory program is by gathering data to assess health and safety priorities. A thorough assessment should include indicators at the organization level (e.g. health and compensation claims, absenteeism, etc.) and at the individual employee level.

The HWPP online toolkit contains tools and instruments for assessing employee perspectives about work, health, safety, and well-being topics. Examples are described below. You can use these tools, or ones like them to help identify topics that a Design Team can address.

• **All Employee Survey and User Manual.** This survey is designed to be administered with all employees to assess employee attitudes and perceptions related to the work environment and to their health, safety, and well-being. The user manual provides survey documentation, scoring instructions, and guidance on quality and ethical considerations for survey administration.

• **Focus Group Guide.** This tool provides instructions for facilitating a focus group (or group interview) to gather perspectives from employees about the topics they see as important for well-being in the workplace. You may consider running a focus group with a Design Team (as is done in DT start up session 2) or with several subgroups of employees to gather a wider range of viewpoints.

Visit the HWPP Assess Health and Safety Priorities page:

<u>www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/get-ready/identify-priorities/</u>

FORM PROGRAM TEAMS: ROLES AND TRAINING OF KEY PROGRAM PARTICIPANTS

Successful participatory programs engage employees at all levels of the organization. The HWPP is designed to encourage multi-level engagement and collaboration through a two-level program structure (see Figure 2). This section describes the roles for each team/committee, and how a program facilitator assists with guiding the activities and promoting communication and collaboration to improve organizational safety, health and well-being.



Fig. 2. The HWPP Two-Committee Structure.

Why a two-committee structure?

The two-committee structure enables employees from all levels of the organization to be involved in designing interventions to improve health, safety, and well-being.

A **Design Team** provides a forum for front-line employees to identify problems within the workplace and propose solutions without worrying about how managers will perceive their ideas. Front-line employees may be less likely to discuss potentially controversial ideas in the presence of managers, even if addressing controversial ideas could provide a great deal of benefit. By utilizing a two-committee structure, Design Teams are more likely to identify the true root causes of a health and safety problem and can design more effective interventions than they otherwise would have been able to.

A **Steering Committee** is important for focusing organizational leaders on issues of safety and well-being, learning about employee perspectives, and receiving and working with DT on intervention proposals. A Steering Committee is needed to marshal resources (staffing, budget, policies, etc.) and provide oversight when an intervention is approved for implementation.



Design Team (DT)

The Design Team consists of non-managerial, front-line employees, and are vitally important to the success of the program. Design Team members can identify health and safety problems employees experience on a day-to-day basis and generate ideas for potential solutions to these problems. Ideally, 6-10 members make up a Design Team.

Design Team members are individuals who are:

- Non-managerial employees
- Interested in health, safety, and well-being
- Able to work successfully in a positive team environment
- Able to represent their peers

Regular team meetings provide a means for front-line employees to take an active role in designing workplace interventions to promote TWH. Members of the Design Team should be able to commit to regular participation in meetings, plus occasional tasks outside of meetings. Supervisors play an important role in supporting DT member attendance. In a unionized organization, a Design Team could be formed within the union.

Throughout the program, the DT:

- Meets with the facilitator and selects workplace health and safety issues for interventions
- Designs interventions to address issues appropriate to their work environment
- Develops a business case for interventions to present to the Steering Committee
- Communicates with management and the workforce about health and safety concerns

After implementing a change, the DT:

- Helps promote and evaluate all interventions to protect long term sustainability
- Helps refine interventions as needed

Section II of the Facilitator Manual (Design Team Start-up) provides step-by-step meeting guides for the first three meetings of a new Design Team. These start-up meeting guides are specifically designed to help get the Design Team off to a strong start by guiding the process of forming team agreements, and clarifying the topics of greatest concern to team members. These meeting guides are also useful if you are orienting an existing team to function as a Design Team for the HWPP.

Visit the HWPP Design Team Start-up page:

www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/form-design-team/

This page provides a Design Team recruitment guide, a Description, and an information video for prospective Design Team members.



Steering Committee (SC)

The Steering Committee consists of senior and mid-level managers and other key personnel who can marshal organizational resources. The SC supports the HWPP primarily through supporting the DT's process, but can also initiate interventions, particularly if interventions are aimed at the level of supervisors and management. A senior leader serves as the program Champion to lead the activities of the Steering Committee.

At the start of the program, the SC:

- Collects baseline data on employee health and safety issues and related business concerns
- · Nominates non-managerial employees to serve on the DT
- Identifies qualified personnel and resources to support a Facilitator
- Informs the organization at large about the program

Throughout the program, the SC:

- Meets regularly to consider the DT's intervention proposals and provides timely feedback
- Selects DT interventions to implement
- Implements the DT's interventions by;
 - Making changes to organizational policies
 - Allocating resources towards implementation of DT interventions
 - Involving the DT in the implementation process (where possible)
 - Creating linkages with key personnel and relevant work units
 - Regularly updates the organization at large on the program's status, goals, and achievements

After implementing a change, the SC:

- Periodically evaluates the benefits and effectiveness of each implemented change
- Monitors and supports continuous improvement of the overall HWPP

Visit the HWPP Form a Steering Committee page:

uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/Form-Program-Teams/

This page includes a guide to selecting and training a Steering Committee, and a Steering Committee description for prospective new members.



Facilitator

As the facilitator, you play an essential role to the success of the HWPP. A skilled facilitator is a "neutral servant" to the Design Team. Your role is to create the conditions for the Design Team members to accomplish their work, while remaining unbiased.

Results

FACILITATOR

Relationships

Though the facilitator is not responsible for the work of the Steering Committee, ensuring a communication system is in place for communication between the Design Team and the Steering Committee is an essential aspect of the role. Facilitators may be recruited from among internal employees or hired as a consultant. Either arrangement can work well, and each has benefits and drawbacks.

Internal Facilitators have firsthand knowledge of the organization and how it works. However, it may be more difficult to act (or to be perceived) as neutral or unbiased.

External Facilitators may be trusted more easily as neutral or unbiased. However, they will not have firsthand knowledge of the organization and how it works.

In your role, you'll need to focus on three aspects of facilitation:

1. Guiding the process

You will guide the Design Team during the Steps 1-5 of the IDEAS process, assessing and ensuring that all team members are contributing well. Use the resources in Section III of this Facilitator Manual to facilitate the IDEAS process.

2. Encouraging relationships

The facilitator sets the conditions for positive **group dynamics** so the Design Team functions well as a team. This is essential for successful outcomes. Use the Design Team Start-up guides in Section II to help the members set ground rules for how they operate. The Facilitator Meeting guides are annotated with tips for participatory facilitation techniques to promote team cohesion, shared purpose, trust and inclusion.

3. Tracking Results

You will help the Design Team monitor their progress by highlighting when they achieve key milestones along the process. Having a sense of accomplishment is important for sustaining commitment and enthusiasm. The HWPP materials are designed to make it easy to recognize specific accomplishments:

- Use the HWPP meeting guides to review the specific goals for each meeting. This will make it clear what has been accomplished and if there is timely progress.
- Use the IDEAS worksheets to document the Design Team's group work.
- Encourage the Design Team to interact with the Steering Committee at appropriate times.
- Assist the Design Team with troubleshooting when they encounter obstacles. This may include identifying when the DT needs training or help from subject experts.

^{*}Note: The facilitator may or may not be responsible for meeting minutes. This task can be assigned to a team member or to someone specifically tasked as the meeting recorder.

Traits of a Skilled Facilitator

Successful facilitators demonstrate specific skills that help a group to function effectively. Some key skills are outlined below, along with reasons they are important.

Facilitation Skill	Why it's Important
Encourages everyone to speak	 Keeps members motivated Allows members' knowledge to be expressed to benefit the team goals
Sets ground rules and expectations	 Helps team members feel more invested Ensures information is shared effectively
Redirects discussion when needed	Keeps the group on taskBalances the voices
Clearly explains the meeting activites and processes	Creates conditions that enable members to know what to do and why they are doing it
Listens reflectively	 Helps clarify the meaning of what's being said Builds a shared understanding between DT members
Remains objective or neutral	 Builds DT confidence that their views will be considered Helps DT to reach decisions objectively
Manages meeting time and materials	Keeps meetings organized and productiveDocuments progress

Visit the HWPP Identify and Train a Facilitator page to locate key training resources (see below) www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/Form-Program-Teams/

- **HWPP Facilitator Description:** Brief list of key roles and skills of effective program facilitators
- **HWPP Facilitator Manual**: Detailed program implementation guide with step by step meeting materials
- Facilitation Skills Training Videos: Demonstration videos to help you learn and practice effective facilitation skills

CUSTOMIZING THE HWPP TO FIT YOUR ORGANIZATION

Organizations have unique characteristics, needs, and resources. You will need to consider how best to implement a HWPP program structure that fits the needs and resources available in your organization. Consider these decisions when planning how best to implement the program.

Committee Structure

Two Committee Structure vs. Single Committee

Prior research has demonstrated that a two-committee structure produces better program engagement and better odds that new interventions will be designed and adopted. However, this arrangement may not be feasible in your organization. With careful planning, you may be able to run an effective participatory program with a single Design Team. The key is to preserve active engagement at all levels of the organization in key times.

Tips for running HWPP with a single committee:

- Appoint a single, mixed level Design Team. This arrangement might be successful in organizations where there is a high level of trust and cooperation already, or when the organizational hierarchy is relatively flat.
- You may find that front-line employees have more flexibility to meet than middle- and upper-level managers, so requiring combined meetings may slow down the process. This may make the single committee structure less feasible.
- Plan specific methods for engaging front line employees and upper level managers at the beginning, mid-way through, and later as interventions are developed. Taking steps to gather input from key groups who are not represented on the Design Team can help assure the program is truly participatory.

One Design Team vs. Multiple Design Teams

If your organization is large and/or complex, you may consider forming more than one Design Team. Design Teams work best if their focus is localized to a specific work location or set of issues. For instance, a corporation with multiple offices may be well served by starting out with a single Design Team in one of its offices.

Using existing Committees vs. Creating New Committees

Who will serve as Design Team and Steering Committee members when you implement the HWPP? There may be an existing team of employees that could be trained to function as a Design Team; a work quality team or a safety committee could be trained to take on a new role as a Design Team. There may be an existing leadership team that could function as a Steering Committee with proper training.

Using Workplace Communications Systems Effectively

Communication systems are essential to effective team functioning. Design Team members need to be able to easily communicate with the program facilitator and with each other in preparation for meetings. They need to be able to access materials created by the group, and they need to know when meetings are scheduled so they can plan in advance to attend.

Early in the formation of the Design Team, a communication system should be established that is predictable and inclusive of all members. For many organizations, email and electronic calendars are basic tools that are available to all employees. However, employees who do not work at a desk may not see emails frequently or may not have a company email at all. A bulletin board or a team mailbox may be good alternatives for posting a calendar with meeting dates and copies of meeting notes with between-meeting assignments. Design Team members should also have access to a contact list in case they want to communicate with members between meetings.

In addition to team communication, the Design Team should also consider how they will communicate with the broader workforce. For example, the Design Team will need to gather input from coworkers about their views on certain health and safety issues, or possible solutions. They may wish to set up a central communication board in a break space, or they may wish to administer brief surveys for this purpose. Organization newsletters are effective for broadcasting news and information about Design Team activities.

Location & Logistics of DT Meetings

Design Team (DT) meetings should ideally be held in an area that is accessible and familiar to all DT members. An unfamiliar location may be intimidating to some DT members, which could decrease participation. The location should also match the size of your Design Team. Too large of a space may feel awkwardly quiet, while a space that is too small may make people feel uncomfortably close.

The facilitator should be aware of the logistics of meeting, such as seating layout, time of day, wall space, etc. Some things to consider are:

- **Seating arrangements:** Having chairs arranged in a circle, or around a table maximizes participatory engagement. All DT members will be able to see and hear each other better than other arrangements. Chairs in circle or chairs around a conference room table work well. Avoid classroom or lecture style seating. It is intimidating and formal, and DT members sitting in the back may be less likely to participate.
- Wall/whiteboard/chalkboard space: Self-adhesive flip chart paper is ideal for recording ideas in the HWPP because they can be posted around the room for the entire meeting, which enables DT members to refer back to them. Whiteboards and chalkboards are less ideal because the content has to be erased once you run out of room. One solution to this is to take photographs of the boards before erasing them. Flip charts from previous meetings can also be saved and posted during follow-up meetings to serve as reminders of past work. If you are unable to save flip charts, you can photograph the flip charts and share them with the DT.
 - If you are using flip charts, make sure that the markers you use do not bleed through the paper and onto the wall.

- If using tape to hang flip chart paper without adhesive backing, painter's tape is less likely to damage walls.
- Writing the date and ensuring that each flip chart has a title will make it easier to refer back to flip charts at a later date.
- Downloadable worksheets can be used as an alternative to flipcharts. Fillable forms are available on the IDEAS tool landing page of the HWPP website at:
 uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/generate-solutions/
- **Time of day:** If your meeting is scheduled right after lunch, you may need to have the group do something active at the beginning of the meeting to get their energy up. Similarly, if DT members are hungry, they will be less engaged. If you have to meet just before lunch, consider arranging snacks/refreshments.

DT Meeting Materials

Sections II and III in this manual provide step-by-step meeting guides, activities and worksheets for Facilitator and Design Team members. These materials are designed to engage workers in meaningful dialogue about issues they care about, to foster learning, and most importantly, to enable effective problem solving.

The meeting materials follow a standard format, as outlined below.

- **1. Facilitator Preparation:** Tips and important information for the facilitator.
 - a. Before each meeting, review this preparation to ensure that you are ready to facilitate the Design Team meeting.
 - b. There will be reminders of things to prepare, concepts and definitions to know, and detailed instructions for certain processes to help you understand how to best support the group's work for that meeting.
- 2. Facilitator Agenda: A comprehensive, designed plan for the entire meeting.
 - a. **Meeting intent:** This statement informs the design team about the purpose for each meeting.
 - b. **Desired outcomes:** This section lists goals to achieve during each meeting. These desired outcomes align with the **"What"** sections of the meeting plan.
 - c. **Agenda:** This is a Roadmap for each meeting. These meeting plans describe how long each activity will take ("When"), the content of the meeting ("What"), and the process used to get at the content ("How").
 - d. **Check-in/Check-out:** Each meeting plan starts with a **check-in** prompt. The check-in prompt is meant to get the team into the mindset of the meeting and leave behind whatever they were doing just before the meeting.

The intent of these meeting plans is to help optimize the group formation process needed to become a high-performing Design Team. The meeting agenda has been designed to help all members be clear about the work ahead. You will learn how to tailor these plans to suit your needs in the CPH-NEW Facilitation Skills Training Video Series.

- **3. Design Team handouts:** Sheets for DT to use during the meeting. These include the meeting agenda, activity sheets and notes pages.
 - a. The examples in the DT handouts will help streamline the process and improve DT members' understanding of the content.
 - b. Some DT members may think more clearly when they can write notes. These handouts provide space for DT members to write their thoughts before a group process. Others may not use the handouts for notes, and that is okay.

How you manage the distribution of the meeting plans and handouts is up to you. You may want to give the DT members all of the agendas/handouts at one time, or you may choose to give the agendas/handouts to the DT "just in time" (i.e. handing out only the materials for the current meeting). Do what works best for your DT and your organization.

HWPP WEBSITE RESOURCES

HWPP Training and Support Page

Provides information on using specific components of the CPH-NEW HWPP toolkit. www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/training-support/

HWPP Toolkit at a Glance

Provides a complete listing of key tools and training resources available on the HWPP website: www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/toolkit.aspx

HWPP Form Program Teams Pages

Provides guides for creating a Steering Committee and recruiting and training a program Facilitator. www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/form-program-teams/

HWPP Design Team Start-up Pages

Provides detailed materials to create and facilitate the first three meetings of a new Design Team.

www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/form-design-team/

HWPP Intervention Design and Analysis Scorecard (IDEAS) Pages

Provides detailed materials and meeting guides for facilitating the IDEAS process to develop interventions. www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/generate-solutions/

HWPP Evaluate Your Program Page

www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/Evaluate-Your-Program/

- Process Evaluation Rating Sheet. Use this 1-page sheet to gauge perceptions about whether the program is functioning effectively.
- **Design Team Evaluation Survey.** Use this survey to assess DT satisfaction with the program, as well as organization support.
- Manager Interview Guide. Use this one-on-one survey with organizational leaders to gather their perspectives about the accomplishments of the Design Team and the overall successes and challenges of the program. The interviews will keep leaders engaged and supportive of the program.



HEALTHY WORKPLACE PARTICIPATORY PROGRM

Section II. Starting-up a Design Team



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WHAT YOU WILL FIND IN SECTION II OF THE FACILITATOR MANUAL

Meeting guides for three Design Team Start-up sessions:

- Start-up Session 1: Welcome to the Healthy Workplace Participatory Program
 - Your role as a Design Team member
 - Creating team agreements for participation and communication
 - Program goals and expectations setting the course
- Start-up Session 2: Identifying Workplace Safety, Health, and Well-being Issues
 - Focus group activity
 - · Ideal Workplace activity
- Start-up Session 3: Prioritizing and Selecting Safety, Health and Well-being Issues
 - Voting and rank ordering topics for intervention planning
 - Introduction to the "IDEAS" Tool (Intervention, Design, and Analysis Scorecard)

Each meeting guide contains the following materials:



Facilitator Preparation



Facilitator Agenda (annotated with group process instructions)



Design Team Agenda and Meeting Handouts

See Section I for a detailed description of how to use the meeting materials.

Visit the Design Team Start-up page to access team recruitment tools and the materials in this guide: https://www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/form-design-team/

Facilitation skills demonstration videos: Links to these videos are in the meeting plans. These videos are specifically tailored to the early stages of Design Team formation. https://www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/training-support/facilitation-skills-training-videos.aspx



Section II. Starting-up a Design Team

WHAT IS A DESIGN TEAM?

The Design Team consists of non-managerial, front-line employees, and are vitally important to the success of the program. Design Team members can identify health and safety problems employees experience on a day-to-day basis and generate ideas for potential solutions to these problems. Ideally, 6-10 members make up a Design Team.

Design Team members are individuals who are:

- Non-managerial employees
- Interested in health, safety, and well-being
- Able to work successfully in a positive team environment
- Able to represent their peers

Members of the Design Team should be able to commit to regular participation in meetings, plus occasional tasks outside of meetings. Supervisors play an important role in supporting DT member attendance. In a unionized organization, a Design Team could be formed within the union.

Throughout the program, the DT:

- Meets with the facilitator and selects workplace health and safety issues for interventions
- Designs interventions to address issues appropriate to their work environment
- Develops a business case for interventions to present to the Steering Committee
- Communicates with management and the workforce about health and safety concerns

After implementing a change, the DT:

- Helps promote and evaluate all interventions to protect long term sustainability
- Helps refine interventions as needed

Every Design Team is unique. You may be working with an existing committee within your organization to serve as a Design Team, or you may be working with a brand-new team. Design team members will come with different levels of skills and experience.

No matter the scenario, training is essential for educating and motivating team members to do their best work. The materials in this section will help you do that.



HEALTHY WORKPLACE PARTICIPATORY PROGRAM SECTION II.

START-UP SESSION 1

Welcome to the HWPP





Welcome to the HWPP



Facilitator Preparation

To do:

	Watch: Videos 1-4 of the Facilitation Skills Training Video Series https://www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/training-support/facilitation-skills-training-videos.aspx
	Preview: "What is Total Worker Health?" University of Iowa Total Worker Health Essentials video series (Decide whether to show the video to the Design Team during the TWH activity.) https://hwc.public-health.uiowa.edu/for-the-workplace/what-is-total-worker-health/
	Read about the Role of the Facilitator in Section I of the HWPP Facilitator Manual
	Optional: Read about "Ground Rules" in the University of Kansas Community Toolbox, Chapter 16, Section 2 (Developing Facilitation Skills) https://www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/Training-Support.aspx
	Review: Facilitator Preparation, Facilitator Agenda, and Design Team handouts
	Prepare photocopies Design Team handouts
	Prepare a draft DT communication plan to discuss with DT during Activity 4
	Send the DT a friendly reminder of the meeting date and time at least 2-3 days before the upcoming meeting
To bring	g:
	Table tents or name tags
	Flip chart paper and markers
	Handouts: Design Team handouts

To know:

Ground Rules are guidelines that the Design Team follows so that all members can participate in the meeting. They set the stage for effective communication and define how the team will operate together.

Team members often feel more invested in following ground rules when the team comes up with the ground rules themselves. If you find that the DT is having difficulty coming up with ground rules, you can suggest some of the following, more common ground rules to get the team talking:

- Listen and learn from each other
- · One person speaks at a time
- Be on time

Don't assume that some common ground rules will work for all DTs (especially if you are a facilitator from outside of the organization). For example, health care organizations may require that the ground rules account for late arrivals due to medical emergencies.

Total Worker Health (TWH) is a holistic approach to worker safety, health, and well-being. It acknowledges risk factors related to work that contribute to health problems previously considered unrelated to work. TWH programs focus on making working conditions conducive to health, which can lead to health benefits on and off the job.

See the Total Worker Health handout at the end of this facilitator preparation

Healthy Workplace Participatory Program (HWPP) is a program designed to help employers implement an integrated, Total Worker Health program. Because it's a Total Worker Health program, it focuses on making the working environment supportive of employee health, safety, and wellbeing.

It's "participatory" because it uses a grassroots approach. Front line employees are in charge of identifying concerns and recommending solutions based on their knowledge of the workplace. The program provides a process and a structure for presenting those solutions in a way that appeals to business leaders.

The program was developed by occupational health psychologists, ergonomists and health promotion researchers at the University of Connecticut and the University of Massachusetts Lowell as part of the activities of the Center for the Promotion of Health in the New England Workplace, a Total Worker Health Center for Excellence.

The program is research-based and has been tested in a variety of occupational settings. You can find journal articles detailing the program development and materials on the HWPP website www.uml.edu/cphnewtoolkit.

Roles of the key participants in the Healthy Workplace Participatory Program

The two-committee structure enables employees from all levels of the organization to be involved in the health, safety, and well-being improvement process. A

participatory TWH approach leads to greater employee engagement and leverages employee knowledge and experience.

Read about the roles of Design Team, Steering Committee and Facilitator in Section I of the Facilitator Manual.



Fig 1: The HWPP two-committee structure

Post-meeting to do:

- 1. Type up the team agreements discussed during the meeting and send out to DT members.
- 2. Take steps to establish the communication systems discussed during the meeting.

What is a Total Worker Health program?

A Total Worker Health program is a new way to promote health on and off the job because it takes a comprehensive, holistic approach to worker safety, health, and well-being. It acknowledges ways that work conditions and work organization (who does the work, how and when) can contribute to health problems previously considered separate from the workplace.

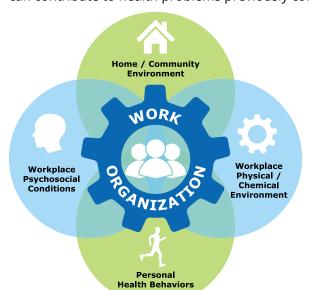


Figure 2 illustrates the overlapping influences of work, community and personal factors on health. A key concept is that work organization can influence each of these areas.

This is why Total Worker Health programs focus on making <u>working conditions</u> conducive to health, which can lead to health benefits on and off the job.

Fig 2. Total Worker Health model of worker well-being.

How is a Total Worker Health program different from what we have now?

Traditional workplace programs for safety and well-being usually are managed separately and do not recognize the interplay between health conditions, behavior, and the work environment.

Traditional Workplace Safety Program:

Aims to reduce exposures to hazards that contribute to work related injury and illness

Traditional Workplace Wellness Program:

Aims to improve personal health behavior, such as exercise, diet, smoking, overweight, etc. that contribute to poor health and chronic diseases.

Examples of an Integrated, Total Worker Health (TWH) Program Approach:

Example: Respiratory illnesses from poor workplace air quality can be more serious for workers who are smokers.

A TWH program deals with air quality AND smoking cessation.

Example: Job stress increases the risk factors for heart disease such as high blood pressure and smoking and low physical activity. Job stress also contributes to anxiety/depression.

A TWH program reduces job stressors AND exercise, diet, stress management.

Example: Physically demanding work can lead to feeling too fatigued to exercise after work or to prepare healthy meals.

 A TWH program addresses equipment to reduce bodily forces AND work schedules that allow for rest and recovery.



Welcome to the HWPP



Facilitator Agenda

Meeting Intent:

To launch the Design Team as a cohesive working group.

Desired outcomes:

- 1. DT members understand the concept and purpose of a Healthy Workplace Participatory Program (HWPP)
- 2. DT members are clear about the roles and responsibilities of:
 - The Design Team
 - The Steering Committee
 - The Facilitator

and how the different groups will communicate with each other

- 3. DT members create an agreement for how we want to operate as a team in terms of participation and attendance
- 4. DT members create an agreement for how we want to communicate with each other
- 5. DT members understand the general sequence and timeline of the HWPP program
- 6. DT members commit to completing the preparation for the next meeting



When	What	How
0:00 (5 min)	Arrival	Show up, sign in, find a seat, settle in
0:05 (5 min)	Check-in	 Facilitator welcomes the group Welcome the group warmly, introduce yourself if needed Suggested talking points: Thank you all for committing to this Design Team. Each of you is here based on the knowledge and skills you will bring to the group. This team has been created to help improve safety, health and well-being of the staff who work here. The leadership of this organization is ready to listen to your ideas for making this place a safer, healthier place to work. We are going to be spending a lot of time talking and planning. The success of this group will depend on everyone participating. We need to hear your voice. My job as facilitator is to help set the conditions for you to do that. Explain that the DT members will have an opportunity to introduce themselves next Explain what a round-robin is: we go around the room and each person gets to speak once. We will hold responses from the group until later to stay on time. The first time the group uses a round-robin process you may suggest that whoever is ready to speak may do so and then can invite the person seated next to them to check-in. Eventually you may move to a round-robin process that allows people to speak in any order they are ready. Round-robin: My name, my position, why am I here (< 30 sec, each)

When	What	How	
0:10 (5 min)	Review Meeting Plan	 Facilitator explains structure of Meeting Plan Suggested talking points: These meeting plans are specifically designed to create an environment in which everyone participates The meeting intent allows DT members to know why they are gathering The desired outcomes allow DT members to know what specifically will be accomplished by the end of a meeting The agenda allows DT members to know how the meeting will flow and what to expect at each moment of the meeting Review Intent and Desired Outcomes for the meeting Facilitator briefly reviews the agenda Review the when and what columns only Questions and comments after each step 	
0:15 (20 min)	1. Purpose of HWPP Handout: Well-being and Work	 Facilitator introduces this next section Review the purpose of this section of the meeting agenda and the process steps Pause to see if anyone has any questions Each DT member - write down your thoughts to the prompts in the handout about workplace well-being. (2 min) "What does well-being mean to you?" "How does this workplace support your well-being?" Are there aspects of well-being that could use more attention here? Allowing people to write before speaking allows each person a moment to be thoughtful and collect their thoughts. This technique is especially critical for those who are introverted or need extra time to prepare before speaking 	

When	What	How	
		3. Volunteers offer to share Encourage people to share, but be mindful of time	
		 Facilitator presents the concept of a Total Worker Health program You can read directly from the facilitator prep if you wish (Optional) View "What is Total Worker Health" video from University of Iowa Clarifying questions from team Pause to ask the team if they have any questions 	
0:35 (10 min)	2. Roles and Responsibilities Handout: Roles of the DT, SC and Facilitator	 Facilitator reviews roles of DT, SC, Facilitator See notes in manual Clarifying questions from team, if needed 	
0:45 (15 min)	3. Team Agreement: Participation/ Attendance	 Facilitator explains why we need a team agreement for participation and attendance Emphasize why establishing a participation/attendance agreement is critical. See Video for more details Each person answers the following prompts: What do I expect from myself in terms of participation & attendance? What do I expect from the team in terms of participation & attendance? Write down what each person says. Initially, make sure each person has space to speak. If anyone is shy to speak, feel free to skip them and invite them after everyone else has had a turn. Encourage dialogue once everyone has had a turn. Direct the conversation to address anything that is missing or resolve anything that is contradictory. Continue the conversation until you feel the group is sufficiently "on the same page." Your agreement should contain language that covers the following topics: What behaviors and attitudes are expected on this team, and which are NOT acceptable What preparation they plan to do What each team member pledges to do if they miss a meeting or are delayed 	

When	What	How	
1:00 (15 min)	4. Team Agreement: Communication	1. Facilitator explains why we need a team agreement for communication Emphasize why a communication agreement is important. 2. Facilitator guides team to align on the following: a. Meeting notices how and when b. Meeting location c. Meeting frequency d. Accessing team meeting notes and documents	
1:15 (10 min)	5. HWPP Sequence Handout: Sequence of HWPP Activities	4. Where will all the DT meeting documents reside and how	

When	What	How
1:25 (3 min)	6. Next Steps	 Facilitator reviews preparation for next meeting Facilitator asks each person to "opt-in" to preparation "Opt-in" - to have each person confirm their agreement to a decision or action. Go around the table and ask each person whether they agree to complete the preparation for next time. Having each member say this out loud makes it more likely that they will honor the task Generate/review other next steps, as needed
1:28 (2 min)	Check-out	Round-robin: One word to describe how you are leaving this meeting Don't skip this step. A check-out is essential for the participants to feel closure/completion to any meeting
1:30	Adjourn	

Welcome to the HWPP



Design Team Handouts

Handouts:

- · Design Team Agenda
- Well-being and Work
- · Roles of the Design Team (DT), Steering Committee (SC), and Facilitator
- Sequence of the HWPP Activites
- To Do



Design Team Agenda

Meeting Intent:

Launch the Design Team as a cohesive working group.

Desired Outcomes:

- 1. Understand the goals and activities of the Healthy Workplace Participatory Program (HWPP)
- 2. Be clear about the roles of the Design Team, Steering Committee, and Facilitator
- 3. Create agreements for participation and communication

When	What	Discussion Questions
0:00 (5 min)	Check-in	My name, my position, why I am here
0:10 (5 min)	Review the meeting plan	
0:15 (20 min)	 Purpose of HWPP Handout: Well-being and Work 	How do we think about well-being at work? What is this program all about?
0:35 (10 min)	2. Roles and Responsibilities Handout: Roles of the Design Team, Steering Committee and Facilitator	What are the roles of program participants? How will the two committees interact?
0:45 (15 min)	3. Team Agreement: Participation/Attendance	What do I expect from the team in terms of participation & attendance?
1:00 (15 min)	4. Team Agreement: Communication	How can we access materials and communicate with each other between meetings?
1:15 (10 min)	5. HWPP Sequence Handout: Sequence of HWPP Activities	What will we do as a team in the next few meetings?
1:25 (3 min)	6. Next steps	
1:28 (2 min)	Check-out	One word to describe how you are leaving this meeting

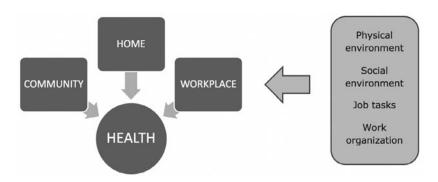


Well-being and Work

1. What does well-being mean to you?

2. How does this workplace support your well-being?

3. Are there aspects of well-being that could use more attention here?





Roles of the Design Team (DT), Steering Committee (SC), and Facilitator



Design Team:

- "Front line" employees who produce the work of the organization
- Are knowledgeable about the safety and well-being problems that employees experience on a day-to-day basis
- Develops and proposes ideas for solutions that improve the work process and environment to be more supportive of employee safety, health and well-being.
- Helps with supporting the implementation of new solutions



Steering Committee:

- Administrators, managers, and supervisors
- Have authority to make policy and budget decisions
- Considers and selects interventions (solutions) to support employee safety, health and well-being
- Coordinates resources to implement and evaluate interventions



The Facilitator:

- Neutral person who is trusted and can relate well to staff at all levels of the organization
- Coordinates Design Team activities; assures communications between DT and SC

The HWPP two-committee structure:

- Engages employees at all levels
- Leverages the knowledge of front line employees about work and well-being





Sequence of the HWPP Activities

HEALTHY WORKPLACE PARTICIPATORY PROGRAM

THE OVERALL PROGRAM PROCESS

GETTING READY FOR PROGRAM START-UP

- -Organizational readiness assessment
- -Gain management support
- -Identify and train Steering Committee
- -Identify and train Facilitator(s)
- -Conduct a needs assessment
- -Nominate Design Team members



THE "IDEAS" PROCESS INTERVENTION DESIGN AND ANALYSIS SCORECARD STEP 7 Monitor Identify & Evaluate Root Causes Intervention 9 STEP, Plan Develop & Implement Objectives Interventions **IDEAS** & Activities Rate/Select Set Selection Intervention Criteria **Alternatives** Apply Selection Criteria STEP 4

What is the IDEAS process?

IDEAS is a 7-step process to develop effective, comprehensive interventions to specific safety or health concerns.

There are roles for Design Team and Steering Committee throughout the process.

A Facilitator guides the process.

The IDEAS tool is used to focus on one safety/well-being issue at a time.



To do for the next meeting:

L	vill
	Make note of things about the workplace that may influence my health and health-related behaviors
	Include things that both support and detract from health and behaviors
	 Make note of things at home that may influence how I perform at work Include things that both support and detract from how I perform at work
	Talk to my coworkers about what they think are the biggest health and safety problems for the organization
V	otes:



HEALTHY WORKPLACE PARTICIPATORY PROGRAM SECTION II.

START-UP SESSION 2

Identifying Workplace Safety, Health & Well-being Issues





Identifying Workplace Safety, Health & Well-being Issues



Facilitator Preparation

To do:

To know:

Activity 1: Create Ground Rules

- **Purpose:** to set the rules for how the Design Team will behave during meetings to encourage an atmosphere of trust and cohesion. Spelling out the expectations (e.g. respectful communication) gets the group off to a good start and provides a way to correct problems that may arise in the future.
- **Examples of ground rules** are one person speaks at a time, cell phones off, no mocking or attacking someone's idea, etc.
- Introduce the activity: "Ground rules can help our meetings run smoothly and help people feel comfortable participating. Let's take a few minutes to establish the rules of how we want our Design Team to function."
- Wrap up the activity: "As the facilitator I will do my best to help you stick with these ground rules. Do I have your permission to tell the group when I see us straying from these rules? If you give me permission, then we can have the best chance for good participation and impact."

Activity 2: Health, safety, and well-being in our organization

(This activity is the centerpiece of the session)

- **Purpose:** DT members to express what they see as the main concerns related to health safety and wellbeing in the organization; they will also identify the primary features of the workplace that support or work against well-being.
- **Introduce the activity:** "For the next 30 minutes we're going to discuss your perspectives on health, safety, and well-being in this organization. We're going to explore this topic by looking at it in three different ways."

Refers to flip chart with 3 question prompts:

- What promotes health, safety and well-being in this workplace?
- What might make health, safety and well-being challenging in this workplace?
- What have been common safety and health issues in the past here?

"I'd like you to take 3-5 minutes to think about these questions. You can use the handout for activity 3 to write down your thoughts for the discussion."

Activity 3: Bringing all together

- If the SC has provided data (see Tips section below) or other supporting information related to employee injuries and illness, provide that information to the Design Team and ask how they prefer to understand and absorb the material.
 - DT may ask for meeting time to discuss and digest the information, or they may wish to review information individually outside of meeting time.
- Ask team members, "Considering all the topics we discussed, do we have sufficient

- understanding about how our co-workers think about these issues? How might we go about determining this?"
- Tell the DT that in the next meeting, they will review the topics they discussed and what the data say, then they will prioritize the issues they want to work on. Before the next meeting, they can talk to their peers about the topics and they can think about which topics are most important, and which topics may be good to start with as a new Design Team.

Activity 4: The ideal workplace

- **Purpose:** helps the DT think creatively to envision an "ideal state" they would like to see for the organization relative to health, safety and well-being.
- This exercise can help create a positive vision and is meant to be motivational.
- Thinking of what might be achievable in a year or two may give clues for prioritizing issues in the next meeting.
- Encourage creative thinking and remind the team to keep an open mind.
- The agenda has only 15 minutes assigned to this topic. You could lengthen this discussion comfortably by scheduling 2 hours for this meeting instead of 90 minutes.

Facilitation skills and concepts

- Individual and collective participation are both important
 - Commit to ensuring that all voices are heard; notice when certain members are quiet.
 - If some dominate and others are quiet, it might help to go around the room and give all a turn. This is called a round robin technique.
- The team is only as good as the wisdom shared by individual members
 - Ideas need to be shared and discussed in order to be useful; ideas that are not shared cannot contribute anything positive to the team.
 - Collective wisdom can only come if we listen to each other AND offer our own thoughts AND are willing to learn from each other.
- People collect and process information differently
 - Some need to write things down, others do not.
 - DT members who like to reflect and write their thoughts can use the DT handouts for this purpose to assemble their ideas before sharing them. Try to give a minute or two for quiet reflection before beginning a brainstorm. This allows the "thinker/reflectors" to gather their thoughts before they listen to what others have to say.
- **Encourage DT members to ask clarifying questions** when they are confused or don't agree with an idea expressed by another DT member.
 - Clarifying questions help the group members learn from each other, which is important for understanding each other (e.g. "Can you help me understand what you meant when you said X").
 - DT members can feel discouraged if their ideas are challenged with questions such as, "How can you say that?" Asking for clarification and more information is a much more positive, respectful way to responding to ideas that are confusing or strange. It also can help a DT member more fully develop their thoughts or ideas.
- Be prepared to help the Design Team keep the discussion moving forward when they begin to get bogged down in complexity or indecision. You may need to suggest resolving a question outside of the meeting, or setting it aside for future discussion.

Tips for working with a Steering Committee to gather relevant data for the Design Team

- Find out from the Steering Committee (SC) what types of data, if any, are available and relevant for the Design Team on the topic of health, safety, and well-being.
 - **Examples:** summary reports from workers' compensation or health claims, employee job satisfaction surveys, employee health surveys.
- **If data are available**, ask the SC for help with assembling the data and calling attention to the issues/concerns they think are important for the Design Team to address.
 - Engaging the SC in this way reinforces awareness of safety and well-being, and encourages communication about these topics with the Design Team.
 - Providing Design Team members with data provides a learning opportunity as they consider topics to prioritize for interventions during Start-up Session #3.
 - Communication and collaboration on safety and well-being at all levels of the organization is one of the desired outcomes of the HWPP.
- If no data seem to be available, it will become important for Steering Committee to plan some type of data gathering activity before proceeding with Start-up Session #3. Data gathering can be formal (e.g. surveys or focus groups) or informal (e.g. conversations, meeting discussions).
 - If the organization is relatively small, Design Team members can help gather input from co-workers between Start-up Sessions 2 and 3. A single focus group may work well if the target population is fairly defined.
 - If the organization is medium size or larger, it will be more important to use a formal data gathering method to systematically collect views and perspectives from different parts of the organization. Several focus groups can be used.

HWPP Tools for workforce assessment

- Visit the Identify Safety and Health Priorities page for measurement instruments: https://www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/get-ready/identify-priorities/
 - Health and Workplace Focus Group tool
 - All-Employee Work and Health Survey
- Visit the Training and Support page: https://www.uml.edu/Research/
 CPH-NEW/Healthy-Work-Participatory-Program/training-support/
 - View a 1-hour pre-recorded training webinar on Identifying Safety and Health Priorities. The video reviews the purpose and approaches to data collection, as well as provides an introduction to data collection tools available on the HWPP website.



Identifying Workplace Safety, Health & Well-being Issues



Facilitator Agenda

Meeting Intent:

Create a shared understanding of how specific aspects of the working environment can affect health, safety, and well-being (HS&W) in this organization.

Desired outcomes:

- 1. Final agreement on the Design Team Ground Rules (from Session 1)
- 2. Increased understanding about HS&W in our organization:
 - a. What promotes HS&W in our workplace
 - b. What challenges HS&W in our workplace
 - c. Past HS&W concerns of employees
- Increased awareness of what available organizational data says about employee health, safety and well-being concerns (Bringing it all together)
- 4. A shared vision of an ideal workplace that supports health, safety, and well-being



Facilitator Agenda

When	What	How	
0:00 (5 min)	Arrival	Show up, sign in, find a seat, settle in	
0:05 (4 min)	Check-in	Round-robin: What am I looking forward to in this meeting	
0:9 (1 min)	Approve meeting minutes	Facilitator asks Design Team members for any changes and then asks for a vote to approve meeting minutes	
		1. Review Intent and Desired Outcomes for the meeting	
		Ask for a volunteer to read out loud the Intent and Desired Outcomes for this meeting	
0:10	Review	2. Facilitator briefly reviews the agenda	
(5 min)	Meeting Plan	Review only the when & what columns	
		3. Facilitator ask for a volunteer note-taker	
		Questions and comments after each step	
		Pause briefly to see if anyone has a question or comment	
	1. Finalize the Ground Rules	1. Facilitator presents Ground Rules created in Session 1	
		Present the cleaned-up version of the ground rules	
		2. Facilitator asks if anything is missing or needs upgrading	
		Facilitator ask each team member if they are willing to uphold these ground rules	
		Pose the question: "Are you willing to support and uphold these roles?"	
0:15 (10 min)		Go around the group in a round robin to ask for each person's affirmation (or whatever they might need to say)	
		If you get someone who can't quite affirm - ask them what changes need to be made.	
		Continue asking for each person's affirmation	
		Explain that the facilitator's role is to remind the team of the ground rules if needed to help them keep on track.	

When	What	How	
		1. Facilitator introduces HS&W activity	
	2. Health, safety and well-being in our organization	Explain the purpose of this activity. Refer to the discussion questions on a flip chart.	
		2. Each person takes time to think and write down answers to the prompts	
0.25		Pay attention to whether they need an extra minute or two. Encourage them to write down their thoughts on the handout page	
0:25 (25 min)	Handout: Focus Group: Health, Safety and Well-being at Work	 What promotes health, safety and well-being in this workplace? What might make health, safety and well-being challenging in this workplace? What have been common safety and health issues in the past here?" 	
		3. Round-Robin: share your answers	
		Write down their responses notes on flip charts. Use "+1" if someone gives a similar response to what was already said	
		1. Facilitator introduces organizational HS&W data.	
		 Introduces the idea that data can be resource to help DT better understand priority concerns Describes supporting data (if any) provided by SC Ask DT whether and how they would like to review and better understand the data (e.g. in meeting vs outside of meeting, other) 	
		2. Q&A	
0:50 (15 min)	3. Bringing it all together	3. Dialogue: Do we have sufficient understanding about how our co-workers think about the issues we discussed today? How might we go about determining this?	
		 If no organization data exists, spend the entire 15 minutes on this process step 	

When	What	How
1:05 (20 min)	4. The Ideal Workplace Handout: The Ideal Workplace notes page	 Facilitator introduces this next exercise Introduce the prompt and process Prompt: What would the ideal workplace be like, in regards to health, safety, and well-being? How would it be different from now? Process: Round-robin to get everyone's thoughts out in the open; Dialogue so people understand each other's perspectives. Take 2 minutes to write down your thoughts to the following prompt: What would the ideal workplace be like in regards to health, safety, and well-being? How would it be different from now? Round-robin followed by dialogue If no-one begins to speak after the round robin - facilitator can hold silence for a brief moment You can break the silence by making any of the following statements: Does anyone have any additional thoughts? Does anyone have a question you'd like to ask someone? [Person's name], can you say more about _X_? Or anything else to get the conversation flowing Take notes on round-robin and dialogue responses on flip chart. When the dialogue begins to slow down or if you are starting to run out time, segue way to the next prompt Round robin: Where should we focus our attention to move toward an ideal workplace? Take notes on round-robin responses on flip chart.
1:25 (3 min)	5. Next Steps	 Facilitator reviews preparation for next meeting Facilitator describes goals for next meeting Clarifying questions, if needed
1:28 (2 min)	Check-out	Round-robin: One word to describe how you are leaving this meeting
1:30	Adjourn	



Identifying Workplace Safety,
Health & Well-being Issues



Design Team Handouts

Handouts:

- Design Team Agenda
- Focus Group: Health, Safety and Well-being and Work
- The Ideal Workplace
- · To Do



Design Team Agenda

Meeting Intent:

Create a shared understanding of how specific aspects of the working environment can affect health, safety, and well-being (HS&W) in this organization.

Desired Outcomes:

- 1. Final agreement on Ground Rules
- 2. Awareness of how HS&W issues are viewed by all team members.
- 3. Increased awareness of what available data tell us about HS&W
- 4. Shared vision of an ideal workplace supporting HS&W

When	What	Discussion Question
0:05 (9 min)	Arrival/Check-in	What am I looking forward to in this meeting?
0:09 (1 min)	Approve meeting minutes	
0:10 (5 min)	Review Meeting Plan	
0:15 (10 min)	1. Finalize the Ground Rules	Are there any changes needed? Are you willing to support and uphold these rules?
0:25 (25 min)	2. Health, safety and well-being in our organization Handout: Focus Group: Health, Safety and Well-being at Work	What promotes health, safety and well-being in this workplace? What might make health, safety and well-being challenging in this workplace? What have been common safety and health issues in the past here?
0:50 (15 min)	3. Bringing it all together	Do we understand how our co-workers think about the issues we discussed today? How might we find out?
1:05 (20 min)	4. The Ideal workplace Handout: The Ideal Workplace	What would the ideal workplace be like in regards to health, safety, and well-being? How would it be different from now? Where should we focus our attention to move toward an ideal workplace?
1:25 (3 min)	5. Next Steps	
1:28 (2 min)	Check-out	One word to describe how you are leaving this meeting?



Health, Safety and Well-being and Work **Focus Group:**

Past health, safety, and well-being concerns in my workplace	
What challenges health, safety, and well-being in this workplace?	
What promotes health, safety, and well-being in this workplace?	

The Ideal Workplace

Notes:

What would the ideal workplace be like regarding health, safety, and well-being?

How would it be different from now?



To do for the next meeting:

	I WIII
シ	Review the organizational information provided (if any) to better understand what employees view as the most pressing health, safety, and well-being concerns
	And/Or
3	Speak to at least three employees about what they believe to be the most pressing health, safety, and well-being concerns and record their thoughts below
	•••••••••••••••••••••••••••••••••••••••
	Notes:



HEALTHY WORKPLACE PARTICIPATORY PROGRAM SECTION II.

START-UP SESSION 3

Prioritize and Select Concerns for Intervention





Prioritize and Select Concerns for Intervention



Facilitator Preparation

To do) :
	 Watch: Video 8 of the Facilitation Skills Training Video Series https://www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/training-support/facilitation-skills-training-videos.aspx
	 Review: Facilitator Preparation, Facilitator Agenda, and DT Handouts Ensure that you understand the process of the group voting activity (explained below)
	Prepare (i.e. print, copy) DT handouts
	Send the DT a friendly reminder of the meeting date and time at least 2-3 days before the upcoming meeting ing:
	Blank flip chart paper and markers
	Flip charts from the prior meeting (what promotes/detracts from well-being at work)
	Multiple stacks of post-it notes
	"Dot" stickers (enough for 3 for each person); If you cannot obtain "dot" stickers, make sure you have multiple wide tip markers to use instead
	Design Team handouts

To know:

Activity 1:

Report back on peer input on Health, Safety and Well-being issues

- **Purpose:** to provide an opportunity for DT members to share and discuss any new topic areas (from discussions with co-workers or from data they reviewed) before they begin to prioritize and select their first issue for intervention planning.
- Having flip charts from the prior meeting may be useful to remind DT members of topics discussed. Add to this list based on new information and/or new inputs from co-workers.
- Giving DT members an opportunity to digest new information is important for learning how other people view the issues. This may be a first experience for some DT members to use data in decision-making.
- DT members may wish to hear from a subject expert to help them interpret data and/or to learn about a topic in depth. If the DT is enthusiastic and wants to learn more, consider planning time for an expert to attend a meeting for this purpose.
- This will not be the last opportunity for the DT to gather and review data. Tell DT members that they can request more information later about the specific issue area they'll be working on.

Activity 2:

Prioritizing Health, Safety and Well-being concerns

- **Purpose:** help the DT organize and narrow down the topics they may work on.
- Introduce activity: "In the next 20 minutes we're going to develop a list of issues you'd like to see this team prioritize for developing interventions. Each of you will suggest the top three issues you think we should address. Then we'll organize them into themes if some topics are related to each other."

Thematic/topic grouping

- **During the individual brainstorming of HS&W concerns themes will arise.** These can be grouped into similar topics. However, if the DT disagrees on groups, do not force concerns to fit into a broader group.
- This process allows DT members to observe how many people think a particular issue is important, or which smaller issues contribute to a larger issue.
- For time management purposes, it will be important to encourage DT members to keep the discussion at a high level and not go into great detail.

Activity 3.

Selecting the first Health, Safety or Well-being issue for intervention

- Introduce the activity: "We'll vote to decide which issue you want to focus on first to develop interventions. We'll do this in several rounds. In the first round Each DT member gets 3 votes. Cast your votes however you wish 1-3 votes per issue. We will then do a gradual process of elimination to get to the top issues."
- After the group votes once, eliminate the bottom of the field. If more votes are needed, continue to remove the bottom of the field with each successive round until you get to a list of three issues that the group designates are most important.

Dialogue to choose first issue to tackle (final vote and winnowing)

- To get the team to the point of choosing the first concern to address, you will facilitate the team in a second (and final) round of voting to decide which concern to address first.
- As an introduction to the vote you will want to make the following points to group
 - This is only the first concern and the team will be addressing others as it continues it work
 - The first concern should be one that the team believes can be tackled successfully.
 - By tackling an "easier" task first, it will help the DT master the intervention design process
 - This will also allow the DT to build their skills in working with the Steering Committee
- Allow each DT member ONE VOTE.
- If there isn't a clear choice, guide the group in a short dialogue to try to nudge the group towards unity.
- Use an "opt-in" question to confirm that all team members are willing to commit to moving forward.



START-UP SESSION 3

Prioritize and Select Concerns for Intervention



Facilitator Agenda

Meeting Intent:

The intent of this meeting is to decide which Health, Safety, and Well-being (HS&W) topics are most important for the Design Team to focus on. The topics will be prioritized for developing interventions one topic at a time.

Desired Outcomes:

- 1. A shared understanding of any new HS&W information since we last met
- 2. A list of high priority HS&W concerns
- 3. The first HS&W concern the DT will address using the IDEAS toolkit
- 4. Clear next steps



Facilitator Agenda

When	What	How
0:00 (4 min)	Arrival/ Check-in	 Show up, find a seat, settle in Round-robin: If you could be a bumper sticker, what would you be? (10 sec each) Or any other question you wish to help kick-off the meeting Should be a question that can be addressed with a short answer
0:04 (1 min)	Approve Meeting Minutes	Facilitator asks Design Team members for any changes and then asks for a vote to approve meeting minutes
0:05 (5 min)	Review Meeting Plan	 A volunteer reviews the intent and desired outcomes for the meeting Facilitator briefly reviews the agenda Questions and comments after each step
0:10 (10 min)	1. Report back - peer input on HS&W issues	 Facilitator reviews where we've been and where we are going Recap of DT tasks since last meeting, to: Review any data summary or survey reports (if available) Talk with co-workers to gain better understanding of these issues Round Robin: What did you do? Who did you talk to? What did you learn since our last meeting? (1 min each)
0:20 (15 min)	2. Prioritizing health, safety and well-being concerns Handout: Prioritizing health, safety and well-being concerns	 Facilitator introduces the purpose of the prioritizing exercise The team will organize and prioritize the topics that matter most to them. They will vote to select the first topic to address and will develop interventions for this topic. They will return to the list for future rounds of intervention planning

When	What	How
		 Each DT member writes down three or four HS&W concerns that are the most significant for the organization to address. One topic per sticky note (~5min) Significant can be: urgent, impactful, or "lowest hanging fruit". Write down one concern per sticky note Use less time if people seem ready to move on Each DT member post their notes Invite each person to read off their stickies and post them at the front of the room or where everyone can see it. Encourage the team to sort the stickies into groups or themes. Create theme headings as needed Note when one issue is linked with another issue Dialogue: Are there any key HS&W concerns missing from these groups? (5 min.)
0:35 (20 min)	3. Selecting the first HS&W concern	 Make any adjustments needed Facilitator introduces group voting activity We'll vote to decide which issue you want to focus on first to develop interventions We'll do this in several rounds The first round - Each DT member gets 3 votes Cast your votes however you wish - 1-3 votes per issue We will then do a gradual process of elimination to get to the top issues Each member votes Facilitator guides group to reduce the field Round 1: Suggest eliminating the bottom half Round 2 & 3 - keep reducing by half until you get to 3 remaining (or whatever makes sense) Dialogue: Which issue do we want to tackle first You may use the guiding prompt: What concern if resolved could be most doable and impactful for the team to tackle first Since we are a new team - we could choose something that could be an "easy win"
		 Try to bring group to consensus by emphasizing that this concern will the first of many

When	What	How
		5. Facilitator asks for final approval
		 Ask group to "opt-in" to this choice by raising their hands Can also ask: How do I rate my enthusiasm for starting with this issue. (5 = off the charts; 4 = very enthusiastic; 3 - good; 2 = okay; 1 = do not support this choice)
0:55 (3 min)	4. Clarity on next steps	 Facilitator reviews preparation for next meeting Generate/review other next steps as needed
0:58 (2 min)	Check-out	Round-robin: A few words to describe how I feel as I leave this meeting
1:00	Adjourn	

START-UP SESSION 3



Prioritize and Select Concerns for Intervention



Design Team Handouts

Handouts:

- · Design Team Agenda
- Prioritizing Issues: Health, Safety and Well-being and Work
- To Do and notes page



Design Team Agenda

Meeting Intent:

The intent of this meeting is to decide which topics are most important for the Design Team to focus on. The topics will be prioritized for developing interventions one topic at a time.

Desired Outcomes:

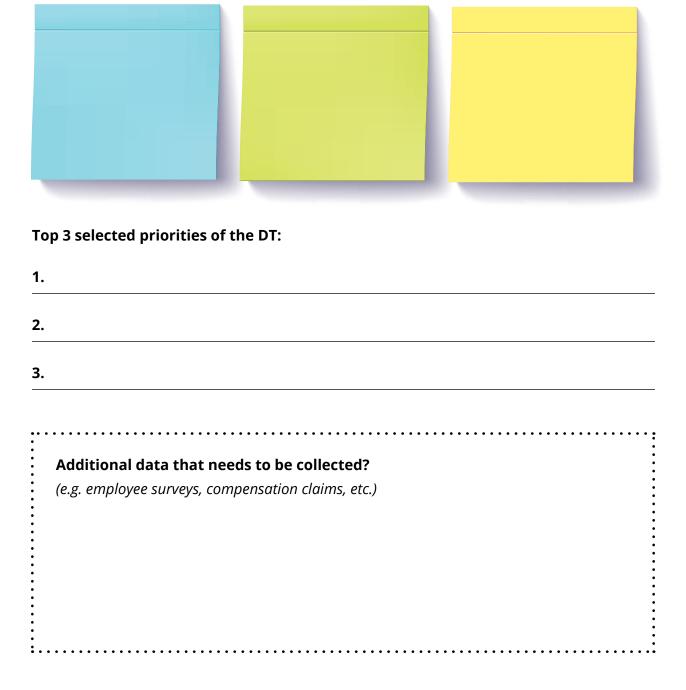
- 1. Everyone understands any new HS&W issues since last the meeting.
- 2. A list of high priority HS&W concerns for DT to address over time.
- 3. Decision on the first HS&W concern the DT will address.

When	What	Discussion Questions
0:00 (4 min)	Arrival/Check-in	If you were a bumper sticker, what would you say?
0:04 (1 min)	Approve meeting minutes	
0:05 (5 min)	Review meeting plan	
0:10 (10 min)	1. Report back – peer input on HS&W issues	Who did you talk to? What did you learn since our last meeting?
0:20 (15 min)	2. Prioritizing health, safety and well-being concerns <u>Handout</u>	What are the 3-4 most important issues the organization needs to address? Each member contributes ideas, then the team organizes the ideas and begins to prioritize
0:35 (20 min)	3. Selecting the first HS&W concern	Which concern do we want to tackle first? Members vote
0:55 (3 min)	4. Next steps	
0:58 (2 min)	5. Check-out	A few words to describe how I feel as I leave this meeting



Prioritizing Issues: Health, Safety and Well-being and Work

Write down the top 3-4 health & safety issues that you think are most important for the organization to address. Write ONE concern on each post-it note.





To do for the next meeting:

١١	WIII
	Gather any additional data that I agreed to collect that will enhance the Design Team's understanding of the prioritized health and safety concerns
	Identify which key managers/stakeholders could provide additional data on the HS&W concern that was selected
	Think about things that may be contributing to the prioritized health and safety concerns
••	
N	otes:



HEALTHY WORKPLACE PARTICIPATORY PROGRAM

Section III. Generate Solutions Using the IDEAS Tool



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WHAT YOU WILL FIND IN SECTION III OF THE FACILITATOR MANUAL

Overall guidance on managing the IDEAS process

- · Tracking DT and SC progress through the IDEAS 7 steps
- · When and how to incorporate the IDEAS worksheets
- · When and how to incorporate the IDEAS training videos

Facilitator and Design Team materials for IDEAS Steps 1 - 7

Each meeting contains the following materials:



Facilitator Preparation



Facilitator Agenda (annotated with group process instructions)



Design Team Agenda and Meeting Handouts

See Section I for a detailed description of how to use the meeting materials.

Visit the Generate Solutions Using the IDEAS Tool page to access Step-by-Step materials and training videos: https://www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/generate-solutions/

Read about case studies and the science behind the HWPP: https://www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/Benefit/



Section III. Generate Solutions Using the IDEAS Tool

INTRODUCTION

The Intervention, Design, and Analysis Scorecard (IDEAS) Tool is a structured process that engages employees at all levels in the design of workplace interventions. The IDEAS process empowers employees by providing a structure for meaningful input. This structure builds a culture of health in the organization and confidence to change unhealthy behaviors and conditions. The IDEAS process is applied to a single health, safety, or well-being issue at a time. It helps a team of employees uncover root causes to poor health and injuries so they can be addressed with complete and sustainable solutions. The goal is to design an intervention that addresses an issue as completely as possible using an integrated, TWH approach.

There are many advantages of grassroots engagement over "top-down" approaches. Some advantages include:

- The issues selected for interventions are more likely to be perceived as important by employees themselves, which can result in greater enthusiasm, participation and sustainability of interventions.
- Design Teams can identify a wider range of intervention possibilities. Front line employees are aware of the ways that work processes and the work environment can lead to stress, physical hazards, social difficulties, and can even influence protective health habits such as exercise, sleep, eating well, etc. These insights make it possible to design creative solutions that go beyond the immediate workplace, in keeping with the Total Worker Health® concept.
- Design Teams can do a better job of identifying potential barriers and facilitators to interventions.

Tracking DT and SC progress through the IDEAS 7 Steps

IDEAS Steps 1-5 focus on creating and selecting interventions. IDEAS Steps 6 and 7 focus on implementing and evaluating interventions. The Design Team and Steering Committee have specific roles throughout the process. See Figure 1 for details of the IDEAS process.

You can help the DT and SC track their progress by using the "IDEAS wheel" to visualize which IDEAS steps in the planning cycle have been completed for a specific issue area. This is especially useful if the DT is working on more than one issue area simultaneously. For example, one intervention may be in the process of being implemented (Step 6) while another intervention planning effort may be in the early planning stages (Step 2). This can quickly orient the DT or SC as to where intervention planning efforts stand, and what needs to be worked on next.

IDEAS STEPS 1-4

- DT takes the lead, with SC input
- Identify root causes behind health concerns, and design solutions that directly address root causes; present interventions to the SC

IDEAS STEPS 5-7

- SC takes the lead, with DT input
- Evaluate the DT's proposed interventions, decide which to fund, then support and oversee implementation and evaluation

Considerations when using an alternative committee structure

If your organization has chosen to implement an alternative committee structure the process may look a bit different. For example, when using a single-committee structure, be sure to make arrangements for gathering input from front-line employees. You can do this with focus groups with front-line employees during IDEAS Steps 1 and 2, and again during Step 4 when rating interventions. If senior level managers are not typically present on your committee, and you need approvals and resources to implement interventions, you will need to arrange a way to present proposals to them. Be sure to provide training and orientation as outlined in IDEAS Step 5. This will prepare leadership to be as receptive as possible to new ideas.

THE "IDEAS" PROCESS

INTERVENTION DESIGN AND ANALYSIS SCORECARD ROLES FOR STEERING COMMITTEE AND DESIGN TEAM

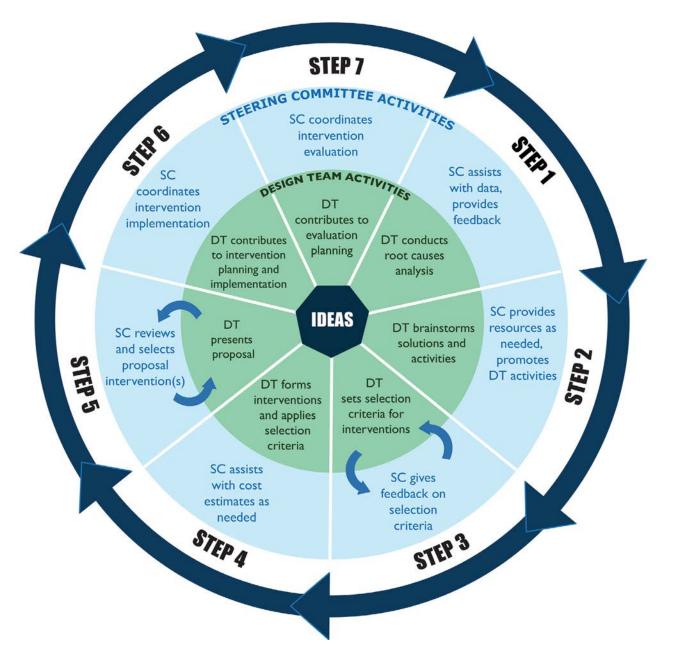


Fig 1: Roles of DT and SC during the IDEAS Process

When and how to incorporate IDEAS Worksheets

The purpose of the IDEAS worksheets is to capture the Design Team's work at each step of the IDEAS process. The worksheets serve as a ready reference at each DT meeting to help the team reflect on the prior meeting and build on their progress over time. The worksheets will also be used later as supporting material when the DT proposes interventions to the Steering Committee.

Visit the HWPP IDEAS web page to access the complete set of fillable worksheets: https://www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/generate-solutions/

The Facilitator completes the IDEAS worksheets immediately following DT meetings. Alternatively, you can complete the worksheet electronically during the DT meeting using a projector and the fillable forms available on the HWPP website. Another option is for DT members to take turns completing the worksheets; this option depends on practical considerations of DT members' job duties and work settings.

Share the completed worksheets with DT members between meetings if possible. If some team members do not have ready access to email, you'll need to consider alternative communication methods. Some alternative communication strategies could include:

- Email
- Use of a bulletin board
- Creating a DT-related mailbox (physical or electronic)

Distribute the completed worksheets at each meeting and ask the DT to review and approve the content to ensure that everyone is aligned on the material. This should take only a few minutes. You can add any new ideas that surfaced between meetings to the worksheet.

When and How to Incorporate IDEAS Training Videos

The HWPP website has brief training videos appropriate for you and for Design Team members at each step of the IDEAS process. You may wish to use these videos with Design Team members when they are new to the IDEAS process. Videos each run between 3-5 minutes. Consider sending a link to the video as a pre-meeting assignment to begin the learning process before the meeting. Alternatively, you can incorporate the video as a meeting activity. For best results, present each video "just in time" so Design Team members watch only the video for the technique they will use during a specific meeting.

Visit the IDEAS Tool pages for videos and key information and tools. https://www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/generate-solutions/

Facilitation Skills Training Video Series

The HWPP website provides training videos to help you learn and practice effective facilitation skills as you implement the program. These videos can bring your facilitation skills to the next level. You can apply the skills in these videos when working with any team.

Visit the HWPP Facilitation Skills training videos page to access all eight videos: https://www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/training-support/facilitation-skills-training-videos.aspx

- **Design Team Start-up videos 1-4** demonstrate specific techniques to use when forming a new team. These techniques can help members learn how to work together:
 - 1. Facilitate a participation agreement
 - 2. Facilitate a communication agreement
 - 3. Using the Check-in / Check-out process
 - 4. Review the meeting agenda
- Facilitation skills videos 5-8 demonstrate facilitation techniques that promote positive group dynamics for effective, high impact meetings.
 - 5. Keeping control of meeting discussions
 - 6. Managing disruptive behaviors
 - 7. Maximizing participation
 - 8. Art of asking questions



IDEAS STEP 1

Identify Root Causes of a Health, Safety, and Well-being Concern





IDEAS STEP 1

Identify Root Causes of a Health, Safety, and Well-being Concern



Facilitator Preparation

To do:

- 1. Watch training videos; decide whether to show them during the Design Team meeting
 - a. IDEAS Step 1 Training Video: https://www.uml.edu/Research/CPH-NEW/
 Healthy-Work-Participatory-Program/generate-solutions/identify-problems.aspx
 - **b. Fishbone Diagram Video:** light-hearted animated video about the fishbone diagram process for root causes analysis. https://www.youtube.com/watch?v=l0c6Gd26Fxw
- **2. Review:** Facilitator Preparation, Facilitator Agenda, and DT handouts. Carefully review the fishbone diagram process and example (see DT handouts).
- 3. Prepare: (i.e. print, copy) DT handouts
- **4. Be prepared to explain the rationale for conducting a Root Causes Analysis (RCA).** During the first meeting agenda item (Rationale for RCA), you will ask DT members to explain their understanding of the purpose of a RCA. You will need to address any gaps in their understanding.
- **5. Send the DT a friendly reminder of the meeting date and time** at least 24 hours (*preferably 2-3 days*) before the upcoming meeting

To bring:

Ш	Flip chart paper and markers, or laptop and projector if using an electronic
	fishbone diagram template. Download from: https://www.uml.edu/Research/CPH -
	NEW/Healthy-Work-Participatory-Program/generate-solutions/identify-problems.aspx
	IDEAS Step 1 DT handouts

To know:

This IDEAS step may require 2 meetings. Duration will vary depending on the complexity of the health and safety concern, the size of the group and the meeting duration.

Key Definitions

Health, Safety and Well-being Concern	Anything that places employees' physical and/ or mental wellbeing at risk.
Root Cause Analysis	A problem-solving process to identify all the underlying causes of a health or safety concern. There may be several sub-issues, each with their own contributing factors. The "fishbone diagram" activity used within Step 1 is an example of one technique for Root Cause Analysis.
Sub-issue	A smaller part or aspect of the main health & safety concern. For example, filling too many hot coffee orders at one time may be one sub-issue that explains workers' coffee burns.
Contributing Factors	Anything on the job or off the job that can lead to the sub-issue. For example, having too few coffee servers may be a contributing factor to filling too many hot coffee orders at one time.

Root Cause Analysis (RCA)

A RCA provides for a more thorough understanding of why the HS&W concern is occurring.

- If we do not fully understand the causes of the problem, we may not design solution that address the true cause of the problem.
- By doing a RCA before designing solutions to the HS&W concern, we better ensure that the work of the DT will have a real impact on the HS&W concern.

Encourage Total Worker Health® thinking during the RCA. Considering sub-issues and contributing factors from work and non-work areas will lead to a more thorough understanding of the HS&W concern.

Facilitating a Fishbone Diagram Activity (along with "The Five Whys")

- 1. Start with a health, safety & well-being (HS&W) concern (e.g. high rate of burns from coffee spills among coffee shop workers). This concern is placed at the "head" of the fish.
- 2. Draw several "spines" coming off the fish's head. (See example in DT handouts)

Defining the sub-issues - "The First Why" (Up to 5 min.)

- 3. Facilitator asks the group to brainstorm different categories of possible causes for the HS&W concern -- "why" this HS&W concern is happening.
 - a. First, give DT a minute or so to gather their thoughts individually (they can jot notes in the notebook or on individual post-it notes)
 - b. Then, invite the team to begin the group brainstorm. Members can share and organize post it notes on a large board for a more visual, active approach.

Tip: You may consider reminding the DT about the ground rules and how to use clarifying questions to understand each others' perspectives.

- 4. Facilitator writes down all responses of the brainstorm on a separate sheet of paper.
- **5.** After this initial brainstorm, facilitator helps Design Team sort the answers into a final list of Sub-Issues they will place on the fish (One sub-issue per spine, try to identify 3-5 sub-issue themes).

Defining the contributing factors - "2nd, 3rd, 4th and 5th Why" (Average 2-3 min. per sub-issue.)

- **6. For each Sub-Issue, the Facilitator asks "why" might this sub-issue occur.** Facilitator jots down DT responses as branches off of the sub-issue.
- 7. Facilitator keeps asking "why" to prompt the team to identify as many contributing factors as possible.
- 8. The process ends when DT feels as though no other possible contributing factors remain.
- 9. Facilitator moves to next sub-issue.

During the brainstorm portion of RCA process, DT members may produce ideas that jump around between sub-issues; be prepared to allow that to happen. Allowing the team to say what is on their mind in this stage of the process is a good way to build team engagement.

Post-meeting to do:

- Complete (i.e. fill out) the IDEAS Step 1 Worksheet with the ideas created during the fishbone activity
- **Worksheet alternative:** Use a fillable fishbone diagram template to create a "clean" version of the fishbone diagram using the information recorded during the meeting on flip charts.

Access the fillable fishbone template on the IDEAS Step 1 web page at: https://www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/generate-solutions/identify-problems.aspx



IDEAS STEP 1

Identify Root Causes of a Health, Safety, and Well-being Concern



Facilitator Agenda

Note: This IDEAS step may require two meetings.

Meeting Intent:

The intent of this meeting is to fully understand all the factors that contribute to the health, safety, and well-being concern that we selected as our focus area.

Desired Outcomes for IDEAS Step 1:

- 1. Understand the concept and rationale for doing a Root Causes Analysis (RCA).
- 2. Understand how to use a fishbone diagram for conducting a RCA.
- 3. Create a fishbone diagram to map the Sub-issues and Contributing Factors underlying the chosen health, safety, and wellbeing concern.





Facilitator Agenda

When	What	How	
0:00 (5 min)	Arrival	Show up, sign in, find a seat, settle in	
0:05 (4 min)	Check-in	Round-Robin: How am I arriving to this meeting?	
0:09 (1 min)	Approve Meeting Minutes	Facilitator asks Design Team members for any changes and then asks for a vote to approve meeting minutes	
0:10 (5 min)	Review Meeting Plan	 Review Intent and Desired Outcomes for the meeting Facilitator briefly reviews the agenda Facilitator ask for a volunteer note-taker Questions and comments after each step 	
0:15 (15 min)	1. Clarity on the concept and process of a RCA Handouts: Definitions Fishbone coffee spill example and worksheet IDEAS Step 1: Identify Root Causes (coffee spill example)	 Volunteers read aloud the definitions of: a. Health, Safety, and Well-being Concern b. Root Causes Analysis c. Sub Issue d. Contributing Factors e. Fishbone Diagram Ask for different volunteers to read aloud the definitions in the handout Using a common vocabulary will help us communicate more easily in the meetings Clarifying questions Check to see if anyone needs any further explanation of any of the terms Facilitator reviews the process for RCA (Follow along the example in the handout) Summarize and highlight the instructions Dialogue: Why a RCA is important for addressing HS&W concerns Pose the questions and pause (Counting to 10 silently to yourself helps create the space for someone to reply) Listen to the responses. Provide additional responses, if needed 	



When	What	How
		 5. Clarifying questions, if needed Check for questions 6. Facilitator illustrates the Fishbone process using coffee spill example Highlight the main process steps 7. Clarifying questions, as needed Check for questions as you walk through steps 4 & 5
0:30 (40 min)	2. Shared understanding of the root causes of the HS&W concern Handouts: Fishbone notes	 Facilitator sets stage for the fishbone activity (a RCA for our priority HS&W issue) Make it clear to the group that they will now try this process themselves Review the process steps before you engage in the process Each person: Write down your thoughts about different categories of causes of this HS&W concern? (~1-2 min.) Group Brainstorm: Share out your ideas to the group (~5 min.) Initially record their brainstorm as a list Work with the DT to determine which causal themes go on the "spines" of the fish Select one spine (cause) to start with Group Brainstorm: What could be contributing factors to that cause? (2-3 minutes for each spine (cause) Encourage your group to keep moving and not get stuck If they do - move to the next category. Don't encourage them to sit on any aspect of the analysis for too long Repeat for each spine (cause) When exercise is complete ask: Is there anything missing?
1:10 (5 min)	3. Next Steps	 Facilitator reviews preparation for next meeting Generate/review other next steps, as needed
1:15 (5 min)	Check-out	3. Round-robin: One word to describe how you are feeling as you leave this meeting
1:20	Adjourn	

IDEAS STEP 1

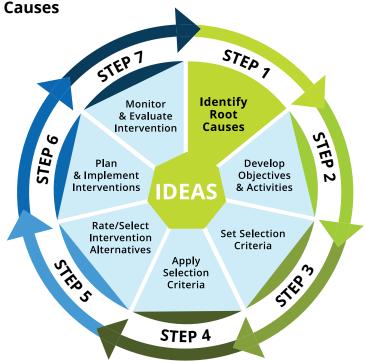




Design Team Handouts

Handouts:

- Design Team Agenda
- Definitions
- Fishbone "Coffee Spill" Example and Worksheet
- IDEAS Step 1: Identify Root Causes "Coffee Spill" Example
- Fishbone Notes
- IDEAS Step 1: Identify Root Causes
- · To Do



IDEAS Step 1: Identify Root Causes



Design Team Agenda

Meeting Intent:

The intent of this meeting is to fully understand all the factors that contribute to the health, safety, well-being concern that we selected as our focus area.

Desired Outcomes:

- 1. Understand the concept and rationale for doing a Root Causes Analysis (RCA).
- 2. Understand how to use a fishbone diagram for conducting a RCA.
- 3. Create a fishbone diagram to map the Sub-issues and Contributing Factors underlying the chosen health, safety, and well-being concern.

When	What	Discussion Questions
0:00 (9 min)	Arrival/Check-in	How am I arriving to this meeting?
0:9 (1 min)	Approve meeting minutes	
0:10 (5 min)	Review Meeting Plan	How do we think about well-being at work? What is this program all about?
0:15 (15 min)	1. Clarity on the concept and process of a RCA Handouts: Definitions, Fishbone coffee spill example and worksheet, IDEAS Step 1: Identify Root Causes (coffee spill example)	What are the roles of program participants? How will the two committees interact?
0:30 (40 min)	2. Shared understanding of the root causes of the HS&W concern Handouts: Fishbone notes	What is the main problem we want to address (head of the fish)? What are some of the reasons for the main problem we want to address? What could be contributing factors to that cause? - 2-3 minutes for each spine (cause) 1. Repeat for each spine (cause)
1:10 (5 min)	3. Next steps	
1:15 (5 min)	Check-out	One word to describe how you are feeling as you leave this meeting

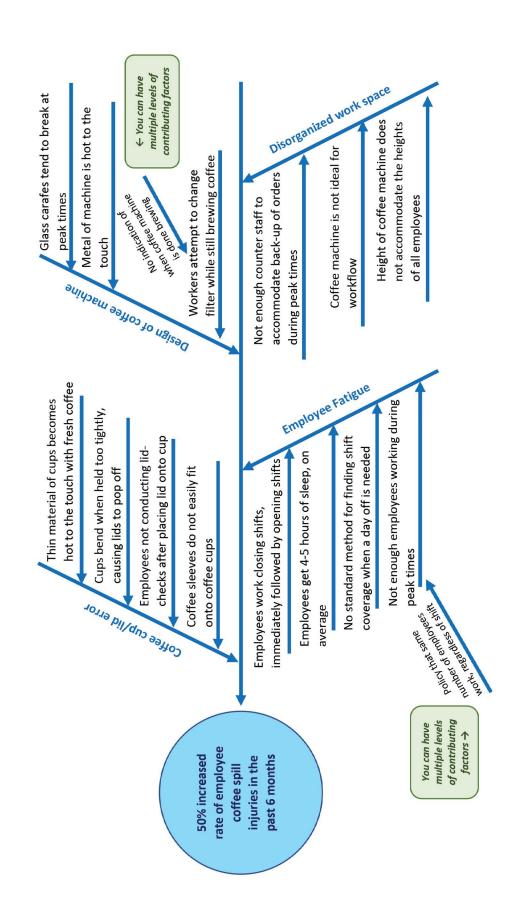


Key Definitions

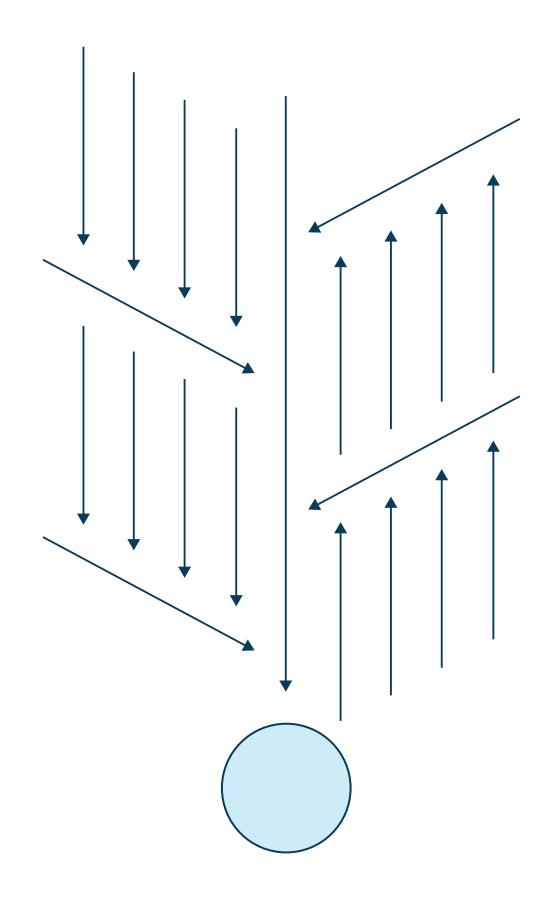
Health, Safety, and Well-being (HS&W) Concern	Anything that places employees' physical and/ or mental wellbeing at risk.
Root Causes Analysis (RCA)	A problem-solving process to identify all the underlying causes of a health or safety concern. There may be several sub-issues, each with their own contributing factors.
Sub-issue	A smaller part or aspect of the main health & safety concern. For example, filling too many hot coffee orders at one time may be one sub-issue that explains workers' coffee burns.
Contributing Factors	Anything on the job or off the job that can lead to the subissue. For example, having too few coffee servers may be a contributing factor to filling too many hot coffee orders at one time.
Fishbone Diagram	A way of structuring a RCA that is relatively easy to follow. Please see Activity 1 handout for an example of the fishbone process.



Fishbone Coffee Spill Example



Fishbone Notes



Step 1: Identify Root Causes -- Sub-Issues and Contributing Factors

General Health and Safety Concern:

More employee injuries due to spilled hot coffee over the past six months

Sub-Issue:	Disorganized work space	Contributing Factors:	Not enough counter space Coffee machine in an inconvenient location Coffee machines too close to food prep area
Sub-Issue:	Employee fatigue	Contributing Factors:	Late-night closers often have opening shift next day Average of 4-5 hours of sleep Finding shift coverage not standardized Understaffed during peak hours
Sub-Issue:	Design of coffee machine	Contributing Factors:	Coffee machine does not indicate when it is done brewing Glass carafes dribble when filling orders
Sub-Issue:	Coffee cup/lid error	Contributing Factors:	Cups are too thin Lid-checks not performed Coffee cup sleeves do not easily fit

Developed by the Center for the Promotion of Health in the New England Workplace with support from NIOSH grant #U19-OH008857

Step 1: Identify Root Causes -- Sub-Issues and Contributing Factors

General Health and Safety Concern:

Sub-Issue:	Contributing Factors:	nt #U19-OH008857
Sub-Issue:	Contributing Factors:	Promotion of Health in the New England Workplace with support from NIOSH grant #U19-OH008857
Sub-Issue:	Contributing Factors:	nter for the Promotion of Health in the New Eng
Sub-Issue:	Contributing Factors:	Developed by the Center for the



To do for the next meeting:

	I will
3	Write down any additional sub-issues and/or contributing factors that I think of that were not brought up during the session to be discussed next time.
3	Ask coworkers what they think may be contributing to the health and safety concern.
3	Begin to think about strategies for improving the identified health and safety concern, subissues, and/or contributing factors.
	•••••••••••••••••••••••••••••••••••••••
	Notes:



Develop Measurable Objective and Solution Activities





Develop Measurable Objective and Solution Activities



Facilitator Preparation

To do:

- Watch: training videos and access downloadable DT meeting materials. Decide whether to show the video during the DT meeting. IDEAS Step 2 Training Video - Develop Objective and Activities (6:30): https://www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/generate-solutions/develop-objective-activities.aspx
- 2. Review: Facilitator Preparation, Facilitator Agenda, and DT handouts
- **3. Prepare:** copies of the completed IDEAS Step 1 Worksheet and/or Fishbone diagram to bring to the meeting.
 - a. Optional look over the Resources for Intervention Planning document to become familiar with sources of information for the specific issue of concern https://www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/get-ready/identify-priorities/
- **4. Prepare:** (i.e. print, copy) DT handouts
- 5. Be prepared to explain how Step 1 relates to Step 2
- **6. Send the DT a friendly reminder of the meeting date and time** at least 2-3 days before the upcoming meeting

To bring:

Ш	Flip chart paper and markers, or laptop and projector if using IDEAS worksheets
	IDEAS Step 2 DT handouts
	Copies of the Completed Step 1 Worksheet and/or completed Fishbone diagram

To know:

This IDEAS step may require 2 meetings. Duration will vary depending on the complexity of the health and safety concern, the size of the group and the length/frequency of the DT meetings. The meeting plan is planned for 90 minutes. If your meeting time is only 60 minutes, you should plan for two full meetings on this step.

Key Definitions

Major Health, Safety, and Well-being Objective	An overall statement of the desired outcome related to the safety, health, and well-being concern identified in Step 1. For example: Decrease employee coffee burn by 50% in one year.
Solution	A more specific, targeted objective for what could be done to accomplish the major health and safety goal, making it easier to come up with ideas specific solution activities.
Activities	Specific actions that would bring the organization closer to achieving a solution.
Interventions	A set of solution activities designed to initiate workplace change to benefit employee health and safety. An intervention should ideally take an integrated, TWH approach and encompass a variety of activities, that together, improve organizational policies/practices as well as encourage employee health and/or safety behavior.

Activity 1: Clarify how IDEAS Step 1 relates to IDEAS Step 2

- a. Step 1 dealt with describing why the Health & Safety concern is occurring.
- b. Step 2 identifies ways to address the root causes of the Health & Safety concern identified during Step 1.
- c. This step should not be rushed because the quality of the intervention planning that follows will depend this step.

Activity 2: Create the Major Health, Safety, and Well-being Objective

- The Major Health and Safety Objective and solutions should be "SMART": Specific, Measurable, Achievable, Realistic, and Time-oriented (refer to example in handout).
- *Tip:* Help the DT avoid getting bogged down in "wordsmithing" when they are creating the major goal/objective. Encourage the team to focus first on the main objective and what they feel would be a realistic and meaningful magnitude of improvement. Keep them focused on the "big picture"; you can help with wording later.

Activity 3: Create a list of solutions with activities (see example in handout)

- This will be their first opportunity to brainstorm ways to make things better for themselves and their co-workers. Encourage the team to think creatively and avoid ruling out ideas at this point. There will be an opportunity to do that later.
- You can help organize the brainstorming discussion by asking the DT to focus on one subissue at a time.
- It may be helpful to ask the DT if every sub-issue is equally important, or if one or two areas are more important contributors to the HS&W concern. If the latter, then encourage the DT to focus on these areas first.
- When starting the discussion, help the DT understand the difference between "solutions" and "activities."
- Solutions are more specific, targeted objective for what could be done to accomplish the major health and safety goal. Solutions often, but not always, are developed by paraphrasing the sub-issues identified in Step 1.
- Activities are the things that will be done to achieve the solution.
- When summarizing the discussion, invite DT members to take a "birds eye view" of the notes. Ask them if they see any areas of overlap or duplication. This may be an opportunity to clarify differences or consolidate solutions.

Post-meeting to do:

Complete (i.e. fill out) IDEAS Step 2 Worksheet.





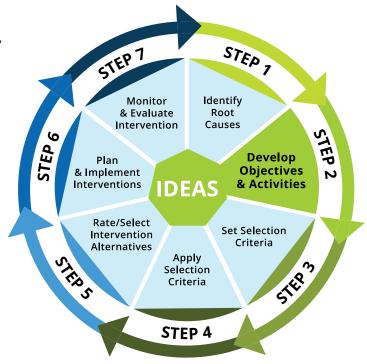
Facilitator Agenda

Meeting Intent:

To create a list of possible solutions to address the root causes of the major health, safety, and well-being concern that were discussed during the previous meeting.

Desired Outcomes for IDEAS Step 2:

- 1. Clarity about the relationship between IDEAS Steps 1 and 2.
- 2. A written Major Health, Safety, and Well-being Objective to work towards achieving through the IDEAS process.
- A list of solutions with activities that will address the Major Health, Safety, and Well-being Objective as completely as possible.





Facilitator Agenda

When	What	How
0:00 (6 min)	Arrival/ Check-in	 Show up, find a seat, settle in Round-robin: What animal do you feel like today?
0:06 (1 min)	Approve meeting minutes	Facilitator asks Design Team members for any changes and then asks for a vote to approve meeting minutes
0:07 (3 min)	Review Meeting Plan	 Review Intent and Desired Outcomes for the meeting Facilitator briefly reviews the agenda Facilitator ask for a volunteer note-taker Questions and comments after each step
0:10 (5 min)	1. Clarity on how IDEAS Step 1 relates to IDEAS Step 2 Handout: Definitions	 Facilitator asks for a volunteer to read the definitions on Activity 1 handout: a. Major Health & Safety Objective b. Solution c. Activity Facilitator explains the relationship between Steps 1 & 2 Clarifying questions, if needed
0:15 (15 min)	2. Create a Major Health and Safety Objective Handout: Objective Statement	 Facilitator introduces how to turn a H&S Concern from Step 1 into a Major H&S Objective in Step 2 (Follow along on Activity 2 handout) Dialogue: What is our Major Health & Safety Objective? Volunteer records ideas on flip chart Help the DT from getting too much in the weeds at first Keep them focused on the "big picture" when they are creating the major goal/objective and what they feel would be a realistic and meaningful magnitude of improvement Tell them you can help with wordsmithing later



When	What	How
		Check to make sure the objective and concern match, if not, redirect their attention to address the concern When the DT agrees on the overall objective, help them develop clear "SMART": Specific, Measurable, Achievable, Realistic, and
		Time-oriented language (refer to example)
		3. DT agrees on Major Health & Safety Concern after final edits
	3. Create a list	Facilitator introduces concept of creating solutions with possible activities (follow along on Activity 3 handout)
	of solutions with activities	Remind them that solutions often come from paraphrasing the sub-issues identified in Step 1, but this is not always the case
0:30 (45 min)	Handouts: Step 2: Develop	Remind them that solutions should accomplish some aspect of the Major Health and Safety Objectives
	Measurable Objectives and Solution	Remind them that activities are the things that will be done to achieve the solution.
	activities example worksheet	2. Brainstorm: What are some solutions and activities that can help us achieve the Major Health and Safety Objective?
	Completed IDEAS Step 1 fishbone	 What are the most important spines of the fishbone to address in the interventions we create? (Tip: Refer to IDEAS Step 1 materials for key sub-issues) Volunteer records ideas on flip chart
	diagram or Step 1	4. Encourage the group to not filter too much
	worksheet (Identify Root Causes)	5. Encourage the generation of ideas- no idea is a bad idea6. Help the group differentiate between solutions and activities7. You might need multiple sheets of flip chart paper
		8. Clarifying questions, if needed
1:15 (10 min)	Next Steps	Facilitator reviews preparation for next meeting Complete (i.e. fill) out IDEAS Step 2 Worksheet
(10 111111)	·	2. Generate/review other next steps, as needed
1:25 (5 min)	Check-out	Round-robin: <i>Is there anything on your mind that you did not have a chance to share?</i>
1:30	Adjourn	



Develop Measurable Objective and Solution Activities



Design Team Handouts

Handouts:

- Design Team Agenda
- Definitions
- IDEAS Step 2: Develop Measurable Objective and Solution Activities Sample
- IDEAS Step 2: Develop Measurable Objective and Solution Activities Worksheet
- · To Do



IDEAS Step 2: Develop Measurable Objectives and Solution Activities



Design Team Agenda

Meeting Intent:

To create a list of possible solutions to address the root causes of the Major Health, Safety, and Well-being objectives that were discussed during the previous meeting.

Desired Outcomes:

- 1. Clarity about the relationship between IDEAS Steps 1 & 2.
- 2. A written Major Health and Safety Objective to work towards achieving through the IDEAS process.
- 3. A list of solutions with activities that will address the Major Health and Safety objective as completely as possible.

When	What	Discussion Questions
0:00 (6 min)	Arrival / Check-in	What animal do you feel like today?
0:06 (1 min)	Approve meeting minutes	
0:07 (3 min)	Review Meeting Plan	
0:10 (5 min)	 Clarity on how IDEAS Step 1 relates to IDEAS Step 2 <u>Handouts:</u> Definitions 	
0:15 (15 min)	 Create a Major Health, Safety, and Well-being Objective Handouts: Objective Statement 	How will we describe our Major Health & Safety Objective?
0:30 (45 min)	3. Create a list of solutions with activities Handouts: Step 2: Develop Measurable Objectives and Solution activities example worksheet, Completed IDEAS Step 1 fishbone diagram or Step 1 worksheet (Identify Root Causes)	
1:15 (10 min)	Next Steps	
1:25 (5 min)	Check-out	Is there anything on your mind that you did not have a chance to share?



Definitions

Major Health, Safety, & Well-being Objective: An overall statement of the desired outcome related to the safety, health, and well-being concern identified in Step 1.

Solution: A more specific, targeted objective for what could be done to accomplish the major health and safety objective, making it easier to come up with ideas for a set of activities; solutions should also be SMART

Activities: Specific actions that would bring the organization closer to achieving a solution.

Developing an Objective Statement

HEALTH & SAFETY CONCERN

High rate of employee burns from hot coffee spills over the past six months



MAJOR HEALTH & SAFETY OBJECTIVE

Reduce the rate of reported employee burns by 50% one year after solutions are implemented

IDEAS Step 2 Notes (Optional):

Feel free to record any of your individual thoughts/the thoughts of the group below. Refer to the example as needed.

Step 2: Develop Measurable Objective and Solution Activities

Major Health and Safety Objective:

	Reduce the rate of employee inju	Reduce the rate of employee injuries as a result of hot coffee spills	10
Solution 1:	Solution 2:	Solution 3:	Solution 4:
Improve functionality of coffee cups and lids	Improve safety features of coffee machine	Policy changes/education to reduce employee fatigue	Reorganize workspace to maximize efficiency
Specific Activities/ Components of Solution 1:	Specific Activities/ Components of Solution 2:	Specific Activities/ Components of Solution 3:	Specific Activities/ Components of Solution 4:
Order thicker coffee cups/lids with coffee sleeves that fit easily Train employees on conducting lid-checks & safe handling of cups	Purchase coffee machines that prevent splashing, dispense directly to cups Alternative: Purchase: protective splash guard or better carafes that dribble less	Change scheduling and shift coverage policies Provide material on the benefits of sleep/strategies for getting more sleep Have an additional employee during peak hours Convert walk-in closet to an employee quiet/break room	Store infrequently used supplies to clear counter space Hire an ergonomic consultant to reorganize workspace to maximize workflow and usability Separate coffee prep and food prep areas

Developed by the Center for the Promotion of Health in the New England Workplace with support from NIOSH grant #U19-OH008857

Step 2: Develop Measurable Objective and Solution Activities

Major Health and Safety Objective:

Solution 4:	Specific Activities/ Components of Solution 4:	
Solution 3:	Specific Activities/ Components of Solution 3:	
Solution 2:	Specific Activities/ Components of Solution 2:	
Solution 1:	Specific Activities/ Components of Solution 1:	

Developed by the Center for the Promotion of Health in the New England Workplace with support from NIOSH grant #U19-OH008857

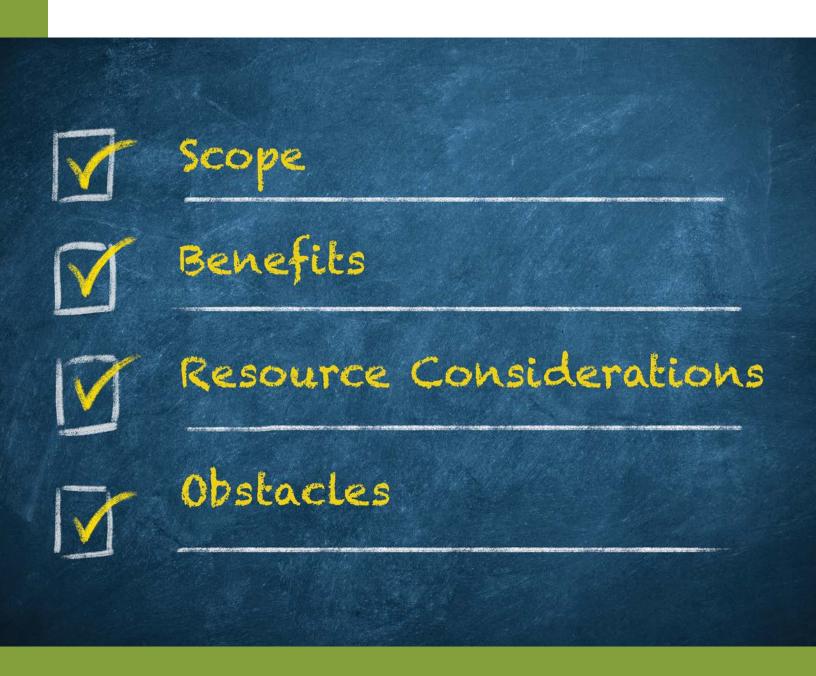


To do for the next meeting:

	I WIII
ろ	Write down any additional solutions and/or activities that I think of that were not brought up during the session to be discussed next time
7	Write down what you know about the resources that might be available in the organization to support any of the solution activities discussed during this meeting. Resources can include people, programs, vendors, funds, etc.
	••••••
	Notes:



Set Criteria for Selecting and Evaluating Interventions





Set Criteria for Selecting and Evaluating Interventions



Facilitator Preparation

To do:

- 1. Watch: training video and decide whether to show the video during the DT meeting:
 - a. Set Selection Criteria (7:21) https://www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/generate-solutions/set-selection-criteria.aspx
- 2. Review: Facilitator Preparation, Facilitator Agenda and the DT handouts.
 - a. Give particular attention to the example provided within the DT handout to understand the selection criteria.
- **3.** Prepare DT materials (i.e. print, copy)
 - a. DT handouts (1 copy per person)
 - b. Completed IDEAS Step 2 worksheet (unless circulated ahead of the meeting)
- **4. Prepare flip charts** to save valuable meeting time. Write the following headings at the top of flip chart paper (one per sheet of paper)
 - a. **Scope** -- Who do you want to reach? How many?
 - b. **Benefits/Effectiveness** -- What positive outcomes are we trying to accomplish? Short term? Long term?
 - c. **Resource Considerations** -- What resources are currently available within the organization? Do we need to acknowledge any constraints?
 - d. **Obstacles** -- What could interfere with intervention success?
- **5. Send the DT a friendly reminder of the meeting date and time** at least 2-3 days before the upcoming meeting

Depending on your organization, you may wish to discuss with the Steering Committee what resources will be available (or other resource related constraints) for DT interventions prior to this meeting.

To bring:

Prepared flip chart paper (with headings), extra, blank flip charts and markers
(or laptop and projector if using worksheets during the meetings)
IDEAS Step 3 DT handouts
IDEAS Steps 1 and 2 completed worksheets

To know:

The purpose of Step 3 is to identify "selection criteria" (also called, Key Performance Indicators, or KPIs) for evaluating intervention activities. These selection criteria will be used several times during the remaining steps in the IDEAS process.

- Step 4 DT will apply the selection criteria to help decide which activities to include or exclude in their intervention proposal
- Step 5 SC will refer to the selection criteria when rating the DT proposed interventions.
- Step 7 The SC will use the selection criteria to evaluate intervention activities that are implemented.

Step 3 typically requires one meeting. This step should involve the Design Team and the Steering Committee.

- Working together on this step can help to set the stage for intervention proposals to be received positively by organizational leaders.
- Step 3 is also a good time to brief the Steering Committee generally on what has been accomplished in IDEAS Steps 1 and 2.

Key Definitions

Selection Criteria	Key Performance Indicators (KPIs) set by the group that are used to measure the effectiveness or success of the solution activities within intervention alternatives, including: Scope, Benefits/Effectiveness, Obstacles and Resource Considerations.		
Scope	The range of people (who and how many) that the intervention is intended to benefit.		
Benefits / Effectiveness	Benefits of any kind that the interventions should provide. Consider short term benefits such as changes in attitudes, behaviors, satisfaction. Consider longer term benefits such as fewer accidents, cost savings, improved health, lower intention to leave, etc.		

Resource Considerations	What resources are currently available within the organization that should be considered? Are there parameters or context factors to consider?		
Obstacles	Anything that is likely to work against the intervention being considered. For example, uncertainty about continued financial resources, long delays in getting needed materials or equipment, a lack of top-down support, resistance to change, etc.		

Activity 1: Understanding selection criteria

It is vital that the DT understand the key definitions of (Scope, Benefits/Effectiveness, Resource Considerations, and Obstacles) before beginning Activity 2. Be sure to review the definitions and show the example handout. The selection criteria will be used again in IDEAS Steps 4,5,6 & 7.

Activity 2: Develop selection criteria for interventions

The DT will generate a list of selection criteria for interventions. Encourage the DT to prioritize the most important items in each category. This will keep the process manageable when they apply the selection criteria in Step 4.

• **Note:** When considering the obstacles category, encourage DT members to avoid listing "cost". Cost will be addressed separately in the Resources category.

Post-meeting to do:

Complete (i.e. fill out) the IDEAS Step 3 Worksheet: Set Selection Criteria. This worksheet will be used in IDEAS Step 4 to evaluate the interventions created by the Design Team.

• If DT has completed this step by themselves, coordinate a meeting with the Steering Committee to invite their input on the selection criteria.



Set Criteria for Selecting and Evaluating Interventions



Facilitator Agenda

Meeting Intent:

To identify criteria to be used to select and evaluate intervention activities.

Desired Outcomes for IDEAS Step 3:

- 1. Understand of the four categories of selection criteria for interventions, and how they will be used.
- 2. Initial list of specific selection criteria within each category.





Facilitator Agenda

When	What	How
0:00 (5 min)	Arrival/Check-in	Show up, find a seat, settle in. Round-robin: Facilitator inserts check-in question here (10-20 sec each)
0:05 (2 min)	Approve meeting minutes	Facilitator asks Design Team members for any changes and then asks for a vote to approve meeting minutes
0:07 (2 min)	Review Meeting Plan	 Review Intent and Desired Outcomes for the meeting Facilitator briefly reviews the agenda Questions and comments after each step Facilitator ask for a volunteer recorder
0:09 (6 min)	1. Understanding selection criteria Handouts: Key Definitions Step 3: Set Criteria for Selecting and Evaluating Interventions example	 Volunteers offer to read out loud the definitions in the handout Clarifying questions from group, if needed Facilitator guides DT through the Step 3 completed worksheet example Facilitator explains how selection criteria will be used in future IDEAS steps. Clarifying questions from group
0:15 (38 min)	2. Develop selection criteria for interventions Handout: (optional) Step 3: Set Criteria for Selecting and Evaluating Interventions blank worksheet	 1. Team develops specific intervention evaluation criteria for each category of the worksheet a. Scope b. Benefits/Effectiveness c. Resource Considerations d. Obstacles



When	What	How
		Use the prompting questions for each category to help DT identify the evaluation criteria:
		Scope Who do you want to reach? How many?
		Benefits/Effectiveness What positive outcomes are we trying to accomplish? Short term? Long term?
		Resource Considerations What resources are currently available within the organization? Do we need to acknowledge any constraints?
		Obstacles What could interfere with intervention success?
		2. Recorder will capture: a. agreed criteria b. unknown (gaps in our knowledge) c. uncertain or disagreed
		3. DT prioritizes 2-4 items per category.
		Explain that it is important to keep these criteria to a manageable number. Too many criteria will be overwhelming to work with in Step 5.
		Try to spend ~8 min/category to ensure you can cover all four selection categories
		Generate/review next steps:
0:53	3.	1. Facilitator reviews preparation for next meeting
(5 min)	Next Steps	 Ask which DT members would like to participate in a meeting with SC to provide a DT update and invite feedback on the selection criteria.
0:58 (2 min)	Check-out	1-2 words to describe how you are feeling as you leave this meeting
1:00	Adjourn	



Set Criteria for Selecting and Evaluating Interventions



Design Team Handouts

Handouts:

- **Design Team Agenda**
- **Definitions**
- **IDEAS Step 3: Set Criteria for Selecting and Evaluating Interventions** Sample
- **IDEAS Step 3: Set Criteria for Selecting and Evaluating Interventions** Worksheet
- To Do



IDEAS Step 3: Set Criteria for Selecting and Evaluating Interventions



Design Team Agenda

Meeting Intent:

To identify criteria to be used to select and evaluate intervention activities.

Desired Outcomes:

- 1. Understand the four categories of selection criteria for interventions, and how they will be used.
- 2. Initial list of specific selection criteria within each category.

When	What	Discussion Questions
0:00 (5 min)	Arrival / Check-in	Round-robin question.
0:05 (2 min)	Approve meeting minutes	
0:07 (2 min)	Review Meeting Plan	
0:09 (6 min)	1. Understanding selection criteria Handouts: Key Definitions Step 3 sample completed worksheet	What are intervention selection criteria? How will we use them in the IDEAS process?
0:15 (38 min)	2. Develop selection criteria for interventions Handout: Step 3 blank worksheet	Scope Who do you we want to reach? How many? Benefits/Effectiveness What positive outcomes are we trying to accomplish? Short term? Long term? Resource Considerations What resources are currently available within the organization? Do we need to acknowledge any constraints? Obstacles What could interfere with intervention success?
0:53 (5 min)	Next Steps	Who would like to attend a meeting with SC members to provide an update and get input on the selection criteria?
0:58 (2 min)	Check-out	1-2 words to describe how you are feeling as you leave this meeting



Definitions

Intervention: A set of solution activities designed to positively impact the objective identified in IDEAS Step 2. An intervention should ideally include a variety of activities that, when combined, will address the key root causes underlying the issue of concern. This is a Total Worker Health approach.

Selection Criteria: Key performance indicators (KPIs) set by the team to measure the effectiveness or success of the interventions. There are four categories:

- 1. **Scope:** The range of people (who and how many) that the intervention is intended to benefit Scope can vary depending on the interventions you are considering. **Your scope can be: a single type of worker, a unit of workers, or the entire organization**
- **2. Benefits/Effectiveness:** The impact of the intervention can include both short-term and long term outcomes of any kind.
 - Short term outcomes are what you would expect to see very soon after the
 intervention begins. Examples: increased knowledge, increased satisfaction, or
 positive changes in worker attitudes
 - Long term outcomes are the health and or organizational goals you hope to achieve over a longer period of time as a result of the intervention. Examples: cost savings (lower turnover, fewer sickness absences, reduced compensation claims), improved health, and fewer injuries

These criteria will form the basis for evaluating success later, so try to be as specific as possible when developing them.

3. Resource Considerations:

General aspects of the organization's financial context that will be relevant to the business case for any intervention. Be sure to consider:

- Internal resources to the organization (e.g. time, money, personnel, etc).
- External resources (e.g. partnerships with outside organizations that could be leveraged).
- Organizational situations (e.g. a hiring freeze) or practices (e.g. stay within a certain percent of existing budget).
- Note: Design Teams may propose interventions that exceed the currently available resources if the benefits justify the resources needed/costs. Resources available should not limit Design Team brainstorming.

4. Obstacles:

Anything that is likely to work against the intervention being considered. Examples:

- Possible resistance from employees/customers/clients, etc.
- Contracts with vendors that may limit options.
- Other organizational initiatives that require time and effort that might limit the ability of leaders and middle managers to implement an intervention.

Note: Do not list cost concerns here. Cost will be evaluated separately in the "Resources" criteria.



Step 3: Set Criteria for Selecting and Evaluating Interventions

Obstacles What potential barriers exist that may interfere with intervention success? Do not list cost as an obstacle here.	Eco-conscious customers want recyclable cups/lids Employees may be resistant to changes in workspace design	Implementing scheduling procedure changes may be difficult Fear of more workers compensation claims (due to increased awareness)	
Resource Considerations What resources are currently available within the organization that should be considered? (e.g. time, money, personnel). Are there important parameters or context factors to consider?	Employees semi-annual training can be used to educate on spills Costs for supplies not to exceed 1% over existing budget for sustainability	Any remodeling or new equipment installation should not stop service	Design Teams may propose interventions that exceed the resources currently available if the benefits justify the costs. Resources should not limit brainstorming.
Benefits/Effectiveness What are the positive outcomes you want to achieve? (both short and long term) SHORT TERM	Increased employee satisfaction and less stress Better employee comfort Higher customer satisfaction	Fewer burn injury reports Fewer reports of employee fatigue on annual employee survey	Short term examples: Increased knowledge, behavior change, participation, satisfaction Long term examples: Improved health, the costs. Resources should not limit brainstorming.
Who do you want to reach (e.g. one unit or the entire organization)? How many people should be affected? (If you plan a small pilot, describe # in pilot and in long term)	All coffee servers at this franchise location should benefit from changes being made. It's desirable to make changes that could be adopted by other franchise locations too		

Developed by the Center for the Promotion of Health in the New England Workplace with support from NIOSH grant #U19-OH008857



Step 3: Set Criteria for Selecting and Evaluating Interventions

Obstacles	What potential barriers exist that may interfere with intervention success? Do not list cost as an obstacle here.		
Resource Considerations	SH NEW MEN		Design Teams may propose interventions that exceed the resources currently available if the benefits justify the costs. Resources should not limit brainstorming.
Benefits/Effectiveness	What are the positive outcomes you want to achieve? (both short and long term) SHORT TERM	LONG TERM	Short term examples: Increased knowledge, behavior change, participation, satisfaction Long term examples: Improved health, lower claims/costs, more productive
Scope	Who do you want to reach (e.g. one unit or the entire organization)? How many people should be affected? (If you plan a small pilot, describe # in pilot and in long term)		

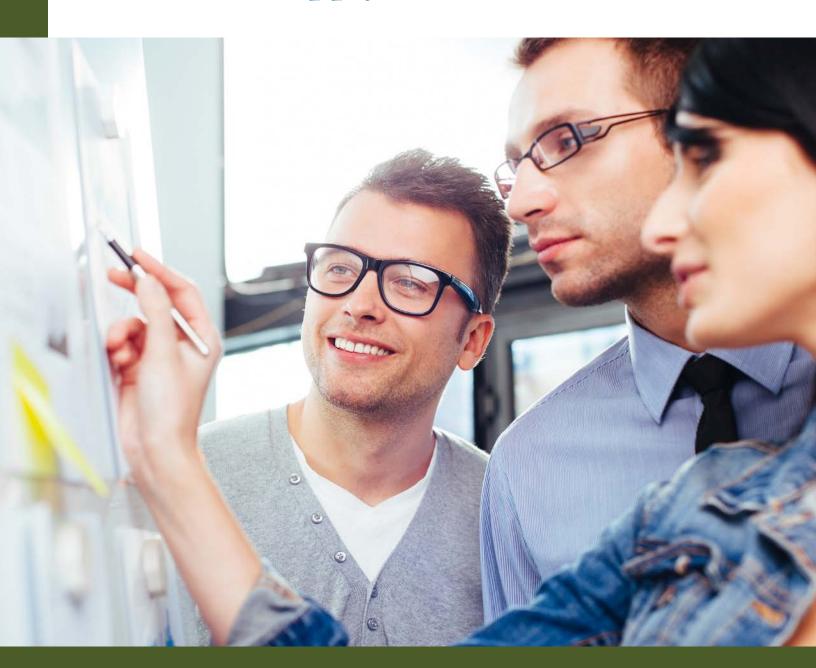


To do for the next meeting:

I will		
interventio	t these criteria and consider whether they are sufficient to help us select th ns for Step 4. List any additional selection criteria that come to mind as iten d at the next meeting.	
• • • • • • • • •		• • •
Notes:		



Form Interventions and Apply Selection Criteria





IDEAS STEP 4

Form Interventions and Apply Selection Criteria



Facilitator Preparation

To do:

- Watch and decide whether to show the video during the DT meeting: Apply selection criteria (8:05) https://www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/generate-solutions/apply-criteria.aspx
- 2. Prepare photocopies of:
 - a. The completed IDEAS Step 2 and Step 3 worksheets to bring to the meeting
 - b. DT handouts (meeting plan and other handouts in packet)
- **3. Prepare Step 4 "Apply Selection Criteria" Worksheet** (for Activity 5) -- the DT will work together to complete this worksheet in Activity 5.
 - i. Fill in the selection criteria (from IDEAS Step 3 Worksheet) on the top row
 - ii. If you have access to a projector, you can project a digital copy of the worksheet for the group to work on together. If you do not have access to a projector, you can prepare a large poster-sized version of the worksheet.
- **4. Send the DT a friendly reminder of the meeting date and time** at least 2-3 days before the upcoming meeting.

To bring:

- Photocopies of:

 Completed Step 2 and Step 3 Worksheets (or bring Step 3 flip charts of selection criteria (key performance indicators) from last meeting.
 IDEAS Step 4 meeting plan and DT handouts
 - Intervention Proposal Presentation Planning Guide for Design Team and Steering Committee (to be distributed at end of meeting while reviewing next steps)
- ☐ Flip chart paper and markers, or laptop and projector
- ☐ A few stacks of post-it notes (ideally different colors)

To know:

The intent of IDEAS Step 4 is to form three intervention options and prepare a business case for proposal to the Steering Committee. Creating three intervention options increases the odds that key leaders will approve at least one option.

By the end of this step the Design Team will have completed an analysis of each intervention option, and will rate how well each option meets the criteria they set in Step 3.

IDEAS Step 4 is the most complex and most time consuming to accomplish; you will need 2-3 meetings at a minimum. The meeting plan is arranged for three meetings, each 60-90 minutes long.

Tips for facilitating this step:

Facilitating this step with Design Team entails a sequential series of four group activities:

- 1. Grouping solution activities from Step 2 to form 3 intervention options
- 2. Analyzing each intervention for scope, benefit, resources needed, and potential obstacles.
 - DT members may need to assist with researching information as "homework" outside of meeting time to streamline the process.
- 3. Applying selection criteria from Step 3 to each intervention option.
- 4. Rating and ranking each intervention option regarding how well it meets the selection criteria.

Concepts you will need to explain to the DT

What is a solution vs. an intervention?

In Step 2 the DT brainstormed solutions to specific sub-issues for the major health and safety problems. In Step 4 the DT will use their brainstorming to create three intervention options.

Solution:

A targeted sub-objective for what could be done to achieve the Major Health & Safety, Wellbeing (HS&W) Objective, making it easier to come up with ideas for specific actions/activities.

- Solutions and their accompanying activities were the focus of the DT's work in Step 2. (Examples: Provide training, provide proper equipment, re-organize workflow, etc.)
- Each solution may have one or more activities associated with it.

Intervention:

A set of activities that, when implemented together, address a Major HS&W Objective as completely as possible.

- Interventions can include activities from a single solution or multiple, different solutions.
- However, more typically the Major HS&W Objective will be better addressed with a "hybrid" solution, which will include activities from multiple solutions and combine them into a single, multifaceted intervention
- Generally, the more sub-issues (from IDEAS Step 1) that are addressed with an intervention, the more effective the intervention is likely to be.

Key Definitions:

Scope The range of people (who and how many) that the intervention is intended to benefit.		
Benefits / Effectiveness	Benefits of any kind that the intervention should provide. Consider short term benefits such as changes in attitudes, behaviors, satisfaction.	
	Consider longer term benefits such as fewer accidents, cost savings, improved health, lower intention to leave, etc.	
Resources Needed	Estimates of the financial or other types of resources needed for the intervention. Need to consider both the short and long-term resources/ costs	
Obstacles	Anything that is likely to work against the intervention being considered; for example, uncertainty about continued financial resources, long delays in getting needed materials or equipment, a lack of top-down support, resistance to change.	

What is a "business case"?

A business case is a proposal presentation that outlines the characteristics and relative effectiveness of each intervention so that the SC has sufficient information for selecting one or more intervention options to be implemented.

IDEAS Step 4 helps the DT to create a business case for three intervention options. All three options will be presented to the Steering Committee for consideration, with the goal of the SC approving at least one option.

Each intervention option will be evaluated based the selection criteria (or "key performance criteria – KPIs) developed during IDEAS Step 3:

- Scope
- Benefits/Effectiveness
- Resource considerations
- Potential obstacles

Tip: The size and complexity of the interventions should reflect the size and complexity of the health and safety concern.

Why should the DT propose more than one intervention option?

Presenting multiple intervention options to the SC increases the odds that at least one will be supported for implementation during IDEAS Steps 5 and 6.

Presenting multiple interventions demonstrates to organizational leaders that the Design Team has given careful thought to how to solve problems with different approaches and with varying levels of resources.

Meeting #1

Activity 1: Review activities from Step 2

During Step 2, you helped the DT to generate as many ideas as they could imagine addressing the health and safety concerns. However, in Step 4, they need to reflect and consider how to make their proposal manageable and practical. This activity asks them to add new thoughts from co-workers and to prioritize the ideas they feel most strongly about. You can use a voting procedure to help the process. If the DT narrowed down their solution activities already in Step 2, you do not need to do this activity again in Step 4.

Activity 2: Form interventions

The most efficient way for DT to proceed is to use the planning template provided in their handout. The template (and the meeting plan) guides the DT to first consider the "must haves" and set this as the first intervention option. Then they form two additional intervention options as outlined in the template.

There are three key concepts that are important for Design Team members to grasp as they form interventions.

Key concept #1: Interventions will have the most impact if they address as many sub-issues (from IDEAS Step1) as possible. That means that a strong intervention will incorporate a group of activities from several solution areas.

Key concept #2: The DT should make sure that any intervention they form is acceptable if it's the one that is selected. They should not be tempted to limit the interventions to those that entail minimal cost to implement. If it cost nothing, it likely indicates that very little of the upstream contributing factors of the problem will be addressed.

Key concept #3: The DT should consider including one or two activities in each intervention option that are relatively easy or affordable to implement. This allows some "quick wins" when entering the implementation phase of an intervention that has been approved.

Meeting #2

Activity 4: Analyze interventions

The purpose of this activity is to estimate the requirements and impacts for each intervention option to generate a "business case" for decision making.

DT members will estimate the scope, benefits, resources needed, and potential obstacles for each intervention based on the activities that were "packaged" together in the prior meeting. This information will be used in Step 5 to assess how well each intervention meets selection criteria they set in IDEAS Step 3.

It's best to review the definitions, guide the DT through a completed, example and then practice analyzing 1-2 activities as a group. Once they feel confident, then DT members should be able to divide the activities up and work individually to complete the rest as homework.

Tips:

- Use the "Analyze Activities" sample, worksheet, and detailed instructions in the DT handouts for teaching purposes.
- You may decide to adjust the homework assignment based on the experience and resources of the DT members. For example, you may decide to assign only the cost estimates as homework, or only the scope, benefits and obstacles.

- If your DT prefers to work electronically, you can prepare an Excel spreadsheet to collect the information that is in the DT homework worksheet. This will make it easier for you to compile a master list of solution activity details into a single sheet.
- The DT may request to work as a group to complete this step; if so, plan for 1-2 meetings to accomplish this work.

Once all the estimating and information gathering is done, make sure all team members can see and discuss the totality of the information. Ask DT team members to briefly present the work they did to estimate scope, benefits, resources, obstacles for specific activities. As the facilitator, you should pay attention to two process concerns -- time keeping and DT listening and communication skills.

- **Time keeping:** it will be important to help keep the meeting moving forward. Remind the team that "clarifying questions" are appropriate but try not to argue the merits of the research at this point. You can encourage the DT members to write down any suggested "upgrades" to be addressed later. Then come back to those points after DT members have shared their information.
- **DT listening and communication skills:** You can set the stage for DT members to practice good listening and positive communication with a little coaching before the share-back begins. Suggest that each DT "presenter" begin with a statement that they want to share their homework as preliminary estimates, and they welcome any new ideas.

Meeting #3

Activity 5: Apply selection criteria, rate interventions

- In this meeting the DT will **apply** the selection criteria (also called, Key Performance Indicators or KPIs) from Step 3 to evaluate the intervention options they created.
 - The facilitator should prepare ahead the Step 4 "Apply Selection Criteria" Worksheet for the group activity (see **To do** notes above).
- After applying the selection criteria, DT may want to modify the intervention activities to better achieve the criteria. This is a positive, normal aspect of the process. Encourage the DT to take the time they need to refine their intervention options until they feel satisfied and confident. This may require additional meeting time to reconfigure interventions.
- Once the DT is satisfied with the intervention options, they will use the Step 4 Intervention Rating Sheet to summarize their evaluation of each intervention option according to the selection criteria. This sheet and prior worksheets will be used as supporting materials for a proposal presentation during IDEAS Step 5.

Activity 6: DT rates interventions using the IDEAS Step 5 scoring sheet

- **The Design Team** uses the rating sheet to score and prioritize the intervention options.
 - High scores in the selection criteria of Scope and Benefits/Effectiveness signify a
 positive attribute. This means the intervention will likely reach the desired
 employees and have the desired outcomes. The Step 5A scoring sheet uses green
 shading for these criteria.
 - High scores in the selection criteria of Resources Needed and Obstacles signify a
 negative attribute. For instance, expensive interventions with a lot of obstacles are
 more challenging to implement. Therefore, a "high" rating is unfavorable. The scoring
 sheet uses red shading for these criteria.
 - These ratings are meant to give the Steering Committee an idea of how the DT views the strengths and drawbacks of each intervention option intervention.
 - Note: Using a numerical rating system is an acceptable alternative. However, the same rating system must be applied consistently by DT and SC during IDEAS Steps 4 and 5.
- It is important to clarify to the DT that their ratings are still in the "proposal phase" when they present them to the SC. The DT should expect the SC to ask questions about the intervention. Tip: View the proposal as a "conversation starter" with organizational leaders, especially for interventions that require a high resource commitment.
- After completing the Step 5A Scoring Sheet, the DT should select at least 1-2 members to
 present their proposal to the Steering Committee. The team can discuss and decide who else
 they would like to attend and participate in the discussion that follows the presentation.

Post-meeting to do:

- Prepare a final version of all IDEAS Step 4 worksheets.
- Retain information gathered on all activities (even those that were not chosen to be part of an intervention) in case you need to refer back to them later.



IDEAS STEP 4 Form Interventions and Apply Selection Criteria



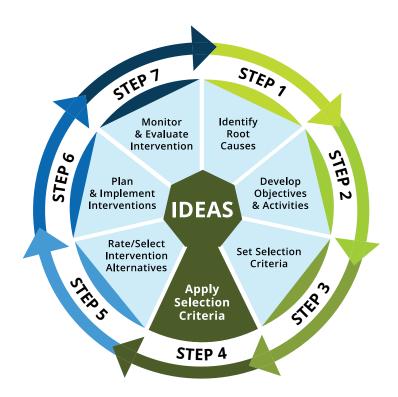
Facilitator Agenda

Meeting Intent:

To form three intervention options and prepare a business case for proposal.

Desired Outcomes for IDEAS Step 4:

- 1. A set of three intervention options, each containing a range of solution activities that address the major safety and health concern.
- 2. An analysis of each intervention option based on the Selection Criteria set in Step 3.
- 3. Evaluation ratings for each intervention option.
- 4. Clarity on next steps





Facilitator Agenda

When	What	How		
0:00 (2 min)	Check-in	Round-robin: Insert Check-in question here.		
0:02 (1 min)	Approve meeting minutes	Facilitator asks Design Team members for any changes and then asks for a vote to approve meeting minutes		
0:03 (2 min)	Review Meeting Plan	 Volunteer reviews Intent and Desired Outcomes for the meeting Volunteer reviews the agenda and key definitions Facilitator explains this step will take 2-3 meetings. Questions and comments if necessary		
1	Recommended Meeting #1: Group the solution activities (from Step 2) to form 3 intervention options			
0:05 (10 min)	1. Review activities from Step 2 and simplify if needed	 DT members suggest new activities based on co-worker suggestions. Assumes DT members have spoken with peer to get input on the activities brainstormed by DT after Step 2. DT prioritizes the list of activities to 3-4 in each solution area. Vote if needed 		
0:15 (40 min)	2. Form interventions Handouts: Step 4A: Form Interventions	 Facilitator explains the method to group activities together to form intervention. (Refer to example in Form Interventions handout) Try to address the sub-issues as completely as possible in each option. SC may approve only 1 intervention - make it count. 		



When	What	How
	:	2. DT forms interventions: Personal reflection: Spend 5 minutes writing your ideas for each intervention options A, B, C using the approach we decided on. Identify the "basic essential" activities that will form Intervention A.
	3	3. Round-robin: What are the must-haves?
		Intervention A – the "basic essentials" The "basic essential" activities are those that, even if the only things to be adopted, would make a meaningful impact.
		This intervention is the most important one to start with. It sets the floor for what is acceptable/ meaningful.
		Note-taker captures "must have" activities on flip chart paper. Use voting or nominal group process to form agreement.
	4	1. Discussion: If we had the resources, which activities would we include to address the root causes as completely as possible?
		Intervention B - the ideal, "comprehensive" Encourage members to consider these questions:
		Are some solution areas more important than others?
		What is the maximum number of activities we envision for Intervention B?
		Be sure to include the "must haves" in Intervention B and add other activities across all solution areas that address subissues as completely as possible.
		Remind the DT they will have an opportunity to assess feasibility based on costs and benefits later. Right now, they are forming an initial concept.
		Note-taker captures activities on flip chart paper for "comprehensive" Intervention B.
	!	6. Round-robin: If there were limited resources, and you could only add a couple activities to the "basic essentials" which activities would they be? Intervention C - the "Hybrid" Be sure to include the "must haves" in Intervention A and add other activities across all solution areas that address subissues as completely as possible.
		Note-taker writes activities on flip chart paper; voting and further discussion as needed to develop agreement.
		5. Facilitator summarizes the activities in each intervention option and confirms agreement.



When	What	How
0:55 (5 min)	Review next steps	Facilitator reviews preparation for next meeting: DT members read, "Analyze Activities" worksheet and definitions. If desired, assign preliminary homework to prepare for next activity.
	mended Meeting a each intervention	#2: option for scope, benefit, resources needed, and potential obstacles.
		 Facilitator explains – DT will review key terms and definitions, see an example, then work together to estimate scope/benefits/resources needed/obstacles for 1 or 2 intervention activities. Refer to Activity 3 in DT handouts Volunteers offer to read aloud the definitions on the Analyze Activities worksheet.
	3.	3. Clarifying questions from DT
	Practice and do: Analyze Interventions	4. Facilitator guides DT through a completed example, provided. Refer to DT handouts
0:05 (75 min)	Handouts: Analyze Activities Step 4B: Analyze Activities for Interventions example and worksheet	5. DT selects 1 activity; Facilitator guides the DT discussion of scope/benefits/resources needed/obstacles. Select a relatively simple activity from one of the solution areas for practice.
		Encourage the DT to keep it simple and keep moving; they don't need an exhaustive, detailed analysis.
		Note whether additional information is needed; this can be researched by DT and/or can be collected from SC.
		6. DT members select 2-3 activities to repeat the "analysis" procedure as homework before the next meeting. Refer to Activity 3 worksheet and homework page.
		Each DT is different; some may prefer to do this activity together in meeting time.
		7. Shareback of results at next meeting if needed.

When	What	How
1:20 (5 min)	Review next steps	Facilitator reviews preparation for next meeting: DT members complete homework, send ahead to facilitator by deadline date.
	mended Meeting step 3 selection crite	#3: eria and rate each intervention option.
0:05 (50 min)	4. Apply selection criteria to evaluate each intervention option Handout: Step 4C: Apply Selection Criteria to Intervention Options example and worksheet	 Facilitator explains purpose of this step: To evaluate each intervention option against the selection criteria you set in Step 3. This will help you judge whether to refine the interventions before you propose them to the Steering Committee. Facilitator explains how to apply selection criterial to each intervention option. Review the sample completed "Apply the Selection Criteria" Worksheet Point out the selection criteria listed in the first row of the worksheet Point out the activities listed in the first column of the worksheet S. Facilitator guides the DT to decide whether each intervention meets the selection criteria by "checking" the appropriate cell. (Refer to Design Team: Apply Selection Criteria worksheet) By looking across the rows, you can see which selection criteria an intervention meets By looking down the columns, you can see which interventions meet a certain selection criterion DT may decide to refine the activities chosen for a particular intervention option if they are not satisfied with the overall quality of the intervention. They may remove, add, or replace solution activities based on activities brainstormed during Step 2

When	What	How
0:55 (10 min)	5. Agree on interventions to present to SC	 Facilitator explains the feedback process: thumbs up, thumbs-down, or horizontal to indicate your satisfaction with each intervention in its current form. Facilitator asks for a "thumb vote" for each intervention package Note-taker captures the "vote" on flip chart paper If DT satisfaction is low for any one intervention, discuss ways to modify it.
1:05 (20 min)	6. Team members rate each intervention option (package) Handout: Step 4D: Rate Intervention Options Example and worksheet	 Facilitator explains the rating system that will be used (H-M-L) for each intervention option High is "good" for scope and benefits. We want a large scope and many benefits. High is "bad" for resources needed and anticipated obstacles. High resources needed means that the intervention is expensive. High anticipated obstacles mean that things could get in the way of intervention success. Refer to worksheet example in handouts DT members use the Rate Interventions Worksheet in their DT notebook to rate the selection criteria for each of the interventions options. – 5 min Explain that DT members will work individually at first and then will discuss everyone's responses together. This will allow everyone to understand the range of perspectives in the group. DT members discuss each domain (one at a time) in round robin fashion. E.g Round-Robin: What rating did you assign the benefits/ effectiveness for intervention 1? – up to 20 sec each Repeat for remaining domains, and for each intervention option. Discuss and resolve any differences of opinion Remind the DT that the ratings apply to the expected reach of the intervention overall, given all the activities within that intervention option. If their ratings seem overly optimistic, ask clarifying questions to encourage them to be as realistic as possible.

When	What	How
1:25 (5 min)	Review next steps Handouts: Intervention Proposal Presentation Planning Guide for Design Team and Steering Committee	Facilitator reviews preparation for next meeting: DT rates interventions and prepares for proposal presentation. Read through Intervention Proposal Presentation Planning Guide for Design Team and Steering Committee
1:30	Adjourn	



IDEAS STEP 4

Form Interventions and Apply Selection Criteria



Design Team Handouts

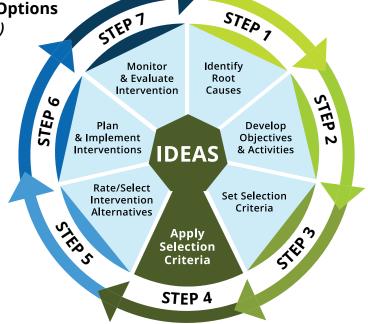
Handouts:

- Design Team Agenda
- Step 4A: Form Interventions Guide
- Step 4A: Form Interventions Worksheet (Blank and Completed Sample)
- Step 4B: Analyze Activities Worksheet Instructions
- Step 4B: Analyze Activities Worksheet (Blank and Completed Sample)

Step 4C: Apply Criteria for Selecting & Evaluating Interventions
 (Blank and Completed Sample)

 Step 4D: Rate Intervention Options (Blank and Completed Sample)

· To Do



IDEAS Step 4: Form Interventions and Apply Selection Criteria



Design Team Agenda

Meeting Intent:

To form three intervention options and prepare a business case for proposal.

Desired Outcomes:

- 1. A set of three intervention options, each containing a range of solution activities that address the major safety and health concern.
- 2. An analysis of each intervention option based on the Selection Criteria set in Step 3.
- 3. Evaluation ratings for each intervention option.
- 4. Clarity on next steps

When	What	Discussion Questions
0:00 (2 min)	Check-in	Round-robin
0:02 (1 min)	Approve meeting minutes	
0:03 (2 min)	Review Meeting Plan	How do we think about well-being at work? What is this program all about?
	nended Meeting #1: ne solution activities (from Step 2) to form 3 i	ntervention options
0:05 (10 min)	1. Review activities from Step 2 and simplify if needed (<i>try to limit each</i> "solution" area to fewer than 4 activities)	Are we satisfied with the list of activities from Step 2? Do we want to remove or replace any, based on co-worker suggestions?
0:15 (40 min)	2. Form interventions Each DT member writes his/her ideas, then team discusses: Intervention A (basic essentials) Intervention C (comprehensive) Intervention B (hybrid) Handout: Step 4A: Form Interventions	What are the basic essentials (must-have) activities? If we had the resources, which activities would we include for a comprehensive intervention? If you could only add a couple activities to the "basic essentials" which activities would they be to make a hybrid option?
0:55 (5 min)	Review next steps	



When	What	Discussion Questions
	nended meeting #2: each intervention option for scope, benefit, I	-
0:05 (80 min)	3. Practice and do: Analyze Interventions Handout: Step 4B: Analyze Activities for Interventions example and worksheet	For each intervention option, what do we estimate to be the –Scope (reach) Benefits (outcomes) Resources needed (costs, people) Potential obstacles (Consider the activities in each Intervention option in this exercise)
1:25 (5 min)	Review next steps	
Recomn	nended meeting #3: Apply Step 3 selection	criteria and rate each intervention option.
0:05 (50 min)	 4. Apply selection criteria to evaluate each intervention option. Place a check for each selection criteria that is met. Handout: Step 4C: Apply Selection Criteria to Intervention Options 	Which intervention option(s) meet most criteria? Does any option fail to meet criteria?
0:55 (10 min)	5. Agree on interventions to present to SC	Do we need to modify intervention activities based on how well they met selection criteria?
1:05 (20 min)	 6. Team members rate each intervention option (package) Handouts: Step 4D: Rate Intervention Options example and worksheet 	 What rating did you assign the benefits/ effectiveness for intervention 1? Repeat for remaining domains, and for each intervention option. Discuss and resolve any differences of opinion Are we comfortable presenting these interventions to the Steering Committee? If not, what would need to be modified?
1:25 (5 min)	Review Next Steps Handouts: Intervention Proposal Presentation Planning Guide for Design Team and Steering Committee	



Design Team Handout Step 4A, Form Interventions Guide

Proposing three options will increase the likelihood that the at least one option will be approved during IDEAS Step 5 and implemented in IDEAS Step 6. Use this handout as a guide for grouping activities to form three intervention options.

Start with Solutions from Step 2

Solution 1 Activities	Solution 2 Activities	Solution 3 Activities
Α	D	G
В	E	Н
С	F	I

Form Interventions A, B, C, by grouping activities from different solutions.

There is no one right way to group the activities. The matrix shows an example of how you can organize the activities based on different levels of impact.

Intervention A (Basic Essentials¹)	Intervention B (Comprehensive ²)	Intervention C (Hybrid³)
Α	A, B, C	A, B
E	D, E, F	E
	G, I	G, H

Basic essentials means those activities that are **"must haves."** These are the activities that must be addressed to achieve any improvement in the major safety or health concern.

- Comprehensive means that the intervention contains a collection of activities that, if adopted, would address most or all of the key sub-issues and contributing factors in IDEAS Step 1.
- Hybrid option builds on the basic essential activities to also include some selected activities that would **improve impact above the basic essentials.** However, the hybrid may not address the range of sub-issues as completely as the "comprehensive" option.



SAMPLE COMPLETED WORKSHEET

Step 4A: Form Interventions Worksheet

Major Health, Safety, & Well-Being Objective (from Step 2)

Reduce the rate of employee injuries as a result of hot coffee spills

Key sub-issues for intervention (from Step 2 – list only the sub-issues that are addressed in interventions A, B, or C)

Coffee cup/lid error; Design of coffee machine; Policy changes/education to reduce employee fatigue; Disorganized work space

Intervention A	Intervention B	Intervention C
Title:	Title:	Title:
Improve functionality of coffee cups and lids	Improve safety features of coffee machine	Reorganize workspace to maximize efficiency
Activities	Activities	Activities
Order thicker coffee cups/lids with coffee sleeves that fit easily	Purchase coffee machines that prevent splashing, dispense directly to cups	 Store infrequently used supplies to clear counter space
2. Train employees on conducting lid-checks & safe handling of cups	2. Purchase protective splash guard or better carafes that dribble less	2. Hire an ergonomic consultant to reorganize workspace to maximize workflow and usability
K	Ř	3. Separate coffee prep and food prep areas
4	4	4
uń.	,	· Š

Step 4A: Form Interventions Worksheet

	iterventions A, B, or C)	Intervention C Title:	Activities	÷	ú	ĸ.	4	ιń	
bjective (from Step 2)	ep 2 – list only the sub-issues that are addressed in inl	Intervention B Title:	Activities	÷	i	ĸ.	4.	S	
Major Health, Safety, & Well-Being Objective (from Step 2)	Key sub-issues for intervention (from Step 2 – list only the sub-issues that are addressed in interventions A, B, or C)	Intervention A Title:	Activities	÷	i	m	4	I Ó	

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Design Team Activity Step 4B: Analyze Activities Worksheet Instructions

Purpose: To understand each solution activity as thoroughly as possible so that you can make informed decisions about which activities will best address the Major Health, Safety, and Well-being Objective.

Task: To the best of your ability, try to estimate the qualities for each intervention based on the dimension below. You will compare these qualities against the intervention selection criteria later.

Intervention Qualities

- **Scope:** Who and how many people will be affected by, participate in, or benefit from the intervention. Try to be specific.
- **Benefits/Effectiveness:** What positive outcomes will be achieved through this intervention in the short term and long term.
 - There may be positive outcomes for an activity above and beyond what you have listed as your selection criteria for Step 3.
- **Resources Needed:** What are the costs and/or resources needed to accomplish this intervention? You can estimate these by gathering information from vendors or from knowledgeable personnel (e.g. Steering Committee members) in your organization. Consider the following:
 - Costs for equipment, installation, software, services?
 - Can you project the costs of new equipment over time? For example, there may be an
 upfront cost of new equipment in the short term, but cost savings in the long term due
 to lower energy needs, less frequent maintenance, etc.
 - Personnel time, training time and fees, to implement and maintain the intervention.
 - Vendor or consultant services to provide specialized skills or knowledge.
- **Obstacles:** What factors could interfere with the success of this intervention? Note: Costs should not be considered an obstacle in this category.

Record the information that you find in the Design Team Analyze Activities Worksheet (or an electronic equivalent).



SAMPLE COMPLETED WORKSHEET

Step 4B: Analyze Activities Worksheet

	Solution:	Reorganize workspace to maximize efficiency	maximize efficiency	
Solution Activities	Scope	Benefits/ Effectiveness	Resources Needed	Obstacles
List the activities that you want to include in this intervention	Who will this activity reach? How many people will be affected?	What positive outcomes will be achieved through this activity? (short and long term)	What are the resources needs/costs of this activity? (time, money, personnel)	What obstacles or potential barriers could interfere with the success of this activity?
Store infrequently used supplies to clear counterspace	All employees	- More counter space decreases clutter and spilling	-~2-4 hrs employee planning time -\$100 for storage shelves	-May disadvantage shorter employees
Hire an ergonomic consultant to reorganize workspace and workflow	All employees	-Fewer collisions between workers -Fewer spills -Faster, easier order filling	-\$250/ 1.5 hour consulting fee -Potential cost (?) of new equipment based on assessment	-Managers may worry that consultant will recommend expensive changes
Separate food prep from coffee prep area	All employees	-Fewer claims for burns	\$3,000 for remodeling new food prep area	-Time and hassle of hiring and supervising a contractor -Impact to orders during construction
-			OF ITT I TOOM	



Step 4B: Analyze Activities Worksheet

	Obstacles	What obstacles or potential barriers could interfere with the success of this activity?			
	Resources Needed	What are the resources needs/costs of this activity? (time, money, personnel)			
	Benefits/ Effectiveness	What positive outcomes will be achieved through this activity? (short and long term)			
Solution:	Scope	Who will this activity reach? How many people will be affected?			
	Solution Activities	List the activities that you want to include in this intervention			

Step 4C: Apply Criteria for Selecting & Evaluating Interventions

Instructions to complete this form:	Scone	Benefit	Benefits / Effectiveness	ess	Pecolitre Conciderations	aratione	ć	Obstacles	Summary.	ž
1) List the colories estade from Chan 2 in	2000	Short Term	rm Long Term	erm	nesion en incesu		3	carnes	5	<u>-</u>
the corresponding column. 2) List the intervention activities in the appropriate row. 3) If an activity meets the selection criteria, place a check-mark in the appropriate cell. If not, leave the cell blank. 4) By looking across rows, you can see how well an activity meets all selection criteria. 5) By looking down columns, you can assess which activities meet a specific criterion.									Number of positive selection criteria (scope, benefits/effectiveness, and resource considerations)	Number of negative selection criteria (obstacles)
Intervention A Activities										
Intervention B Activities										
Intervention C Activities										
Developed by the Center for the Promotion of Health in the New England Workplace with support from NIOSH grant #U19-OH008857	for the Promotiv	on of Health	in the New Engla	and Wor	kplace with support	from NIOSH	grant #U19-0	H008857		



SAMPLE COMPLETED WORKSHEET

Step 4C: Apply Criteria for Selecting & Evaluating Interventions

			Bene	Benefits / Effectiveness	ectiver	ssat						7				
Instructions to complete this form:	Š	edo	Short	Short Term	Long Term	erm	Kesonr	Kesource Considerations	siderat	ous		Obst	Obstacles		Summary	nary
the corresponding column. 2) List the intervention activities in the appropriate row. 3) If an activity meets the selection criteria, place a check-mark in the appropriate cell. If not, leave the cell blank. 4) By looking across rows, you can see how well an activity meets all selection criteria. 5) By looking down columns, you can assess which activities meet a specific criterion.	All coffee servers at this franchise location should benefit from changes being made.	It's desirable to make changes that could be adopted by other franchise locations too.	Increased employee satisfaction and less	Better employee comfort	Fewer burn injury reports	Fewer reports of employee fatigue on annual employee survey	Employees semi-annual training can be used to educate on spills	Costs for supplies not to exceed 1% over existing budget for sustainability	Any nemodeling or new equipment not stop service	Require a one-time change	Eco-conscious customers want recyclable cups/lids	in segnera to strast and year segrethow or design	Implementing scheduling procedure changes	Fear of more workers compensation claims (due to increased awareness)	Mumber of positive selection criteria (scope, benefits/effectiveness, and resource considerations)	Number of negative selection criteria (obstacles)
Intervention A Activities																
-Order thicker coffee cups/lids with coffee sleeves that fit easily -Train employees on conducting lid-checks & safe handling of cups	>	>	>		>			>	>	>	>				7	7
Intervention B Activities																
-Purchase a coffee machines that prevent splashing, dispense directly to cups -Alternative: Purchase protective splash guard or better carafes that dribble less	>				>				>	>		>		>	4	2
Intervention C Activities																
-Store infrequently used supplies to clear counter space -Hire an ergonomic consultant to reorganize workspace to maximize workflow and usability -Separate coffee prep and food prep areas	>					>			>	>			>		4	-
Developed by the Center for the		romotion	of Heal	h in the	New Fno	land Wo	Promotion of Health in the New England Workplace with support from NIOSH grant #1119-OH008857	ith supp	ort from	NIOSH	grant #1	119-OH	008857			



Step 4D: Rate Intervention Options -- Design Team

	Intervention A Title:	Intervention B Title:	Intervention C Title:
Rate the three intervention alternatives as High (H), Medium (M), or Low (L) (or a combination) relative to the selection criteria from Step 3.			
Anticipated Scope (L/M/H)			
Anticipated Benefits (L/M/H)			
Anticipated Resources Needed (L/M/H)			
Anticipated Obstacles (L/M/H)			
Priority ranking of interventions (optional):	onal):		

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Additional notes (optional):

Healthy Workplace

SAMPLE COMPLETED WORKSHEET

Step 4D: Rate Intervention Options -- Design Team

	Intervention A	Intervention B	Intervention C
Rate the three intervention alternatives as High (H), Medium (M), or Low (L) (or a combination) relative to the selection criteria from Step 3.	Improve functionality of coffee cups and lids	Improve safety features of coffee machine	Reorganize workspace to maximize efficiency
Anticipated Scope (L/M/H)	M/H	т	¥
Anticipated Benefits (L/M/H)	Γ/M	Ι	¥
Anticipated Resources Needed (L/M/H)	1 ==	M/H	Σ
Anticipated Obstacles (L/M/H)	7	Σ	, l
Priority ranking of interventions (ontional):	- (1000)		

Priority ranking of interventions (optional):

1.Best option: Intervention B addresses main source of burns -- at the point of the coffee machine. This will have greatest chance of reduction in employee burn injuries

2.Intervention C: Could help, but addresses a secondary problem of people bumping into each other

3.Intervention A: Least expensive, but may not show results

Additional notes (optional):

Consider checking if corporate office resources are available to offset costs.



To do for the next meeting:

	I will		
\odot		Analyze Activity Worksheet (or an electronic equivalent) for the for as part of the information gathering task.	
3	Worksheet to the facilitator	t I gathered from completing the Design Team Analyze Activity one week ahead of the next scheduled DT meeting. The al and/or paper copies for the DT to view and use in the next	
	Activities I will resea	arch:	
	1.	3.	
	2.	4.	
	•••••	• • • • • • • • • • • • • • • • • • • •	•
	Notes:		
			_



IDEAS STEP 5

Rate and Select Interventions





IDEAS STEP 5

Rate and Select Interventions



Facilitator & Champion Preparation

To do:

- 1. Watch: Step 5 Training video: Rate and Select Intervention (See Key Resources)
- **2. Review:** the Intervention Proposal Presentation Planning Guide for Design Team and Steering Committee (*See Key Resources*)
- **3. Review:** the Detailed Guidance for leading IDEAS Step 5 on the following pages.

To know:

- The goal of IDEAS Step 5 is for the Steering Committee to rate and approve a Design Team intervention to be implemented.
- IDEAS Step 5 involves both the Design Team and the Steering Committee in three distinct phases. (See Figure 1)
- All SC members should plan to attend the DT proposal presentation. The proposal
 presentation is a time for managers to learn how workers view key safety or well-being
 concerns and to understand their thinking regarding solutions to problems. Decisions about
 interventions will be made later.
- Decisions about interventions should be made only after the SC has met separately to discuss and rate the proposed options. The SC will recommend approval for at least one option, although modifications may be requested.
- The success of Step 5 depends upon the quality of the communication between the Steering Committee and the Design Team. Taking time to coach and prepare both teams is well worth the effort to help ensure a positive, trust-building experience.

DT presents interventions SC rates decision DT asks questions

Fig 1: Sequence of activities for IDEAS Step 5: Rate and Select Interventions

Key Resources for rating and selecting interventions:

- Step 5 Training Video: Rate and Select Interventions
 https://www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/generate-solutions/rate-interventions.aspx
- IDEAS Step 5 Steering Committee Tools
 - Handout -- Intervention Proposal Presentation Planning Guide for Design Team and Steering Committee
 - Handout -- Active Listening
 - Handout -- Giving and Receiving Feedback Effectively
- Copies of completed IDEAS Steps 1-4 worksheets (from Design Team)
- **Flip chart paper and markers** (for general use during the proposal presentation)
- Blank Step 5 worksheet: Rate and Select Intervention Options

Detailed guidance for leading IDEAS Step 5

Design Team presents interventions to SC

The Steering Committee and/or upper managers meet with the Design Team to receive a presentation regarding proposed interventions to address a specific safety, health, and well-being concern.

• It is important that all, or most, members of the Steering Committee are present at this meeting, and that the atmosphere is respectful, and open.

The proposal presentation is a time to learn how workers view key health, safety, or well-being concerns and understand their thinking regarding solutions to problems. Decisions about interventions will be made later.

Training should be provided to Steering Committee members **before** the Design Team presentation so they understand expectations and roles during IDEAS Steps 5, 6, & 7.

- Share the "Planning Guide" handout before the training meeting.
- Review the IDEAS 7-Step process, and the details of the Step 5 process.
- Review the communication techniques in the "Active Listening" and "Giving and Receiving Feedback" handouts.
 - Explain the importance of supportive communication during the proposal presentation.
 - Effective communication will help build a trusting partnership with the Design Team.

Design Team members should prepare and practice a presentation of their three intervention proposals. Help them to review the handouts: Active Listening, and Giving and Receiving Feedback Effectively.

SC rates interventions using the Step 5 Scoring Sheet

Step 5 involves the Steering Committee scoring and prioritizing the intervention options using the Rate and Select Intervention Options worksheet.

SC members will use the DT proposal information together with their management experience to rate the strengths and drawbacks of each intervention option.

• Completing this step after the DT proposal presentation allows the SC to use information from the DT as part of their appraisal process.

It is recommended that the SC discuss the proposal together as a group in a meeting that follows the DT proposal.

- The SC scores may or may not match the DT scores, and they may rank the intervention options in a different order than the DT.
- When the scores or rankings differ, it is important to document the reasons why so these can be effectively communicated to the Design Team.

Rating method

The Steering Committee assigns ratings for Scope, Effectiveness, Resources/Costs, and Obstacles to each intervention option that is proposed.

Ratings can be HIGH, MEDIUM, or LOW.

A HIGH rating (H)

An "H" is used to indicate that the activities, taken together in an intervention, **meet or exceed** what is stated in the selection criteria.

• For example, if "Scope" for an intervention would benefit all employees targeted for the intervention, then "Scope" for the intervention would receive a rating of "H" (high).

A MEDIUM rating (M)

An "M" is used to indicate that the activities, taken together in an intervention, only partially accomplishes what is stated in the selection criteria.

A LOW rating (L)

An "L" is used to indicate that the activities, taken together in an intervention, fail to accomplish, or barely accomplishes what is stated in the selection criteria.

Note: Using a numerical rating system is an acceptable alternative. However, the same rating system must be applied consistently by DT and SC during IDEAS Steps 4 and 5.

Steering Committee presents decision to Design Team

Once the SC has completed scoring and prioritizing of intervention options, they should prepare a detailed response to the DT proposal.

- Communicating a response to the Design Team in a timely manner is essential for instilling trust and a shared responsibility for advancing safety, health and well-being in the organization.
- An in-person meeting is most effective for trust-building and will allow DT members to ask follow up questions. Try to schedule a time when SC and all or most DT members can be present. Name a spokesperson to take the lead.
- Taking time to explain differences in perspectives on the scores is vital for building knowledge of DT members about the organizational resources, priorities and decision considerations. This new knowledge will increase DT commitment and their skills for future problem solving.
- Meeting materials should include Step 5 worksheet, and possibly, a brief outline of reasons for any scores that differ from those of the DT.

Moving to IDEAS Step 6:

Once a decision has been reached to approve an intervention, the Steering Committee can begin preparations for IDEAS Step 6 -- Intervention Implementation.

- Although the SC takes the lead, they can continue engaging the DT members as partners in the implementation and evaluation phases. DT members have valuable knowledge and can suggest practical considerations for preparation and roll-out of new interventions.
- DT members can assist by providing feedback on action plans, pilot testing or prototyping of new solutions, promoting and encouraging employees to participate in new interventions, and assisting with evaluation activities.

Post-meeting to do:

Prepare a follow up meeting with the SC (and possibly selected DT members) to plan for IDEAS Step 6: Intervention Implementation.

Schedule a follow up meeting with the DT to celebrate their accomplishments and to debrief on the Step 5 experience. They may wish to discuss any follow up communications needed with the SC relative to implementation and evaluation phases.

The Design Team will need to decide how and when to proceed with a new cycle of IDEAS to address another health, safety, and well-being issue or concern. They can review their list of priority issues from the "Getting Started" sessions, or they can consult with the Steering Committee when deciding the next issue they will tackle.





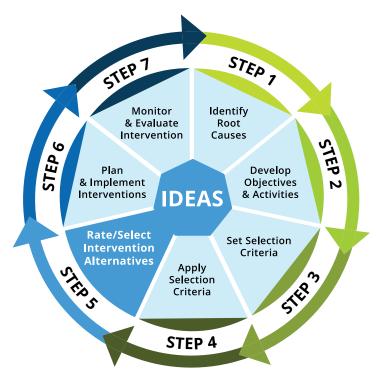
Steering Committee Agenda

Meeting Intent:

The Steering Committee rates and approves an intervention to be implemented.

Desired Outcomes for IDEAS Step 4:

- 1. SC meets and discusses proposed intervention options with the Design Team.
- 2. SC assigns ratings to each intervention option.
- 3. SC selects intervention to be implemented and communicates the decision to the Design Team.



Key Definitions:

Intervention: A set of activities that, when implemented together, address a major health, safety, and well-being (HS&W) goal as completely as possible.

• Generally, the more sub-issues (from IDEAS Step 1) that are addressed with an intervention, the more effective the intervention is likely to be.

Selection criteria: Quantifiable measures [in business terms, "key performance indicators" (KPIs)] set by the team that can be used to measure the effectiveness of the intervention.

The IDEAS process assigns a rating to each of four selection criteria: Scope, Benefits/Effectiveness, Resource/Costs, and Obstacles (See Figure 2 below).

Ratings assigned may be High (H), Medium (M), or Low (L).

- "H" indicates the intervention, as a whole, meets or exceeds the stated selection criteria.
- "M" indicates the intervention, as a whole, only partially accomplishes the stated selection criteria.
- "L" indicates the intervention, as a whole, fails to accomplish or barely accomplishes the stated selection criteria.

Figure 2. Example intervention rating worksheet with descriptions of the four selection criteria and sample ratings

	Intervention A	Intervention B	Intervention C
Anticipated Scope			
"Who do you want to reach? How many?"	M/H	н	М
Anticipated Benefits			
"What positive outcomes are we trying to accomplish? Short term? Long term?"	L/M	н	М
Anticipated Resources Needed			
"What resources are currently available? Do we need to acknowledge any constraints?"	L	M / H	М
Anticipated Obstacles "What could interfere with intervention success?"	L	М	L

Priority ranking:

The Steering Committee rank orders the intervention options after deciding how much each option addresses the general health and safety concern, and how much weight to place on each of the selection criteria.

- For example, three intervention options should be ranked 1st, 2nd, 3rd choice according to their strength at meeting the selection criteria.
- *Tip:* Some selection criteria may be more important than others. Consider placing more weight on the ratings that matter most, and prioritize accordingly.
- *Tip:* If an intervention requires authority or budget beyond that of the Steering Committee, still consider making a request to the proper authority. By doing so, you can show the DT that management is willing to act in support of their concerns.

Final decisions about which intervention(s) to implement are made by the Steering Committee and/ or upper management.

Resources:

Handout: Intervention Proposal Planning Guide for Design Team and Steering Committee

Handout: Active Listening

Handout: Giving and Receiving Feedback Effectively



Step 5: Rate and Select Intervention Options -- Steering Committee

	Intervention A Title:	Intervention B Title:	Intervention C Title:
Rate the three intervention alternatives as High (H), Medium (M), or Low (L) relative to the selection criteria from Step 3.			
Anticipated Scope (L/M/H)			
Anticipated Benefits (L/M/H)			
Anticipated Resources Needed (L/M/H)			
Anticipated Obstacles (L/M/H)			
Topics to discuss with Design Tean	Topics to discuss with Design Team regarding proposed intervention (optional):	optional):	

Intervention(s) selected for implementation:

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Step 5: Rate and Select Intervention Options -- Steering Committee

SAMPLE COMPLETED WORKSHEET	Intervention A Title:	Intervention B Title:	Intervention C Title:
Rate the three intervention alternatives as High (H), Medium (M), or Low (L) relative to the selection criteria from Step 3.	Improve functionality of coffee cups and lids	Improve safety features of coffee machine	Reorganize workspace to maximize efficiency
Anticipated Scope (L/M/H)	T	π	Τ
Anticipated Benefits (L/M/H)	Γ/M	Ι	Σ
Anticipated Resources Needed (L/M/H)	T	M/H	Σ
Anticipated Obstacles (L/M/H)	工	I	Ţ
Topics to discuss with Design Tean	Topics to discuss with Design Team regarding proposed intervention (optional):	optional):	

Intervention B: SC agrees this intervention may have the greatest impact. However, we are concerned about the time and effort to find an alternative coffee machine Intervention A: SC agrees with ratings for anticipated benefits and resources. However, using thicker coffee cups materials may conflict with eco-friendly brand. We design and if it will impact coffee flavor. Are DT members willing to gather more info so SC can make an informed decision before purchasing new machines? rated "high" for obstacles because we might lose customers. SC would like to research compostable cup options if DT feels this option is essential. Intervention C: This seems like a win-win. All employees benefit and the obstacles are quite low.

Intervention(s) selected for implementation:

We recommend proceeding with option C first, then possibly implementing other options based on the results of additional research.

Intervention Proposal Presentation Planning Guide for Design Team and Steering Committee

The goals of the proposal presentation are:

- Develop a **shared understanding** of the root causes of a specific safety or well-being concern.
- Develop a shared understanding of how the proposed interventions will address those root causes.
- · Develop trust through respectful, open dialogue.
- Inspire management support for at least one of the proposed interventions.

Design Team

- Prepares and delivers a proposal presentation to the Steering Committee
 - The proposal should include three intervention options with fully developed business case for each one. The goal is for Steering Committee to approve at least one option.
- · Prepares proposal presentation materials
 - **Recommended:** Prepare a summary sheet and PPT presentation use these to focus attention of managers, be brief and clear. Can provide worksheets as supporting documentation.
 - Presentation Content
 - Background (the problem, the root causes, goal, possible solutions)
 - Selection criteria (from Step 3, also called key performance indicators or KPIs)
 - Proposed Interventions -- rated by KPIs (from Step 4C and Step 4D worksheets)
 - Conclusion/recommendation
- Practices proposal presentation
 - Selects 1-2 DT members as presenters. Practice with DT until presenters are comfortable, the materials are refined, and the DT is satisfied. This may take 2-3 meetings if DT members have little prior presentation experience.
 - Practices effective presentation skills
 - •Use presentation tools to keep yourself and others focused
 - •Use your own words to tell a compelling story
 - Invite questions and feedback
 - •If you don't know the answer to a question, acknowledge that fact and offer to help find the answer
 - •Conclude the presentation with a clear call to action
 - Reviews effective communication skills (see handouts: Active Listening, Giving and Receiving Feedback Effectively)
- Tips for effective communication Steering Committee and Design Team
 - Ask questions and listen actively to understand the values and perspective of the person speaking.

- Assume good intent and remain positive. What participants say and do in a meeting
 will impact everyone's comfort, confidence, and trust in the process. This may be
 especially true for Design Team members who are interacting with managers in a
 presentation setting for the first time.
- Pay special attention to the intervention selection criteria (KPIs) Ask, "How do the KPIs support organizational goals?" This information will help Steering Committee members assess the merits of the interventions. It will also help Design Team members understand and accept the SC decisions and recommendations.

Steering Committee (SC)

- Attends the proposal presentation most or all members should be present.
 - Asks clarifying questions to fully understand the rationale and business case for the intervention options. This is an opportunity to learn how front-line employees view the root causes of a health concern and what can be done to address it.
- After the proposal presentation Meets as a team separately to review and discuss the proposed interventions. Rates the intervention options (uses a blank IDEAS Step 5 worksheet) and recommends one or more interventions for implementation.
- After completing Step 5 rating sheet Reconvenes (in person is best) with DT to recommend intervention priorities. Aim for 2-4 weeks for timely follow up.
 - Explains any modifications suggested in the proposed intervention activities.
 - Explains resources available to support interventions and recommended timeline for implementation.
 - Invites Design Team to contribute to developing action and evaluation plans (IDEAS Steps 6 and 7). They can be valuable partner for successful implementation!
 - Appropriate roles for DT members could include: providing feedback on action plans, pilot testing or prototyping of new solutions, promoting employee participation in new interventions, and assisting with evaluation activities.
- Steering committee prepares to move into IDEAS Steps 6 and 7
 - Establishes action plans for implementing intervention activities (Step 6).
 - Uses selection criteria from IDEAS Step 5 to develop an evaluation plan for monitoring and evaluating intervention activities (Step 7).

Resources

Handout: Active Listening

Handout: Giving and Receiving Feedback Effectively

PPT Template for Intervention Proposals (download from www.uml.edu/cphnewtoolkit)



Active Listening

Seeking to Understand First

We demonstrate this by:

- · Listening without interrupting
- Listening without judging or reacting in the moment to what is said, "Hearing the whole story"
- Communicating attentiveness to the speaker through facial expression and non-verbal behaviors (nodding, attentive body posture, etc.)

Coming to Mutual Understanding

We demonstrate this through paraphrasing and clarifying:

- Stating what you heard using your own words
- Checking with the speaker that we are capturing the message
- Asking clarifying questions

Examples of Paraphrasing.

zampies or i arapmasing.	
"I heard you say"	
"From what you said, it sounds like you felt"	
"This is how I understood what you were saying"	
Examples of Asking Clarifying Questions:	
"When you said did you mean or?"	
"I am not sure what you meant by Could you say more	?"

Adapted from University of Massachusetts Lowell Workplace Learning and Development



Giving and Receiving Feedback Effectively

When giving feedback, be:

Specific: Be explicit, free from ambiguity, and example-driven

Behavioral: Focus on behaviors and ideas, not personality

Timely: Give feedback as soon as possible, don't put it off

Frequent: Allows for balance (positive and critical), becomes more the norm

Balanced: Be sure to ask the employee what he/she thinks, give both positive and critical feedback

Constructive: When providing critical feedback, focus on the merits of the proposal content.

Provide clear suggestions for improvement, free of judgement and bias

Relevant: Cover the most important aspects, allow for personal style

Accurate: Avoid hearsay as feedback, get the facts

When receiving feedback, be:

Open: Be willing to hear ways to improve, keep an open mind

Patient: Listen without interrupting, justifying or explaining

An Active Participant: If you do not understand, ask for an example or further explanation

Reflective: Allow for time to process feedback, agree to discuss further if needed

Interested: Pay attention, ask questions, and ask for examples

Non-Defensive: Try to listen openly without prejudgment or bias

A Listener: Try to avoid the habit of "waiting to respond"

Adapted from University of Massachusetts Lowell Workplace Learning and Development



IDEAS STEP 6

Plan and Implement Interventions





IDEAS STEP 6

Plan and Implement Interventions

Champion Preparation

To do:

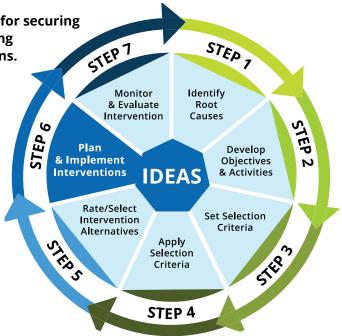
- 1. Watch: IDEAS Step 6 Training video: Plan and Implement Interventions (See Key Resources)
- 2. Review the Planning Guide for Implementing Interventions. (See Key Resources)
- 3. Secure support from key stakeholders who will be involved in implementing intervention activities. Invite key Design Team members.

To know:

The goal of IDEAS Step 6 is to develop an implementation plan and timeline for each activity of the approved intervention. The plan should include information about each activity to be implemented, how and when it will be implemented, and who is responsible.

The Steering Committee (SC) is responsible for securing resources and oversight for implementing all activities of the approved interventions.

- The SC may delegate implementation to others, but should monitor implementation success.
- The implementation process may be iterative and will likely require a period of weeks or months, depending on the number and complexity of the intervention activities.



Key resources for implementing interventions:

- **IDEAS Step 4 worksheets** refer to these for a complete inventory of intervention activities, intended participants, desired outcomes, and potential obstacles.
- Planning Guide for Intervention Implementation (next page)
- Implementation Plan template for interventions use this (or an existing project management tool) to document tasks, deadlines and responsible personnel.
 https://www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/generate-solutions/plan-and-implement.aspx
- Step 6 Training video: Plan and Implement Interventions https://www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/generate-solutions/plan-and-implement.aspx

Planning Guide for Planning and Implementing Interventions

Implementing an intervention takes careful planning and management, especially if there are multiple intervention component activities. To be successful, you'll need to involve the right people, gather input, overcome roadblocks, and track progress.

Think of the implementation process as a **journey.** Use the outline and discussion points below as a road map to carefully guide decisions as you proceed along the journey.



1. Set priorities for sequencing the implementation of specific activities. You may recommend pilot testing certain activities before full-scale implementation.

- What are the component activities of the approved intervention?
- Do some activities need to be implemented first, relative to other components?
- Should some activities be prioritized because they can be more easily accomplished?
- Are there any organizational initiatives (e.g. mergers, reorganizations, software changes, relocation, etc.) that would suggest the need to implement certain activities earlier rather than later (or vice versa)?
- Would pilot testing be beneficial before implementing some activities?
- For more challenging components, what preliminary steps can be taken to prepare for implementation? This may help to expedite the implementation progress.

2. Identify personnel who should be involved in planning and implementing the intervention components.

- a. Determine staffing and financial resources necessary to implement an intervention.
 - Where in the organization would each of the intervention activities be implemented?
 - Who are the logical leaders for each activity? Who will play central roles?
 - Do some activities require approvals to implement? Whose approvals are required?
 - Are there vendors or external partners to involve?
 - How much will it cost in terms of equipment, training, personnel time?
 - What existing resources within the organization can be used to help initiate implementation of an intervention?

- b. Invite Design Team members to assist with implementation in specific ways. Possible Design Team roles:
 - Participating on planning committees.
 - Conducting small pilot tests before implementing activities more broadly.
 - Gathering feedback from co-workers to help identify and resolve barriers.
 - Suggesting ways to simplify or streamline the implementation process.
 - Recommending or providing training to help workers successfully adopt new procedures.
- 3. Create a schedule for implementing each component activity of the intervention. Use your organization's existing project planning tools or use the Implementation Plan template for interventions (see Key Resources).
 - a. Identify key stages that would benefit from worker/end user input.
 - b. Determine ways in which DT members can assist with delivering some of the intervention activities.
 - c. Decide how the implementation plan will be communicated to the Design Team; they can serve as important supporters and problem solvers as implementation proceeds and should remain well informed throughout the process.
 - d. Identify how the intervention components interact with other initiatives occurring within the organization or departments.
 - e. Manage and follow through with the implementation schedule; adjust as needed.
- 4. Develop a communication plan for the intervention and the overall participatory program to inform workers, supervisors and middle and upper managers.
 - a. Who will be impacted by the intervention activities? These people are important stakeholders and should be represented on the implementation team.
 - Who will be most affected? Consider people whose jobs or work process may change.
 - What training is needed to successfully adopt the change?
 - b. Which DT members can serve as key contacts to explain the planned implementation steps and to get further input from the front-line staff?
 - c. Decide how the implementation plan will be communicated to managers, supervisors, and the broader workforce.
 - d. Plan training sessions for supervisors and managers who will need to support the intervention. Recognize DT members for their roles in creating interventions and supporting implementation.

5. Celebrate successes and milestones

- Publish progress updates in your organization's newsletters
- Honor outstanding effort of individuals at meetings and/or events
- Hold a celebration party
- Organize award ceremonies

IDEAS Step 6 – Implementation Plan

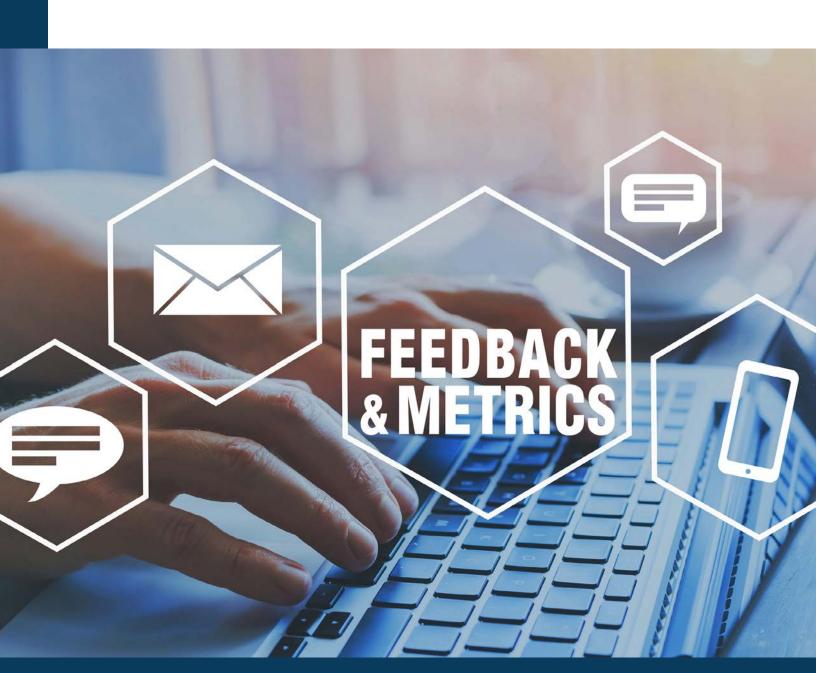
TO BE COMPLETED BY STEERING COMMITTEE WITH INPUT FROM DESIGN TEAM

Health/Safety/Well-being Objective:	ective:		
Intervention Activity			
Actions/Tasks (What)	Implementation Process (How, Who)	Due by (When)	Status
		⊢	
.			
Evaluation Measures: If this objective	Evaluation Measures: If this objective and activity were achieved, we would see	see in the short term, and	nd in the long term,
Tip: Use the Selection Criteria from IDEAS	Steps 3 and 4 worksheets as the basis to I	Tip: Use the Selection Criteria from IDEAS Steps 3 and 4 worksheets as the basis to measure short and long-term results of activities.	/ities.
Developed by the Ce	enter for the Promotion of Health in the New Er	Developed by the Center for the Promotion of Health in the New England Workplace with support from NIOSH grant #U19-OH008857.	nt #U19-OH008857.



IDEAS STEP 7

Evaluate Interventions





IDEAS STEP 7Evaluate Interventions

Champion Preparation

To do:

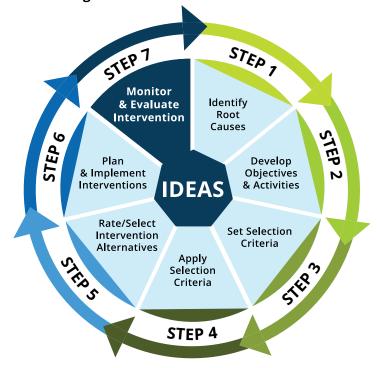
- **1. Watch:** Step 7 Training video: Evaluate Interventions (See Key Resources)
- 2. Review: Planning Guide for Evaluating Interventions
- 3. Review: Understanding Process and Outcome Evaluation Measures

To know:

The goal of IDEAS Step 7 is to develop an evaluation plan and timeline for each component of the approved intervention.

The Steering Committee is responsible for overseeing the evaluation of interventions.

- The Steering Committee may delegate responsibility for the evaluation activities, but they should monitor progress towards the effectiveness criteria.
- It is highly beneficial to involve key Design Team members in evaluation activities.



Key resources for evaluation planning:

- IDEAS Steps 3 and 4 worksheets (from Design Team)
- Step 7 Training video: Evaluate Interventions https://www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/generate-solutions/monitor-and-evaluate.aspx
- A sample Evaluation Planning Template is available on the HWPP IDEAS Step 7 Monitor and Evaluate Interventions page: https://www.uml.edu/Research/CPH-NEW/Healthy-Work-Participatory-Program/generate-solutions/monitor-and-evaluate.aspx
- CDC Worksite Health Promotion Evaluation page https://www.cdc.gov/workplacehealthpromotion/model/evaluation/index.html
- OSHA Evaluating Safety and Health programs page https://www.osha.gov/shpguidelines/program-evaluation.html

Planning Guide for Evaluating Interventions

- 1. Review the worksheets from IDEAS Steps 4B and 4C to identify the evaluation measures (KPI's or Selection Criteria) for the proposed intervention activities.
- 2. Develop a plan to evaluate the interventions.

Determine who should be involved in intervention evaluation.

- Identify who should be involved in creating the evaluation plan.
- Identify who can assist with designing data collection tools, and leading data collection activities.



- **3. Use the Evaluation Planning Template** (See Key Resources) to list the evaluation measures and how they will be assessed.
 - a) Prioritize evaluation activities based on the intervention implementation plan created in IDEAS Step 6.
 - b) Plan methods to evaluate each intervention activity.
 - c) Develop data collection tools and instruments. You may need to develop surveys quickly if you plan to measure changes in attitudes and behavior BEFORE and AFTER implementing specific intervention activities.
- 4. Establish a plan for how you will collect and review data on the implementation process and the intervention results. Use this information to refine the intervention activities.
 - a) Decide who will oversee evaluation activities, how and when the data will be reviewed and communicated.
 - b) Communicate potential concerns or changes with the Design Team and continue using an organization-wide integrated participatory health promotion program.

Understanding Process and Outcome Evaluation Measures

Process evaluation: How you monitor implementation effectiveness

Having a written evaluation plan will help to assure that the proper data will be collected, at the right time, from the right people, and reviewed appropriately. A plan will also document who is responsible for specific tasks.

Based on the key considerations generated in Step 6, the Steering Committee will monitor:

- how close the estimates were on resources needed, costs and funding, and potential obstacles,
- · communications and training, and
- key personnel responsible for the intervention itself.

A strong evaluation plan includes multiple levels of data collection, including "process evaluation" and "outcome evaluation" measures.

Process evaluation answers questions such as:

Are the intervention activities being implemented as planned? If not, why not?

Are there adequate resources allocated to support the intervention?

Is the intervention reaching the intended audience? If not, why not?

Are the people who will be affected by the implementation (e.g. changes in work procedures, or equipment) satisfied, or are there unanticipated problems that need to be solved?

Is additional training or communication needed for things to run more smoothly?

Process evaluation methods don't need to be very formal, but they do need to be planned.

The implementation team (if different from the Steering Committee) should maintain contact with the people who are implementing various activities of the intervention.

• **Example:** Schedule meetings or regularly speak with supervisors and workers to ask how things are going.

Set up a system to "count" or quantify what is done and who is on the receiving end of what is done (e.g. numbers of training presentations, numbers of participants, etc.).

• **Example:** Use an electronic sign up system for training events to create a record of events and registrants.

Set up a system to capture feedback for improvement from people the intervention is intended to reach.

Example: Collect brief evaluation surveys following training events. Use process evaluation
data to refine the implementation so the activities are well-accepted and reach the intended
audience. Be prepared to respond quickly and adapt the intervention if there are
unexpected obstacles or unintended consequences.

Outcome evaluation: How you measure intervention impact

Outcome evaluation answers questions such as:

- Does the intervention seem to be having the intended benefits related to the major safety, health, and well-being concern?
- Are there any unintended consequences that are a cause of concern?

Outcome evaluation should include measures of **short-term** and **long-term** results.

- **Short-term** measures assess the immediate results of the intervention activities. These are important indicators that some initial changes are taking place as a result of the intervention.
 - **Examples:** changes in knowledge, attitudes, behaviors. These are typically measured using surveys.
- **Long-term** measures assess the health-related outcomes of the immediate changes. Changes in health and safety outcomes can take a year or longer to observe.
 - **Examples:** Fewer injuries, reductions in lost time, improved scores of health and well-being. These are typically measured by company data such as healthcare utilization data, workers' compensation claims, and other kinds of administrative data at the organization level.

Use outcome evaluation data to confirm whether the intervention components are or are not having the desired effect. Be sure to recruit the assistance of someone with evaluation training when you are planning specific evaluation methods.

Tips when using outcome evaluation data

Changes in reported health status or health conditions take time to achieve. Even though your target measures may not change quickly, there may still be positive impacts.

• Be sure to collect plenty of "short-term" measures to give an opportunity to assess and document positive changes.

Sometimes, large swings in outcomes measures are due to factors other than your intervention.

- Statistics on health and injury rates can fluctuate due to chance, making it hard to detect differences due to an intervention.
- Grouping statistics in multi-year time increments (e.g. three years at a time) can provide a more stable and reliable look at trends in health and safety impacts.
- Someone trained in epidemiology can assist with data analysis and interpretation.
- Again, collecting "short-term" measures can help you detect immediate impacts to behavior and other changes in the organization.

Don't underestimate the power of organizational culture and climate for supporting positive health and safety behavior. These are important outcomes to measure.

• If workers perceive that their co-workers and managers value health, safety and well-being, they will tend to value it too.

Use evaluation data to generate awareness and support for your intervention.

- Develop communications to promote the successes of the intervention at every stage.
 Frequent communication can help people feel more engaged and motivated to be part of something positive.
- Develop progress reports about the intervention to promote both the intervention and the overall Healthy Workplace Participatory Program.

IDEAS Step 7 - Evaluation Plan

TO BE COMPLETED BY STEERING COMMITTEE WITH INPUT FROM DESIGN TEAM

Key Performance Indicator* (How, When, Who) (Example – Flex-time policy	aluation Results of Evaluation Activity Implications for Future Action Plan
	Ι
* Tip: Refer to the short-term and long-term effectiveness measures outlined in IDEAS Steps 3 and 4 Worksheets as the basis for the planned evaluation activities. Be sure to capture "process" measures to evaluate implementation and participation.	s as the basis for the planned evaluation activities.