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From:

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132 - NIOSH WorkLife Essential Elements

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Draft January 2008

Candidate List: Essential Elements of Effective Workplace Programs and Policies for Improved Worker Health and Wellbeing

Organizational Culture and Leadership

- Put People First- Any successful worklife program has to put people first. It has to have active worker involvement or else it won't work. It must be based on trust not fear...
- Leadership commitment to worker health and safety, reflected in words and actions, is critical. Everyone must see that safety and health is critical to the company, that it is not just talk. A Worklife program will not work without a commitment to worker safety and health first..
- 3. Mid-level management engagement. A worklife program will not be effective without the active support of mid-level managers and supervisors. They are the direct links between the workers and company and will determine if the program succeeds or fails.

Program Design

- 4. Integrate systems. A Worklife program generally works best if it is integrated with all the other programs for that company (health and welfare, occupational safety and health, etc., Programs should reflect a comprehensive view of health: behavioral health/mental health/physical health/spiritual health are all part of total health.
- 5. Establish clear principles Worklife programs need to have clear principles that focus their priorities. Prevention is more efficient and effective than treatment. Changes in the work environment (such as reduction in toxic exposures or improvement in work station design and flexibility) affecting all workers pay greater dividends than relying solely on individually focused change strategies that must be embraced by each affected individual to succeed.
- 6. Be Consistent. Workers won't participate in a Worklife program unless they believe the company really cares about worker health. By demonstrating a commitment to worker health, workers are more likely to participate in a Worklife program. For example, blue collar workers who smoke are more likely to quit and stay quit after a worksite tobacco cessation program if workplace dusts, fumes, and vapors are controlled and workplace smoking policies are in place.
- 7. Tailor programs to the <u>specific</u> workplace and the diverse needs of workers. Workplaces vary in size, sector, product, design, location, health and safety experience, resources, and worker characteristics such as age, training, education, cultural background, and health practices. Effective programs are responsive and attractive to a diverse workforce. One size does <u>not</u> fit all—flexibility is necessary. Successful

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Deleted: . The connection of workforce health and safety to the core products, services and values of the company should be acknowledged by leaders and communicated widely. In some notable examples, corporate Boards of Directors have recognized the value of workforce health and wellbeing and made it a key operating principle for which organization leaders are held accountable

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- programs are inclusive and recognize and address disparities and diversity. [Can we give an example?]
- Consider incentives and rewards in program design. Worklife
 programs that work often include rewards or incentives for participation
 but poorly designed incentives may create a sense of "winners" and
 "losers" and hurt the effort. Incentives and rewards should focus on
 outcomes that are important to the effort.
- Measure Progress Effectively. To see if your Worklife Program is
 effective you need to start by measuring where you are and then later
 assess your progress. For example, a Worker survey to assess Health
 Risk needs to include both individual and work-environment health risk
 factors can help establish baseline workforce health information, direct
 environmental and individual interventions, and measure progress over
 time.
- 10. Recognition of complexity. Successful programs reflect an understanding that the interrelationships between work and health are complex. New workplace programs and policies modify complex systems. Uncertainty is inevitable; consequences of change may be unforeseen. Interventions in one part of a complex system are likely to have predictable and unpredictable effects elsewhere. Failure is common. Programs must be evaluated to detect unanticipated effects and adjusted based on analysis of experience. What is this section saying-don't worry if you fail? Is that an essential element of a successful program? Maybe it should read to not let failures stop you, to assess the failure and learn form it, then improve the program.
- 11. Make Sure Your Worklife Program Lasts- . Programs must be flexible enough to change with changing conditions. Reassess your Worklife program periodically to make sure it is tailored to the changing needs. This will keep it successful.
- 12. Ensure **confidentiality**. Be sure that the program meets regulatory requirements (e.g., HIPAA, State Law, ADA) and that the communication to employees is clear and concise on this issue. <u>If workers feel that information is not kept confidential</u>, the program is doomed.

Program Implementation and Resources

13. Be willing to start small, scale up. Although the overall program design should be comprehensive, starting with modest targets is often beneficial if they are recognized as first steps in a broader program. For example, target reduction in injury rates or absence. Consider phased implementation of these elements if adoption at one time is not feasible. Use (and evaluate) pilot efforts before scaling up. Be willing to abandon pilot projects that fail. [This is good advice for any intervention. Can you give a concrete example to make it hit home?]

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- 14. Staffing. Identify and engage appropriately trained and motivated staff. Select qualified vendors. [Give an example of the staff normally required for a successful Worklife program but don't scare off small companies by making it sound like they have to hire lots of professionals to make it work]
- 15. Resources. Allocate sufficient resources, including staff, space, and time, to achieve the results you seek. Direct and focus resources strategically, reflecting the principles embodied in program design. [Again this is vague and hard to refute, but what does it mean? Can we give a concrete example to make this understandable, e.g. to a small company?]
- 16. Communication. A Worklife program needs effective communications to be successful. You need to let everyone know what you are doing and why and tell of your successes. You need to think about what ways are most effective to get information to your workers and managers, is it a newsletter? Email? Weekly meetings? A bulletin board? If people know what is happening they will be more supportive and the program will be mnore successful.
- 17. Hold People Accountable for the WorkLife program—If this program is important to management then the successes and failures should have an impact in the performance assessment of those in charge.

 They shold know that they will be rewarded for success and not for failures (although some failure is inevitable). (See below)

Program evaluation

- 18. Measurement. Develop objectives and a selective menu of relevant measurements, recognizing that the total value of a program, particularly one designed to abate chronic diseases, may not be determinable in the short run. Integrate data systems across programs and among vendors. Integrated systems simplify the evaluation system and enable both tracking of results and continual program improvement. [Isn't this similar to #9?]
- 19. Learn from your experiences. Adjust or modify the Worklife program based on established milestones and the results you have measured.
- 20. Report on progress. Provide periodic updates to the organizational leadership and workforce. Maintain program visibility at the highest level of the organization through data-driven reports that allow for a linkage to program resource allocations. [Isn't this similar to #16? Or could be combined with it?]

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Supervisors and managers at all levels are involved in promoting healthsupportive programs. They are the key to integrating, motivating and communicating with employees. Mechanisms are also important that ensure that employees are not just recipients of services but have opportunities to contribute to program design and implementation.

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Program design involves an initial inventory and evaluation of existing programs and policies relevant to health and well- being and a determination of their potential connections

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. In general, better integrated systems perform more effectively. The first step should be to integrate the often separately managed programs (health promotion and wellness, disease management, disability management, risk management, employee assistance and behavioral health, and health/sickness insurance) into a comprehensive health-focused system. This system should then be coordinated or integrated with an overall health and safety management system

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No single vendor offers programs that fully address all of these dimensions of health. Therefore, it is important to meet the challenge of integrating data systems across vendors and with internal data systems.

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to guide program design and resource allocation. Adopt accountability systems to reflect these principles.

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Willingness to engage in worksite health-directed programs may depend on perceptions of whether

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. Individual interventions can be linked to specific work experience. Change the physical and organizational work environment to align with health goals

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. Successful programs recognize this diversity and are designed to meet the needs of both individuals and the enterprise.