INTERIM REPORT

Team Awareness For Workplace Wellbeing

An Adapted Tool-Kit for New York State

Developed by Organizational Wellness and Learning Systems
In association with NCADD - RA, and LEAF

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Background

In New York State, prevention efforts have primarily been focused on youth risk and protective factors with a concentration in providing school-based prevention education and counseling. This project is an initial, early-phase, capacity-building process to initiate the development of a prevention delivery infrastructure for workplace substance misuse prevention that is integrated within the destignatized context of health promotion, well-being, and resilience. The model utilized is the OASAS approved PPP Team Awareness for Workplace Wellness model (TAWW). The TAWW model is adaptive in nature and can be implemented along with supplemental education.

The model and its adaptation occur across four standard phases:

- 1. Discovery (early capacity building),
- 2. Adapt (showcase/prototype),
- 3. Design (early pilot curriculum), and
- 4. Deliver.

All four phases are anticipated to last for 2 years. This report covers results from the Discovery phase and proposal of the new adapted TAWW Tool-Kit.

LONG-TERM GOALS

- Goal #1: Implement some element of the adapted TAWW Tool-Kit in 5 businesses
- Goal #2: Train prevention providers in 6 counties to deliver the TAWW Tool-Kit
- Goal #3: Document evidence of effectiveness to be utilized by prevention providers for program implementation and for use in a value proposition for value-based payments.

WORK TO DATE

Between August 2021 and December 2021, the consulting organization (Organizational Wellness & Learning Systems) worked closely with two SOR2 grantees: LEAF (Leatherstocking Education on Alcoholism/Addictions Foundation) from Oneonta, New York, and with Executive Director Julie Dostal; and also, NCADD-RA (National Council on Alcoholism and Drug Dependence) from Rochester, New York, and with Executive Director Jennifer Faringer. Both LEAF and NCADD-RA also assembled other educator partners from surrounding counties.

The focus of all of these initial efforts was on both: (1) Capacity Building and discovery of needs, issues, strengths, and concerns amongst stakeholder in the respective regions of these two provider agencies; and (2) providing educators a train-the-trainer for their own capacity building

efforts. Importantly, a multi-county needs survey was distributed through the region assessing organizational leaders' perceptions of the need for mental health services.

DISCOVERY METHODOLOGY

The Capacity Building process included a number of Train-the-Trainer activities. Dr. Joel Bennett (Principal Developer of the original Team Awareness-TA) was the primary trainer in all of these activities, which included:

- Several in-person and/or orientation sessions of prospective educators of the TA model (theory, practice, findings) and methods for adaptation.
- A total of eleven (11) in-depth Stakeholder Interviews (specific for NCADD-RA) with leaders and managers from key perspectives in diverse communities (including directors of Chambers of Commerce, Business Executives, Public Health Executives, County Government Executives, and Directors of Workforce Development). Importantly, educators shadowed these activities and then conducted their own interviews. Results from these interviews identified key themes needing to be addressed in the adapted program.
- A total of five (5) in-depth focus groups (specific for NCADD-RA) that reached over 40 employees. After establishing confidentiality guidelines, these groups reported on current stressors and were then provided a sample resilience activity from the original Team Awareness or Team Resilience training programs. Pre-and-post session ratings were also collected. Importantly, educators shadowed these focus group activities and then conducted their own focus groups.
- The multi-county survey was developed following input from a focus group gathered through the collaboration with Southern Tier 8 (Binghamton New York, Executive Director Jen Gregory) and the CREST Project (Collaborative Recovery Empowerment of the Southern Tier). This group consisted of 8 employers and consultants who provided detailed feedback on item wording and optimizing survey utility. The survey was distributed through LinkedIn, Facebook ads, and with the assistance of all groups and educator agencies as well as chambers of commerce throughout the region (e.g., Binghamton, Rochester, Delaware). A total of over 220 responses from businesses of all sizes completed the survey.

Results to Date

Common themes were identified across both Stakeholder Interviews and Focus (aka "Discovery") Groups. It should be kept in mind that the majority of participants in these interviews worked in the areas of workforce development, community public health, county or local government, and educational settings. Briefly, the themes from these interviews and groups could be categorized into three areas:

GENERAL ISSUES

- COVID 19 related stressors (staffing, apathy). Respondents unanimously shared about both acute responses to initial COVID and lock-down as well as ongoing chronic problems, especially staffing shortages and growing apathy amongst a sufficient number of workers who are dealing with work overload, uncertainty about employment, reluctance in returning fully to work, and ongoing regulatory changes in public health agencies.
- Polarization related stressors (hyper-reactivity, empathy failures). Respondents expressed concern about the political environment and emotional hyper-reactivity where individuals own stress reactions lead to further reactions, negativity, and failures to maintain civil interaction. Comments about lack of empathy showed concern about social problems and the need to build more social capital within communities.

WORKPLACE ISSUES

- Moral Injury, Burn-Out, Traumatization, Resignation. A number of stakeholders who were senior or middle managers, as well as employees working at lower job levels, shared that they had been exposed to moral injury (e.g., witnessing or told to do things that were against their values), and either reported about their own loss, grief, and loss of optimism in the face of the above-stated stressors. Some respondents shared of their or other's resignation; that is, nothing could be done given the chronic and unaddressed nature of the staffing problems and coworkers resigning because of workload and in favor of better jobs in the public sector.
- Employers not listening as much as work piled. One aspect of burn-out and resignation was the feeling that those in higher leadership positions were themselves straddled with increasing workloads and could not take the time to listen to employee concerns.
- Lack of community connection for healing. Several high-profile community leaders (working with and through diverse community agencies) felt that there was less interaction and community-to-community (agency) interaction compared to before the pandemic. They also commented that the lack of connection was a result of polarized attitudes due to either political party, mask mandates, Black Lives Matter, or other social issues. This lack of connection was an important workplace issue for many but especially those in governmental or public service.

SOLUTIONS

- Take time to build listening reconnection support. Listening and reconnecting (celebrating, having fun, and doing joint activities) was a key solution that several felt would directly address the above issues. Interviewees felt there was a need to bring people together into a common setting to discuss issues with a focus on positive and uplifting dialogue.
- Create connections between public health, community, business. A key focus for many stakeholders was in those community groups, networking groups, civic groups, or coalitions. It would be important to share and promote solutions in and through such groups as Chambers of Commerce, Rotary Clubs, Jaycees, Lions Clubs, Women's Leadership Circle, Prevention Coalitions, Employer/Industry Association Meetings, etc. (Note. This approach to gathering different community stakeholder groups was part of one of the Team Awareness Family of programs, "The Small Business Wellness Initiative," funded by CSAP as a Community-Initiated Prevention Intervention and later designated in the National Registry of Evidence-Based Programs and Practices)¹
- Build Resilience and Self-Care Skills. Respondents felt it would help to review resilience strategies, self-care strategies, and, within workplaces, set aside time where employees could participate in these educational programs.
- Re-activate a "Choices" mind-set rather than Resignation. As many of the stakeholders (and focus group participants) held managerial positions, there was a sense that employees could be reminded of the choices they do have for healthy coping and building a growth mind-set (optimism, hope, self-leadership) as a way to mitigate the negativity and reactivity.

MULTI-COUNTY SURVEY RESULTS (Preliminary)

Early results from the survey suggested that employers were most interested in communications, team building, and soft skills development; positive resilience and thriving, and also manager stress training. These top-three varied somewhat depending on the region and type of business but were generally the most preferred (See Diagram).

In some cases, employers were most concerned that employees had access to depression and stress coaching or counseling.

Importantly, each of these top interest areas are covered in one or more aspects of the TAWW model. Also, 70% of respondents reported having an Employee Assistance Program (EAP). It would be important for employers to receive information about either how to leverage and optimize their EAP for counseling access or learn how to get free or reduced costs mental health services in and through their community.

¹ See the SBWI Final Research Report Abstract Final SBWI Research Report extract2.pdf

SELECT YOUR TOP THREE: Please select the three services that you are most interested in to help reduce employee health issues.

Answer	First Choice	Second Choice	Third Choice	Grand Total <i>₹</i>
COMMUNICATION, TEAM BUILDING, AND SOFT SKILLS DEVELOPMENT	29	25	22	76
POSITIVE RESILIENCE AND THRIVING	20	26	24	70
MANAGER TRAINING ON STRESS	26	27	17	70
DEPRESSION AND STRESS COACHING OR COUNSELING	29	15	21	65
MIND-BODY PRACTICE: MINDFULNESS, MEDITATION, YOGA	18	16		51
ANTI-STIGMA CAMPAIGNS AND PROMOTE A RECOVERY-FRIENDLY WORKPLACE	5	8	11	24
EDUCATION ON SLEEP HABITS AND SLEEP DISORDERS	3	9	10	22
EDUCATION ON HEALTH PROMOTION INTEGRATED WITH SUBSTANCE USE PREVENTION	1	5	8	14
ALCOHOL AND OTHER DRUG USE ASSESSMENT AND FEEDBACK	1	1	2	4

The survey also asked specifically about programs that could address misuse of Prescription Drugs and the Opioid Epidemic. The chart below shows that, more than any other type of approach, respondents were most interest in the Health Consciousness (Health Activation) education of employees.

Specifically, this item states:

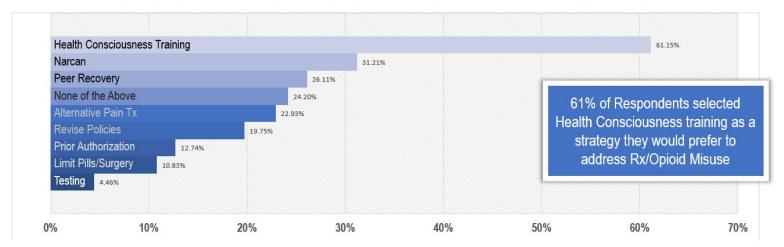
Provide and promote interactive educational programming on empowering employees to be more health-conscious and find healthy alternatives for dealing with pain, anxiety, sleep, energy, or other issues.

We note that the Empowered Health Consciousness program is one of the adapted Team Awareness programs and developed through funding from the CSAP Division of Workplace Program and their Prescription Abuse in the Workplace (PAW) initiative.²

Bennett, J. B., Lucas, G. M., Linde, B. D., Neeper, M. A., Hudson, M., & Gatchel, R. J. (2018). A process model of health consciousness: Its application to the prevention of workplace prescription drug misuse. *Journal of Applied Biobehavioral Research*, 23(3), e12130; and Lucas, G., Neeper, M., Linde, B., & Bennett, J. (2017). Preventing prescription drug misuse in work settings: efficacy of a brief intervention in health consciousness. *Journal of medical Internet research*, 19(7), e242.

INTEREST IN WORKPLACE PROGRAMS FOR PREVENTING PRESCRIPTION DRUG/OPIOID MISUSE

Executives, Managers, Business Owners (Central Region, New York State) – December 2021– February, 2022 Sample Size = 157



Summary

As a result of considerable capacity-building efforts and data collection, the ground has been prepared to begin adapting the original TA model to address identified concerns, needs, and interests across all stakeholder groups. The following section provides an initial recommendation for a new Training Model framework. This model has been reviewed and approved by both agency leads as of March 1st, 2022. An initial version of the "Fundamentals" program will be introduced to educators in March of 2022 along with proposed evaluation tools (pre-and-post ratings).

Introduction to Training Model

The resilience and mental well-being of adults, mainly working adults, are intimately connected to the resilience and mental well-being of the surrounding community. Resilience comes from living one's values in the face of challenges and always seeking to raise one's strength while helping others to do the same. This requires self-care (centering), self-efficacy and determination (confidence), follow-through (commitment), compassion (for self and others), and community (connection and support). These are the Five C's of Resilience as described in the evidence-based "Team Resilience" model.³ It also requires knowing the choices we have to either respond or tolerate (put up with, ignore, and deny) to the challenges and stressors we face alone and together.

Each community is a mosaic of connected features. This includes business owners and workplace leaders in for-profit and nonprofit organizations (e.g., public health, community service, faith-based). Amongst these leaders, a group of particular interest is small businesses. Small businesses (defined as less than 500 workers) and employees make up most of America's workforce. Too often, these companies have to do more with less and, at the same time, also employ workers (with family members) who have stress, mental health challenges, and overall, less access to resources. Fortunately, because of the community mosaic, there are many resources available. Awareness and access to these vital resources require ongoing connection across the community and, most importantly, a sense that "we are all in this together."

The Team Awareness for Workplace Well-Being (TAWW) Toolkit was developed as a result of the capacity building efforts reviewed above. It is designed to promote well-being and positive resilience across a diverse set of stakeholder groups within a community. The TAWW model defines well-being and resilience as follows:

Well-Being: an active process through which people become aware of (have health consciousness) and make choices (take responsibility) for a successful existence and personal sense of wholeness. (This definition is adapted from the National Wellness Institute.)

³ Team Resilience was listed in the <u>National Registry of Evidence-Based Programs (NREPP)</u> and has been studied in several research trials. Two key references are Petree, R. D., Broome, K. M., & Bennett, J. B. (2012). Exploring and reducing stress in young restaurant workers: Results of a randomized field trial. *American Journal of Health Promotion*, *26*(4), 217-224; and Bennett, JB, & Aden, C. (2011). Team Resilience: Health Promotion for Young Restaurant Workers. In Bray, J.W., Galvin, D.M., & Cluff, L.A. Eds. *Young Adults in the Workplace: A Multisite Initiative of Substance Use Prevention Programs*. RTI Press Publication No. BK-0005-1103. Research Triangle Park, NC: RTI Press.

Resilience: The ability to recover from adversity, bounce back to a normal or higher level of functioning, and also learn from the experience of having gone through the adversity.

The ultimate goals of the TAWW Toolkit are to:

- (a) Promote and sustain well-being and resilience amongst individuals, within healthy and resilient teams, workplaces, and communities, and
- (b) Create connections and synergies between these levels individuals, teams, workplaces, and communities that support continued growth and thriving. Accordingly, TAWW is a multi-level well-being strategy.

Successful use of the TAWW Toolkit requires making ongoing efforts at connection, support, access, and genuinely listening to others. These other individuals reside within one's own workplace (team, crew, and department) as well as outside the workplace in other professional associations (e.g., community professional groups, Chambers of Commerce, local associations, civic interest groups). The toolkit is being made available to change-makers, advocates, and ambassadors within and across these diverse areas. This includes workplace leaders (directors, owners, managers), community groups (chambers of commerce, etc.), and -- most importantly -- workers themselves in any type or size of business.

These workers can, through the toolkit, learn how to support, encourage, and even guide their peers as well-being ambassadors. Accordingly, several providers (NCADD-RA, and LEAF, and affiliated prevention providers from diverse organizations) have worked to develop and train a cadre of TAWW educators or facilitators who are available to meet with and provide education to each of the following "buckets" of recipients:

- (1) Small business owners or their delegates (through a needs assessment interview or dialogue conducted by a TAWW educator);
- (2) Employees within work settings (through one or more workshops);
- (3) Managers or leaders within work settings (through one or more workshops)
- (4) Community groups (through one or more workshops)

Employees, after attending a workshop in their work setting, may wish to become a well-being Ambassador and serve as a referral resource for other coworkers. The TAWW Tool-kit includes an advanced Ambassador training for those interested.

Finally, as a way to build connections within a community and both advance and sustain the goals of TAWW, participants can be an Advocate for this work. Any individual who touches the toolkit, through a small business owner interview, community or leadership workshop, can go to another part of the mosaic to promote what they have learned and encourage others to get

together to keep the connections going, build community, instill confidence, and support resilience for everyone. Descriptions of the various aspects of the Tool-Kit and the Ambassador and Advocate trainings are provided in a later section.

Synopsis

The overall purpose of the adapted Team Awareness Workplace Wellness Toolkit is to create an ongoing conversation of care and support across, within, and between four stakeholder groups in the economic/workplace community and within a local area. These stakeholder groups can receive one or more of several tools within the Toolkit. These tools are described in the next section.

The four stakeholder groups (i.e., "buckets" of recipients) who could receive some basic tool within the TAWW Tool-kit are:

- **Small Business Owners** (SBO) or their delegates (of businesses less than 500). The SBO, if they wish, can take action following the interview by:
 - Allowing the educator to schedule a TAWW workshop with employees and managers.
 - O Advocating for the TAWW initiative by sharing information with any community group they are part of.
 - O Business associates, leaders, or managers from a business of any size can participate in the TAWW initiative.
- **Employees** within workplaces or work settings (all industries, profit/non-profit, all sizes). Employees, if they wish, and as supported by their employer, can receive ambassador training.
- **Manager/Supervisors** within workplaces or work settings (for example, CEO, Executives, Directors, Managers, Middle Managers).
 - These managers can also advocate for the TAWW initiative by sharing information with any community group they are part of.
- Community Groups or Networks (Association Members (for example Rotary Club, Women's Business Groups, Civic Groups, Prevention Coalitions, etc.)
 - The individuals in this group or network can also advocate for the TAWW initiative by sharing information with business leaders they know or advocating for the training in their own workplace.

In addition to receiving the basic training, there are two options for Advanced Training:

1. **Resilience Advocate Training -** participants will be asked if they want to be an advocate for Managers/Supervisor or Community Networks training

2.	Employee Ambassador Training - employees will learn peer to peer skills to help peers cope.

TAWW Toolkit

The diagram below shows the basic framework for both the elements of the TAWW toolkit (top of diagram) and the stakeholder recipient groups ("buckets" at bottom of diagram). There are two sets of tools in the TAWW Tool-Kit. **Core Tools** include a Foundational Course (FC) that is recommended as the first entry point as a brief (60-90 minutes) session that can be delivered as a "Lunch & Learn" or

short workshop or session. The other core tools include a brief (60-90 minute) interview that serves as a Needs Assessment and Dialogue (NA^D) between a TAWW educator and a Small Business Owner; a Resilience to Thriving Workshop (R2T); and Health Activation Training (HAT). R2T and HAT are also 60-90 minutes in length.

FC, R2T, and HAT can be delivered to Employees, Managers, and also Community Groups. In addition to these Core Tools, participants can also "Step-Up" for more activities related to continuing the

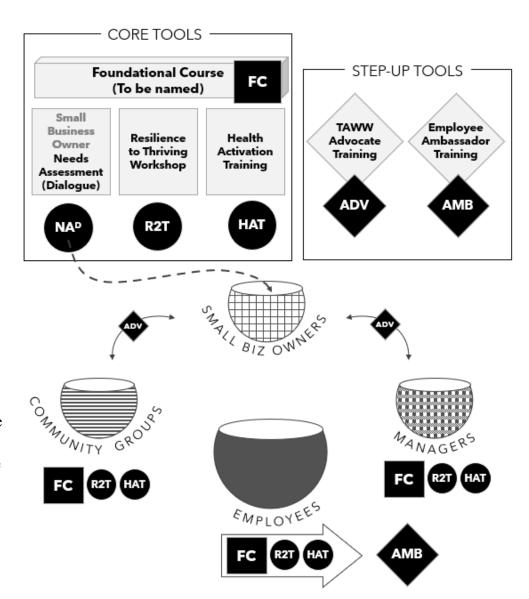
As the diagram shows,

sustaining the program. These **Step-Up Tools**

conversation, building

connections, and

Team Awareness for Workplace Well-Being (The TAWW Toolkit)



include TAWW Advocate Training (ADV) and Employee Ambassador Training (AMB). The request

to be an Advocate is made by a TAWW educator after the Small Business interviews, or at the end of any training (FC, R2T, or HAT) as delivered to a Community Group or Managers. These Advocates would be responsible for promoting the training and encouraging other groups to attend any of the TAWW Tool-Kit courses or asking a business owner to participate in a Needs Assessment Interview/Dialogue (NA^D). Advocate training will consist of a brief online (e-learning) video and reading assignment along with promotional materials and tools that can be shared with others. Each Advocate would have a contact TAWW Educator so Advocates would not have to do too much more than making an introduction and encourage meeting with an Educator.

The other Step-Up Tool is Employee Ambassador Training (AMB). This is a peer-referral training based on the NUDGE module in the original Team Awareness program.⁴ Ambassadors would then receive additional training that involves learning how to NUDGE, role-playing, and practices as well as a full review of local mental health resources. Typically, Ambassadors would be required to have experienced all of the TAWW Tool-Kit programs (FC, R2T, and HAT) and also have some familiarity with mental health and addiction issues (e.g., mental health literacy).

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⁴ NUDGE stands for Notice (if a coworker is struggling or having difficulty with work-life stress), Understand (what, if any, one's role when it comes to approaching the coworker), Decide (if something should be said or done and how), Guidelines (if action is to be taken, then use guidelines described in the course as well as any relevant workplace policies), and Encourage (in ways that are genuine and compassionate).

Articles that explain the derivation of NUDGE include Bennett, J. B., Lehman, W. E., & Reynolds, G. S. (2000). Team awareness for workplace substance abuse prevention: The empirical and conceptual development of a training program. *Prevention Science*, *1*(3), 157-172; and Bennett, J. B., Linde, B.L., Lehman, W. E., & Reynolds, G. S. (2020). Building Prevention for The Workplace: An Integral and Process-Oriented Approach IN Feinberg, M. E. (Ed.). (2020). Designing Evidence-Based Public Health and Prevention Programs: Expert Program Developers Explain the Science and Art. Routledge.

TAWW Fundamentals:

The Ripple Effect of Well-being

Each group/participant has the option to attend a 90-minute training of a "TAWW Fundamentals Workshop" (aka TAWW Fundamentals: The Ripple Effect of Well-Being) that outlines a standard set of practices. At the same time, participants would be made aware that all other stakeholders ("buckets") are taking the same fundamental course with similar conversations. The additional trainings (R2T, HAT) beyond the 60-to-90-minute Fundamentals Course will be available to any group within the Toolkit.

The Fundamental Course will include each of the following mini-modules (Activities) that require between 10 and 20 minutes to deliver. Educators will be encouraged to cover as many of these activities as they can but, for purposes of fidelity, would be required to do at least three activities and always use the Really Listening activity as the final feature.

1. The Power of The Ripple Effect: Introduction and Activity 1

- a. How do health and sense of connection/community work together?
- b. Participants work in pairs or small groups to answer this question by giving examples of how one's health is influenced by support, connection, belonging, and how one's community connections can be facilitated by one's health.

2. What Matters Most: Sharing Values and Activity 2

- a. Participants select the three values of most importance to their lives and share them in pairs.
- b. This value exercise sets the stage for talking about whether one is living according to one's values and how that impacts others.

3. SECRET Power of Stress: Identifying Your Set-Point and Activity 3

- a. SECRET stands for a cognitive-behavioral framework for building resilience: Stress □ Evaluate □ Cope □ Resilience □ Evolve □ Thrive. This framework is derived from Raw Coping Power and an original Team Awareness Module⁵. A quick self-assessment introduces the concepts of resilience, thriving, set-point, and health consciousness.
- b. Participants reflect on questions related to how well they are coping, just getting by, or thriving, and what types of activities help them thrive.
- c. NOTE. This activity also introduces the Resilience to Thrive (R2T) training and the Health Activation Training (HAT). If educators do not do the SECRET activity, they are encouraged to briefly describe R2T and HAT so participants know there are other options.

4. The Choices We Make: Conscious Decisions and Activity 4

a. Participants work in one of three groups to complete the costs/benefits of three

⁵ Bennett, J. (2014). Raw Coping Power: From Stress to Thriving. Organizational Wellness & Learning Systems, Inc.

types of decisions that relate to playing a more active role in creating a healthy team and workplace. Each decision taps into an aspect of team resilience.

- i. DECISION 1 (*Get Help* versus *Go It Alone*): When faced with significant challenges in life (include anxiety, depression, loss)— what are the costs and benefits of Getting Help versus the costs and benefits of Going it Alone?
- ii. DECISION 2 (*Respond* versus *Tolerate/Ignore/Stigmatize*): When one sees another person (coworker) struggling or under mental health or work-life stress—what are the costs and benefits of Responding to them versus Ignoring them, Tolerating the situation, or even judging (Stigmatizing) them?
- iii. DECISION 3 (*Speak Up* versus *Say Nothing*): When an employee sees a problem, concern, or issue that could lead to safety or productivity problems—what are the costs and benefits of Speaking Up (Communicating) versus remaining silent (Saying Nothing)?

5. Team Resilience: The Five Cs and Activity 5

- a. Participants complete a "Best Coworker" exercise and see how resilience is alive in their team.
- b. Describe the Characteristics of Your Best Coworker.
- c. How do these relate to each of the FIVE Cs of Resilience (Centering, Confidence, Commitment, Community, and Compassion)?

6. Really Listening & Next Steps: Select from the Tool-Kit

- a. Participants choose a topic from the class to share about and practice really listening in pairs.
- b. Participants are provided with a "Really Listening" worksheet and given 15 minutes to discuss their goals in pairs. The objective of this activity is to set a small personal goal and to ask their partner to be an accountability buddy and touch base with them in a week to see if they met their goal. Depending on which previous activity was provided, they can choose to discuss:
 - i. Their role in the ripple effect and how they see the relationship between health and support in their own life (Goal: How can you improve either your health or support and how can one of these help the other?).
 - ii. Their top values and how they are or are not living their values (Goal: What steps do you need to take to behave more in alignment with one value that you have not been recent?).
 - iii. Their own resilience feedback (Goal: What did you learn from your self-assessment and how could you move up a level in your score?).
 - iv. Their insights from any of the three choice grids (Goal: What do you need to do in one of the three areas—Get Help (Centering), Respond to Someone (Compassion), or Speak up (Confidence).
 - v. Which of the Five Cs do they need to develop, and which of the Five Cs do they see in another person (coworker) that they wish to acknowledge?

Notably, every activity and conversation in these groups are designed to focus on positive, socially connected means of mutual support and making the most/bringing out the best in each other as a collective. The TAWW Fundamentals Course is designed to avoid being distracted by issues that tend to polarize (e.g., COVID, racial issues, political issues, mask-wearing) and instead focus on just meeting and listening to reduce stress, improve productivity, and increase economic vitality in the local area.

After groups/participants complete the fundamental course they (with assistance from the educator) will have some additional options:

- Decide if they want to have another session to review or add a tool
- Decide if they want to receive R2T or HAT
- Ask if they would like to be an Advocate or Ambassador

Training Groups and Objectives for Each Stakeholder Touch-Point

1) Small Business Owner One-on-One needs assessment

As a result of this interview, the SBO will:

- 1. Complete a needs assessment that focuses mainly on how productivity and business vitality may be improved by addressing Mental Health, Resilience;
- 2. Identify potential services and programs that support mental, well-being, resilience prevention for themselves and their group;
- 3. List priorities for taking action to address the above issues;
- 4. Be ready to select a next step to address needs identified in the interview (e.g., next steps may include a follow-up interview, focus group, offering the employee training, joining a leadership training, joining a community group);
- 5. Follow-up will consist of contact from the interviewer/educator who will ask the SBO if they would like to:
 - a. Join a leader orientation, community group; or
 - b. Host a training; or
 - c. Become an advocate.

2) **Workplace Training for Employees** (□ becoming an ambassador)

As a result of this training, employees will gain tools for preventing burnout, fatigue, and reducing stigma around help-seeking by being able to:

- 1) Identify and practice critical skills for effective communication (focus on really listening);
- 2) Identify and practice essential skills for compassionate fellow and followership;
- 3) Making choices in three areas:
 - a. Getting Help versus Going it Alone
 - b. Responding to Others versus Tolerating (Doing Nothing) versus Stigma
 - c. Speaking Up (about problems) versus Silence
- 4) Distinguish between different aspects of resilience (e.g., invincibility, tough skin, resilience, healthy vulnerability, and weakness);
- 5) Understand how values and set-point determine healthy coping;
- 6) Identify qualities of resilience in oneself and the team;
- 7) Learn ways to exemplify those qualities in themselves and others;
- 8) Learn ways to reduce stigma (e.g., weigh costs and benefits of seeking help) to make a cultural change;

- 9) Identify and understand how to utilize resources for mental health and addiction;
- 10) **Ambassador Training**. Employees will have an opportunity (through volunteer, coworker nomination, or employers) to attend a more extended 4-hour training where they will learn mental health peer support skills for encouraging help-seeking.

3) Manager/Supervisor(s) Training (☐ becoming an advocate)

As a result of this training, participating leaders will gain tools for addressing challenging issues that have arisen due to recruitment, retention, and a need for a culture of well-being by being able to (all the above in workplace training +):

- 1) Understand how the above not only can be applied to their wellness but their organization and employee's wellness;
- 2) Create an action plan to address wellness in their organization utilizing the toolkit and the needs of their employees;
- 3) **Advocacy:** participants will be asked to be advocates to continue the conversation with advocates who have self-selected from other groups.

4) Community Groups Networks Training (☐ becoming an advocate)

As a result of this training, participants will be brought together from community coalitions and groups to gain tools to support their well-being and gain the skills to provide these tools to their communities and support their resilience, vitality, and connectedness by being able to:

- 1) Recognize the importance of the interconnections between community initiatives, employee-based training leader development, and workplace ambassadors as these groups can collectively create a healthy community;
- 2) Identify action steps they can take as an advocate to support wellness;
- 3) Understand how the toolkit can be utilized and applied to different aspects of the community and workplace;
- 4) Understand how to advocate for wellness in their community and working network;
- 5) Advocacy: participants will be asked to be advocates to continue the conversation with advocates who have self-selected from other groups. Specifically, members of the community group will be asked to meet with a small business owner (SBO) and/or with a leader who attended another group-and vice versa.

Appendix A:

Stakeholder Interview Questions

- 1. Tell me about the work you do.
- 2. How long have you been doing it?
- 3. What led you to do this type of work?
- 4. Do you have any questions before we get started?

Part 1. General Input.

Reflect on other organizations or businesses you know in this area.

- 1. What do you think is causing *employers and the business community* stress right now?
- 2. How do you think this is impacting their businesses, services, or performance?
- 3. What are local companies and the business community doing to address these issues?
- 4. What do they need to do moving forward? What ideas do you have for improving?
- 5. Are you aware of others who are doing anything to address these needs?
- 6. How do mental health and substance misuse problems play a role?

Part 2. Your Own Personal Perspective.

Again, we are very interested in helping leaders as well with this initiative so any personal insights will help us better help you and others like you.

- 1. What work-related issues have been taking up more of your time than you would otherwise prefer?
- 2. What kind of resources do you have or could you use to help you overcome issues?
- 3. What do you need to do moving forward? What ideas do you have for improving?
- 4. How much has health, well-being, and resilience become more important to you recently?

Part 3. Proposed Training.

We plan to develop a team-building program that reduces stigma and improves worker willingness to seek help for problems, gives coping skills, and helps create a healthier work environment.

- 1. What content, activities, or exercises should we make sure to include?
- 2. What would encourage or incentivize businesses/agencies to get involved?
- 3. What ideas do you have for marketing, branding, or getting the business community involved?

Assessing Perspective on Wellness in the Workplace

Rate each on a 4-point scale:

1. Never/Rarely, 2. Sometimes, 3. Often, 4. Very Frequently. 5. Don't Know

How often do:

- 1. ...worker health issues and concerns impact or hurt employer or business performance?
- 2. ...worker mental well-being issues and concerns hurt employer or business performance?
- 3. ...worker substance misuse and addiction issues hurt employer or business performance?
- 4. ...employers actively seek to prevent these problems?
- 5. ...employers think about how they can serve the public health of the surrounding community?

Final Thoughts

1. Do you have any additional suggestions or ideas about how we can build a training program or strategy to better engage and help businesses?

In the next phases of this project, we will conduct focus groups with workers themselves. We need to better understand worker perspectives on stress and health.

2. Can you think of any other leaders we should approach who can help us get workers together for such a group?

Appendix B: Stakeholder Interview Sample

Stakeholder A

1. Tell me about the work you do.

- President of Chamber
- o 40 employees
- o Person who does advocacy and membership
- Full service staffing, HR, etc. for business
- o 1300 members
- With COVID □ frustration □ we became a conduit (PPE) to help
- When businesses have issues with State and Federal
- o Full service/customer service
- o Super talent team
- Young professionals
- Used to the kid as CoC "older white guys"
- Super diverse look 5 to 10 years ahead be of value big on DEI and community service, community development, good corporate citizens, most look to give back, Rochester does need help – luck to have CEOs and companies very grounded
- \circ Keep getting asked \square love what I do

2. How long have you been doing it?

Seven years

3. What led you to do this type of work?

- First-term of Lt. Governor
- Never wanted to be in politics
- Wanted to do things of value
- Fascinated with biz and economic development
- Always committed to public service THIS job has so many attributes
- Great political, not a political office
- Business success is a great thing to support □ elected, CEOS, not for profits Whole spectrum So much is based on relationships
- The last job with the state (4 years) met so many people can pick up phone □ helps me to get things does

4. Do you have any questions before we get started?

Part 1. General Input.

Reflect on other organizations or businesses you know in this area.

- 1. What do you think is causing *employers and the business community* stress right now?
 - Pandemic (still in it) caused economic and emotional stress
 - Biz community has changed

- So many severely negatively impacted economically
- Issue of trying to get back to some sense of normalcy
- So many open jobs that companies cannot fill
- They are paying more \$ than ever
- \$15 is now the lower end of pay scale
- Getting workforce and satisfying needs of customers
- Vaccine mandates □ CEO called today he is no Anti-Vaxxer their company you will wear a mask when you go into a company's home he has employees due to OSHA mandate for full vaccinated he is frustrated that employees now applying to less than 100 Extra burden and cost to pay for testing when it should be personal responsibility, not business responsibility
- Rules in place for safety -> wear a mask when walking the halls take off when in my office myself and HR director know □ majority who have not been vaccinated have their reasons □ these are causing stress
- State & Federal regulations and Taxes
- Businesses are painted to be EVIL or BAD (ultra-billionaires) □ there is a lot of wealth focused on small % and businesses I know care about their people but often feel govt sees them more of a problem □ seen as stress
- Open and start a business -- costs of regulations □ lot a CEOs pay out of personal funds
- I know CEOs who have paid and retained their workforce the VAST majority of businesses care about their people – adds to their frustration
- Why hard to get people to work?
 - Benefits paid out
 - Pandemic has caused people to look in the mirror at their lives
 - Work style and lifestyle has changed drastically
 - People don't want to commute they want to work at their desk
 - Prevalence in the future is important
 - Benefits paid extra money to be home
 - If someone needs assistance pay that
 - Companies are shuttering because of benefits
 - Elected officials Santa Claus
 - If you are employed you get job benefits would end
 - Childcare, older parents, □ time lost with family if in car
 - Pandemic has created opportunities
 - Most of our workforce has been remote since 2020 □ I create a more flexible hybrid environment to help them as long as the mission gets accomplished
 - A lot of employers are mandating \square may not be a good thing (does not apply in foodservice and manufacturing)
 - Businesses can save \$ in space and employees save \$
 - Thoughtful in our approach with flexibility
 - Kathy Richmond HR Director a number of webinars on future of work
 etc. –
 - If employees are happy and productive find a way to create flexibility
 - Finance/payroll if cannot work remotely not being

- Throughout the pandemic seen an increase in membership and stability
- Given economics we held off on building members e.g. we gave free membership
- Overall, talented team and relationships follow-up, turn around in customer service we have had
- Our relationship with people in govt agencies we can get answers
- E.g., Minority Women Business Enterprise NYS just came out at our suggestion a locally based process for application and responsible for following through (as opposed to waiting 2 years) unlike radio/media don't get on and criticize we rely on relationships
- Non-Partisan we support
- Listening to constituents is good businesses
- While we can't promise results, we can promise the effort
- When I was Mayor, and at Wegman's, and somebody would stop me and I would follow-up always feared somebody brought to my attention
- When first took the position let's go visit a business we went in and was told "You are not only the first mayor—go around and visit members"
- Let's ask how can we help you
- At the state level, it is rare to have a leader asking and listening (usually speeches)
- 2. How do you think this is impacting their businesses, services, or performance?
 - Huge impact
 - News Hound Look at all the news
 - People going ballistic over inconsequential things
 - Economic and physical stress
 - The way people react violence, broken relationships, close businesses, divorces,
 - Always been stress in our history
 - People's ability to deal with has reduced over the years
 - Road rage
 - It manifests itself in many different ways
 - o Pandemic has exacerbated
 - The opioid epidemic has hurt Hide the pain
 - People lost parents who could not see them in nursing homes
 - The whole combination of things
 - o Stress, Anxiety, at Highest Levels
- 3. What are local companies and the business community doing to address these issues?
 - We have a great EAP our HR director we have resources
 - They can go to resources
 - Having had employees with kids and dying parents give them the flexibility
 - Philosophy when they need your family first; not every company can do that
 - Paying attention to these issues and stressors
 - Having services and processes in place where people will be comfortable
 - We have done a great job of accommodating
 - People don't feel comfortable raising things at work
 - MH challenges we need to do our best to help them
 - Addiction and drugs stay in the system

- o MJ legalization is not going to hit the economic targets they are talking about
- \circ Health aspects medical side \square one more avenue to hide the pain
- Companies should be attentive to these issues
- People who need psych help have a hard time getting those
- Very difficult to get help due to a lack of Psy resources
- Actually licensed psychologists are not in abundance here
- Many companies via HR function and EAP
- Not a lot has been shared about what they are doing
- Smaller ones do not have the capacity
- The need is growing
- The larger ones have more access
- Stigma people afraid to come forward
- Hides the true
- Whether store owner or answer to the board people have health issues they have hidden from their boards heart issues
- o People are concerned especially if they want their job
- o I heard stories of people who had life-threatening surgeries out of state
- o People in leadership may not want people to know if they are fighting an issue
- Media also has a responsibility around stigmatizing on the front page of the newspaper
- Believe in privacy and HIPAA
- Hopefully, athletes coming forward will encourage others
- Workforce development is disparate there is no connectivity
- The same may hold true for EAP but not a lot of common collaborations that are independent of their company
- We work with United Way
- 4. What do they need to do moving forward? What ideas do you have for improving?
 - Ensuring everybody has resources, access, and confidentiality entire 9 county region
 - Have a system that works (not over-worked) a compilation of organizations that can handle this
 - Other than working with anti-drug issues (Tom C.) Rochester Fights Back never been asked at a table where this has come up!
 - We have not locked arms how can businesses, chamber, not for profits
 - Resources
 - Accesses
 - Privacy
 - o Stigma
 - People are Afraid to Bring it Up
 - We provided every resource to a teammate (we made no announcements)
 - Why can't we feel the same way about MH as we do about Cancer and cardio issues
 - People have dealt with depression whether 18 or 80 and we have to look for ways to break down those barriers
 - O I think our region (Dave S at Rochester Works) we have to align all these workforce dev organizations and make sure we measure results

- O Police suicides and stress that they face and stigmatized now as being bad and the problem. Firefighters don't feel the same sense of respect. A small number of suicides here at Rochester. Nobody can say that they are stress-free. Great time, to give pandemic-related issues.
- 5. Are you aware of others who are doing anything to address these needs?
- 6. How do mental health and substance misuse problems play a role?

Part 2. Your Own Personal Perspective.

Again, we are very interested in helping leaders as well with this initiative so any personal insights will help us better help you and others like you.

- 1. What work-related issues have been taking up more of your time than you would otherwise prefer?
 - I start at 500 regulatory issues that are pandemic issues, closures, rules, mandates
 - So much of the stress we get is from govt federal, state (most egregious)
 - A lot of our time is getting complaints
 - Getting someone from the system
 - \circ A member being regulated out of their businesses \square may have to close businesses
 - The governmental decision that no one can explain
 - Govt agencies add to the stress
 - We spend a lot of time helping deal with govt pressures for our members
 - Govt plays a role in these mental health issues (taxes, foreclosures, fines, school district, masks)
 - Govt agencies recreate and exacerbate get access to change advocate big part of our work
 - Staffing businesses can't get people to fill positions cannot get people to apply
 cannot get people to show up for work
 - Re-entry

 Provide opportunities (Incarcerated, veterans)
 - o Some employers are friendly; others not so friendly
 - o College campuses not so much
 - Support open-concept hiring (Adrian Hale) former Marine key frontline with these issues
 - Under-employed, hard to employ,
 - A lot of workforce development provide soft-skill the ultimate measure is employment some sustainable
 - A lot of disconnects in the community everybody wants to own their piece of the pie
 - Competition for funding
 - Create a competitive environment
 - Rochester at press time we are friends –
 - \circ Chuck Schumer 30 years \square has helped so many \square some show up and others don't know –
 - If they have one grant to give
- 2. What kind of resources do you have or could you use to help you overcome issues?
- 3. What do you need to do moving forward? What ideas do you have for improving?

4. How much has health, well-being, and resilience become more important to you recently?

Part 3. Proposed Training.

We plan to develop a team-building program that reduces stigma and improves worker willingness to seek help for problems, gives coping skills, and helps create a healthier work environment.

- 1. What content, activities, or exercises should we make sure to include?
- 2. What would encourage or incentivize businesses/agencies to get involved?
 - Data that gives a big picture on impacts on HR and human resources
 - Quantify the amount that businesses
 - GCR data collection to help paint a picture with data to back it up and get people's attention
 - Convene or co-convene
 - DEFINE the problem what is the next step
 - Use examples of healthcare that work together
 - o UMC and Rochester Regional who were mortal enemies now work side-by-side
 - Highlighting competitors coming together for the public good
 - o "Blood Pressure Initiative" Sandy Parker and Weisberg Common Ground
 - Community-Wide Initiative no one person should own it
 - A lot of people have lost \$ and careers or been victimized by MH concerns
 - Every day you see someone attacking someone
 - Not normal reactions
 - Kathy Richmond □ HR Leaders and EAP leaders in organizations
 - Webinar prelude
- 3. What ideas do you have for marketing, branding, or getting the business community involved?

Assessing Perspective on Wellness in the Workplace

Rate each on a 4-point scale:

1. Never/Rarely, 2. Sometimes, 3. Often, 4. Very Frequently. 5. Don't Know

How often do:

- 1. ...worker health issues and concerns impact or hurt employer or business performance? a. 4
- ...worker mental well-being issues and concerns hurt employer or business performance?
 a. 4
- 3. ...worker substance misuse and addiction issues hurt employer or business performance?
- 4. ...employers actively seek to prevent these problems?
 - a. 2
- 5. ...employers think about how they can serve the public health of the surrounding community?
 - a. 1

Final Thoughts

1. Do you have any additional suggestions or ideas about how we can build a training program or strategy to better engage and help businesses?

In the next phases of this project, we will conduct focus groups with workers themselves. We need to better understand worker perspectives on stress and health.

1. Can you think of any other leaders we should approach who can help us get workers together for such a group?

Appendix C:

Stakeholder Interview Synthesis

Overview

Through the synthesis of the New York stakeholders' interviews, OWLS determined a set of suggestions to improve the overall well-being and economic development of multiple counties of New York. These suggestions are based on the common themes that surfaced during a qualitative assessment of multiple stakeholders. We will provide recommendations, solutions, and a plan moving forward after gathering and analyzing the quantitative portion of this project (i.e., the multi-county survey).

A consistent theme identified across the interviews is the overarching problem of staff shortages. The lack of staff displaces the burdens on current staff, increasing their risk for burnout and negatively impacting their overall well-being. This ultimately leads to problems with retention. Staff may experience stigma around asking for help and leadership may be ill-prepared to respond. Additionally, it creates problems around recruitment, making the work culture less attractive for candidates to want to join. Understandably, leaders and owners feel overwhelmed to address these burdens because they are in survival mode and are focused on "fixing the squeakiest wheel first".

Another theme has to do with the role of identified communities and their perceived value in contributing towards solutions. Having a sense of community, whether through activities or meetings, helps employees feel connected to each other, understand that they are not alone in facing their issues, and help them to be more resilient through open conversations or charity activities. This sense of community could then spread beyond the employer and benefit the surroundings as well. Many stakeholders identified teams, networks, committees, and coalitions that have made strides in the past and need to be re-invigorated or tapped into to problem solve and provide community support.

Therefore, there are four target populations for the program to address. They include leaders, small business owners, employees, and community coalitions simultaneously to begin to eliminate the issues faced by the business community.

Leaders

From the interviews, most business leaders are not equipped with the needed skills to handle the situation they are in. We suggest that business and organizational leaders have their own 1-hour module to develop their skill sets. This module will include content on change management, leadership resilience, servant and supportive leadership, job crafting, a really listening exercise, and education on set-point which will help leaders gain perspective of the negative cycle they are in. This module will aim to achieve the objective of providing leaders with tools and skills for

addressing challenging issues that have arisen due to problems in recruitment, retention, and a need for a culture of well-being.

Small Business Owners

Second, to get small business owners open and committed to this program, a one-on-one needs assessment consultation may be beneficial. Small business owners may not want to spare time for this program because they are more interested in spending their valuable time on keeping their businesses open. The consultation will be a conversation that helps provide small business owners with an understanding of their core issues and thresholds using set-point education to help them resolve issues.

Everyone in Business

Our third target is everyone in the business setting that is suffering from the aftereffects of COVID-19. For this population, we plan to provide a training module that helps the population obtain skills and tools to support their own well-being. This module will include content on obtaining skills to reduce burnout, substance use risk, compassion fatigue, hyper reactivity; content on how to be healthy; content on how to recognize triggers; really listening exercise; setpoint education; and what community resources they can take advantage of and where to get them. This education is meant to help support this population in gaining skills and tools to improve their resilience to stress and overall well-being in both the workplace and in their personal lives. This training module will likely be split into multiple parts, with paired-down contents to fit the schedule of the business population that we meet.

Community Coalition

The last target for this program is to reach our key stakeholders' community and coalition groups that they are involved in. For example, Joe Rumsey's Wellness Committees or Marte Sauerbrey's Tioga Women's League are groups that we want to expose the training that this project will provide. There are two goals in mind. First, this project is intended to help these groups support their own well-being. Second, once the members gain the tools, knowledge, and skills, they now become the ambassadors to provide these skills and tools to their community and support the community's resilience, vitality, and connectedness. The second goal is to build social capital which helps individuals feel and be more connected to others which increases their resilience and overall well-being in addition to the skills, knowledge, and tools they will be gaining.

Marketing and Branding

Another conclusion that OWLS recognized is the need for a multi-agency collaboration between all the organizations that this project will be involved with. Without consistent messaging, the purpose of this project may get diluted and misrepresented in the eyes of the populations we wish to help. That is why a core set of marketing materials should be created beforehand and then be used to educate our partnered organizations' points of contact to ensure consistent messaging.

Conclusion

In conclusion, there are four target populations that we should be targeted with this project. They are the business leaders, everyone in the business community, and the community and coalition groups of our key stakeholders. The objective of each population is listed below:

Leaders

"As a result of taking this training, participants will gain tools for addressing challenging issues that have arisen due to recruitment, retention, and a need for a culture of well-being."

Small Business Owners

"As a result of taking this consultation, participants understand where their core issues lie and be able to start addressing them."

Employees

"As a result of taking this training, participants will gain tools for preventing burnout, fatigue, and reducing stigma around help-seeking."

Community and Coalition Groups

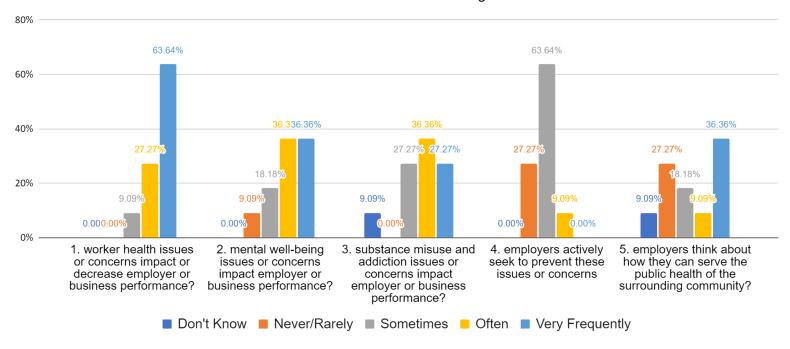
"As a result of taking this training, participants will be brought together from community coalitions and groups to gain tools to support their well-being and gain the skills to provide these tools to their communities and support their resilience, vitality, and connectedness."

Additionally, there needs to be a multi-agency collaboration between all the organizations that are involved with this project to deliver consistent messaging.

Appendix D: Stakeholder Data

	1. Worker health issues or concerns impact or decrease employer or business performance?	2. Mental well-being issues or concerns impact employer or business performance?	3. Substance misuse and addiction issues or concerns impact employer or business performance?	4. employers actively seek to prevent these issues or concerns	5. Employers think about how they can serve the public health of the surrounding community?
Very Frequently	63.64%	36.36%	27.27%	0.00%	36.36%
Often	27.27%	36.36%	36.36%	9.09%	9.09%
Sometimes	9.09%	18.18%	27.27%	63.64%	18.18%
Never/Rarely	0.00%	9.09%	0.00%	27.27%	27.27%
Don't Know	0.00%	0.00%	9.09%	0.00%	9.09%

NCADD Stakeholder Ratings



Appendix E:

Chemung County Discovery Group Slides



A Discovery Group

To Support Innovations in Employee Well-Being

Chemung County

Designed by Organizational Wellness & Learning Systems





Background

NCADD-RA is a long-time provider of prevention and well-being services in the Rochester area. We have received funding to bring a health and well-being program that seeks to support employers and employees in their resilience, emotional health, ability to cope with stress, and lead a healthy and productive life.

As part of this new program NCADD-RA wants to know what employees would like to see delivered in the new training. We are seeking your input and feedback. Specifically, we want to customize or tailor the program to your needs, concerns, and aspirations. In the end, this can be a program built FOR US!

Purpose of This Group

- INSIGHT. Gain local and personal insight on what causes stress and risks to mental well-being
- SOLUTIONS. Empower participants to share openly about their own ideas and solutions (especially within or through the workplace)
- DESIGN. Utilize this feedback to design training and strategies that could practically be used by participants at a later date
- EXPERIENCE. Introduce participants to examples of training activities that have been shown to be effective
- WELL-BEING. Help participants walk away with a sense of wellbeing by contributing to this work

Roles

- REPRESENTATIVE. Think about others you know when answering questions. We obviously cannot include everyone in this group. You were selected, in part, because you have a sense of what others think, including those who cannot be here and think differently than you or others here.
- CUSTOMER. We will be showing you a "micro-resilience" activity. This is just one example of the type of activities we can do as we build out a program based on your input. As a potential customer, tell us what you think, what you need, what you want.



QUESTIONS

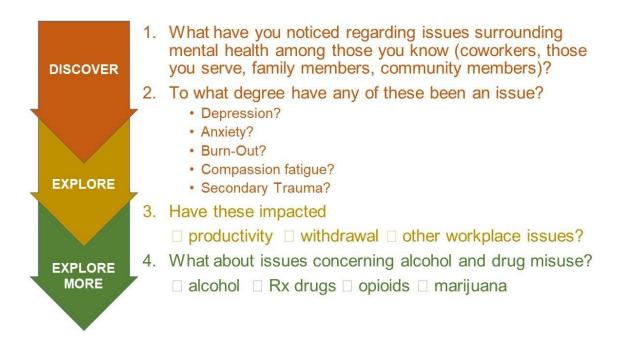
SET 1: STRESS



- 1. What causes you stress?
- 2. How much of this stress is due to any of the following?
 - · Change?
 - · Conflict?
 - · Communication?
 - Health-related (e.g., COVID)?
 - · Personal Issues?
 - · Workplace Issues?
- 3. Would you describe these as
 - □ challenges □ adversity or □ trauma
- 4. What have been effective ways you have identified to help you with stress?
- 5. What do you need?
- 6. What can the workplace do to help?

QUESTIONS

SET 2: RESILIENCE - MENTAL WELL-BEING



SAMPLE ACTIVITY

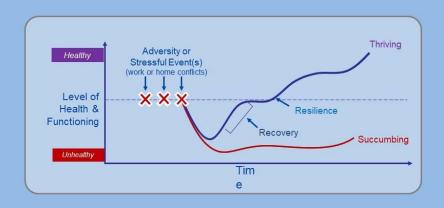
FIVE Cs of RESILIENCE





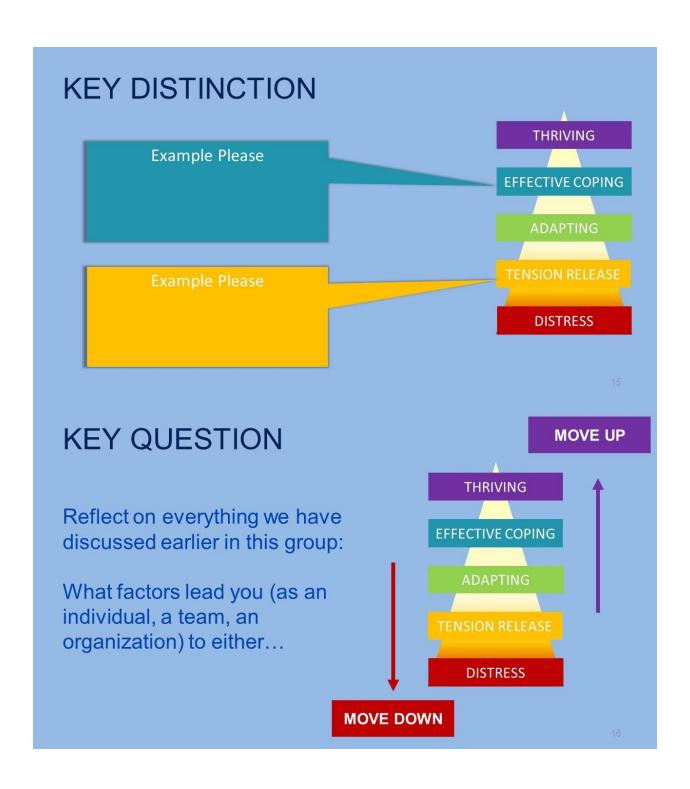
- Identify five core characteristics of resilience
- 2. Identify how you and your coworkers manifest these qualities as individuals and as a team
- 3. Plan for ways to reinforce, recognize, and reward these qualities as a way to protect against risks to your well-being
- 4. Create individual or group plans for improving one of the Five Cs

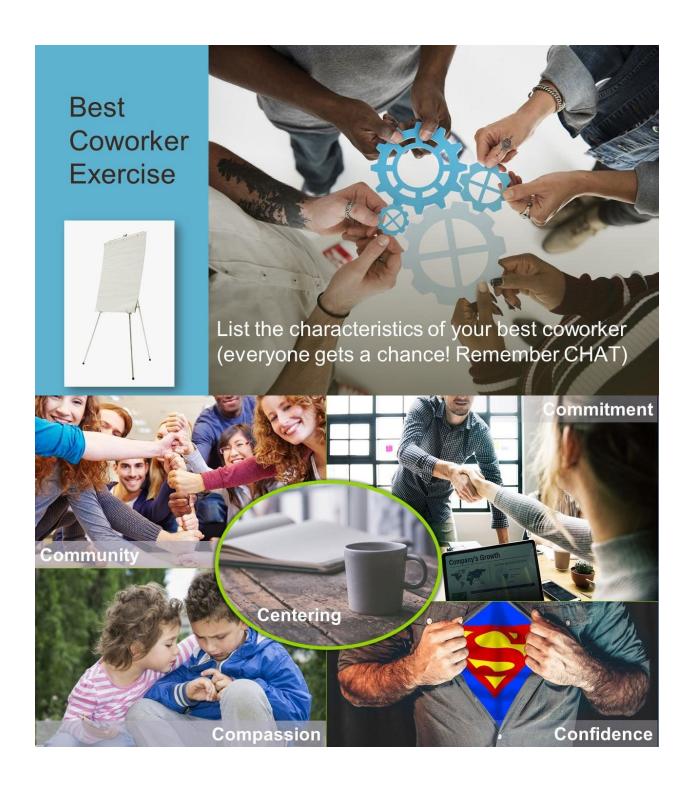
Resilience: Key Terms



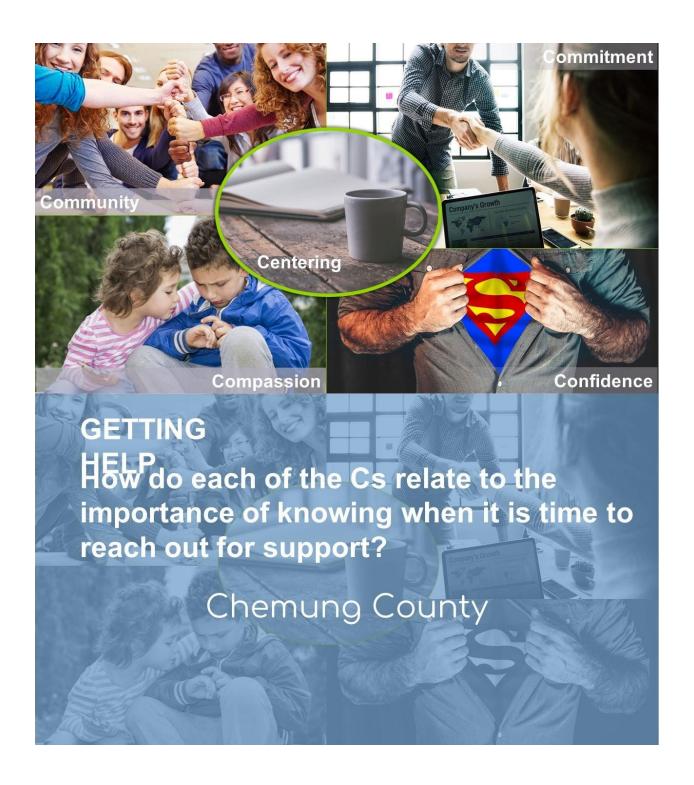


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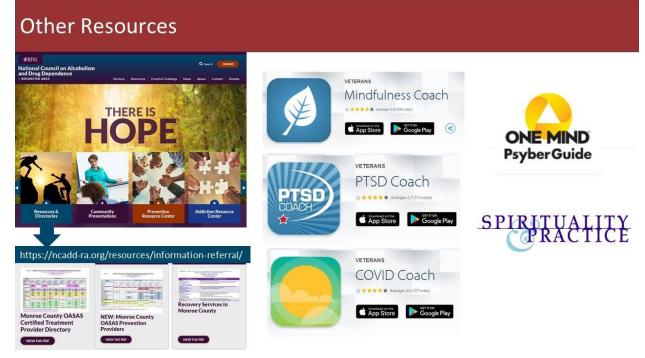
SUPPORT

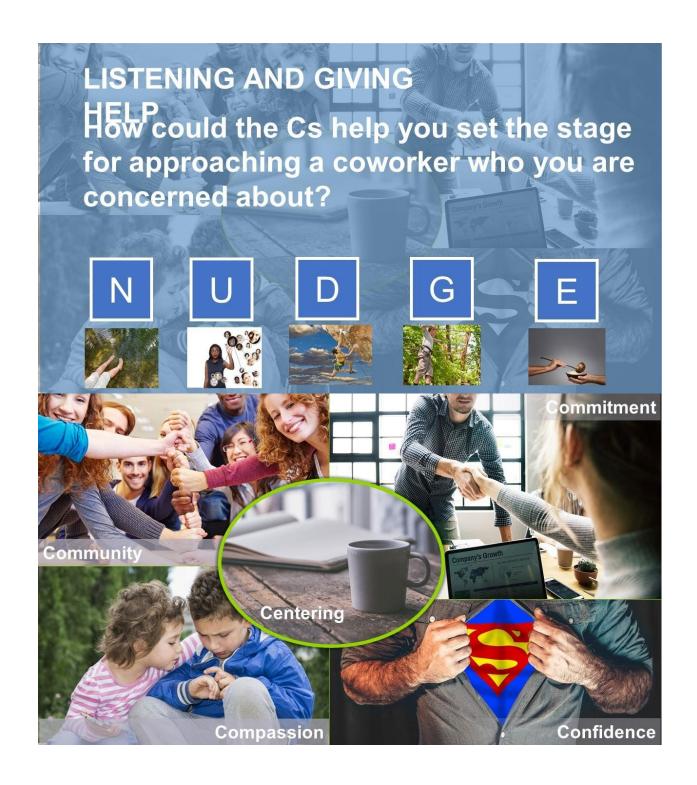
Chemung County

Our agency offers

- Health insurance Benefits include:
 - · Paid holidays
 - · Vacation time
 - · Personal time
 - · Sick time
- · Relaxation Room for Staff
- Breath-Body-Mind Program
 - Teaches breathing techniques and Chi-Gong

- EAP (Clinical Social Workers of the Finger Lakes)
 - · Individual Therapy
 - · Couples Therapy
 - · Family Therapy
 - Contact Information(607)-734-1447
 - cswcs963@yahoo.com





1) Notice how these show up in yourself

Core Quality	Characteristics (Sample Items)
Centering	I know when it's time to relax, unwind, and recover from effort; I use centering skills on a regular basis (e.g.; positive leisure, meditation, prayer, massage, hobby); I am able to monitor when I get triggered or react and can manage my stress in positive ways; It is easy for me to stay focused on the present moment (mindfulness).
Confidence	I have the ability to stay positive and strong no matter what; I can get things done that have to get done; I inspire confidence in others; I overcome setbacks to move forward and address challenges (grit).
Commitment	I finish what I get started; I am able to formulate and follow through on plans; I persevere in spite of the challenges I have to face in life; I do not give up easily on things I believe in and expect to face challenges.
Community	I enjoy bringing others together into a cohesive group or team; I am a great networker or relater and help connect people to each other; I am able to both give and receive social support; I see the positive potential of everyone in my group
Compassion	I am tolerant of my own flaws and inadequacies (self-compassion); I try to see my own failings as part of the human condition(self-compassion); It is easy for me to listen to others and take their viewpoint; I have been told that I am approachable;

2) Notice how these show up in coworkers (on team)

Centering	Someone on the team •maintains composure, is poised, balanced / shows patience in the midst of problems •helps others see the "bigger picture" of where Us is headed •takes a long-view, doesn't sweat the small stuff •shares positive psychology ideas/tools (e.g., yoga, mindfulness, spiritual health, etc.)
Confidence	helps keep our spirits strong in the face of difficulty, changes, or downturns is someone that I or others can talk to in confidence and respect demonstrates high self-efficacy (internal sense of control) and helps others do the same can help us make decisions in the face of ambiguity, insecurity, or failures
Commitment	keeps us moving along with our plans, especially during rough times demonstrates a sense of integrity and good character in their behavior is willing to put in great effort to help make the team and Us successful shares their pride and belief in the future Us
Community	Each of us trust each other to get their part of the work done We have open lines of communication and communicate proactively We are able to embrace and work through conflict (rather than avoid it) I feel supported and cared about by my team members We have fun together or have times of light-hearted sharing
Compassion	•We are able to express our honest feelings without fear of judgment or rejection •It is completely safe to take a risk on this team (psychological safety) •It is easy to ask others on this team for help (psychological safety) •We understand and support others on our team who might be going through a hard time in their lives

PLAN: Appreciative Inquiry

- Who do you know that expresses even a small aspect of one of the Cs?
- How does this help Chemung County & Affiliates?
- Who else do you know that expresses another C?
- Please share your appreciation.
- Together, consider:
 - How can these qualities help you thrive as individuals, as a team, and as a whole?

Appendix F: Discovery Group Synthesis

The information below lists recurring themes heard across each of the four Discovery Groups conducted by OWLS for NCADD-RA.

- 1. Business A
 - a. COVID 19
 - b. Remote work issues
 - c. Lack of and need for support
- 2. Business B
 - a. COVID 19
 - b. Lack of focus on needs of new employees, failure to satisfy tenured employees and unnecessary comparison between both levels
 - c. Lack of appreciation
 - d. Negative view of management
- 3. Business C
 - a. Overwhelmed & overworked
 - b. Low employee morale
 - c. Lack of acknowledgement and of workplace stressors
- 4. Business D
 - a. Social capital of staff
 - b. Lack of authentic and empathetic leaders
 - c. Risk factors

It is evident that COVID 19 has created lasting problems stemming from inadequate staff and workers feeling overwhelmed/overworked across all industries. However, it remains important to recognize how COVID's aftermath still impacts employee morale, lack of workplace empathy, and manager to staff relationships presently. As a result of the findings from each discovery group, OWLS is able to recommend a newly developed TAWW Fundamentals: The Ripple Effect of Well-Being training toolkit as well as materials from existing OWLS trainings; Resilience to Thriving and Empowered Health Consciousness. NCADD-RA or its affiliated educators can initiate and administer the training at any point.

Business A

Because Business A is a nonprofit organization dedicated to providing services that empower people to enrich their quality of life, it is imperative that its staff are well and capable to carry out those duties. During the discovery group, participants mentioned how they felt disconnected from co-workers due to remote working environments. Participants also mentioned that they lacked support from management and did not feel valued which negatively impacted their work-life balance. The Power of the Ripple module (from the TAWW Fundamentals: The Ripple Effect of Well-Being training) would be good to start with in order to ensure that each staff member understands how their health and sense of connection/community work together. Administering the "What Matters Most" module will help workers identify the personal value

that increases productivity and desire. While sharing information in pairs, workers can begin to regain confidence in their worth and restore working relationships. Lastly, Empowered Health Consciousness training could be a continuation to fully help workers develop better work-life balance and self-care.

Business B

Business B experienced many of the same issues companies have experienced due to the aftermath of COVID. Specifically, workers feel overworked, unappreciated, stressed from internal bureaucratic practices, and loss of hope in management. By working through the TAWW: The Ripple Effect of Well-Being modules, workers have the ability to uncover personal issues and relate to co-workers through establishing common values and goals. Activities 2 and 5 are highly suggested to help workers understand how to be the best co-worker. Administering Resilience to Thriving training would further help co-workers see that resilience is alive in their team.

Business C

All three of the themes mentioned within Business C's discovery group consists of employees' inability to cope and be resilient through the aftermath of COVID-19. By starting off with the TAWW: The Ripple Effect of Well-Being training and ending with Resilience to Thriving training—would give workers the foundation to regain confidence in their value to the organization and move from stress to thriving.

Business D

Business D's employees discussed a crucial need for better communication, increased authenticity, and wanting management to truly listen to staff. Although each module within the TAWW: The Ripple Effect of Well-Being training would be essential to help rebuild social connection and the wellbeing of Business D, Activity 6- the Really Listening module would be extremely helpful for the team to decrease "toxic positivity, lack of transparency, and insensitivity". Resilience to Thriving training would help to relieve secondary trauma from seeing furloughed staff and personal problems that spill over into work.

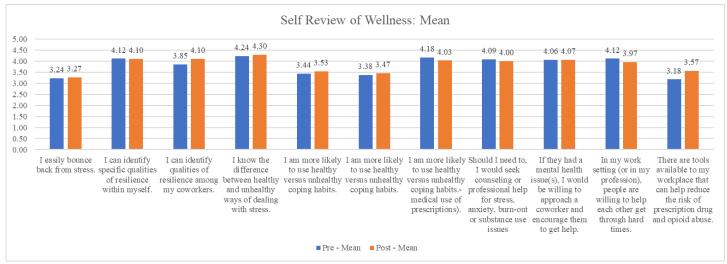
Appendix G: Discovery Group Survey Data

General Questions

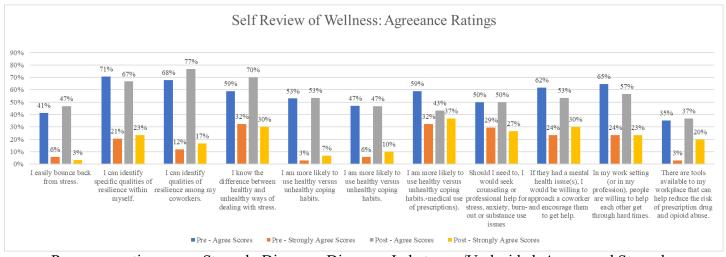
Item(s)	Pre- Mean* (% Agree/Strongly Agree) N = 34	Post- Mean* (% Agree/Strongly Agree) N = 30	T-Test N = 30	Correlation N =30
1) I easily bounce back from stress.	3.24 (41%/6%)	3.27 (47%/3%)	-1.31	0.72***
2) I can identify specific qualities of resilience within myself.	4.12 (71%/21%)	4.10 (67%/23%)	0.00	0.54***
3) I can identify qualities of resilience among my coworkers.	3.85 (68%/12%)	4.10 (77%/17%)	-1.65	0.17
4) I know the difference between healthy and unhealthy ways of dealing with stress.	4.24 (59%/32%)	4.30 (70%/30%)	-0.83	0.27
5) I am more likely to use healthy versus unhealthy coping habits.	3.44 (53%/3%)	3.53 (53%/7%)	-1.07	0.65***
6) I am confident that my healthy coping skills will protect me from having mental health issues (e.g., anxiety, burnout, exhaustion).	3.38 (47%/6%)	3.47 (47%/10%)	-1.29	0.60***
7) My healthy coping skills will protect me from substance misuse (e.g., too much alcohol, using alcohol to cope, non-medical use of prescriptions).	4.18 (59%/32%)	4.03 (43%/37%)	1.00	0.85***
8) Should I need to, I would seek counseling or professional help for stress, anxiety, burnout, or substance use issues.	4.09 (50%/29%)	4.00 (50%/27%)	0.81	0.83***
9) If they had a mental health issue(s), I would be willing to approach a coworker and encourage them to get help.	4.06 (62%/24%)	4.07 (53%/30%)	0.00	0.32
10) In my work setting (or in my profession), people are willing to help each other get through hard times.	4.12 (65%/24%)	3.97 (57%/23%)	0.68	0.42***
11) There are tools available to my workplace that can help reduce the risk of prescription drug and opioid abuse.	3.18 (35%/3%)	3.57 (37%/20%)	-2.05	0.46***

^{*}Response options were Strongly Disagree, Disagree, In between/Undecided, Agree, and Strongly Agree. Responses were coded 1, 2, 3, 4, and 5, respectively.

^{***}Significant Value, p < .05



Response options were Strongly Disagree, Disagree, In between/Undecided, Agree, and Strongly Agree.



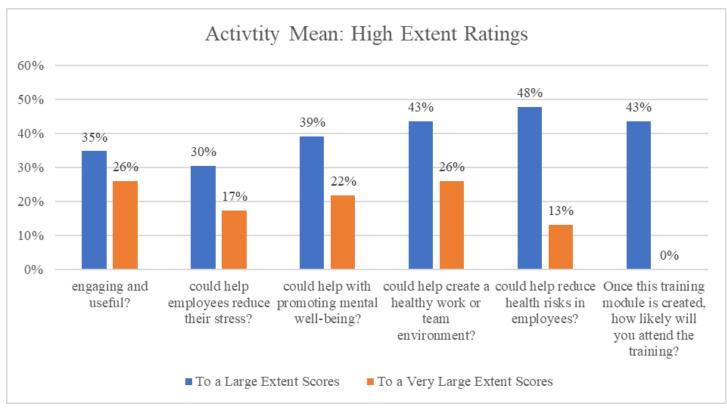
Response options were Strongly Disagree, Disagree, In between/Undecided, Agree, and Strongly Agree.

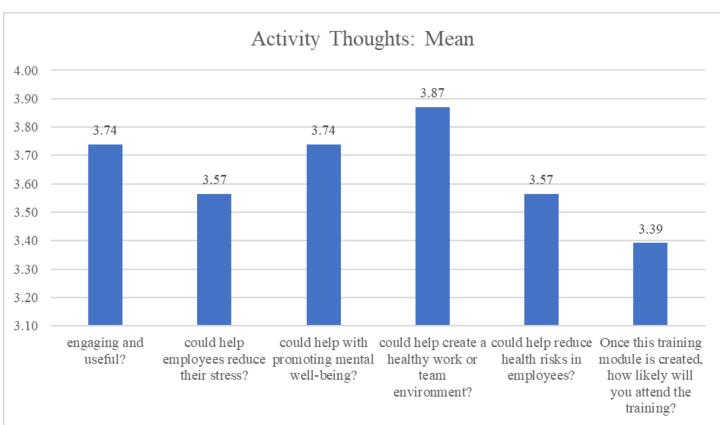
Activity Review (N = 23)

To what extent did you find the activity	Mean (% Large /Very Large Extent)* (% Likely/Very Likely)**
engaging and useful?	3.74* (35%/26%)
could help employees reduce their stress?	3.57* (30%/17%)
could help with promoting mental well-being?	3.74* (39%/22%)
could help create a healthy work or team environment?	3.87* (43%/26%)
could help reduce health risks in employees?	3.57* (48%/13%)
Once this training module is created, how likely will you attend the training?	3.39** (43%/0%)

^{*}Response options were Not At All, To a Small Extent, To A Moderate Extent, To A Large Extent, and To A Very Large Extent. Responses were coded 1, 2, 3, 4, and 5, respectively.

^{**}Response options were Not Very Likely, Not Likely, Likely, Very Likely. Responses were coded 1, 2, 3, and 4, respectively.





Appendix H: New York Survey Form

Mission

This project seeks to improve well-being in the workplace, including mental, physical, and financial health, as well as support workplace leaders and managers in making the best decisions about these issues.

Purpose

Your perspective is very important during this critical time. This 10-15 minute survey invites your insights and opinions about well-being. Survey results will be shared through Chambers of Commerce and Public Health agencies throughout the New York area.

Know Before You Start (Information Requested)

Any information you provide will be confidential. Results will be reported in aggregate only. Individual responses will not be identifiable in any report.

The survey asks for information you may need before proceeding. <u>Click here for a pdf</u> of the survey to help prepare you for questions about organization size, employee information on wage, hours worked, and financial investment in wellness.

If you agree to participate, please click Next below. By clicking Next, you are giving your consent to participate.

Please email aldrich@organizationalwellness.com if you have questions about this survey.

Note. If you work in a Human Resource (HR) Department or have a job relating to the HR function, please answer the survey questions with regards to your local work area.

Type of organization For-profit Nonprofit Other (please specify) Code of Your Workplace	Micro (1 to 10 Employees) Small (11 to 49 Employees) Between Small and Medium (50 to 99 Employees) Medium (100 to 499 Employees) Large (500 or Greater Employees) Don't Know Which of the following best describes the industry of your organization? Type of organization For-profit Nonprofit Other (please specify) Code of Your Workplace	Micro (1 to 10 Employees) Small (11 to 49 Employees) Between Small and Medium (50 to 99 Employees) Medium (100 to 499 Employees) Large (500 or Greater Employees) Don't Know Which of the following best describes the industry of your organization? Type of organization For-profit Nonprofit Other (please specify) Code of Your Workplace	Micro (1 to 10 Employees) Small (11 to 49 Employees) Between Small and Medium (50 to 99 Employees) Medium (100 to 499 Employees) Large (500 or Greater Employees) Don't Know Which of the following best describes the industry of your organization? Type of organization For-profit Nonprofit Other (please specify) Code of Your Workplace	Micro (1 to 10 Employees) Small (11 to 49 Employees) Between Small and Medium (50 to 99 Employees) Medium (100 to 499 Employees) Large (500 or Greater Employees) Don't Know	on)?
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				Other (please specify)	
npany Name (Optional)	mpany Name (Optional)	mpany Name (Optional)	mpany Name (Optional)	p Code of Your Workplace	
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** 7. How would you forecast the financial health of your organization. ** 8. Compared to the year before, how much has employee use of sick leave has significantly increased some No change decreased significantly increased some No change decreased significantly increased some No change decreased significantly Don't know significantly provided in the next sability and procedure organization of overall financial stability and procedure of financial health Slightly Struggling Struggling Struggling Don't Know of your organization in the next 6 months? Getting Slightly Struggling Struggling Don't Know of your organization in the next 6 months? Getting Slightly Struggling Struggling Don't Know of your organization in the next 6 months? Getting Slightly Struggling Struggling Don't Know of your organization in the next 6 months? Getting Slightly Struggling Slightly Struggling Struggling Struggling Don't Know of your organization in the next 6 months? Getting Slightly Struggling Slightly Struggling Slightly Struggling Slightly Sl	SECTION 2. ORG	ANIZATIONA	AL HEALTH ST	'ATUS			
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	0	0	0	0		0	0

	Employee mental health concerns (depression/anxiety) Employee alcohol (depression/anxiety) Emp		Not at all	To a Small Extent	To a Moderate Extent	To a Large Extent	To a Very Great Extent	Don't Know
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* 11. What percentage of your own time at work (in a typical month) have	ve you spent dealing with the above
work issues? This includes taking time to:	,
 put out fires or deal with crises 	
do extra work you would otherwise not have to do	
take extra problem-solving time	
talk to employees	
 coach, counsel, or discipline 	
 conduct performance reviews 	
 meet with human resources 	
 work with consultants or vendors 	
0%	90%+
\cap	
*12 For the typical employee, what percentage of an employee's war	hweek is upproductive because of
* 12. For the typical employee, what percentage of an employee's wor	week is unproductive because of
their stress, burn-out, mental health, alcohol, or drug misuse issues?	
0%	50% +
070	50% +
O .	

SECTION 3. ORGANIZATIONAL HEALTH SUPPORTS

PART A. ADDRESSING THE PROBLEM

Below are services/programs listed in National Surveys from *The Centers for Disease Control and Prevention* and the *International Foundation of Employee Benefit Plans*. These programs can be effective in reducing the problems you rated above.

-ouridatio	To Employee Benefit Plans. These programs can be elective in reducing the problems you rated above.
* 13. progr	For each of the following, please check whether you know that your organization provides the service or ram.
	A. DEPRESSION AND STRESS COACHING OR COUNSELING. Free or subsidized lifestyle coaching/counseling or self-management programs that give employees skills for managing depression or major stress.
	B. MANAGER TRAINING ON STRESS. Train managers to improve their ability to recognize and reduce workplace stress-related issues for themselves and the employees.
	C. POSITIVE RESILIENCE AND THRIVING. Train employees on positive attitudes toward stress, resilience, and thriving as an individual and as a team.
	D. MIND-BODY PRACTICE: MINDFULNESS, MEDITATION, YOGA. Interactive educational programs (for example, workshops, lunch and learns, webinars) that give employees skills in meditation, relaxation, yoga, tai chi, qigong, deep breathing.
	E. ALCOHOL AND OTHER DRUG USE ASSESSMENT AND FEEDBACK . Alcohol and other substance use screening (for example, through health risk assessment) followed by brief intervention and referral for treatment.
	F. EDUCATION ON HEALTH PROMOTION INTEGRATED WITH SUBSTANCE USE PREVENTION. Interactive educational programs (for example, workshops, lunch and learns, webinars) that integrate health promotion with substance use prevention.
	G. EDUCATION ON SLEEP HABITS AND SLEEP DISORDERS . Interactive educational programs (for example, workshops, lunch and learns, webinars) that address sleep habits and treatment of common sleep disorders.
	H. ANTI-STIGMA CAMPAIGNS AND PROMOTE A RECOVERY-FRIENDLY WORKPLACE. Institute policies and practices that reduce the stigma of mental health and substance use disorders for employees and family members.
	I. COMMUNICATION, TEAM BUILDING, AND "SOFT" SKILLS DEVELOPMENT. Includes listening skills, teamwork, identifying team strengths, and other practices to improve the work culture.
	None of the above
PART B.	YOUR SOLUTIONS

* 14. SELECT YOUR TOP THREE			
Please select the three services that you are most interested in to	help reduce	employee healt	h issues.
	First Choice	Second Choice	Third Choice
A. DEPRESSION AND STRESS COACHING OR COUNSELING.	0	0	0
B. MANAGER TRAINING ON STRESS.	0	0	\circ
C. POSITIVE RESILIENCE AND THRIVING.	0	0	0
D. MIND-BODY PRACTICE: MINDFULNESS, MEDITATION, YOGA.	\bigcirc	\circ	\bigcirc
E. ALCOHOL AND OTHER DRUG USE ASSESSMENT AND FEEDBACK.	\circ	0	0
F. EDUCATION ON HEALTH PROMOTION INTEGRATED WITH SUBSTANCE USE PREVENTION.	\bigcirc	\circ	\bigcirc
G. EDUCATION ON SLEEP HABITS AND SLEEP DISORDERS.		0	\circ
H. ANTI-STIGMA CAMPAIGNS AND PROMOTE A RECOVERY-FRIENDLY WORKPLACE.	0	0	\circ
I. COMMUNICATION, TEAM BUILDING, AND "SOFT" SKILLS DEVELOPMENT.	0	0	0
Some A lot A great deal Don't Know			
* 16. If services are available, how likely is your organization to Extremely Unlikely Unlikely	implement the	e three services	?
Neutral Likely			
Extremely Likely			
O Don't Know			

17. What percentage of employees wo	uld your organization offer thes	se services to?	
Selected Group (for			
example: 10%)		All (100%)	
* 18. If services are available, how co	onfident are vou in vour organiz	ation's ability to implen	nent any of the tor
services you selected for your workp		,	
Not confident			
A little confident			
Somewhat confident			
Confident			
Very confident			
On't Know			
* 19. If your organization were to offe	• •		ted above, how
much would your organization be will		year?	
Maximum of \$100 per employee per ye	ear		
\$100 - \$200 per employee per year			
\$200 - \$400 per employee per year			
\$400 - \$700 per employee per year			
Over \$700 per employee per year			
None of the Above			
On't Know			

* 20	PREVENTING PRESCRIPTION DRUG/OPIOID MISUSE. We also want to know your organization's
inter	est in offering programs that address the current and growing Opioid epidemic, including Prescription
Drug	and Opioid misuse. This includes any one of a range of proven strategies. Please check below any you
are i	nterested in having.
	Provide and promote interactive educational programming on empowering employees to be more health-conscious and find healthy alternatives for dealing with pain, anxiety, sleep, energy, or other issues.
	Offering and promoting alternative pain management treatments
	Limiting number of pills post-surgery
	Narcan (Naloxone HCI)-an opioid antidote used in event of overdoes-available at worksite
	Prior authorization of outpatient opioid prescriptions in excess of a specified number of days
	Revised company policies regarding substance use disorders
	Allow Certified Peer Recovery Specialists (who coach workers in recovery) to meet with employees at the worksite as requested or needed
	Increased drug-testing
	None of the above
	How important would it be for your organization to have a program or strategy that prevents "Prescription and Opioid Misuse" when compared to your top three choices of interest? Much less important
0	Less important
0	Of equal importance
\circ	More important
0	Much more important

Section 4. ABOUT YOUR EMPLOYEES
This section helps to estimate financial impact of health problems
This section helps to estimate financial impact of health problems.
FULL-TIME EMPLOYEES
* 22. How many full-time employees does your organization employ in your local area (or best estimate)?
Onn't Know
Number of Employees
* 23. What is the average hourly pay of your full-time employees?
On't Know
O Hourly Pay
* 24. On average, how many hours do your full-time employees work per week? (Or best estimate)
Onn't Know
Hours Worked a Week
PART-TIME EMPLOYEES
105 Harris 100 Harris
* 25. How many part-time employees (less than 30 hours per week and are regular, contract, or seasonal) does your organization employ in your local area?
Opon't Know
Number of Employees
* 26. What is the average hourly pay of your part-time employees?
Onn't Know
Hourly Pay

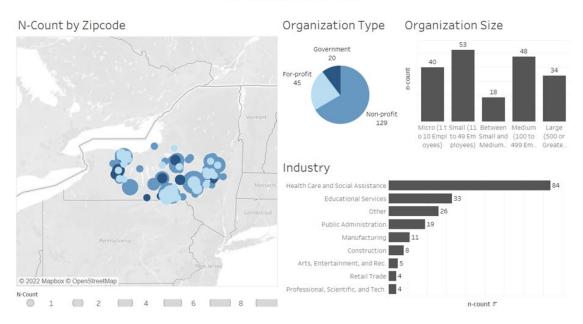
* 27.	On average, how many hours do your part-time employee works per week? (Or best estimate)
	Don't Know
	Hours Worked a Week

SECTION 5. ABOUT YOU
If you would like to receive a copy of the survey findings, please enter your contact information below. Your contact information will be kept confidential not be paired with your responses in our reports.
28. Name (Optional)
29. Email Address (Optional)
* 30. Job Title
CEO/COO/CFO/CIO/CHRO/CMO/President
○ Director/Vice President
Owner/Founder
Senior Manager
Manager/Supervisor
Health and Wellness Professional (Consultant, Coach)
Other (please specify)
31. What is your level of annual total compensation? (Optional. Please note that this information helps us better estimate the costs of dealing with employees with low well-being. Your salary will be kept confidential.)
O <\$25,000
\$25,000 - \$49,999
\$50,000 - \$74,999
\$75,000 - \$99,999
\$100,00 - \$124,999
\$125,000 - \$149,999
\$150,000 - \$199,000
\$200,000 or more

* 32. Does your company have an Employee Assistance Program (EAP)for example, access to 24/7	mental
health and substance misuse counseling for employees?	
Yes – we have an EAP vendor	
Yes – we get EAP services included with a health plan or insurance	
○ No	
O Don't Know	
Dontkliow	
* 33. How much does your organization currently spend annually for employee well-being, stress	
management, and EAP (beyond what is included in health plan services)?	
On't Know	
○ s	
* 34. How effective has your EAP been in helping employees address mental health risk or other issue	!S
described in this survey?	
Not effective	
A little effective	
Somewhat effective	
○ Effective	
Very effective	
O Don't Know	
N/A - We do not have an EAP	
NA - We do not have all EAP	

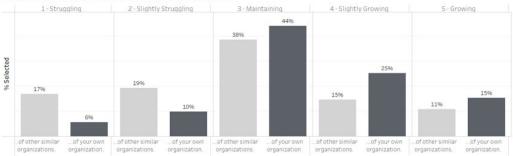
Appendix I: New York State Survey Data

DEMOGRAPHICS

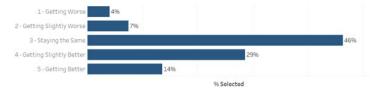


FINANCIAL HEALTH



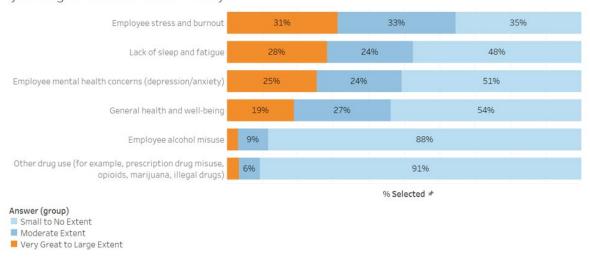


How would you forecast the financial health of your organization in the next 6 months?



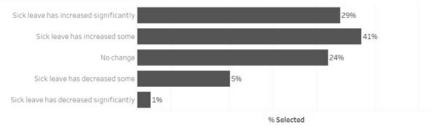
CAUSES OF UNPRODUCTIVITY

In the past 6 months, to what extent have financial health and productivity problems in your organization been caused by:



IMPACT OF SICK TIME





OFFERING EMPLOYEE SERVICES





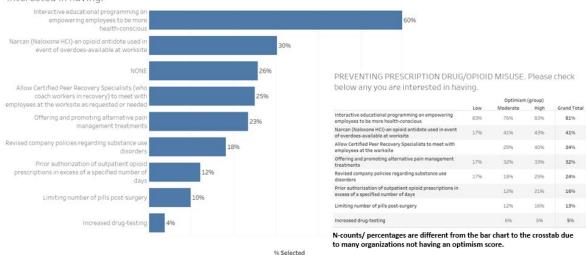
SELECT YOUR TOP THREE: Please select the three services that you are most interested in to help reduce employee health issues.

	Optimism (group)				
	Low	Moderate	High	Grand Total	
COMMUNICATION, TEAM BUILDING, AND SOFT SKILLS DEVELOPMENT	57%	61%	56%	58%	
POSITIVE RESILIENCE AND THRIVING	71%	48%	52%	53%	
MANAGER TRAINING ON STRESS	43%	57%	52%	53%	
DEPRESSION AND STRESS COACHING OR COUNSELING	43%	54%	48%	50%	
MIND-BODY PRACTICE: MINDFULNESS, MEDITATION, YOGA	36%	37%	39%	38%	
ANTI-STIGMA CAMPAIGNS AND PROMOTE A RECOVERY-FRIENDLY WORKPLACE	29%	11%	21%	18%	
EDUCATION ON SLEEP HABITS AND SLEEP DISORDERS		13%	23%	17%	
EDUCATION ON HEALTH PROMOTION INTEGRATED WITH SUBSTANCE USE PREVENTI	14%	13%	8%	11%	
ALCOHOL AND OTHER DRUG USE ASSESSMENT AND FEEDBACK	7%	7%		3%	

N-counts/ percentages are different from heat map on the previous slide due to many organizations not having an optimism score.

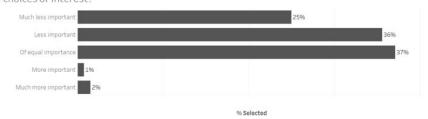
OFFERING EMPLOYEE SERVICES

PREVENTING PRESCRIPTION DRUG/OPIOID MISUSE. Please check below any you are interested in having.



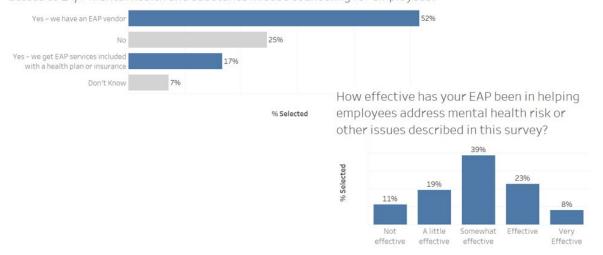
IMPORTANCE OF PRESCRIPTION DRUG AND OPIOID MISUSE PROGRAMMING

Importance of Prescription Drug and Opioid Misuse when compared to your top three choices of interest?



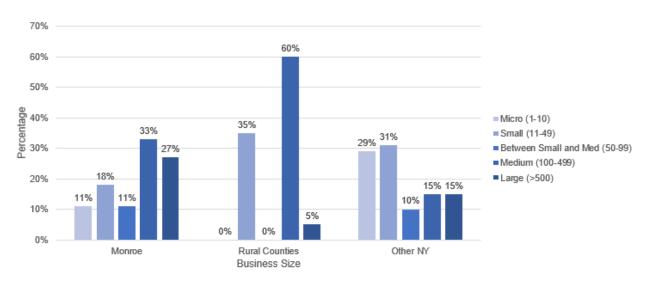
EMPLOYEE ASSISTANCE PROGRAMS

Does your company have an Employee Assistance Program (EAP)--for example, access to 24/7 mental health and substance misuse counseling for employees?



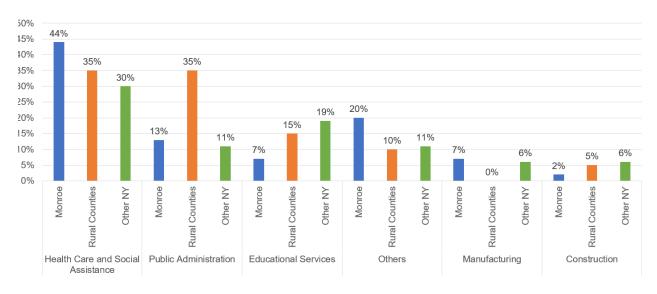
Comparisons

Organization's Size (Monroe, Rural Counties, Other NY)



Sample Size: Monroe n = 45, Rural Counties n = 20, Other NY n = 123

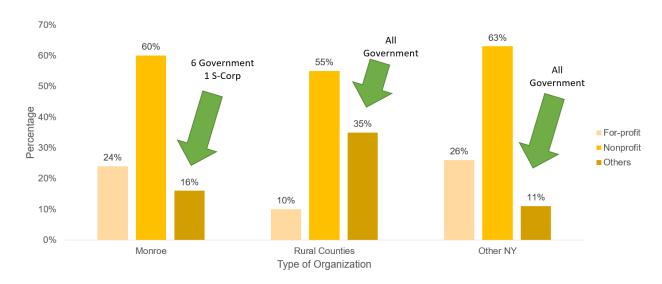
Respondents' Industries (Top 6 Industries) (Monroe, Rural Counties, Other NY)



Sample Size: Monroe n = 45, Rural Counties n = 20, Other NY n = 124

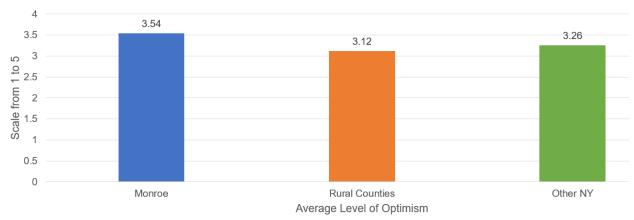
Type of Organization

(Monroe, Rural Counties, Other NY)



Sample Size: Monroe n = 45, Rural Counties n = 20, Other NY n = 124

Average Financial Optimism (Monroe, Rural Counties, Other NY)



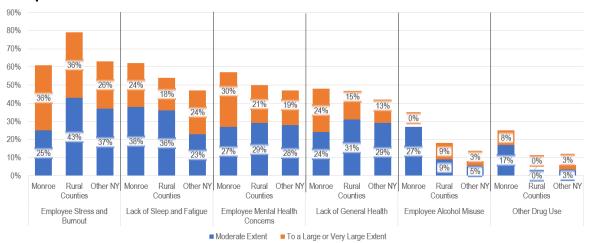
Questions:

- 6a) What is the current state of financial health of other organizations similar to your own (in size and industry).
- 6b) What is the current state of financial health of your own organization.
 - Response Options: 1-Struggling, 2-Slightly Struggling, 3-Maintaining, 4-Slightly Growing, 5-Growing
- 7) How would you forecast the financial health of your organization in the next 6 months?

 Response Options: 1-Getting Worse, 2-Getting Slightly Worse, 3-Staying the Same, 4-Getting Slightly Better, 5-Getting Better

Sample Size: Monroe n = 33, Rural Counties n = 13, Other NY n = 99

Exposure Across Monroe, Rural, and the Rest of NY



Question:

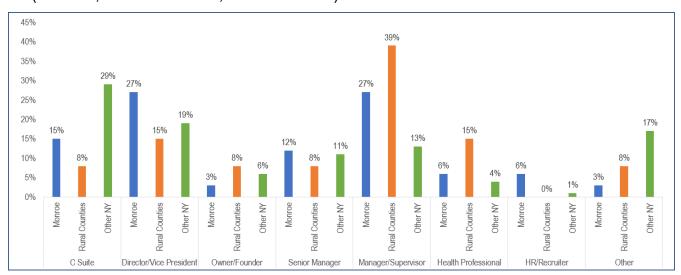
9) In the past 6 months, to what extent have financial health and productivity problems in your organization been caused by: employee stress and burnout, employee mental health concerns, employee alcohol misuse, other drug use (Rx, marijuana, illegal drugs), poor general health, and sleep and fatigue.

Response Options: 1-Not at all, 2-To a Small Extent, 3-To a Moderate Extent, 4-To a Large Extent, 5-To a Very Great Extent

Sample Size: Monroe n = 30-12, Rural Counties n = 14-10, Other NY n = 94-61

Job Titles of Respondents

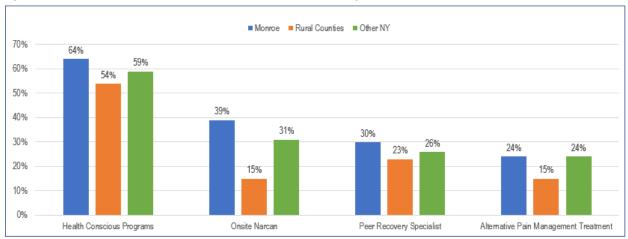
(Monroe, Rural Counties, and Other NY)



Sample Size: Monroe n = 33, Rural Counties n = 13, Other NY n = 72

4 Most Selected Rx Prevention Services

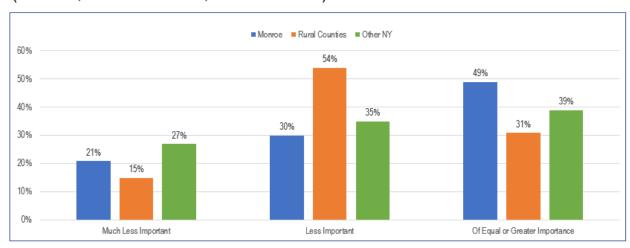
(Monroe, Rural Counties, and Other NY)



"PREVENTING PRESCRIPTION DRUG/OPIOID MISUSE. We also want to know your organization's interest in offering programs that address the current and growing Opioid epidemic, including Prescription Drug and Opioid misuse. This includes any one of a range of proven strategies. Please check below any you are interested in having."

Sample Size: Monroe n = 33, Rural Counties n = 13, Other NY n = 78

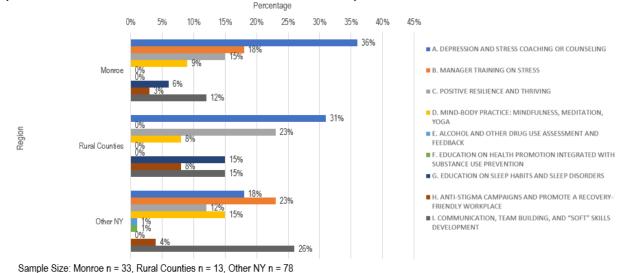
Respondents' Perception of Rx Prevention Importance (Monroe, Rural Counties, and Other NY)



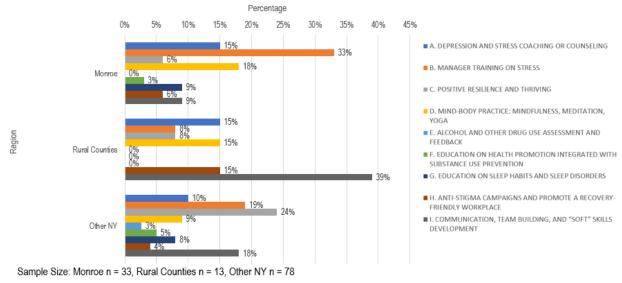
"21) How important would it be for your organization to have a program or strategy that prevents "Prescription Drug and Opioid Misuse" when compared to your top three choices of interest?"

Sample Size: Monroe n = 33, Rural Counties n = 13, Other NY n = 78

Top Choice to Reduce Employee Health Issues (Monroe, Rural Counties, Other NY)



Second Choice to Reduce Employee Health Issues (Monroe, Rural Counties, Other NY)



Third Choice to Reduce Employee Health Issues (Monroe, Rural Counties, Other NY)

