



Seeing the workplace with new eyes: *What helps joint OHS committees?*

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1. *Summary of project activities*

Knowledge about workplace hazards and how to fix them is not enough for members of joint health and safety committees (JHSCs) to get changes made.

It takes know-how about processes, how to make the case for change and being focused on solutions and the strategies that go with them. JHSC members, particularly worker representatives, need time to be trained about, prepare for and do their committee “jobs”. They need respect and support from top management.

Those are some lessons that joint health and safety committees in several Manitoba (Canada) workplaces learned during a successful participatory project.

A five-step process framed the activities:

2. *What were the questions and objectives?*

The Manitoba Workers Compensation Board (WCB) Community Initiatives and Research Programme funded us to investigate the question:

What helps joint health and safety committees play an effective role in preventing workers getting sick or hurt because of their job?

The specific objectives were to:

- ❑ assess health and safety needs and strengths in the two workplaces;

3. *What happened? Why?*

The project made a difference in the two sites where work was focused when we finished in 2007. The committees are more effective. They are starting to use a more holistic approach in their activities,

- where does it hurt?
- what makes it hurt?
- how do you find the symptoms and hazards?
- how should hazards be fixed?
- how do we get the fixes we need?

Consultants developed relevant tools and participatory training using the framework. Starting with basic health and safety training, they followed up with workshops about topics that committee members requested: work-related stress, ergonomics and committee process. Using feedback from the workshops, participant observation at committee meetings and other evaluations, the consultants ended up producing a self-help guide to assist joint health and safety committee members see their workplaces “with new eyes”.

- ❑ develop appropriate training and workshops about health and safety in general, specific hazards and committee activities; and
- ❑ develop, introduce, use and evaluate existing and new tools, resources and materials to assist the committees.

Three consultants guided the process that was supposed to take two years. It ended up taking about an extra 15 months to complete.

reflecting the prevention focus we used with them. They are doing this because the project activities and discussions helped participants to:

- ❑ see their workplace with “new eyes”,
- ❑ learn and apply key prevention principles,
- ❑ “see” that change is possible, and
- ❑ feel confident to change what their committees do and how they do them.

Without the project, we'd have remained stagnant, the committees would have continued to meet and we would've gone nowhere.

Our experience was similar to that in other workplace-based projects. Time and again, we were reminded that workplace change takes a lot of time and effort, especially when the topic is health and safety. As one committee person said:

..There are other hazards we found when we talked together, that are more pressing, that we haven't even touched yet -- the stress hazards. ... I think we do a really good job dealing with the safety stuff,

4. What did we learn?

Besides the guide, we developed a list of 10 ingredients for effective workplace JHSCs. They are:

1. Commitment, support, participation and respect from all levels of management, especially at “the top”. In organised workplaces, this needs to be supplemented by the union(s) involved.
2. Organisational acceptance that committee activities are real work, not a volunteer activity or add-on; adequate time for all committee work, including preparation for activities and meetings, is essential.
3. Competent, trained supervisors with good “people skills”.
4. Knowledgeable workers -- they are trained, know their rights and participate in health and safety decisions and activities.
5. A comprehensive health and safety programme, set in a preventive framework that requires everyone involved to deal with all six hazard categories and look for root causes.
6. All committee members trained and practicing the principles, content and processes required

but not health in the broader sense .. Health is messy.

The consultants attribute the project's success to:

- ✓ the mix of their collective experience, skills and knowledge;
- ✓ taking time to do background work and to adapt to the workplaces' needs and schedules;
- ✓ support from individuals within both organisation, along with their willingness to try new approaches; and
- ✓ the initial two-day committee workshop and related materials developed in an earlier CIRP-funded project.

(The g)rant allowed (us) to become a far more knowledgeable and effective committee in a much quicker period of time. The resources provided in information and direction by the facilitators as coaches helped the process immensely.

(e.g., they have the skills to run meetings, inspect the workplace, “chat people up”, research hazards and solutions and make the case for changes).

7. “New eyes” come into workplaces (e.g., via trained facilitators/ trainers, exchanges and discussions).
8. Participatory methods, including visual tools and materials.
9. Short and long-term planning and evaluation of committee activities, integrated into the organisation's activities.
10. Recognition that conflict is inherent in joint worker-management committees; processes are set up to deal with it in a respectful and healthy way.

For more information about the project, e-mail Dorothy Wigmore at dorothyw@web.ca. The self-help guide is on the SafeWork Manitoba website (http://safemanitoba.com/seeing_the_workplace_with_new_eyes_guide.aspx). It also will be available at www.wigmorising.ca by mid-December, 2009.