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|  | **Step 1: Identify Root Causes -- Sub-Issues and Contributing Factors** |
| General Health and Safety Concern: | |
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| **Sub‐Issue:** | **Sub‐Issue:** | **Sub‐Issue:** | **Sub‐Issue:** |
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| **Contributing Factors:** | **Contributing Factors:** | **Contributing Factors:** | **Contributing Factors:** |
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|  | **Step 2: Develop Measurable Objective and Solution Activities** |
| Major Health and Safety Objective: | |
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| **Solution 1:** | **Solution 2:** | **Solution 3:** | **Solution 4:** |
|  |  |  |  |
| **Specific Activities/**  **Components of Solution 1:** | **Specific Activities/**  **Components of Solution 2:** | **Specific Activities/**  **Components of Solution 3:** | **Specific Activities/**  **Components of Solution 4:** |
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|  | **Step 3: Set Criteria for Selecting and Evaluating Interventions** | | | |
| **Scope**  Who do you want to reach (e.g. one unit or the entire organization)? How many people should be affected? (If you plan a small pilot, describe # in pilot and in long term) | | **Benefits/Effectiveness**  What are the positive outcomes you want to achieve? (both short and long term)  **SHORT TERM** | **Resource Considerations**  What resources are currently available within the organization that should be considered? (e.g. time, money, personnel) Are there important parameters or context factors to consider? | **Obstacles**  What potential barriers exist that may interfere with intervention success?  **Do not list cost as an obstacle here.** |
|  | |  |  |  |
| **LONG TERM** |
|  |
| **Short term examples**: Increased knowledge, behavior change, participation, satisfaction  **Long term examples**: Improved health, lower claims/costs, more productive | Design Teams may propose interventions that exceed the resources currently available if the benefits justify the costs. Resources should not limit brainstorming. |
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|  | **Step 4A: Form Interventions Worksheet** | | |
| **Major Health, Safety, & Well-Being Objective** (from Step 2) | | | |
|  | | | |
| **Key sub-issues for intervention** (from Step 2 – list only the sub-issues that are addressed in interventions A, B, or C) | | | |
|  | | | |
| **Intervention A**  **Title:** | | **Intervention B**  **Title:** | **Intervention C**  **Title:** |
|  | |  |  |
| **Activities** | | **Activities** | **Activities** |
| **1**. | | **1**. | **1**. |
| **2**. | | **2**. | **2**. |
| **3**. | | **3**. | **3**. |
| **4**. | | **4**. | **4**. |
| **5**. | | **5**. | **5**. |
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|  | **Step 4B: Analyze Activities Worksheet** | | | | |
| **Solution:** | | |  | | |
| **Solution Activities**  List the activities that you want to include in this intervention | | **Scope**  Who will this activity reach?  How many people will be affected? | **Benefits/ Effectiveness**  What positive outcomes will be achieved through this activity? (describe both short and long term) | **Resources Needed**  What are the resources needs/costs of this activity? (time, money, personnel) | **Obstacles**  What obstacles or potential barriers could interfere with the success of this activity? |
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|  | **Step 4C: Apply Criteria for Selecting + Evaluating Interventions** | | | | | | | | | | | | | | | | |
| **Instructions to complete this form:**  1) List the selection criteria from Step 3 in the corresponding column.  2) List the intervention activities in the appropriate row.  3) If an activity meets the selection criteria, place a check-mark in the appropriate cell. If not, leave the cell blank.  4) By looking across rows, you can see how well an activity meets all selection criteria.  5) By looking down columns, you can assess which activities meet a specific criterion. | | **Scope** | | **Benefits/ Effectiveness** | | | | **Resource Considerations** | | | | **Obstacles** | | | | **Summary** | |
| **Short Term** | | **Long Term** | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  | **Number of positive selection criteria (scope, benefits/effectiveness, and resource considerations)** | **Number of negative selection criteria (obstacles)** |
| **Intervention A Activities** | | | | | | | | | | | | | | | | | |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Intervention B Activities** | | | | | | | | | | | | | | | | | |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Intervention C Activities** | | | | | | | | | | | | | | | | | |
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|  | **Step 4D: Rate Intervention Options -- Design Team** | | | |
|  | | **Intervention A**  **Title:** | **Intervention B**  **Title:** | **Intervention C**  **Title:** |
| Rate the three intervention alternatives as High (H), Medium (M), or Low (L) relative to the selection criteria from Step 3. | |  |  |  |
| **Anticipated Scope**  **(L/M/H)** | |  |  |  |
| **Anticipated Benefits**  **(L/M/H)** | |  |  |  |
| **Anticipated Resources Needed (L/M/H)** | |  |  |  |
| **Anticipated Obstacles**  **(L/M/H)** | |  |  |  |
| **Priority ranking of interventions (optional):** | | | | |
|  | | | | |
| **Additional notes (optional):** | | | | |
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|  | **Step 5: Rate and Select Intervention Options -- Steering Committee** | | | |
|  | | **Intervention A**  **Title:** | **Intervention B**  **Title:** | **Intervention C**  **Title:** |
| Rate the three intervention alternatives as High (H), Medium (M), or Low (L) relative to the selection criteria from Step 3. | |  |  |  |
| **Anticipated Scope**  **(L/M/H)** | |  |  |  |
| **Anticipated Benefits**  **(L/M/H)** | |  |  |  |
| **Anticipated Resources Needed (L/M/H)** | |  |  |  |
| **Anticipated Obstacles**  **(L/M/H)** | |  |  |  |
| **Topics to discuss with Design Team regarding proposed intervention (optional):** | | | | |
|  | | | | |
| **Intervention(s) selected for implementation:** | | | | |
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