



PUTTING OUR PEOPLE FIRST

**A Discussion Guide for Public Health Agencies to
Advance Worker Well-Being**



This Discussion Guide is dedicated to all public health practitioners working in state and local health departments across the United States.

We thank you for all of your efforts to protect the public's health.

“We can build workplaces that are engines of well-being – showing workers that they matter, that their work matters, and that they have the support necessary to flourish.”

**U.S. Surgeon General 2022
*Workplace Mental Health & Well-being Report***

Annotated Discussion Guide

for use in State and Local Health Departments to Prioritize and Advance Worker Wellbeing

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This Guide is designed specifically for State and local health departments to enhance worker health, well-being, and workplace culture. The guide is intended to be adapted for use for your individual agency. For the purpose of this Guide, ‘Agency’ will refer to the unit using the Guide (e.g., team, office, bureau, division, entire health department, etc.).

We commend you for your interest in advancing worker health and well-being! This is not an easy undertaking, but one that can benefit not only individual employees, but your agency overall. As improving worker health and well-being is continuous, use of the Guide is intended not as a one-time effort, but rather as an ongoing process. As you begin your Guide implementation journey, factors such as agency size, staffing, nature of work, and resources available will likely drive the scope and magnitude of your initial process. However, the aim is that the first use of the Guide will be part of an ongoing effort that will evolve and grow over time to meet changing employee needs and agency circumstances.

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|--|
| Cultivate a positive and productive workplace culture with sustainable support for workers’ personal health and well-being |
| Facilitate productive and authentic conversations among leadership and staff |
| Advance public health workforce recruitment and retention |

Before Getting Started

A. Critical Preparations - Implementation Scope and Timing

This guide is intended for use by any part of a state, local, or tribal health department, from a single unit, to a full division or bureau, or an entire agency. When deciding the level of implementation (e.g., unit, agency-wide, or a larger statewide effort), piloting this Guide on a smaller scale before deploying more broadly might be considered given that small, well-managed change can be the impetus and inspiration for agency or state-wide change. However, implementation level and scale should ultimately be determined based on what makes sense for each individual agency.

To help agencies make important implementation decisions, we have developed a list of critical questions to consider before launching your implementation journey. These critical questions are noted in the box below, but if your agency prefers to work through and adapt these questions to fit your agency's needs, we have created a separate [worksheet](#) for your use.

Implementation Scope and Timing

As proper timing and preparation for such undertakings as this guide are critical for success, we suggest potential users read this Guide in its entirety and think through the following questions prior to implementation.

- Is our agency ready to embark on a process to enhance worker health, well-being, and culture? If not, what factors might need to be in place to do so? Can implementation of this Guide be tailored to help us collectively achieve the needed factors?
- Is our agency leadership prepared to listen and support efforts to advance worker health, well-being, and workplace culture? If not, what steps are needed for leadership readiness? Could implementation of the Guide be tailored to advance leadership readiness?
- Are agency staff ready and have the capacity to work collectively with leadership to advance worker health, well-being, and workplace culture? If not, what changes are needed? Could implementation of the Guide be tailored to achieve these necessary changes?

After careful review of this Guide and assessment of the above questions, a decision should be made as to whether now is the right time to move forward with implementation. If the decision is 'no', we suggest asking hard questions as to why not and what would need to be done to undertake such an effort and setting some specific goals and timelines for future implementation.

B. Pre-implementation Foundation Building

This Guide can be used as a stand-alone tool or embedded within an agency's ongoing initiatives such as: quality improvement, [public health agency accreditation](#), [public health infrastructure restructuring](#), workforce improvement, public health transformation, community health assessment, and/or strategic planning initiative(s).

Resources to help guide implementation both internally and externally should be assessed before initiating your process.

Internal Resources

Often there is a lack of awareness of employee resources already available (e.g., mental health services, employee benefits, policies, etc.). Thus, we recommend creating and disseminating a list of existing resources along with access information.

- Examples of possible existing resources within the agency:
 - Mental health supports (e.g., counselors, therapists, support groups)
 - Employee Assistance Programs
 - Workplace policies and procedures that address safety, harassment, DEI, reporting, and/or grievance processes
 - Programs available to agency staff such as childcare or dependent care, passes for transit or parking, access to state or national parks, and opportunities for agency employees to access recreational or social support events and locations at free or reduced rates.

External Resources

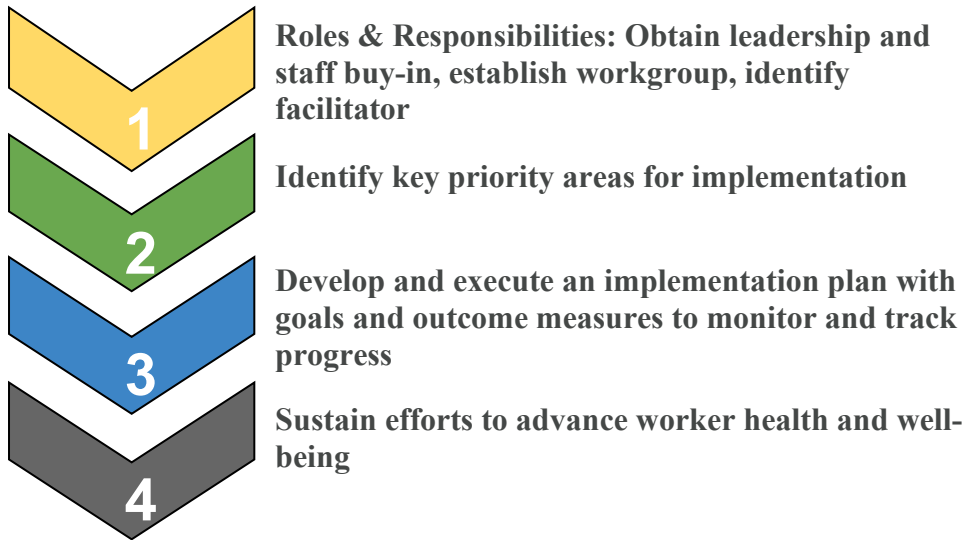
- Examples of possible external resources:
 - Training and Professional Development: Coursera, Linked-In Learning, [CDC Public Health Professionals Gateway](#)
 - Free guides and toolkits aimed at [creating mentally healthy workplaces](#) and [reducing workplace stress and fatigue](#)

Additional resources that may be relevant to implementation are linked at the end of the Guide for reference. As you continue on your implementation journey, we encourage you to explore options for other resources (e.g., trainings, materials specific to your identified priority areas, etc.).

C. Conduct a Baseline Assessment

Conducting a baseline assessment provides a marker as to where the agency is starting from to help guide priorities, action steps, and measure impacts. We offer this [pre-assessment tool](#) to assist in this process.

Suggested Implementation Roadmap



1. Roles, Responsibilities, and Engagement

As this is an important undertaking, adequate leadership support and staffing are critical to success, please see the leadership, staffing, and participation considerations below and adapt as needed for your individual agency context.

Agencies should determine who and how many individuals need to be involved in each step of the process (e.g., brainstorming, goal setting, and implementation), recognizing that engagement may vary at each stage of the process (i.e., participants in the brainstorming process might not necessarily be involved in implementation). Level of involvement will likely vary depending on agency size and engagement may evolve as you make your way through the process, but it is important to have a general sense of anticipated engagement from leadership and staff before beginning. Additionally, consideration should be given to assuring representation from across the agency and at different staff levels, as well as consideration of any potential power imbalances and how to minimize them.

Leadership

Leaders, at any level of implementation, have responsibility for and influence on many aspects of workplace practices and culture. Thus, agency leadership support and buy-in are critical to the success and sustainability of the process.

Staff:

Staff commitment and capacity to improve health and well-being is critical to success. Given the current status of often overburdened and burned-out public health workers, we strongly recommend that participation in efforts to plan and implement the Guide be optional, so that this activity is not interpreted as an additional required task.

Workgroup Establishment

We recommend the establishment of a workgroup to oversee Guide implementation. The workgroup's composition should be representative of the range of leadership and staff across the agency. Appointing a workgroup chair, designating staffing, and assuring shared authority can help to create buy-in, assure a manageable workload, and accountability for the implementation process. Workgroup participation and staffing duties ideally, if possible, should be coupled with a reduction in regular work duties. The workgroup should be recognizable and transparent and communicate updates and invitations to participate in the implementation effort to leadership and staff.

Some workgroup considerations (adapt as needed for your agency):

- What is the anticipated role and responsibilities and time commitment for workgroup members? The Chair?
- Are there resources to support the workgroup? Or ability to reduce the participants' other duties to offset the additional work burden?
- How will the workgroup report to leadership? Will workgroup meeting minutes be shared broadly across the agency?
- How will assurances be made to all for all voices to be heard and to minimize any potential power imbalances?
- What ground rules does the workgroup wish to set to guide workgroup meetings and project work?

Facilitator

- A facilitator can be helpful to assure a productive and engaged implementation process. If you choose to use a facilitator for some or all of the implementation meetings, a facilitator can be selected from either outside or inside the agency depending on resources and facilitator scope of work (see considerations below). The workgroup should spend time defining the facilitator role and responsibilities and the selection process.

Key Considerations in Facilitator Selection

The facilitator ideally should be an unbiased entity who is cognizant of the work of the agency and its mission.

If the facilitator is selected from inside the agency, leadership is encouraged to look beyond the traditional leaders and select someone who exhibit strong facilitation skills and has the respect of other agency staff.

If the facilitator is an external person, finding someone with familiarity with the agency that can be an independent and trusted voice for agency staff is critical.

2. Identifying Priority Areas

This section of the Guide lays out a process to identify implementation priorities. The first suggested step is a brainstorming process. The nature, participants, and extent of the brainstorming process will vary depending on the scope of the effort as well as staff capacity and interest to participate. Whatever brainstorming process is ultimately decided upon, it is important to assure diverse perspectives across the agency are reflected in the brainstorming process.

2A. Brainstorming Priority Areas

Once the workgroup has settled on a brainstorming process, the brainstorm should be framed as an open call for potential areas as to how the agency can better support employee health and well-being and work toward positive culture changes. Leaders of the brainstorm process (or the facilitator) may want to provide some general guidelines of scope of what areas are open for discussion along with feasible areas for change at the present time. It is important for all participating to feel free to voice their concerns, feelings, and thoughts, and that all comments are documented. It is also critical that leaders of the process are cognizant of and take active steps to minimize any potential power dynamics.

It is recommended that you have a plan in place in advance to be sure that all issues raised are documented and responded to in a respectful and productive way, even those that fall outside the identified scope. Below are a few possible ways to respond to such concerns.

- Outline a potential alternative suggestion that is within the identified scope.
- Explain that the raised concern is not within the identified scope (suggest to keep the explanation brief and simple).
- Discuss the possibility of addressing the concern in the future (use this option only if there potentially is a future opportunity to address the concern).

2B. Narrow Your Focus

After the brainstorm session(s), notes of all the brainstorm input should be documented, reviewed and synthesized to capture all the key areas/themes raised, before narrowing down to a final 2 to 3 priority areas to act upon. The workgroup will need to determine who and how many individuals need to be involved in the final priority selection process; however, it is important to have clarity and transparency to assure that the final priority selection is representative of the input received and within the scope of the feasible areas for change.

The following prioritization chart is offered as a tool to assist in the final priority selection process.

| Prioritization Chart | | | | | | |
|--|-----------------------------------|-----------------------------------|-----------------------------------|-----------------------------------|-----------------------------------|--|
| This chart is a tool to guide the process of narrowing your focus to identify 2-3 key priority areas for implementation/action. Expand or adapt the chart as needed. | | | | | | |
| Decision Criteria | Potential Priority Area #1 | Potential Priority Area #2 | Potential Priority Area #3 | Potential Priority Area #4 | Potential Priority Area #5 | Example Questions for Consideration |
| Briefly Summarize each potential priority area | | | | | | <ul style="list-style-type: none"> Why is this priority area important for staff? (you may want to include pre-assessment survey (or other data as applicable) to further inform your priority characterization Is this priority within the scope of implementation that has been defined? |
| Potential Impact | | | | | | <ul style="list-style-type: none"> Is it possible for the agency to make an impact in this priority area? |
| Potential Unintended Consequences | | | | | | <ul style="list-style-type: none"> Could there be any potential unintended consequences of addressing this priority area? |
| Constraints | | | | | | <ul style="list-style-type: none"> Are there constraints that would hinder changes? Are there any possible alternatives that are not bound by the same constraints? |
| Funding/Other Resources | | | | | | <ul style="list-style-type: none"> If there is funding or other resources available, how might they be invested to best support staff? Are there any potential funding or resource opportunities to support implementation efforts now or in the near future? |
| Sustainability | | | | | | <ul style="list-style-type: none"> Can changes to address this priority be sustained? |
| Evaluation | | | | | | <ul style="list-style-type: none"> Can implementation efforts be assessed? Are there SMART objectives that could track progress over time? |

2C. Solidifying Goals, Desired Outcomes, and Measurable Indicators

After narrowing down to 2-3 priority areas to focus on during implementation, the next step is to develop purposeful goals, aims, and outcome measures for each identified priority area. Agencies will need to determine desired level of engagement for this step of the process (e.g., workgroup members, leadership, staff, human resources, others, etc.).

Below are some sample goals, aims, and indicators to help you in this process. Note, these sample goals are fairly broad in scope, you likely will want to be more specific and identify more than one actionable goal within each priority area.

| Sample Goals, Outcomes, and Indicators | | |
|---|---|---|
| <i>Adapted from ASTHO Technical Package for Enhancing Governmental Public Health Workforce Well-Being and Retention</i> | | |
| Sample Goals | Sample Desired Outcomes | Sample Measurable Indicators |
| Engage health department leaders and staff to work collectively and intentionally to foster an environment that supports worker health, well-being, and workplace culture that allows employees to feel safe, valued and appreciated. | Positive workplace culture and connection that allows staff to thrive. | <ul style="list-style-type: none"> • Employee-reported satisfaction with workplace culture • Employee engagement ratings related to appreciation, inclusion, and belonging within the agency |
| Identify opportunities for policy and practice changes to better support worker health and well-being. | Creation or adaptation of programs and policies for employees to feel safe, welcomed, and supported in the workplace. | <ul style="list-style-type: none"> • Number of updated policies • Updated employee recognition programs • Number of employee resource groups |
| Leverage ongoing initiatives to incorporate a sustained focus on employee health, well-being, and workplace culture. | Update ongoing initiatives and processes to prioritize employee health, well-being and improved culture. | <ul style="list-style-type: none"> • Improvement in agency retention rates • Number of employees taking advantage of flexible workplace options • Time to hire • Agency strategic plans include strategies to address workforce health, well-being and culture. |

3. Implementation & Evaluation

Implementation Plan: Once specific goals, outcomes and measures are defined, the next step is to develop and execute a formal implementation plan that aligns the goals with clear and measurable action steps, and outcome measures. Below is a sample implementation plan template to guide you in your process. Note, the sample is very basic to get you started; you likely will want to adapt it to align with your plan and to track short, interim, and long-term progress. Regardless of what implementation plan you use, measurable outcomes and regular progress checks and reports are critical for success and sustained impact.

Evaluation: Your implementation plan should incorporate an evidence-based evaluation component to help assess and monitor progress. Here are some suggested components for consideration:

| <i>Feedback Mechanisms</i> | <i>Pre- and Post-Evaluations</i> | <i>Performance Management Tool & Metrics</i> | <i>Employee Engagement</i> |
|--|---|---|--|
| Feedback mechanisms can be implemented in many forms on an ongoing basis, such as bi-weekly or monthly meetings, individual meetings with staff and leadership, or anonymous online forums or surveys. | Pre- and post-surveys can help define a baseline and assess implementation progress and impact, as well as identify areas for further improvement and growth. | Consider adding or using existing systems to track performance improvement with specific emphasis on identified priorities. Potential metrics include employee retention/turnover rates and quality metrics (e.g., employee satisfaction, number of errors in workflow processes, etc.) | Measures for employee engagement will vary based on resources and data readily available to health department management. Sample measures include employee participation rates in implementation efforts, employee surveys (e.g., annual, quarterly, or pulse), and workplace absenteeism. |

| <p align="center">Sample Implementation Plan <i>(Does not include evaluation - you would need to build this in)</i> Blank Sample Implementation Plan</p> | | | | | | |
|---|---|-------------|--------------|---------------|--|---|
| Goal | Specific Actions | Lead | Time* | Status | Outcome Measure(s) | Performance Indicator(s) / Benchmark |
| Engage health department leaders and staff to work collectively and intentionally to foster an environment that supports worker health, | Work with leadership to formalize an annual or biannual retreat to foster team building and collaboration | MR | Summer 202X | In process | - Plan, from beginning to end, a retreat with outlined objectives and offsite team building activities, and set goals for what you hope to accomplish. | - Number of employees attending retreat |

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| well-being, and workplace culture that allows employees to feel safe, valued and appreciated. | Work with leadership to incorporate mental health and wellbeing into employee communications and meetings. | JP | Spring 202X | In process | <ul style="list-style-type: none"> - Update quarterly newsletter to include a section on staff-driven topics. - Include a minute for wellness at the end of monthly all-staff meetings. | <ul style="list-style-type: none"> - Number of newsletters disseminated to employees - Number of employees attending and participating in a wellness minute at the end of meetings. |
| Identify opportunities for policy and practice changes to better support change specific needs related to worker health and well-being | Meet with HR to discuss updates to the flexible work and employee leave policies to better meet employee needs | TS | Spring 202x | In process | <ul style="list-style-type: none"> - Keep designated time available on staff calendars to meet with HR. - Implement regular reminders to staff that HR is an available resource for employees to leverage for policy change. | <ul style="list-style-type: none"> - Number of staff meeting with HR. - Completion of employee health and well-being modules being added to new employee orientation. -New employee orientation evaluation results |
| | Meet with HR to add a module on employee health and well-being to the new employee orientation | TS | Fall 202x | Completed-changes to orientation made as of 12/15 | | |
| | Request funding to establish 3 additional employee resource groups | BT | Winter 202x | In process | <ul style="list-style-type: none"> - Provide employees the mechanisms necessary to easily request funding. | <ul style="list-style-type: none"> - Completion of funding requests - Successful integration of additional employee resource groups into ongoing efforts -Employee response and participation rates in the new resource groups |
| | Expand employee recognition program to include categories for both frontline and support staff | JP | Winter 202x | Implemented as of Jan. 1 | <ul style="list-style-type: none"> - Embed recognition systems into staff meetings, retreats, and newsletters (e.g., shout-outs, awards, certificates of achievement, etc.). | <ul style="list-style-type: none"> - Number of recognized frontline and support staff. - Variation of recognition systems (shout-out, awards, etc.) |
| | Meet with facilities to discuss options to adapt work spaces to better meet employee needs | VJ | Winter 202x | In process | <ul style="list-style-type: none"> - Redefine workspaces to promote wellness habits that support productivity. - Leverage physical space to enhance workplace culture and collaboration (e.g., painting walls, adding artwork, allowing staff to bring in personal items, etc.). | <ul style="list-style-type: none"> - Outlined options, based on meetings with facilities, for potential adaptation of work spaces. - Staff consensus on any changes made to the collective work space. - Completion of outlined changes to the work space. |
| | Meet with WIC staff to identify opportunities for healthy and fun agency events | VJ | Summer 202x | To be started April 202x | <ul style="list-style-type: none"> - Incentivize wellness challenges. - Provide incentives for healthier food options at agency events and consider options to engage staff (e.g., cooking contests, recipe | <ul style="list-style-type: none"> - Number of meetings with WIC staff. - Number of healthy and fun agency events completed. - Participation rates in healthy and fun agency events. |

| | | | | | | |
|--|---|----|-----------|------------|---|--|
| | | | | | swaps, etc.) | |
| Leverage ongoing initiatives to incorporate a sustained focus on employee health, well-being, and workplace culture. | Expand available staff and leadership training and professional development opportunities** | TS | Fall 202x | In process | <ul style="list-style-type: none"> - Formalize leadership engagement in the orientation and onboarding process. - Increase the number of available employee professional development options, mentorship programs, and training sessions. | <ul style="list-style-type: none"> - Number of changes or additions made to current/ongoing initiatives identified as having potential to support employee health and well-being - Completion of leadership training or professional development programs. |

*Though not noted in the sample, you may want to have some short, interim and longer outcomes to track progress, and assure accountability.

**Access leadership and staff training and professional development resources in the [Additional Resources](#) section.

Once the plan has been developed, the next step will be to determine how best to assure and track implementation progress. This should include regular check-in meetings and reports and may require the formation of subcommittees and/or assignment of responsibilities to existing units (e.g., human resources, employee health, etc.) to assure goal accountability and achievement.

4. Building Sustainable Change

We commend you for embarking on this journey! It takes courage and effort to launch such an initiative! It is important to acknowledge progress along the way as well as anticipate and adapt to challenges and setbacks. Sustainable change is an ongoing effort. We applaud your work and encourage you to keep going, share your progress and continue to engage your agency to meet employee needs and advance worker health and well-being!

[Discussion Guide Feedback Survey](#)

Share Your Feedback!

Let us know how you're using this Discussion Guide in your agency. We learn from you. Tell us how you're using this, what else you'd like to see, and/or anything we can do to improve the Guide.

Authorship & Acknowledgements

The development of this Guide was a collaborative effort of the Johns Hopkins Bloomberg School of Public Health (BSPH) and the Public Health Accreditation Board (PHAB) with input from over 80 public health practitioners and representatives from public health partner organizations.

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Additional Resources

1. Accreditation

- The [Public Health Accreditation Board \(PHAB\)](#) is the national accrediting body for public health in the United States. PHAB has many [tools for transformation](#) that can be used as actionable next steps.
- [Accreditation](#) measures a health department’s performance against a set of nationally recognized, practice-focused, and evidence-based standards.
 - i. Within PHAB’s Accreditation Standards and Measures, many measures promote the health and wellbeing of public health workers but specifically Domain 8, “Build and support a diverse and skilled public health workforce,” focuses on the need for health departments to strategically support the development of a competent workforce to perform public health functions. A selection of related measures include:
 1. 5.1.1 Maintain awareness of public health issues that are being discussed by those who set policies and practices that impact on public health
 2. 8.1.2 Recruit a qualified and diverse health department workforce
 3. 8.2.1 Develop a workforce development plan that assesses workforce capacity and includes strategies for improvement
 4. 8.2.2 Provide professional and career development opportunities for all staff
 5. 8.2.3 Build a supportive work environment
 6. 10.2.1 Manage operational policies including those related to equity
- [Public health workforce calculator](#): Provides local health departments with a data-driven tool for workforce planning and to advocate for additional resources.
- [Pathways Recognition Program](#): Designed to support performance improvement efforts, strengthen infrastructure, and facilitate public health system transformation for health departments not yet ready for accreditation.

2. Leadership Resources

- [Employee Mental Health and Well-Being: Best Practices and Case Study Examples](#) - Health Enhancement Research Organization (HERO)
 - i. Report that discusses six workplace mental health and well-being practices.
- [Training and Education Resources for the Workforce](#) - CDC
 - i. Inventory of continuing education courses and other trainings aimed at strengthening the public health workforce

3. Change Management Resources

- [Checklist for Mentally Healthy Workplaces](#) - Employer Assistance and Resource Network on Disability Inclusion (EARN)
 - i. Checklist of strategies to improve mental wellness in the workplace.

4. Workforce Mental Health and Well-Being Frameworks, Toolkits, & Resources

- [Workforce Development Plan Toolkit](#) - Association of State and Territorial Health Officials (ASTHO)

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- i. Toolkit designed for state and territorial health agencies (can also be used by local and Tribal health agencies) with resources to develop a workforce development plan.
 - [Workforce Development and Training](#) - National Association of County and City Health Officials (NACCHO)
 - i. Available resources and tools to help ensure a competent governmental public health workforce
 - [Workplace Mental Health and Well-Being](#) - U.S. Surgeon General
 - i. Framework of five essentials to support workplaces as engines of well-being: connection and community; mattering at work; work-life harmony; opportunity for growth; and protection from harm.
 - [Total Worker Health Program](#) - National Institute for Occupational Safety & Health (NIOSH)
 - i. A program that offers resources and integrated intervention suggestions in order to benefit workers and improve workplace well being.
 - [Johns Hopkins P.O.E. Framework](#)
 - i. Framework that considers the interplay of psychosocial factors, organizational conditions, and environmental exposures to improve worker and organizational outcomes.
 - [Recommended Resources to Advance Employee Mental Health & Well-Being in Public Health Agencies](#)
 - i. List of frameworks, resources, and toolkits identified for potential adaptation and use by local, tribal, or state public health entities to advance employee mental health and well-being.
 - [Synthesis of Workforce Mental Health and Well-being Challenges and Best Practices](#)
 - i. Summary of identified core challenges and best practices to address public health workforce mental health and well-being.