



Opioids in the Workplace

An update on the working group collaboration with MSHA

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Update on Opioid Employer Guide

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Background

MSHA requested NIOSH collaboration in developing opioid prevention resources

NIOSH conducted working sessions with Miner Health Partnership to understand needs and challenges

Takeaways of opioid working sessions

Opioid misuse is likely underestimated in many mine sites

Opioid awareness training is rarely provided by employers

Occupational Safety & Health (OSH) managers need help in making the business case for opioid prevention

Managers are not aware of information sources that they can use to understand problems related to opioid use and mental health

Takeaways of opioid working sessions

Managers did not have specific processes for health prevention planning and implementation

Prevention programs and health-related policies were generally administered by different departments in “silos” and were not coordinated between departments

Development of employer guide for opioid prevention based on...

Feedback received during working sessions

Review of other opioid prevention guides (e.g., construction, non-profit and government organizations)

Workplace prevention research

Approach of guide

Evidence-based

Steps to
systematically
implement
strategies

Resources

Modular

Not one-size-fits-
all

Components of the guide



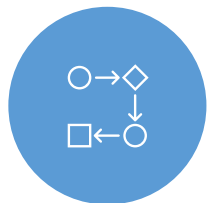
Burden of opioid use
on mine workers



Business case for
opioid prevention



Overview of
workplace prevention



Model to implement
prevention strategies



Components of an opioid
prevention program

The business case for workplace opioid prevention

Miners are prescribed opioids more often, at higher doses, and for longer durations than most other workers.

Miners have among the highest rates of illicit opioid use compared with other workers.

Mine Worker Fatalities

Incident



Suicide



Overdose



TOTAL COST: \$145,133



Lost Time

COST:

\$41,070



Job Turnover & Re-training

COST:

\$59,325

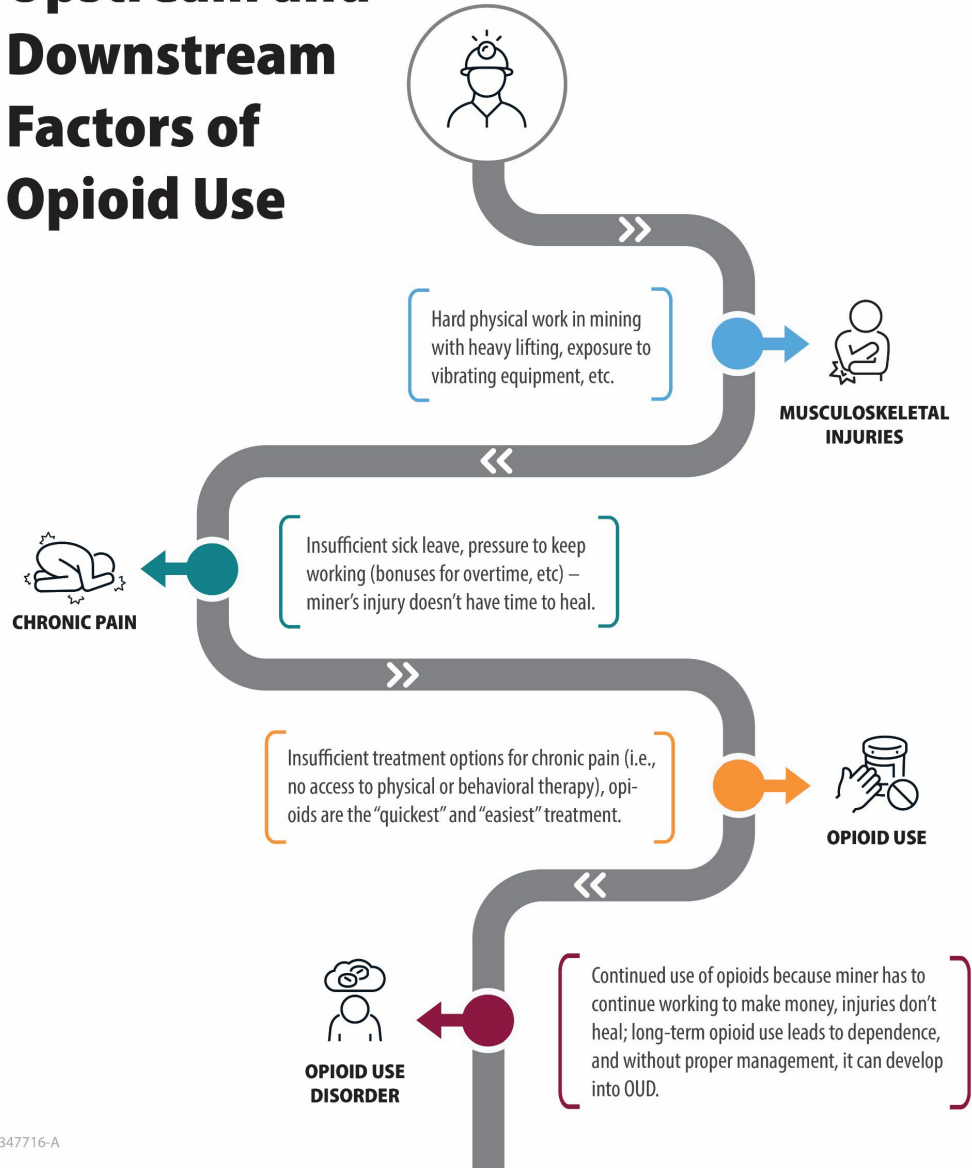


Health Care

COST:

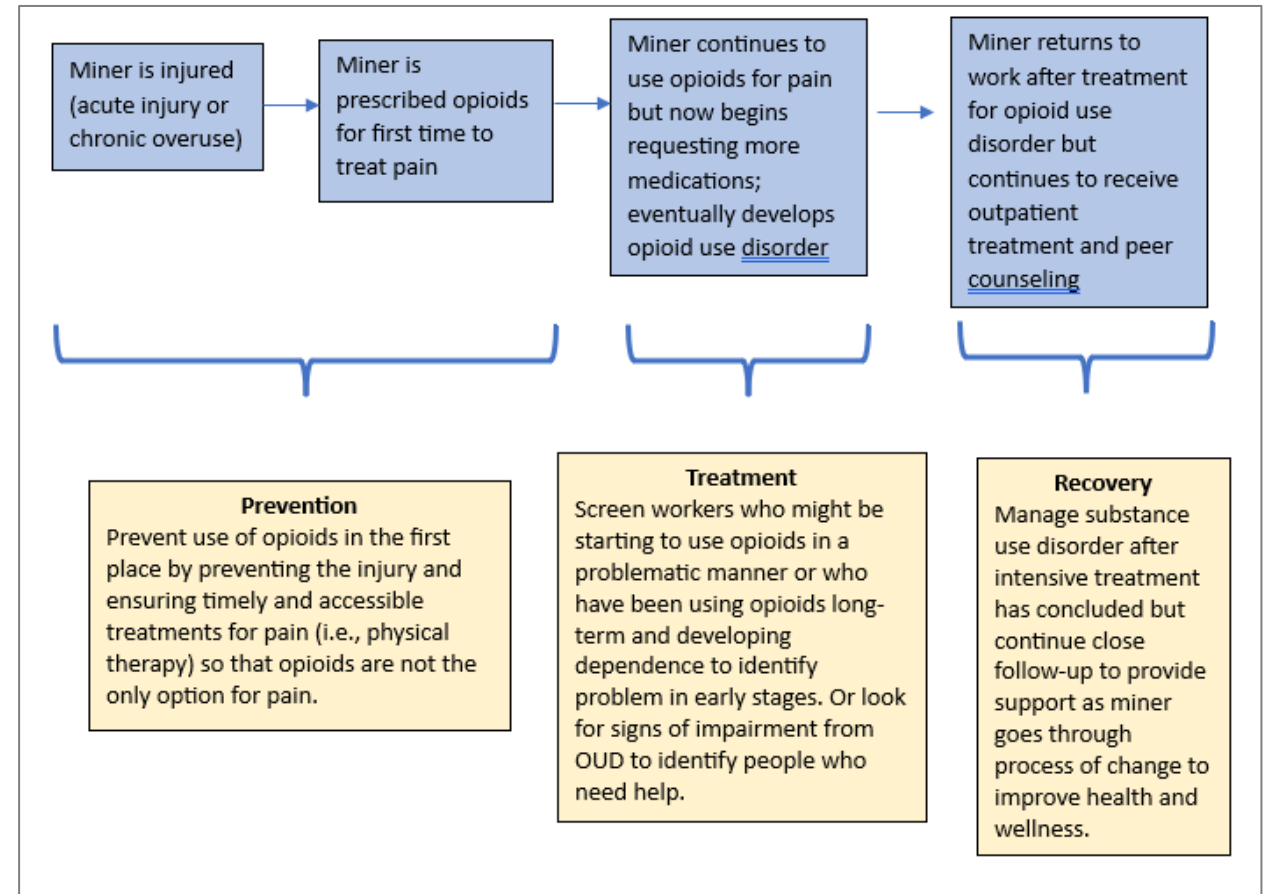
\$44,738

Upstream and Downstream Factors of Opioid Use



CS 347716-A

Workplace prevention is essential



Workplace Health Prevention Model

A systematic approach to program development

Workplace Health Prevention Model

1 ASSESSMENT

COLLECT DATA ACROSS LEVELS

- **EMPLOYEE**
(e.g., demographics, health risks, attitudes, health status)
- **ORGANIZATIONAL**
(e.g., culture, work design, current practices, leadership buy-in, service use, health costs)
- **COMMUNITY**
(e.g., health resources, potential partners, transportation, geography)

IDENTIFY RISKS THAT LEAD TO POOR HEALTH
To mitigate through prevention

IDENTIFY PREVENTION STRATEGIES
To strengthen existing policies and practices to improve worker health

4 EVALUATION

TRACK BASELINE DATA
Collected during assessment phase to assess trends

MONITOR MEASURES OF SUCCESS
(e.g., worker and organizational outcomes)

IMPROVE PREVENTION ACTIVITIES
Based on results and feedback

APPLY LESSONS LEARNED
In ongoing and future health prevention efforts



2 PLANNING & MANAGEMENT

ESTABLISH LEADERSHIP
Executive champions and empowered middle managers

ENGAGE WORKERS
As partners in identifying problems and solutions

COLLABORATE AND COORDINATE
To align strategies across functional departments (e.g., operations, safety and health, human resources)

DEVELOP HEALTH IMPROVEMENT PLAN
With goals, strategies, activities, capacity building for implementation, timeline, communications

DEDICATE RESOURCES
Including staffing, vendors, and materials

DEVELOP PARTNERSHIPS
With labor, local health providers, national organizations

DEFINE EVALUATION MEASURES
To determine whether goals are achieved

3 IMPLEMENTATION

COMMUNICATE GOALS, RATIONALE, & PROGRESS
Prepare and engage workforce for change

IMPLEMENT PLAN
(i.e., prevention policy, program, practice)

MONITOR PROGRESS & ADJUST
(e.g., identify challenges, collect participant feedback, track outcomes, make needed adjustments)

Components of an opioid prevention program

COMPONENTS OF COMPREHENSIVE WORKPLACE PREVENTION

Workplace
Health
Promotion



Injury
Prevention
Programs



Created by Liza Hancock
from Hour1 Project

Workplace
Policies



policy
Created by dDara

Employee
Education
and Training



Created by Max Hancock
from the Noon Project

Drug
Testing
Program



Medical,
Behavioral, &
Pharmacy
Coverage



Created by Dude Design

Employee
Assistance
Program



Peer
Programs



Created by Andrew Cramer
from Hour1 Project

Consistent presentation for each component

Background on importance and tips on improving or developing the component

A light orange downward-pointing arrow indicating a flow from the first box to the second.

Steps on how to get started, using the Workplace Health Prevention Model

A light brown downward-pointing arrow indicating a flow from the second box to the third.

Resources

An example strategy section: employee education

Employee Education and Training



Created by Max Hancock from the House Project

Importance of Employee Education

Education and training are important tools to ensure that all employees (employers, managers, supervisors, workers) have the knowledge and skills to identify and prevent health and safety concerns related to opioids. Training helps to get everyone on the same page and facilitate buy-in and commitment to solutions.

There are multiple goals for employee training on opioids including to:

- Identify and reduce risk factors for misuse and addiction.
- Decrease inappropriate use of opioids.
- Empower workers to get help for themselves.
- Recognize impairment and help needed for a co-worker.
- Respond appropriately to a potential overdose event.
- Reduce stigma through open discussion and increased knowledge.



Be strategic and intentional in the design and delivery of training. Maximize the benefits of training by using the following [Apply the principles of adult education to maximize the benefits of training.](#)

Clearly communicate why the training is important and relevant. Sharing personal stories is very helpful in engaging workers about opioid addiction, overdose, and suicide. Peers who are willing to share their stories are very effective champions of opioid prevention efforts.

Incorporate visual, auditory, and hands-on elements to cater to different learning styles. Whenever possible, promote interactive, small-group discussions and active problem solving and minimize lecture. Active learning strategies promote positive attitudes and behavior change and reduce stigma.

Tailor training to workers' roles and responsibilities. Workers with safety sensitive jobs may need additional training. Supervisors and managers need additional training to support their leadership responsibilities.

Provide training to managers and supervisors before workers. If supervisors aren't committed to the need and value of prevention or aren't adequately prepared to provide leadership and support, your educational efforts may fail.

Employee education workplace health prevention model

How to Get Started

Using the Workplace Prevention Model to guide planning and implementation of employee education, the following sections illustrate steps employers can take during each of the model's four phases.

1 ASSESSMENT

Ask workers about their perspectives

Consider conducting site visit discussions, focus groups, or surveys with workers to understand their perspectives on opioids. For example, ask workers for feedback on workplace stressors, challenges, and perceived risks of opioid use. Ask workers to identify barriers to opioid prevention goals (e.g., using non-opioid pain management). Make sure to use this information to tailor training to your workforce needs.

Identify gaps in addressing educational needs

Document what training is currently provided for each group of employees (e.g., mine workers, supervisors, managers) and when the training occurs.

Anticipate challenges upfront

Define challenges providing training such as limited resources, less than optimal management support, competing priorities for worker time, and worker distrust. Be sure to consider creative solutions to these challenges and engage these solutions in planning and prior to implementation.

2 PLANNING & MANAGEMENT

Define goals, objectives, and timeline for training

Plan to repeat training regularly to reinforce and update workers' knowledge. Do not depend on a one-and-done approach to training. Workers usually do not retain much content from new hire training. Make sure training raises awareness about opioid risk factors and workplace policies and procedures.

Use a variety of instructional methods and formats

Maximize group discussion to promote learning. Consider providing a comprehensive training to larger groups and then following up to reinforce key messages using toolbox talks, EAP presentations, posters in breakrooms, virtual content, and wallet cards.

Select relevant training materials and personnel

Select relevant training materials and personnel

Review and identify educational materials for mine workers and supervisors. Adapt training materials, posters, and fact sheets from other organizations as needed. Consider what personnel are best positioned to support training (e.g., obtain training approvals, adapt materials, conduct training) and in partners (e.g., labor, health and benefit providers) can deliver training or reinforcing health messages.

Reinforce key messages within a training and over time

Repeat key messages using a variety of formats, across settings, and delivered by different messengers. Adults retain more information when messages are repeated and personalized.

Build capacity among trainers

Ensure trainers receive the education and resources they need to feel comfortable. Make sure trainers are instructed on incorporating small group discussions within their training programs.

3 IMPLEMENTATION

Collect employee feedback in real-time to support improvements

Collect feedback from attendees at the end of the training using a variety of strategies (e.g., anonymous surveys, email, observation). Assess what went well and what can be improved. Make suggestions to facilitate worker engagement and active participation.

Share training progress often

Build support and buy-in by communicating progress, feedback, and related training improvements with management and workers at a regular time interval (i.e., quarterly).

4 EVALUATION

Evaluate impacts of training

Establish measures of success during the planning phase, including qualitative and quantitative data. For example:

- Document the numbers of trainings provided and employees who attended.
- Use brief post-training surveys to assess worker knowledge, attitudes, and satisfaction.
- Use periodic employee surveys to examine changes in attitudes and workplace culture.

Employee Education *resources*

Resources for Employee Education

LEADERSHIP & SUPERVISOR TRAINING

[Impairment Recognition and Response Training for Supervisors](#), National Safety Council
This is a one-hour eLearning course designed to prepare supervisors to recognize and address impairment in the workplace and support worker safety and well-being.

[Opioids & the Workplace: Leadership Training](#), NIEHS, Worker Training Program
This course is intended for leaders from organizations who have influence on organizational policy, procedures, and culture. The course focuses on identifying gaps and opportunities for system improvements at the organizational level to prevent and respond to opioid misuse.

FACT SHEETS & TIP CARDS

[Injured on the Job or at Home? Ask Your Health Care Provider These Questions Before Accepting Opioids](#), NIEHS Worker Training Program

[Preventing an Opioid Overdose: Know the Signs. Save a Life](#), Tip Card, Centers for Disease Control and Prevention

[Conversation Starters: If You Are Prescribed Opioids](#), Centers for Disease Control and Prevention
[Conversation Starters: If You Have Chronic Pain](#), Centers for Disease Control and Prevention

TOOLBOX TALKS

[Contractor Resources](#), Associated General Contractors of America (AGC)
Includes toolbox talks, podcast, videos, practice guides, and others. The [12-pack of toolbox talks](#) spans a variety of topics including mental health, reducing stigma, stress, how to get help, opioids and other pain killers, suicide awareness, and feeling fatigued, among others.

WORKER EDUCATION

[Opioid Hazard Awareness for Stone, Sand and Gravel Miners MSHA Refresher Training](#), Center for the Promotion of Health in the New England Workplace (CPH-NEW)
This 45-minute training was designed for sand and gravel workers and meets the requirements of the health section of MSHA's Part 46 Health and Safety Refresher Training. This module is also available as a fully narrated, video training.

[Opioid Awareness Training Program](#), The Center for Construction Research and Training
This one-hour training is designed to promote awareness of risks, support workplace prevention, and promote help seeking. The module is intended for experienced instructors and includes presentation slides, a facilitator's guide, and a participant handout.

Additional information



Recovery Ready
Workplace Programs



Naloxone



Legal
considerations

Next steps and future plans

Current review and drafting by MSHA

NIOSH formal review

Hope to publish ~
September 2024

Future evaluation research
make improvements



Questions?