

ENGAGING INDUSTRY PARTNERS TO ADOPT EVIDENCE-BASED PRACTICE

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In 2009, RMC Research Corporation and the Oregon Nurses Foundation are completing the fifth year of a service-to-science research and training project with apprentice electricians. The project is funded by the federal Center for Substance Abuse Prevention (CSAP), a center within the Substance Abuse and Mental Health Services Administration (SAMHSA). Working with our industry partners at the National Electrical Contractors Association (NECA), the International Brotherhood of Electrical Workers (IBEW), and the Electrical Training Centers (ETC), we have learned lessons about how to promote an evidence-based practice for workers in the private sector.

Engaging NECA and IBEW to use an evidence-based practice included three initial steps:

- 1) Attracting the industry partners to a discussion,
- 2) Clarifying what is most important to the industry, and
- 3) Identifying an evidence-based practice that both meets industry priorities and promotes healthy behavior among workers.

Discussion with industry partners. The project team (RMC Research Corporation and Oregon Nurses Foundation) first had to carefully consider which industries might have a significant stake in long term results from training. Industries with high safety risk occupations and substantial investment in training seemed like good prospects. In particular, the unionized sector of electrical trades had several key features that were promising, including a formal apprenticeship program, a major emphasis on safety training, benefits that include employee assistance and group healthcare insurance, a stable industry drugfree workplace program, and a history of labor-management collaboration.

Clarifying important topics. We initiated the discussion by meeting with labor, management and apprenticeship. They believed that the low positivity rate of their random drug screening program indicated that drug abuse was not a major problem. However, they were concerned about losing their competitive edge in safety and quality if young workers displayed a poor work ethic. In addition, they believed that foremen were not faithfully implementing the drugfree workplace policy when they encountered suspicious behavior on the job. The final set of industry-defined objectives included: improving young worker work ethic, increasing supervisor confidence to implement reasonable suspicion drug testing, and assessing the accuracy of the drug testing positivity rate as an indicator of substance abuse risk.

Identifying the evidence-based practice. NECA and IBEW leaders agreed to incorporate *Team Awareness*, a SAMHSA model program, into the apprenticeship curriculum. Team Awareness was a good pick because it reduced problem drinking in past trials and increased utilization of employee assistance. The study team believed that they could work with the training developer to incorporate work ethic elements into the content to meet the top industry priority. In short, everyone (NECA, IBEW, training centers, the study team, and the model program developer) worked together to achieve a win-win-win solution.

Team Awareness is listed with the National Registry of Evidence-Based Programs and Practices and includes modules on stress management, teamwork responsibilities,

perceptions of risky behavior, tolerance of co-workers who use alcohol or other drugs, and attitudes toward policy. Importantly, Team Awareness includes skills training in peer referral of co-workers to the employee assistance program. In addition, Team Awareness has training components for both line workers and supervisory staff.

The NECA-IBEW Team Awareness project provides important lessons for how to engage industry to implement an evidence-based practice.