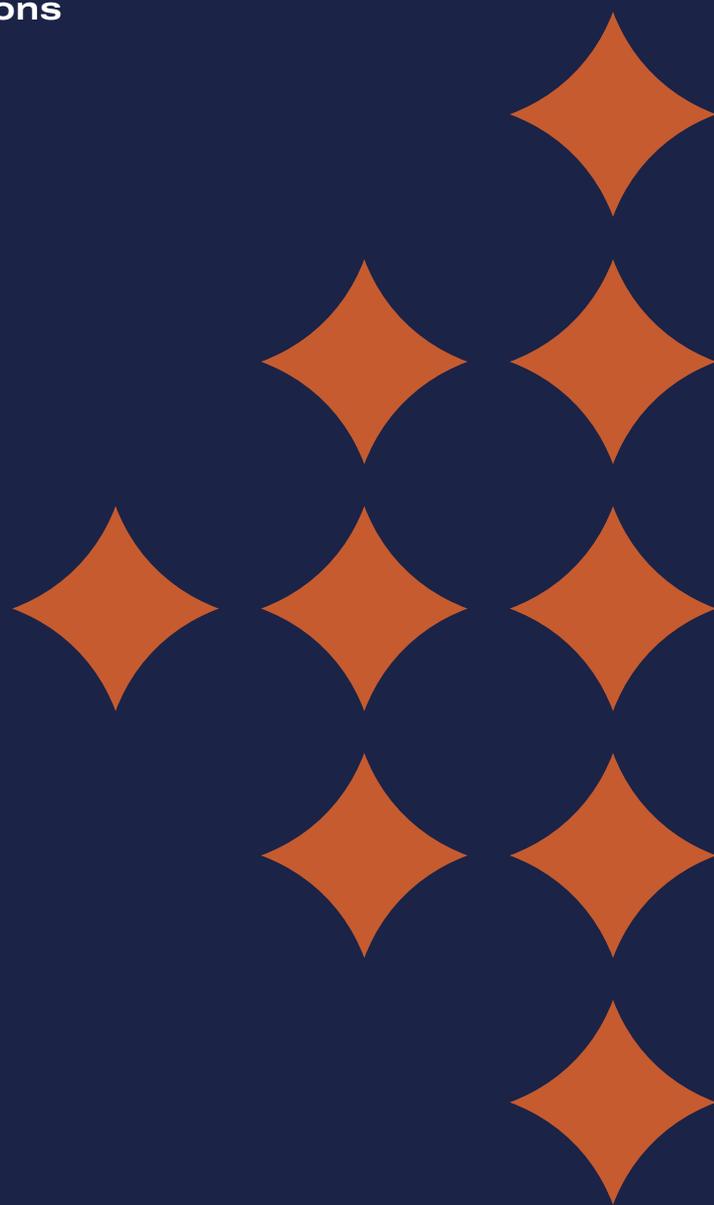




# Revel Method

A workplace wellbeing improvement  
method for health care organizations



# SITUATION



# Collective truth for collective change

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## **Canada's health care system is beyond stretched. COVID-19 has greatly exacerbated the problem.**

As health care workers, we are among the worst impacted by the pandemic. To what extent is still unknown.

We have a cross-country critical shortage of all health care professionals: leaders, doctors, nurses, allied health, administrative staff. From the executive to the frontline, all health care workers are exhausted from three years of battling the pandemic within a system already hampered by decades of failures, backlogs, wait times and resource shortages.

We are coping with varying degrees of exhaustion, many of us feeling burned out, demoralized and hopeless. Many of us are quitting hospital work, moving to other areas of practice, retiring early or leaving the health care sector entirely.

We see job openings everywhere. It isn't simply enough to offer a position anymore—workplace wellbeing supports and employee experience are just as important as opportunity and compensation.

The pandemic forced us into immediate, unprecedented action—leaders rallied to support staff and physicians and protect patient care. There was no prior training, no manuals to follow. From frontline staff to executives, our work had to continue as increased pressure mounted on existing backlogs, system constraints and resource shortages. We persevered amid social distancing, home schooling, family illness and every other upheaval experienced by everyone during the pandemic.

We are worn out. Most of us are fighting demoralization due to the system's failings and hopelessness from the (real or perceived) lack of workplace supports. Self-care has its place but deep breathing, meditating or journaling will not fix burnout. Taking time off won't help if we return to the same system that caused the stress and exhaustion. Generic workplace training solutions that put the responsibility on us as individuals—who don't want, need or have time for it—won't stem hopelessness.

At a national level, the health care system must be re-imagined to meet the needs of patients in an aging society and our health care workplaces must be transformed to be responsive to workers within it. Political reform, systemic change and increased funding are all essential but beyond our immediate sight or control.

Re-engage us with our work, let us share our lived experience, understand how colleagues at all levels have been impacted and co-create a stronger workplace culture. We're still here. We want a workplace where everyone is seen, heard, understood and valued. A workplace where we can be open about our struggles—and where that struggle does not define the person, their work or their value. A workplace where blame is replaced with compassionate, tangible action.

We know that no one person is to blame for the Canadian health care crisis. And that no one single person can fix the system. All workplaces have been forever changed. The pandemic, in parallel with Black Lives Matter, further exposed the critical need for greater understanding of equity, diversity and inclusion. We do not all see or are seen the same way. Collective experience generates vastly disparate impact. For workplaces these movements prompted tangible evolution, specialists were hired, policies and practices examined and amended.

We, who care for the sick and fragile in our country, are struggling. Socially as much as professionally, the stigma around mental health is still prevalent and widely misunderstood. There is an opportunity for more than talk around wellbeing in the workplace. With all our voices and experiences at the table, small but meaningful change can be achieved and replicated until wellbeing is as core to an organization as patient care.

To support those of us most impacted by COVID-19, we require a revolutionary approach to workplace engagement that brings together the organization, leadership, teams and individuals. Via a new method of whole-of-workplace engagement, practical and specific ideas can come from anyone to be supported by everyone. Let's introduce empathy into workplace culture, where each person sees their contribution as an individual, as well as part of a team and organization.

Together we can create solutions to improve our collective workplace wellbeing.

**PROGRAM**  
**INTRODUCTION**  
**& OVERVIEW**



# Why Revel?

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## Why do we need the Revel method?

After three years of the COVID-19 pandemic, the Public Health Agency of Canada (PHAC) recognized the severe impacts on the mental health and wellbeing of health care workers. The Revel method was developed through PHAC's initiative to seek solutions to the wellbeing crisis.

Leading researchers, health care organizations, strategic communications companies and subject matter experts came together and realized one important thing: the solution wasn't going to come from more self-help and resiliency tools.

Using best practices from across health care, industry, change management, employee engagement, therapeutic models and compassionate leadership, Revel was designed to offer a way for health care workers to have a voice in their own wellbeing, and for organizations to find the right solutions for their unique workplace.

Dozens of proven models and processes, hundreds of voices and thousands of ideas were instrumental in guiding Revel. This active engagement and visible leadership process brings transparency and trust back to fractured organizations.

Inside Revel you will find practical tools and step-by-step guides to creating an environment of open communication and tangible improvements to workplace wellbeing. Revel is also underpinned by a full guide to the research and expertise gathered on employee mental health and wellbeing across Canada and internationally.

**Tool: one-page summary [Year 1]**

**Tool: a summary of the Guide prepared by Phoenix [Year 2]**

# Setting the stage with a health care wellbeing overview

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## What does wellbeing mean for me?

Wellbeing means something different to everyone, and to every organization. Revel provides tools for different people, audiences and levels of an organization to fully understand and define what wellbeing means, how to assess it and how to apply that assessment to the Revel method.

This section will provide the context for each participant in Revel—organizational and individual—to understand what wellbeing means for this method. The intent is to set the baseline, but also give organizations the flexibility they need to make wellbeing their own.

We will also explain how the dual continuum model of mental wellbeing will factor into this work.

**Tool: Dual continuum one-pager [Year 1]**

**Tool: Explaining burnout and demoralization [Year 1]**

**Tool: How to define wellbeing [Year 2]**

# Case for change

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## WHY NOW?

The cracks in our health care system were laid bare during the COVID pandemic. We lost faith in our system and saw many colleagues leave the profession entirely. Those of us still here are facing increased stress, staffing shortages and a lack of resources.

Now is exactly the time to come together and move determinedly to get on the same page, build trust and create solutions for wellbeing together.

This is the time for a revolutionary transformation in our workplace and in our industry. We deserve greater wellbeing. We deserve to be engaged in our work. We deserve to be seen, heard, understood and valued.

Revel is an evidence-based approach that positions engagement as the solution to burnout and demoralization.

It is flexible enough for all of us to take part but also focused on real, tangible impacts.

We will join together to recognize each other's unique lived experiences and work as one to find solutions that improve each other's workplace wellbeing.

Now is the time because we're through waiting.

**Video: The Reason to Revel [Year 1]**

**Tool: a one-pager (back and front). Description on the front side, method graphic overview on the back side. [Year 1 – in progress]**

**Tool: Revel badge [Year 1]**



# Revel Method Overview

01

## READINESS AND PREPARATION

An opportunity for leadership to honestly reflect on how they've prioritized health care worker wellbeing.



02

## CREATE THE ENVIRONMENT

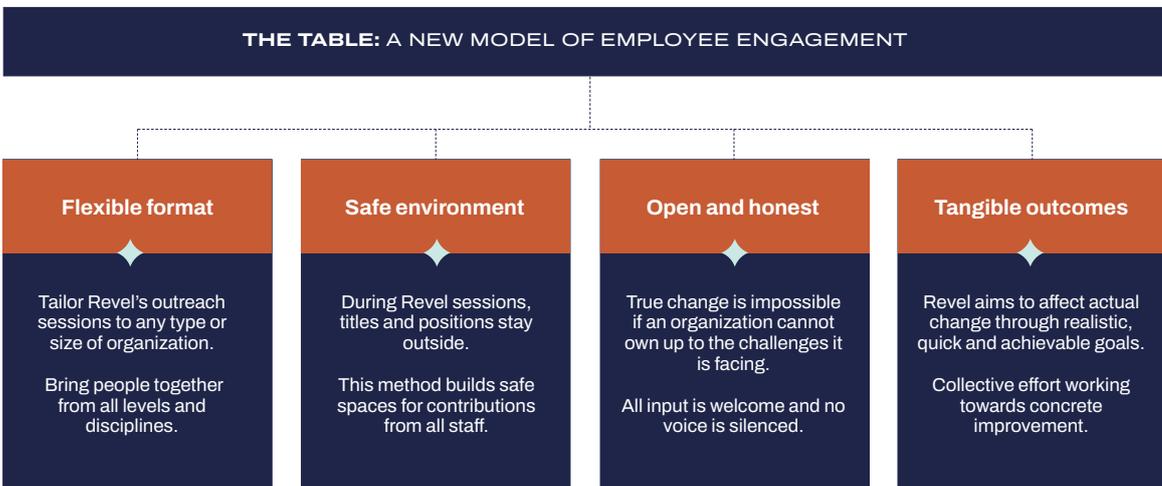
Bring health care workers into Revel and participate in the development of workplace wellbeing.



03

## IMPLEMENTATION

Put Revel into action by giving people a voice at the table so that they're seen, heard, understood and valued.



04

## SUSTAIN, SHARE AND IMPROVE

Measure the impact of Revel to meet the ever-changing needs of health care workers and the health care system.



# What is Revel?

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We're all exhausted, burned out and feeling demoralized. Our workplace—and the entire health care industry in Canada—has huge workplace stressors that impact every level of our organization, from leadership to the individual. We're told that there are supports in place, but we don't always know what they are or where or how to access them. Revel helps by reviewing and mapping existing wellbeing assets to raise awareness and help us better access mental wellbeing resources.

The most important thing to wellbeing is when we feel seen, heard, understood and valued. We also feel greater recognition when we're invited to sit at the table where ideas are heard and decisions are made. Revel gives us all the opportunity to join a meeting with our colleagues irrespective of practice or seniority to tackle tangible workplace improvements, no matter how small.

Revel has four foundational pillars:

- Prioritize engagement
- Open communication
- Be workplace specific
- Start small

## **PRIORITIZE ENGAGEMENT**

None of us have the time or energy for more training. And all of our experiences are different and nuanced. One generalized approach to workplace wellbeing improvement doesn't work.

Burnout and demoralization are caused both by each individual's circumstances and by the workplace—by what is missing (perceived or otherwise) from the environment to support our jobs.

The opposite of burnout is engagement. And to be engaged in our work—to be seen, heard, understood and valued—we all deserve the chance to talk about our challenges and find ways to co-create meaningful, tangible change.

While no one health care organization can fix the entire system, Revel brings a new, more cohesive and interactive approach to employee engagement into the workplace. Revel aims to help everyone feel that we can work together to improve our own workspace.

## **OPEN COMMUNICATION**

Revel enhances how we collectively communicate about mental health and wellbeing. It brings together voices from individuals, teams and organizational leadership. Taking on Revel is an organization-wide commitment, a pledge, with a set of actionable goals that will declare in no uncertain terms that mental health and wellbeing are important.

To do this, we will take part in a method of co-creation where shared experiences reinforce that everyone is fighting for the same cause. Where all of us have an opportunity to make immediate, measurable and lasting change in the ways that will impact us the most.

This type of big, clear change can be complex, but to achieve it relies on one key element: empathy—an attribute already central to those of us who work in any health care environment. Empathy is compassion in action, and Revel helps people come together to see, hear, understand and value each other so that we can carry that forward in the way we approach our work and colleagues.

## WORKPLACE SPECIFIC

No two organizations are the same. One workplace's biggest weakness may be another's greatest strength. But the only ones who can truly know what is needed to improve a workplace are those who are immersed in it every day. Revel helps an organization make a radical and transparent self-assessment of its situation and then openly communicate those results—however good or bad—with its workforce. This openness builds trust.

Revel brings those of us most affected to a table of peers where we can co-create solutions, for the betterment of our team, our unit, our hospital and our industry.

## START SMALL

While the impact of the Revel method can be significant, its implementation should not be daunting. The onus is on each hospital organization to make the process equitable, achievable and worthwhile. No one here has the time to create a brand new wellbeing program from scratch. The notion of more meetings with groups of time-stretched individuals is a fantasy. There may even be a lack of trust between departments or layers of an organization. But there is no other choice to protect the future of health care than to come together in empathy and honesty.

Revel is built upon elements of best practices in leadership, HR, communications and employee engagement with an emphasis on empathetic collaboration. It is a visible management practice that allows all of us in health care to come together as peers, sharing our lived experiences to create real outcomes for the betterment of everyone's wellbeing.



# Built on best practices

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Revel didn't appear out of thin air. Hundreds of health care workers contributed ideas about what would make a real difference in their workplace. Revel also borrows the best from change management processes, employee engagement and compassionate leadership theories and therapeutic methods, bringing aspects of cross-industry best practices into one package.

Many of these models, across a wide range of disciplines, share common threads. This makes sense—any successful change model will draw from similar principles because they are proven time and time again to work.

Different change management approaches often have different ways to simply say: **collaborate and bring all employees into the process.**

That's what Revel does.

Or various models will find four distinct terms for: **make leadership an active supporter and champion.**

Revel relies heavily on positive and constructive guidance from leadership and managers.

But Revel is more than change management—it has to be. We focus on employee engagement, positive employee experience and compassionate leadership models as well—because they work.

These processes share more common DNA—highlighting open and frequent communication.

Revel is nothing if we are not communicating clearly and transparently.

And there's more. Compassionate leadership's four central ideas—attending, understanding, empathizing and helping—feature prominently in the Revel method. We employ appreciative inquiry to build an outreach and consultation process around the pillars of empathy, attention and recognition. Therapeutic approaches such as Gestalt and “Two Chairs” give perspective on how mental health professionals approach work with their clients and Revel integrates key aspects of those methods.

Per Gestalt thinking, Revel deals in the here and now. As much as the past—and immense circumstances outside of our control—have brought our health care system to this critical point, Revel looks at the present moment and the future.

It looks closely at the conditions that exist today and asks for honest input and solutions.



## THE REVEL DIFFERENCE

The world has changed thanks to the pandemic. There are elements of our daily and working lives that are forever changed. And there is a global impact of living through such an unprecedented time, from stress to burnout, exhaustion to demoralization. Using pre-pandemic best practices will not fully address workplace wellbeing.

Across all health care spaces, we who work here are suffering from:

1. Emotional exhaustion—fatigue that comes from caring too much, for too long
2. Depersonalization—depletion of empathy, caring and compassion
3. Decreased sense of accomplishment—futility: feeling that nothing you do makes any difference

Revel exists to enhance proven engagement models through empathy.

- Empathy is the deliberate action of moving from compassion to action.
- Empathy is the beginning of trust
- Trust is earned through action and consistency over time
- Visible and active in every corner of the workplace

**Tool: Empathy and active listening tip sheet [Year 1]**

**Tool: Best practice source visual treatment [Year 2]**

**Video: How to Revel [Year 2]**

**Tools: ‘How to Revel’ supporting tools [Year 2]:**

- Prioritize engagement—A how-to
- Open communication do’s and don’ts
- Workplace specific checklist to know where to start
- Start small—A how-to



# Who is this for?

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## Leadership:

- ◆ Champion wellbeing for the whole of the organization through adoption of the method.

## Team managers

- ◆ Embrace, educate and empower the wellbeing of your staff and physicians leveraging the tools provided.

## Individuals

- ◆ All workers have a voice in defining and structuring wellbeing for ourselves and others within our organization.

When leaders, managers and individuals work together to prioritize wellbeing, we create great opportunity for our organization to better understand that everyone is impacted. Encouraging empathetic engagement in the workplace can help with retention, productivity and reputation.

# Principles

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Revel is based on a shared set of principles. These unassailable facts are common truths that cannot be ignored and must be actively embraced if solutions are to be found.

- 1. Canada's health care system is broken.**
- 2. We cannot fix the system but we can improve the workplace.**
- 3. All health care workers deserve to feel seen, heard, understood and valued.**
- 4. Empathetic engagement requires all voices at the table.**
- 5. Empower motivated individuals to champion a new way of sharing information.**
- 6. Administrators and health care workers work together daily, face-to-face whenever possible to advance the method and achieve real progress.**
- 7. Words without action are worse than empty—they become false promises.**

**Tool: A one-page printout or poster with the principles listed. [Year 1]**

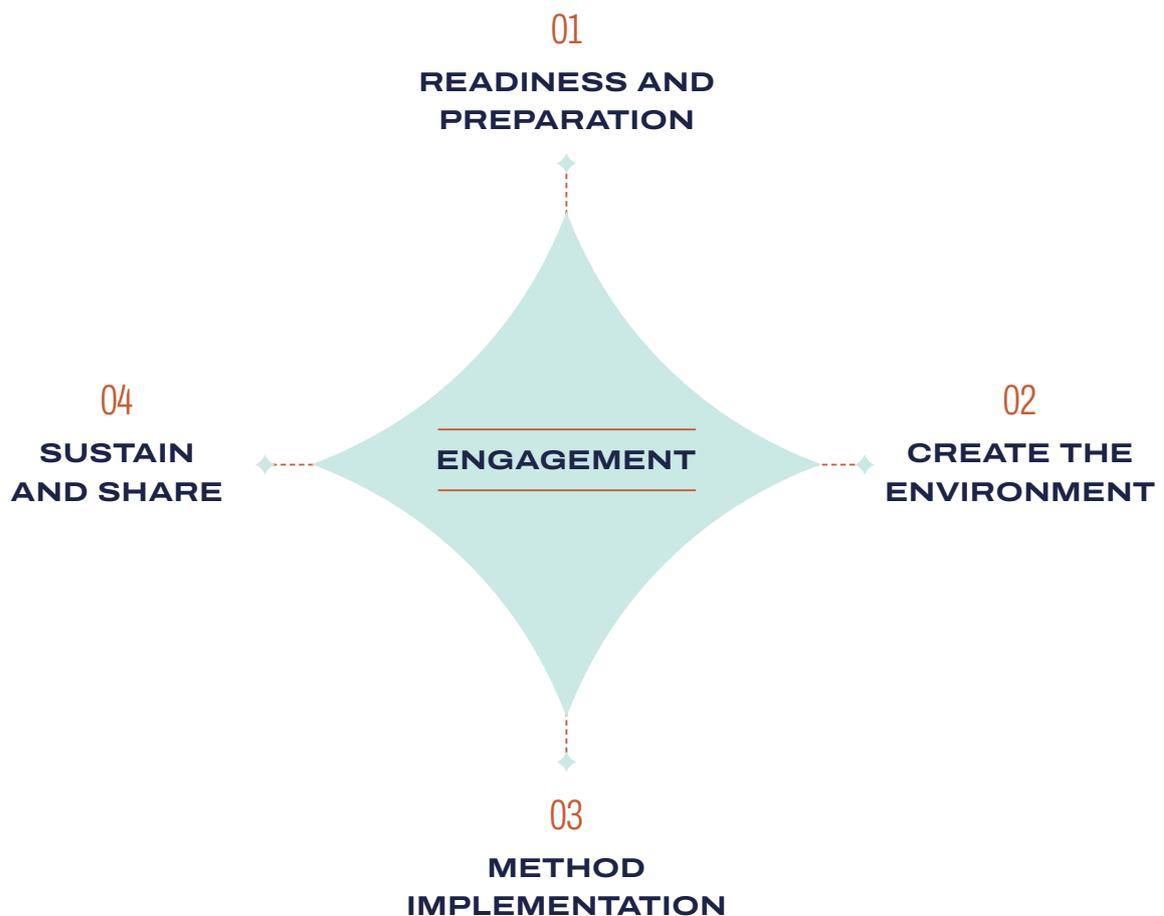
# How to start?

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## THERE ARE FOUR MAIN COMPONENTS TO THIS WORK:

1. **Readiness and preparation**—this step allows leadership to honestly reflect on how they've prioritized their people and wellbeing.
2. **Create the environment**—this is the work needed to bring all of us into the Revel method and have us contribute to and participate in the development of a workplace wellbeing method.
3. **Implementation**—the groundwork is laid, now it's time to put it into action by giving people a voice.
4. **Sustain and share**—if the Revel method is introduced but not maintained, it can cause more harm than good. Once the process is in place, monitor and adapt to meet the ever-changing needs of our staff and physicians and the health care system.

This work takes time to do properly. The result is a long-term wellbeing and engagement strategy built specifically for your organization. Following each step, there are immediate actions and outcomes that are to be shared across the organization.



PART 1: FOR LEADERS

# READINESS AND PREPARATION



# Criteria to participate

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To take part in Revel, our organization—and our people—need to be ready.

How are we currently prioritizing our people and their wellbeing? As a leadership team, we must assess our readiness and determine where we will start in the 'create the environment' portion of our work.

## Are we, as an organization, able to:

- Assign someone from the leadership team to champion this process and signify the importance of this to the whole organization?
- Include representatives from Communications and HR to support the Revel method for the duration of the project?
- Make room for all levels of the organization to participate in the preparation and implementation of Revel?
- Provide permission to managers to redirect and give employees time for involvement in this work?
- Hire or allocate a wellbeing lead to support the rollout of this program?
- Allocate the required budget needed to implement Revel at your organization?

## Is the answer to all of these questions 'yes?' Fantastic—we're ready to go.

If the answer to any of these questions is 'no,' then there's a chance that proceeding with this work can do more harm to our organization than good.

Until every answer above it yes, it's time to pause and address the barrier that is preventing action.

**Tool: tips and rationale for why each of these points are important. [Year 2]**

# Readiness assessment

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Before anything is done by way of communications or action for the Revel method, we must identify our organization's readiness level based on which strategies, tools and resources that are already in place.

## 1. Do we have a strategic plan?

- a. **Yes:** great!
- b. **No:** that's okay, but we need to establish what our priorities are for workplace wellbeing. Choose three top priorities for our staff and physicians from the leadership's perspective. Priorities could include:
  - i. Greater job satisfaction
  - ii. Reduced stress
  - iii. More positive workplace environment
  - iv. More open conversations around mental wellbeing
  - v. [others as desired]

## 2. If we do have a strategic plan, does it focus on people?

- a. **Yes:** fantastic—we're already further ahead than most!
- b. **No:** it's time now to put our people as a priority in our strategic plan. Use this method to research and strategize what people need, and create an action plan through this method. There's more to people than wellbeing, but if we have to build a plan from scratch, that's a good place to start.

## 3. In the last 12 months, have we conducted any employee engagement or wellbeing surveys?

- a. **Yes:** go back to the results and closely review questions and answers that pertain to employee wellbeing, engagement, communication, leadership style, etc. Anything that gives a sense of how employees feel toward the organization, leadership and culture is a good starting point. Take the time to understand the opportunities and barriers that are present themselves based on the survey data.
- b. **No:** That's okay. In the next phase of our work, a survey template and other guidance is provided.

## 4. Do we have a list of all of the tools and resources that contribute to employee engagement and wellbeing?

- a. **Yes:** check that list to see if it's fully up to date. If so, keep it readily available for the next phase of work.
- b. **No:** don't fret. We have a whole plan in place called 'asset mapping' that helps to identify and ratify every program, policy and practice within your organization.

## 5. [Additional questions can be tailored to an individual institution]

- a. **Yes:** \_\_\_\_\_
- b. **No:** \_\_\_\_\_

**Tool: Readiness assessment worksheet [Year 2]**



# Hold a Revel or Rebel session

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It's vital that we all understand what's at stake here. We need all leaders within our organization on the same page. The choice between action and inaction is no choice at all. We must act now to improve wellbeing and stop the crisis in health care.

Before launching Revel to the full organization, our leadership team will take part in a "Revel or Rebel" session, where we will discuss best- and worst-case scenarios for our institution.

This session explores scenarios where we act and succeed, and where we do nothing and fail. We confront the ideal world as it could be and the disaster scenario that awaits if we ignore this process or do it poorly.

We will bring together our leadership and lay out our vision for the future, and by the end, we will have jointly agreed on the importance of this process and defined our top three priorities for Revel to address.

Or, conversely, we will agree that now is not the time for Revel—that we still have more work to do before we jump in. Above all, we will realize that doing Revel poorly is worse than not doing it at all.

**Tool: facilitation guide and session overview [Year 1]**

## The pledge

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### **Now is the time to decide: are we in or out?**

If we commit to Revel, we're committing to prioritizing our people's wellbeing from this day forward. Things aren't going to change overnight. But as we work through the next three phases, we'll see that from small, incremental changes come big shifts in attitude, culture and engagement. We can do this—together.

This pledge becomes the commitment to wellbeing for each participating organization and what it means. The standards that the organization agrees to rise and adhere to.

**Tools: pledge icon/certificate; a fillable form to show the commitments leadership have made. [Year 2]**

PART 2: FOR EVERYONE

# CREATE THE ENVIRONMENT



# Getting ready to Revel

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In this phase, we lay the groundwork to properly prepare all levels of our organization to achieve the goals of the Revel method's pledge.

We will dig into our organization's practices and illuminate all the things we're already doing in support of wellbeing. And in doing this, we will uncover gaps, duplications of effort and areas to grow.

Representatives from the executive, communications and HR teams will conduct most of the work in this phase. But it's important that all of us prepare and open ourselves to the discussions at hand.

This guide includes a step-by-step guide for how to create the environment at every level of the organization. It shows how executives need to prepare. It explains how teams and managers need to get their staff and physicians ready. It outlines how individuals can start to think and communicate effectively for Revel.

But this is not a quick process. Done properly, this portion of the work will take approximately 9-12 months. There is a lot to prepare. This is where we begin to build trust in each other and reframe our expectations about wellbeing in our workplace.

Each level of our organization will achieve different things in this phase of work.

## OUTCOMES FOR:

### Leadership

- A clear understanding of what wellbeing means and what is needed from the entire organization.
- An opportunity to progress, or begin, building out a people strategy.
- An honest reflection of current strengths and weaknesses within your organization.
- Build trust and authenticity within the organization through clear and transparent communications.

### Directors and managers

- Education and training opportunities to improve leadership skills.
- An opportunity to shape what workplace wellbeing means to the organization in which they work.
- Direct, informed and frequent conversations with leadership in shaping workplace wellbeing.

### Employees

- Trust restored or increased in the organization due to the prioritization of workplace wellbeing.
- An opportunity to shape what workplace wellbeing means to the organization in which they work.
- Visibility and understanding about what workplace wellbeing supports are already in place.

## STEPS TO CREATING AN ENVIRONMENT AT OUR ORGANIZATION:

### STEP 1: IDENTIFY AN EXECUTIVE CHAMPION

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The champion will regularly communicate updates about the workplace wellbeing initiatives already in place. By appointing an executive champion, it signifies that the work that's being done is important and adds credibility and accountability to the work. It doesn't mean the champion needs to do all the work, but it's someone who believes in the work and is comfortable openly talking about the topics that fall within wellbeing.

The champion is also responsible for keeping all key stakeholders informed of the project's progress, potential barriers and opportunities that are identified along the way.

**Tool: brief description of what it means to be an executive sponsor and how to support Revel. [Year 2]**

### STEP 2: HIRE OR APPOINT A WELLBEING ADVISOR/SPECIALIST

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Workplace wellbeing deserves the same level of prominence and value as Equity, Diversity and Inclusion (often also belonging) initiatives. A wellbeing specialist will be responsible for ensuring all steps throughout the method are followed. They will also be the person to ensure that once the workplace wellbeing program is introduced, it is nurtured and maintained on an ongoing basis. Beyond everything mentioned, hiring a wellbeing employee will also show staff and physicians that an organization is truly dedicated. While it is strongly encouraged to hire someone, it may not be feasible at this specific moment. Don't let that stop you. Find someone within HR that can be seconded to this role so that there is still a dedicated staff member working on this project.

**Tool: hiring/appointment criteria for a wellbeing specialist [Year 2]**

### STEP 3: REVIEW AND AUDIT FOUNDATIONAL DOCUMENTS

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Look back at your previous work to understand what's been communicated and committed to staff and physicians. Review communications and HR strategies, Strategic Plans, recent survey results, codes of conduct, etc. to determine what's already been asked of people and what data points you have already that indicate how you can help employees.

**Tool: Tips on what to audit and how one-pager; additional materials to be identified [Year 2]**

### STEP 4: PLAN FOR COMMUNICATIONS

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Prepare a communications rollout plan to ensure all key audiences are aware of the work that is about to take place. There are three common barriers when it comes to workplace wellbeing: cynicism, perception and participation. By communicating effectively and clearly about the importance of workplace wellbeing and breaking down the barriers, it will give staff and physicians the confidence and willingness to participate.

When planning your communications, consider not only communicating to all staff and physicians, but specifically to those who will be participating in the work ahead. Determine if this will be rolled out to the whole of the organization or if it will be piloted with specific groups to see how it works.

Also consider the best ways to communicate this work with staff and physicians. If emails aren't read, consider launching this at a townhall where you have a captive audience. And then follow up by email. Find ways to communicate this work in as many ways as possible so that staff and physicians across the organization know what's happening.

**Tools: 1) communications rollout plan template [Year 1]; 2) communications do's and don'ts [Year 2]; 3) barriers & solutions one-pager [Year 2]; 4) how to communicate with your audiences [Year 2]**

### STEP 5: ASSET MAP

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Asset mapping describes the process of identifying and listing programs, policies, practices, benefits, groups and tools as a resource. This activity should be co-lead by communications and HR. It's a process of hunting and gathering all the great things you're already doing within your organization. For Revel, this will give your organization a global view of all the activities and commitments that are already in place that contribute to the wellbeing of your employees.

**Tools: 1) asset mapping process overview; 2) asset mapping considerations; asset mapping workbook; 3) asset mapping: what's next? [Year 1]**

## STEP 6: PREPARE A SURVEY

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Surveys are a great tool to solicit feedback from staff and physicians, but only if it's done correctly and meaningfully, where results and subsequent actions are communicated back to respondents. Before creating a new survey, review any survey results that you may have from the last 12 months. Even if the survey did not focus on workplace wellbeing, you can glean a lot from general engagement and corporate surveys. Look at results regarding leadership (trust in and communications from), overall satisfaction and engagement, health and safety, etc. All of these are indicators and contributors to wellbeing.

## STEP 7: COMMUNICATE YOUR EFFORTS

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This is where the communications plan created in step 4 is executed. Initiate your communications in a waterfall approach to explain the work that's being done, the commitments made at the leadership level and who will be participating.

## STEP 8: TRAIN DIRECTORS AND MANAGERS

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Change can't happen unless the people who need to enact the change know how. Provide a series of education and training sessions to help create compassionate, caring and authentic leaders. The individuals who make the biggest impact on staff and physicians are their leaders, so it's important to equip leaders and managers with the tools, education and training they need to support staff and physicians.

**Tool: training and facilitation guide for directors and managers [Year 2]**

## STEP 9: HOLD WORKSHOPS

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Workshops are important to solicit detailed information directly from the people this is for. The workshops should be no longer than an hour in length. The purpose of this initial workshop is to discuss what workplace wellbeing means to individuals and what the opportunities and barriers (perceived or otherwise) there are. The purpose of this session is to gather initial feedback.

## STEP 10: PREPARE FOR IMPLEMENTATION

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Bring every tool, resource and guide pertinent to wellbeing, engagement and culture together in one centralized place for employees to access. This step provides an actionable deliverable to staff and physicians prior to implementing the actual method. Early wins in the process are important so that people see progress

**Final word:** Always think about measurement

At any point throughout this phase, it's important to determine how to measure the success of workplace wellbeing. Key performance indicators can be aligned with business objectives, based on benchmark data points from survey results or based on your organization's values and priorities. However you choose to measure effectiveness and success, ensure the metrics are communicated, measured frequently and results are shared.

We've created a Revel scorecard of the areas that we think are most important to measure the efficacy and success of this methodology (reference part 4 of this method). If these aren't the right measurements, then adapt them accordingly for your organization, but make sure to measure.

**Tool: Revel scorecard template [Year 2]**

PART 3: FOR EVERYONE

# IMPLEMENTATION



# Launching Revel to all audiences

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From all the work done in the Create the Environment phase, our organization is now ready to roll Revel out to the entire workplace.

No two implementations will be alike, because no two organizations are alike. Revel and the accompanying foundational guide suggest possible interventions and solutions, but nothing is written in stone. Our program for workplace wellbeing will be as unique as we are. Our programs and solutions will grow organically from what we want and need.

## **Best practices for organizational change and workplace wellbeing consistently reinforce key pillars for implementation phases, including:**

- Engaging with front-line employees
- Executive sponsorship that plays an active, engaged role
- Structured processes that are clear and repeatable
- Frequent and open communication
- Strong activation of middle managers

Without these elements, the implementation of consultation and change processes can feel hollow or ineffective. These results are completely contrary to the tone and feel of the Revel method.

If we understand and adhere to the tactical pillars above, our Revel program will gain stronger buy-in and achieve more effective results. The outcomes of the program will rely on the ideas and input we all bring to the process, and exact outcomes will vary based on those ideas.

## **OUTCOMES:**

### **Leadership will:**

- First and foremost engender a stronger sense of employee engagement and trust in the organization.
- Receive direct feedback and ideas from employees at all levels that outlines which interventions would be most effective at improving the workplace experience.
- Get direction about concrete actions to take for employees.
- Be expected to follow through on actions submitted.
- Be responsible for the progress made towards workplace wellbeing—positive and negative.

### **Directors and managers will:**

- Be charged with opening and continuing the conversation around wellbeing in the workplace. They are the gateway to all wellbeing resources and trusted with input from their staff and physicians.
- Be supported by the organization with tools and communications resources (communications guides; flexibility on redirecting workloads wherever possible to take part in Revel; employee-first policies that prioritize staff and physician wellbeing above productivity) and by executive leadership that are engaged with the program.
- Receive support from a dedicated wellbeing support staff member. If this role doesn't exist already, it will be created. This person will be available to provide directors and managers with clarity and resources for our teams to access.
- Enable lines of communication to flow in all directions—from our staff, physicians and teams, and from leadership; there are no bottlenecks and no obfuscations.
- Have tangible actions to take and report on to create a sense of progress and acknowledgment among teams.
- See patient care improve as staff and physician wellbeing improves.

## Staff and physicians will:

- Feel seen and heard, leading to increased engagement with the workplace, greater trust in management and a more positive work experience
- Have improved clarity on what resources are available for mental wellbeing that are not reliant on our own actions (i.e.: greater organizational support that goes beyond self-care)
- Employees feel more comfortable in discussing their mental wellbeing at work without judgment or fear of reprisal
- Employees feel empowered through Revel sessions to contribute ideas to workplace improvement
- Tangible improvements are noted through ongoing Revel communications either during Table sessions themselves or the regular and structured reporting on the process

# Actions

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## THE TABLE

### How it works

For too long, we in health care, at all levels of an organization, have pinned our struggles on each other. But the problems within the system are not the fault of one person alone, rather the system itself. When we all have an equal voice and are all given the opportunity to work together, we can make change happen. Revel turns our toughest problems in our workday over to a collection of our peers. We know that if we're honest, we will help each other overcome the issues that make our jobs thankless and our careers unmanageable.

We'll use employee engagement best practices, particularly those geared to wellbeing in the workplace, emphasize key principles that include:

- Creating safe environments for conversations around mental health
- Fostering a culture of wellbeing
- Providing resources

The Table does all three of these things, with the added benefit of giving agency and power to those of us on the frontline to be seen and heard by being part of the discussion from the beginning.

As we create the Table, it's important to strip away bias, and foster an empathetic environment as we execute this method and these discussions. We must also acknowledge, as leaders of or participants in Revel, that you don't start with all the answers—we're all co-creating both the Table and the solutions that come from the Table together. Once we acknowledge this, only then will the process, and all of us involved, be able to create an honest picture of what problems we're facing, and what can be changed and cannot be changed.

We'll find solutions in untraditional places and from unlikely sources. And when it's working properly, we'll see an immediate effect. We will be seen and heard. We'll all have a voice. We'll all feel understood and valued.

There are solutions on the horizon.

There is hope.

## Table process

**Pick a format:** whether it's a physical table, a Zoom call or an opinion card that we fill out and put in a box, we must choose a way for all of us throughout the organization to come together and have a voice about wellbeing. The size of the group doesn't affect the process—this can be organization-wide or within a single team or department.

**Pick a frequency:** what can we reasonably commit to? We need to be flexible and offer opportunities for anyone who wishes to contribute, no matter the schedule. This could mean holding multiple rounds of a 'Table' session or holding it asynchronously with robust outreach from team leaders and management to encourage participation.

**Pick an audience:** Revel can take place across a whole organization, or within specialized teams, groups or departments.

### If across the organization, options include:

- Full-scale, asynchronous Revel instance offered across all staff and physicians and all departments for broad information gathering and intervention assessment
- Quarterly Revel townhalls with a mid-scale focus on a set of wellbeing issues (logistical, resource-based, etc)
- Monthly small-scale Revel sessions targeted on a single issue to provide quick follow-up and progress

### If within teams, options include:

- Full-team Revel sessions (in-person or online; live or asynchronous) focused on opening up conversations on wellbeing and soliciting team input on what interventions are needed for that specific team
- Shift-based sessions for specific segments of a team—as hospitals and clinics can have greatly diverging conditions from one shift to the next (i.e.: daytime vs. overnight), the concerns of one segment will not align with those of another; flexibility and seeking input from all avenues is vital
- Individual outreach from team leaders and managers to staff and physicians
  - ◆ Scheduled or ad hoc
  - ◆ Structured or free-flowing
  - ◆ Exact utility and style should be determined by each team leader in conjunction with a Director or senior leader

### If within existing wellbeing groups, options include:

- Monthly small-scale Revel sessions targeted on a single issue relevant to that wellbeing group to provide quick follow-up and progress
- Enhanced communication and reporting to help disseminate the wellbeing group's resources and progress to staff and physicians at large



## Revel meeting principles

Most wellbeing supports put the work on the individual. Revel sees wellbeing as an organization-wide priority, where everyone is engaged to identify solutions for our own workplace. Regardless of role, tenure or seniority, Revel invites us to the table to share workplace wellbeing fixes for our team, our unit, our hospital and our industry.

Revel meetings operate under these principles:

### **Honesty**

Everyone deserves to feel seen, heard, understood and valued. It is essential we believe we will be listened to, taken seriously or believed. If we participate equally, honesty will thrive, and change will occur.

### **Equality**

We are born equal. Regardless of role outside the meeting, we are encouraged to speak up. At every meeting, we agree that we are peers, that we never correct fact and always welcome opinion.

### **Representation**

“Never about us, without us” is our mantra. If someone should be at the meeting, we invite them. There must be representation of staff and physicians present for discussion about the issues that will affect them. Period.

### **Safety**

We stick to our code of conduct in the method. We do not accept bullying or aggressive behaviour. We welcome all viewpoints, but we communicate with compassion and empathy.

### **Facilitation**

We have a dedicated facilitator to keep meetings running, minutes logged and decisions recorded. If we don't have a dedicated facilitator, we share the responsibility until one is available.

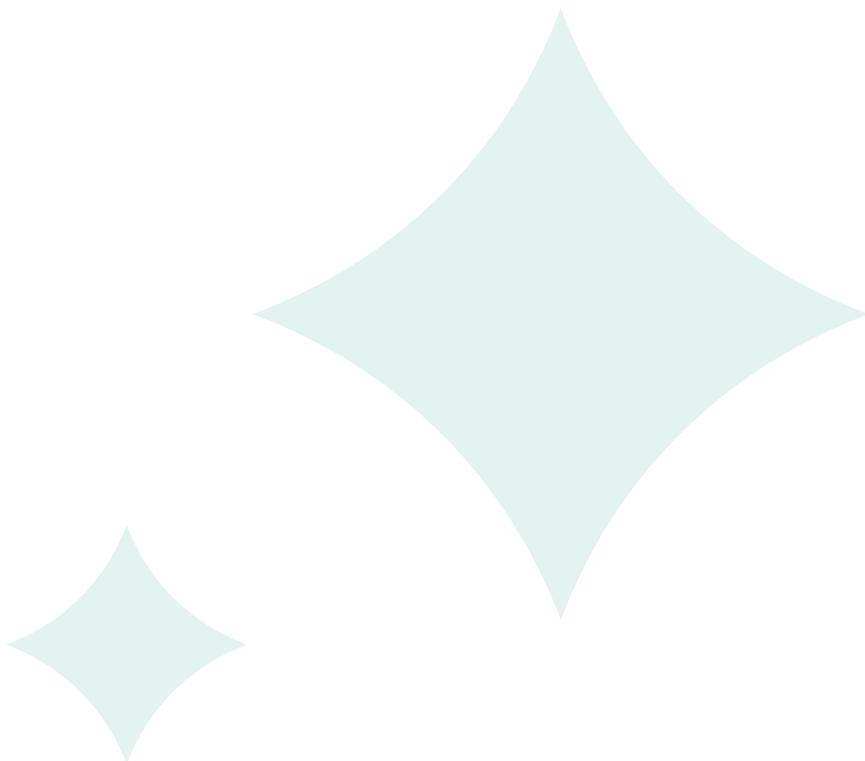
### **Consistency**

We believe in the importance of collaboration and set out a realistic cadence of meetings that suits our group and workplace.

### **Commitment**

We commit to the method and know that as long as we are working together as peers in the way we've outlined, we will make demonstrable and repeatable change for our colleagues and each other over time.

**Tools: one-pager/poster on the values of The Table based on the strategic framework and facilitation guide [Year 1]**



PART 4: FOR EVERYONE

# SUSTAIN AND SHARE



# Taking Revel forward

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As we take part in Revel together, we ensure also implement a structure to measure the impact of our changes and ensure the value and efficacy of our work.

If things aren't going exactly as we expect, remember that the process is flexible and can be adapted.

In addition to measurement, the point of this part of Revel is to show our work and show how change—big or small—is being implemented throughout our organization. This is where we share stories of how Revel has helped with change. We communicate often about the impact that Revel is having. And we're transparent about how the work is progressing, even if change is slow.

We're all continually updated on any changes that might help our wellbeing. And none of us are in the dark about any roadblocks that are standing in our way.

## OUTCOMES:

### Leadership will:

- Provide regular and transparent communications about the progress and successes of Revel.
- Conduct ongoing measurement to understand how all staff and physicians feel about wellbeing.
- Get the opportunity to share Revel successes with other health care organizations.

### Directors and managers will:

- Have autonomy and control over wellbeing within teams.
- Gain an understanding of how wellbeing is performing for their team based on the Revel score.
- Get opportunities to learn from other directors and managers about Revel successes and areas of avoidance.

### Employees will:

- Have an open avenue to provide feedback on what's working and not with the Revel method.
- Gain a sense that opinions matter and because of that, change is happening.
- Receive ongoing open and transparent communication from all levels of leadership.

## MEASURE, MAINTAIN, ITERATE – A CONTINUOUS LISTENING APPROACH FOR LEADERS

We can't know if Revel is successful unless we put methodical and deliberate measurements in place. In the **Create the Environment** portion of the work, metrics for success should have been set. We will use our judgement and understanding of our organization to determine how often to gather feedback and how to go about doing so. Leverage the work of directors and managers to solicit feedback. We do this by introducing the **Revel scorecard** to each team/unit. The Revel scorecard has standard key performance indicators that allows you to collect standardized data across the organization. The intent is to provide scores to leadership across the organization and have an overall Revel score out of 100. Our score can be a point of pride, or a point in time to re-evaluate the strategy in place and adjust it accordingly. If things aren't going exactly as we intended in the outset of this work, that doesn't mean we've failed. Find out where things are falling short and adapt plans and tactics accordingly.

**Tool: Revel scorecard [Year 2]; how-to measure Revel's effectiveness [Year 2]**

## MAKE DIRECTORS AND MANAGERS ACCOUNTABLE FOR WELLBEING

If workplace wellbeing is not mandatory and embedded in the day-to-day operations of a team or unit, it can easily be forgotten. New data suggests that for almost 70% of people, their manager has more [impact on their mental health](#) than their therapist or their doctor—and it's equal to the impact of their partner (Forbes, Jan 2023).

Visibly giving accountability for wellbeing to managers and people leaders at the department and team level will create an immediate sense of urgency for employees on those teams. Staff and physicians will begin to get accustomed to the implementation of a more open and empathetic workplace environment with a manager who is charged with not only the functioning of the unit, but of the wellbeing of those who work within it.

Give managers autonomy to support their employee's wellbeing, and make sure that they report back on it—both to leadership and to their teams. There need to be benefits for managers embracing wellbeing within their teams as much as there needs to be consequences if they do not.

## SHARE YOUR FINDINGS AND LEARNINGS

While we can't fix the system, we can work together to share success stories across the health care industry for other hospitals and organizations. If positive Revel outcomes are happening within teams or departments, share successes with managers and directors so the good news can be shared with others. It's important to share findings so that when similar issues arise throughout the organization, there are case studies and proven solutions that can be implemented.

In a future where this method is adopted across Canada, there would then be a forum for success stories to be shared from health care organization to health care organization.

## ACT ON WHAT YOU LEARN

If we learn something that helps one part of our organization that can be acted upon immediately, we will then determine how to build it into our strategic plans, or communicate back to staff and physicians why certain things can't be done. How we act can't be prescriptive ahead of time; our actions must be based on the unique needs and values we identify through Revel.

For example, research has shown that health care workers are looking for offsite retreats to be removed from their day-to-day work environment in favour of having the time and space to talk about priorities for their team and department. If there are limitations to doing something like this, tell people why and how we might plan to implement it in the future. And if we can do it, then do it.



