

MODULE 7

HOW TO RUN AN EFFECTIVE, WORKING MEETING

ACCOMPANIES THE 'MANAGING HEALTH AT THE WORKPLACE' GUIDEBOOK

MODULE 7: How to Run an Effective, Working Meeting

If you want to improve your health services and results, then you need to use meetings effectively to get work done.

In factories where health is managed well, there are three kinds of meetings that should take place:

- **Senior management and nurse meeting.** The Senior Manager for health meets regularly – usually once a week, but not less than monthly – with the nursing and other health staff.
- **The health staff meeting.** The nurses and health staff meets – by itself – each week to prepare for upcoming activities and have a safe time to discuss health care issues.
- **Health and safety committee meeting.** The H&S committee includes representatives of workers and management to discuss safety and health issues usually once a month. A nurse should have a seat on the committee and be active.

You may not like having many meetings. But these meetings serve an important purpose – IF they are run as *working* meetings.

SIGNS OF A POOR MEETING

No one likes sitting in meetings all day, especially one that looks like this:

- One person does all the talking
- There is no agenda to follow
- People only complain about problems, but no one discusses solutions.
- No decisions are made
- No follow-up task are given to participants

If meetings with the health staff look like that – make changes!

This How-To module covers three elements of effective working meetings:

1. **Management of Working Meetings**
2. **Purposes of the Meetings**
3. **Sample Agenda Items & Discussion Topics**

Your job is to help the health staff learn how to participate in and run effective meetings that enable them to improve their work and engage others in the factory.

MANAGEMENT OF WORKING MEETINGS

An effective, *working* meeting does five things well:

- Shares Information
- Monitors progress on action steps, goals and plans for improvement
- Coordinates activities
- Addresses issues or challenges and problem-solving
- Assigns tasks and takes action

You can build the skills of running an effective working meeting by taking the following steps:

- **Ensure everyone has a role:** A chairperson, a note-taker, participant updates and reports
- **Prepare an agenda** for each meeting with a set time.
- **Ensure that health information is reviewed,** include past action steps and plans
- **Make time for discussion of a specific issue** or topics: problem-solving; health information (data) analysis, development health promotion activities; planning etc.

- **Take action and assign tasks** relating to discussions and plans.

These meetings have value only if the participants use them as a tool to get important work done. Your job is to ensure these meetings take place AND they are effective.

THE PURPOSE OF MEETINGS

Why are there meetings important? They are the primary tool to help you manage the health staff and promoting continuous improvement. If run correctly, meetings serve three purposes:

- They enable you to know what is actually happening in the clinic.
- They build a working relationship and trust between factory management and nurses.
- They build the capacity of nurses to be proactive and more effective.

Yet each of these meetings have somewhat different functions:

THE NURSES STAFF MEETING

This meeting needs to be a safe, private space where the nurses can talk openly among themselves. If you want them to become practice and solve problems, they need to talk privately without management looking over their shoulders.

These are the main recommendations for establishing the nurses' meeting:

- **The nurses should be responsible for running their own meeting.** In general, doctors and factory management should not participate in the nurse meetings. This nurses' meeting is separate from the "check-ins" or short meetings to review patient care that the doctors may hold with the nurses each day.
- **If needed, join the first meeting or two to provide guidance on following the**

agenda, taking actions and other support. After that, the senior nurse should be responsible for holding the meetings and facilitating them as effective working meetings.

- **Ensure that the nurses meet weekly** – and do not start cancelling meetings. This is a sign that they need more support. They will learn how to run a working meeting only by holding them regularly.
- **Ensure that meeting "roles" rotate.** The senior nurse should assign someone to chair each meeting and facilitate the discussion. This includes determining the agenda. Rotating the role of chair builds each nurse's capacity to run a meeting and ensure others are capable to fill in if the assigned chair is absent.
- **Have the nurses' meeting agenda be the same the nurse-management meeting.** The basic approach should be identical – only the topics will differ. For instance, a regular topic may be what they want to discuss as a group with management. Also, they will want to discuss coordination of care and activities that is not necessary to talk about with you or other managers.

The nurse meeting is about trying to create a **culture change** in which active, engaged nurses take responsibility for the patient care, health education, planning and other proactive activities.

MANAGEMENT-NURSE STAFF MEETING

You should use this meeting to build capacity of the nurses to manage clinic activities and implement health action plans. It is also a chance for you and your management team to learn what is happening.

This meetings should specifically build capacity for:

- Monitoring the Annual Plan or scheduled activities for progress

- Collecting, analyzing and using health information to take action
- Problem-solving and continuous improvement
- Reviewing infirmity practices – and addressing those that nurses or health staff are having difficulty applying
- Reviewing job responsibilities and areas that require further support

These are key recommendations for the meeting:

1. **Include others from management in these meetings.** The meeting should not depend on the availability of one person. Multiple people – or at least one other – in management need to be involved and be able to assume responsibility if some reason you have an extended absence for health or business.
2. **Ensure all the health staff get to attend several meetings.** If you have a small number of nurses, such as two or three, then all should attend this meeting. But with a larger health staff, the senior nurses should attend. But it is good to rotate in one other nurse so that all nurses are exposed to and participate in the discussions.
3. **The role of meeting chair should rotate between nurses and managers.** Part of nurse building capacity is putting them in roles of authority.
4. **Hold the meeting on regular schedule.** You cannot build trust and communication if you are seeing the health staff less than once a month, preferably more frequently. Meetings that take place infrequently signal that they are not important.

HEALTH AND SAFETY COMMITTEE MEETINGS

It is common for these meetings to give greater focus to safety than general health. Nurses

should be represented on this committee, if they are not.

Nurses will need training on how to play an active role on the committee, as frequently they are passive members. However, they should use the same techniques for their own *working* meetings for the Health and Safety Committee.

The nurse can help the committee address broader health issues as well as safety by:

- Presenting health information for the month, quarter or year that highlights key health issues or concerns
- Asking the committee participants for feedback on education activities, plans, needed services and other health issues.
- Informing the participants of planned events or activities or any changes to clinic services or staffing.
- Asking the participants to take action – to do something active after the meeting.

The Health and Safety Committee is a tool for nurses to engage workers and management alike in the work of continuous improvement.

MEETING AGENDA AND DISCUSSIONS

The meeting agenda for effective working meetings should have four parts:

- **Review of last week/month and past actions**
This is about monitoring what has been done and assuring that people are held accountable. It is also a chance to share successes and highlight issues for discussion. One of the roles for nurse participants is to prepare a short report on their area of responsibility.
- **Preview of activities or plans for the next week/month**
This is about sharing information and coordinating activities. It provides an

opportunity to remind participants about important events and deadlines

- **Discussion and Problem Solving**

This is about addressing one or two issues in depth with the aim of making a decision, solving a problem, assessing progress on plans, identifying health needs or creating a plan.

Some topics may be recurring ones. For instance, every quarter the participants may review the annual plan to assess progress and discuss any change that might be needed.

Other times, the discussion may be about a new health issue that requires immediate consideration, such as a viral epidemic.

- **Actions and Assignments**

This is about coming to an agreement about what actions to take and assigning tasks to participants. Every meeting should have action steps for the participants. But they do not always have to be major steps, but everyone does something.

Tools 24, 25, and 26 provide sample meeting agendas, discussion guidance, and explanations.

If you meet every week, you decide to alternate between shorter meetings – 30 minutes – and longer ones – 60 or more minutes – according to the needs of that week.

The nurse or manager facilitating the next meeting should prepare an agenda with specific items that is circulated before the meeting takes place. Each meeting someone should be responsible for taking short notes, mainly highlighting decisions made and actions to be taken.

TOOL 24: SAMPLE AGENDA

The sample agenda includes possible topics of discussion. In a 30-60 minute meeting, the chair needs to determine one, possibly two, topics for discussion.

1. Old Business/Review of past week's items – Examples:

- Observations from walkabouts, trainings
- Health Issues/problems requiring focus
- Outcomes of H&S committee other meetings
- Patient care updates
- Other:

2. Preview of week – Examples:

- Upcoming meetings, outreach activities
- Doctors' visits
- Nurse Schedule/Rotations/Absences

3. Discussion Topics for Action – Examples:

- Planning – review or development
 - Education/outreach plan
 - Annual plan
 - Progress review
- Issue for problem solving (by nurses/management)
 - Emerging health concerns
 - Patient management
 - Medical supplies
- Health Information/Data review and analysis
- Topics/messages for the Health & Safety committee meeting
- Preparation for management meeting
 - Challenges & problems
 - Action plan updates/changes
 - Data analysis

4. Next Steps/Assignments:

- Assignment of the next week's chairperson
- List of follow-up actions and person responsible
- Other:

1. Old Business Questions:

- Overall, how did last week go?
- Update from last week's action items?
- How did the outreach go?
- What ongoing health or other issues require further attention?
- What activities did not take place as planned and why?

2. Preview of Week Questions:

- What's happening this week we should know about or need to prepare for?

3. Discussion Questions:

- What should be our priorities (for education/ outreach, HS, annual plan)? [Use of data is part of this work]
- How can we make educational activities interesting or new? (What participatory technique should we use – games, role plays, small group, competition?)
- What are the big health issues we need to focus on this month? How do we engage workers/managers on these issues?
- What immediate issues do we need management to take this week?

4. Next Steps

- Each participant should have an assignment:
 - meeting notes updates for management meeting,
 - preparation for next nurses meeting,
 - chairing next meeting,
 - updating education/action

TOOL 25: PRESENTING HEALTH INFORMATION OT THE HEALTH AND SAFETY COMMITTEE

Below is a four-part structure for the nurse report to the H&S Committee that is designed to engage the other participants in health discussions, outreach and improvement:

1. Report of health issues for the past month:

- Review the main health issues from last month (possibly using clinic data as graphs)
- Describe what problems the health team has been seeing (dehydration, stomach ailments, headaches etc.)

2. Report on Health Activities:

- Review activities main nurse activities completed last month
- Review health education plans and key messages for the month – including trainings, refreshers, calendar etc.
- Report on any news – a new nurse, a new topic/activity, new services etc.

3. H&S Committee Input:

- Request for input – specific and general:
- Ask H&S members for general input such as what health issues are you noticing on the floor
- Ask members for specific input such as what health education activities would you/workers like to see: how can we get workers to drink water” etc., “what feedback to you have for peer educators?”)

4. Call for Action:

- Close the report/discussion by asking members to take action
- Make assignments to the H&S committee members
- Make clear that they will be ask to report back to you at in the meeting

Making Your Health Report Interesting & Participatory

- Ask the committee what they think was the biggest health issue for workers during the last month, or the top three or the least issue.
- Show the group a graph of the last 3 months and ask which ones have gone up or down the most and why?
- Highlight only the most important items – the full list can be handed out.

How to Give Assignments to the H&S Committee

- A call for action can be simple – such as “Please inform supervisors there will be a training next week” or “Please tell workers to wash hands and drink lots of water this month.”
- Ask the members to report next month on how workers liked new PHE messages or a specific participatory activity or what health issues they want information on.
- Request feedback on training schedules and other health education activities.
- Be sure to follow-up on the assignments at the next meeting.

TOOL 26: SAMPLE DISCUSSION TOPICS FOR MEETINGS

1. Planning.

Nurses should be regularly involved in some form of simple (or more complex) planning activities such as:

- Determining the messages and finding more health information for the next week's educational activities, such as walk-about.
- Developing the next month's or quarter's education and outreach plans – such as the schedule for lunch-time talks, walkabouts and infirmary meetings; posting of health information, communication about activities with managers and workers.
- Reviewing the annual plan for progress, prioritizing action on areas that are behind schedule, and developing a new annual plan.

2. Emerging health issues.

Nurses are often the first to see health problems occurring from infectious diseases like the flu, to problems with menstrual pain, to hygiene and food-related illnesses like diarrhea.

Meetings should include time to discuss these issues and determine next steps, such as:

- Special walkabouts to remind workers of good health behaviors such as hand washing as well as staying home if they have a fever and are infectious.
- Meeting with managers to reinforce health messages and identify workers who do not look well.

3. Patient care challenges.

Nurses may need to discuss challenges they are having providing effective patient care. These may include:

- Complaints from supervisors about workers visiting the clinic
- Specific health topics that requires more training or education
- Lack of supplies

Nurse meetings and management-nurse meetings are times to find a solution to such issues.

4. Infirmary practices.

Good practice requires regular oversight and review by the nurses and management. The topic can should come from all participants:

Principle for Health Meetings

A key principle for any discussion is that **no one can raise an issue or a problem without offering a solution**. It is easy for nurses or workers to simply make a bunch of complaints.

This is particularly important for the nurses. They may be used to waiting for management to find the solution and take action. Instead, nurses must define their own role in finding solutions and taking action – even if it will certainly require engaging with managers.

People may need more time to think about solutions. So you may have the call to action or next steps at the end of to be for participants to come to the next meeting with concrete suggestions for solving the problem.

- The senior manager during his or her observations may notice that some practices are not being followed by nurses – such as filling in patient registers or medical records fully or filling these materials.
- The nurses may notice that the doctor is not filling out the patient charts completely, making follow up difficult.
- The head nurse may raise an issue of poor practice, such as lack of privacy or poor hygiene, by management or the health staff.

The meetings enable participants to review expected practices, address any problems following them, and reinforce their importance.

5. Health Information (Data) Analysis.

Increasingly, these meetings should include a review of health information (data) as well as progress on annual plan goals or indicators. Nurses with management should present the information as bar charts or other visual forms. This information may include:

- Monthly, quarterly, and annual data on health problems seen by the infirmary
- Data on the number of specific services provided or health education activities undertaking
- Data on workers absent due to personal or family health issues.

(See to the Module 8 on Collecting, Analyzing and Using Health Information.) Meetings are a time to review jointly the data as a team and identify health trends – based on clinic data and information – that require action or celebration.

At the end of the meeting, the chairperson (senior manager or lead nurse) should bring the group to consensus for action and make assignments.

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