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Research aim

The aim of the research project was to support social healthcare workplaces with methods to establish coherence between strategic management decisions regarding prevention of Musculoskeletal Disorders (MSD) and the operational work related preventive changes implemented in the organization.

Research question:
What characterize participatory methods that can establish coherence between strategic management decisions and preventive interventions?

Project Overview

The study was divided into 8 steps:
1) Phone survey of practice in Danish municipalities
2) In-depth interviews with 3 extreme cases
3) Develop method
4) Conceptual test in three organizations
5) Refine method and develop toolbox
6) Hearing with three top managers in elderly care
7) Final revision

Theory

The study builds on the known risk factors for developing MSD in combination with the theory of explication of **tacit knowledge** (Nonaka et al, 2002) by the use of **boundary objects** (Carlile, 2002).

The purpose of the boundary objects is to facilitate at participatory (Rosskam,2009) transfer and transformation of general descriptions of reducing MSD risk factors from a strategic level to concrete interventions at the operational level and back again to the evaluation.

Visualization Methods

Procedure

The test was done in two work environment department in two municipalities and one hospital ward. First, the purpose was to evaluate if the users were comfortable using the methods. 1) Workplaces received the material, 2) Read and discussed the material at a staff meeting, 3) had a phone interview with the researchers. 4) Decisions were made
Second, the methods were tested in the organizations.

Results

The identified visualization methods focus each on specific risk factors of MSD but when combined, they offer a holistic insight in to the work-related causes to MSD at the workplace. The new knowledge formed the basis for focused work-related preventive changes. The test participants found the methods applicable in relation to create coherence between strategy and practice.

Conclusion

Collective and multi-level visualization methods can generate new knowledge about work-related causes to MSD, identification of new preventive changes and link these to the preventive MSD strategy.

Works Cited

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Rosskam, E., 2009. Using Participatory Action Research Methodology to Improve Worker Health, Baywood Publishing Company, Amityville, New York, pp. 211–228