



Delaware County Emergency Medical Services

Alternative Dispute Resolution Worksheet

STEP I: Identify and/or Discuss the Problem as You See It (By person initiating problem solving worksheet)

STEP Ia: How does this matter affect you personally or your work group?

STEP II: Identify And/Or Discuss the Problem as You See It. (By other person or persons in the workgroup)

STEP II a How does this matter affect you personally or your work group?



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STEP III: What steps can be taken by each involved party to resolve this problem? (Possible Solutions)

Employee #1

Employee #2

Employee #3

Employee #4

STEP IV: The agreement: (How we are going to solve the problem)

STEP V: Review date (Mutual agreement on a date to reevaluate how agreement is working for all parties)

Date: ___/___/___



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STEP VI: Signatures of all parties

Employee #1: _____ date __/__/__

Employee #2: _____ date __/__/__

Employee #3: _____ date __/__/__

Employee #4: _____ date __/__/__

Mediator: _____ date __/__/__

Mediator's Notes: