



Occupational &
Environmental Medicine

Return to Work and Disability Management

Behdin Nowrouzi-Kia

Assistant Professor, Temerty Faculty of Medicine

University of Toronto

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Mitigating Potential Bias

- The information presented in this program is based on recent information that is explicitly “evidence-based”.
- This Program and its material is peer reviewed and all the recommendations involving clinical medicine are based on evidence that is accepted within the profession; and all scientific research referred to, reported, or used in this CME/CPD activity in support or justification of patient care recommendations conforms to the generally accepted standards

Learning Objectives



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By the end of this session, participants will be able to:

1. Explain the role of allied health practitioners in return to work and disability management
2. Recognize resources for suitable workplace accommodations through a biopsychosocial framework
3. Summarize the "Seven principles for successful return to work"

Return to Work and Disability Management

- Focus on work disability prevention
- Disability management including vocational rehabilitation



Stages of Disability Management

Employee work status	At work	Incidental absences	Sick leave	Short-term disability leave	Long-term disability leave
Type of intervention	Prevention		Early intervention	Recovery	
Employee health status	Healthy	Possible health risks	Illness/injury	Serious or chronic conditions	
Employer focus	Health promotion	Health risk management	Injury/disease management	Disability management	
Examples of employer programs	<ul style="list-style-type: none"> • Life habits assessment • Information sessions • Work/life balance programs • Physical activity promotion 	<ul style="list-style-type: none"> • Health risk assessment • Behavioural change promotion • Stress management • Physical fitness programs 	<ul style="list-style-type: none"> • Programs aimed at specific illnesses • Targeted education programs • Medication adherence programs • Care guides • Preventative accommodations 	<ul style="list-style-type: none"> • Management of individual employee claims • Specialized care • Chronic or episodic illness management • Rehabilitation • Transitional job options • Accommodations 	
Return-to-work strategies	n.a.	Proactive absence management	Stay-at-work program	Early return-to-work program	

Sources: Lindenberg, "An Organizational Health Perspective," 18; Roach, "Disability Management: Trends and Best Practices," 8; and Seward, "Trends in Mental Health," 7.

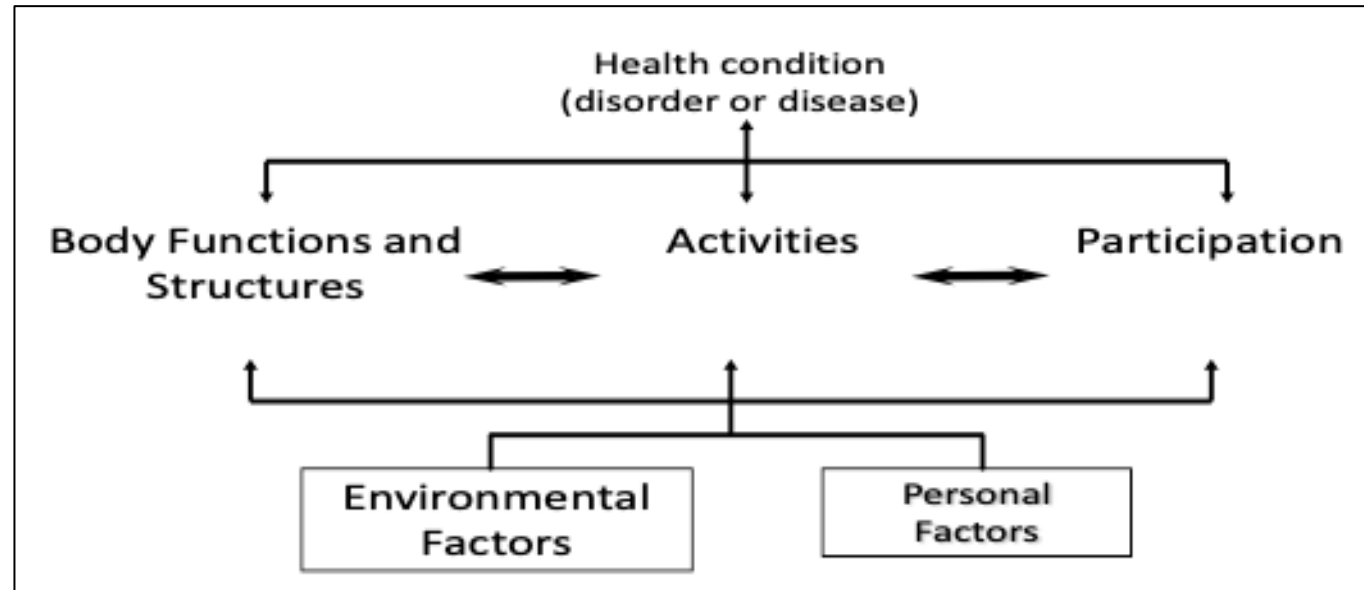
Importance of RTW Programs and Disability Management

Returning to Work...

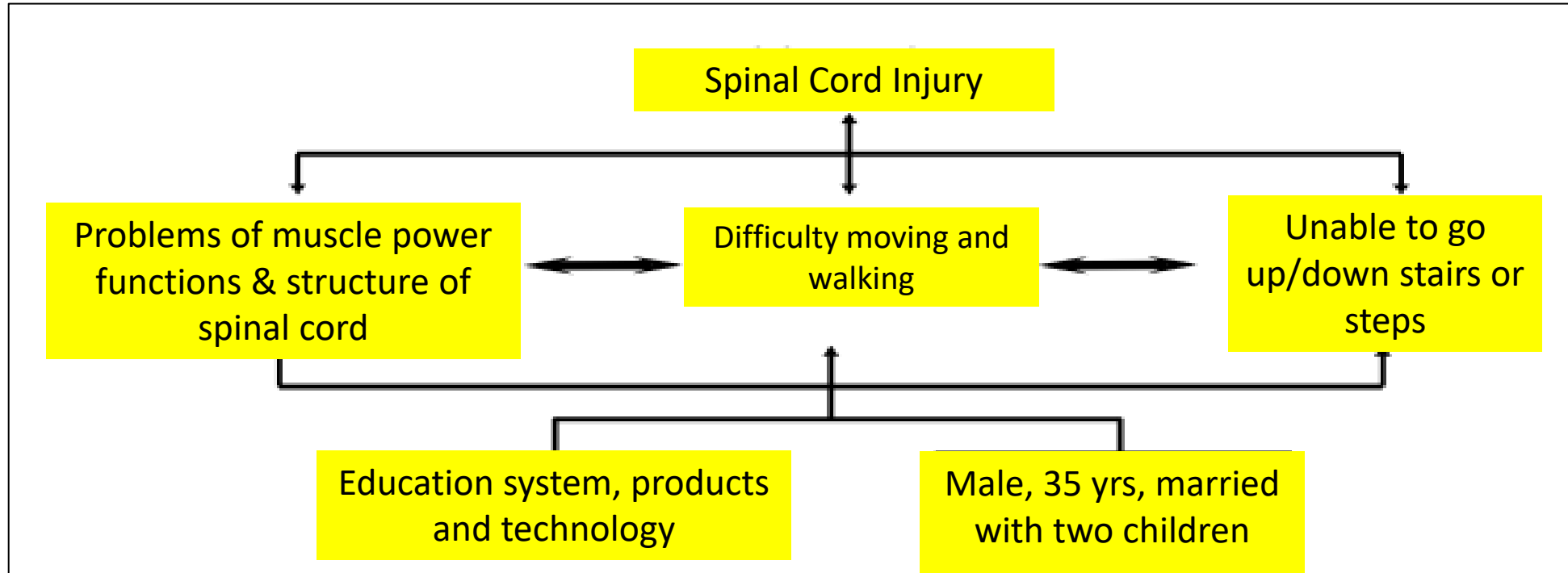


The International Classification of Functioning Disability and Health (ICF)

- Framework for describing and organizing information on functioning and disability by WHO (2001)
- The ICF model looks at functioning at the level of the body, at the level of the individual, of a person as a member of society and environmental factors



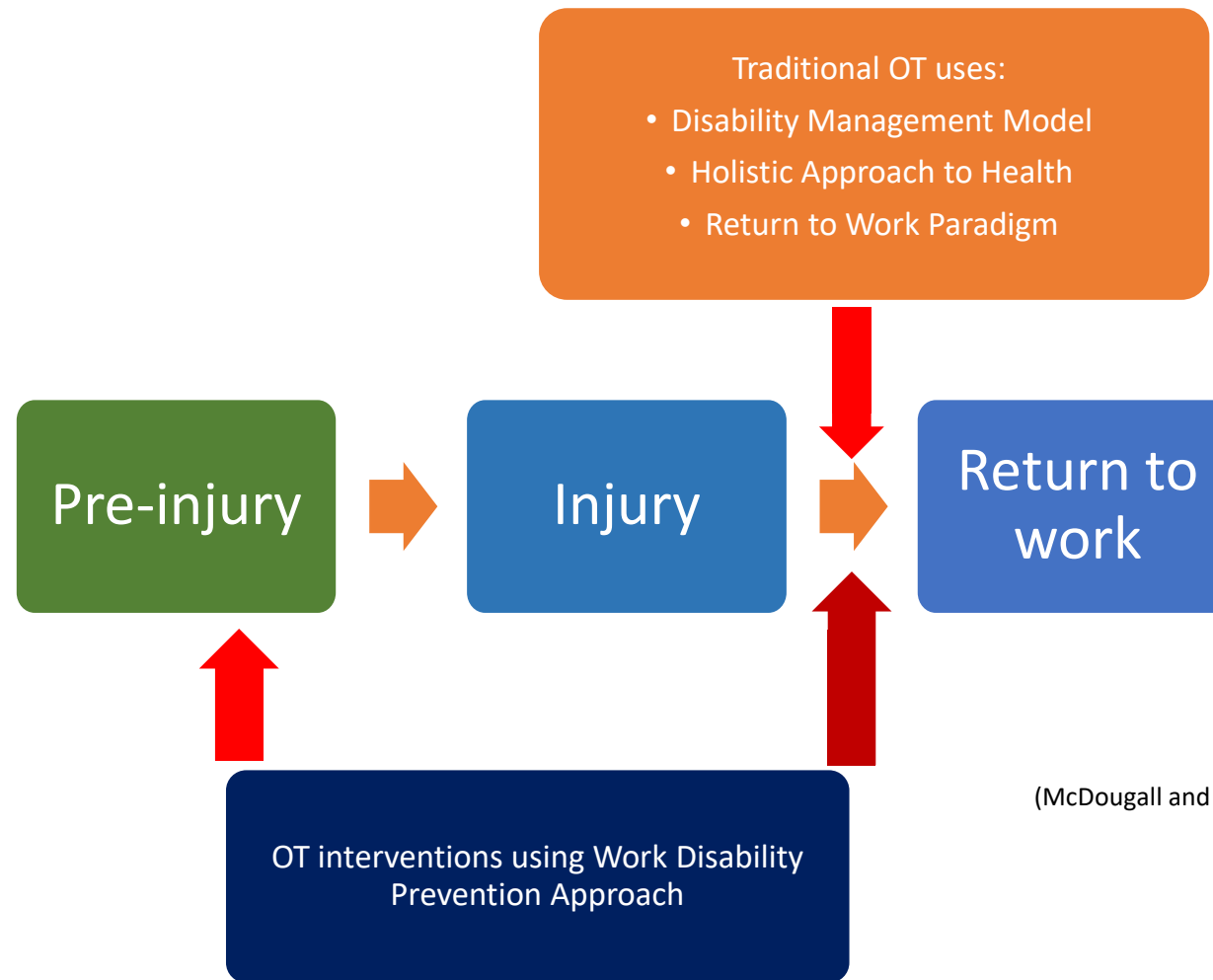
Example Using the WHO ICF



WHO ICF checklist:

<https://www.who.int/publications/m/item/icf-checklist>

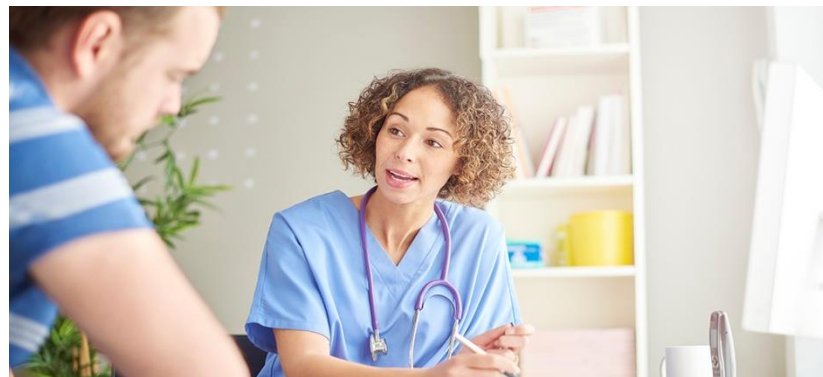
Work Disability and Management Prevention Model



(McDougall and Nowrouzi-Kia, 2017)

Allied Health Care Professionals in RTW and Disability Management

- Advise and support ill/injured worker
- Communicate a worker's abilities with the worker and employer
- Work with other healthcare professionals to facilitate the ill/injured worker's improvement and safe return to work
- Help transition from worker readiness (at home/community), to re-integration (work), to re-establishing resilience and sustainability at work



The Seven 'Principles' for Successful Return to Work

1. Positive workplace health and safety climate
2. The employer offer of modified work (accommodation)
3. RTW planning
4. Supervisors trained in work disability prevention and included in RTW planning
5. Employer makes early and considerate contact with injured/ill workers
6. Identified person to coordinate RTW
7. Communication between employers and health care providers (consent)



Canadian Standards Association

CSAZ1003: Psychological Health and Safety in the Workplace

About the Standard

- Offers practical guidance to develop and maintain a psychologically healthy and safe workplace

Importance for healthcare professionals

- Health professionals with expertise in trauma and operational stress injury may be involved in treatment options



CSAZ1011: Work disability management system

About the Standard

- Sets out the requirements for a work disability management (WDM) system
 - Guidance on how to effectively manage workers' health needs to minimize the impact of work disability and effectively onboard workers with disabilities

Importance for healthcare professionals

- Healthcare professionals with expertise in workplace disability may be involved in the case management process

Job Demands Analysis

Job demands analysis: comprehensive approach to quantify the physical, cognitive, and environmental demands of the essential and non-essential tasks of a job

- Body Mechanics
- Physical Demands Information
- Cognitive Demands Information
- Costs, providers and types



Plant : Plant# 10 – Coleman
Occ Code : 596
Occ Title : Machinist
Date of
Analysis : Jan 25, 2012

Job Objective

The job of Machinist involves operating a variety of machining equipment used to fabricate a variety of parts and components, will perform repairs of conveyor pulleys and guide wheels, and perform inspections and taking measurements in the field.

Job Description

Essential Functions:

1. Shop (machine work)
2. Shop (bench work)
3. Field work

Shift work: The Machinist works an 8-hour shift from Monday to Friday.

Underground work required: Yes

Personal Protective Equipment:

Standard personal protective equipment required.

Environment / Conditions of work:

Both indoor and outdoors depending on the assigned task.

Employee usually works alone but may work with Millwrights in a support role.

Job title: Machinist - Job demands analysis – Occupational therapy report



Occupational Summary Chart

Overall Demand Rating: Heavy Physical Effort (max lift/carry of 100 lbs)				
CRITICAL DEMAND	FREQUENCY (% of shift duration)			
	Rarely (1-5%)	Occasionally (6-33%)	Frequently (34-66%)	Continuously (67-100%)
Lifting: floor to waist (lbs)	77			
Lifting: waist to crown (lbs)	61			
Lifting: at waist height (lbs)	50	33		
Pushing (lbs or effort level)	•Hi	•Mod		
Pulling (lbs or effort level)	•Hi	•Mod		
Carrying: front (lbs)	50			
Carrying: one hand (lbs)	20			
Sitting	•	•		
Standing: still/on foot			•	•
Walking		•	•	
Climbing: stairs	•			
Climbing: ladders	•			
Climbing: mount/dismount	•			
Crouching/squatting	•			
Crawling	Not Required			
Kneeling	Not Required			
Trunk: stooping in sitting	•			
Trunk: stooping in standing		•		

Job title: Admin assistant - Job demands analysis – Occupational therapy report

Plant |
Occ Code -----
Occ Title Admin I and II
Date of Analysis September 20, 2011

Job Summary: On a daily basis the employee is required to input production statistics slips and make necessary corrections. Also enters requisition for office supplies, service contracts and creates work orders as required. Other duties include the upkeep of vacation schedules, safety calendars, minutes of meetings.

Administration I and II differ in computer competency only.

Essential Functions:

1. Data Input and Tracking
2. Administrative Duties

Hours:

The Admin 1 work hours are from 7:00 a.m. to 3:30 p.m., Monday to Friday. A half hour unpaid lunch is provided daily.

Underground work required:

Not required.

Personal Protective Equipment:

Not required.

Environment/Conditions of Work

Work Area:

All tasks are completed at the Coleman site Mining Technology Services (MTS) offices.

Position Status:

The Admin I will work independently throughout the shift. Some tasks may require consultation with other departments.

Resources available:

The Admin has access to various supports and resources, including colleagues, peers, as well as the Human Resources Department.



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Job title: Admin assistant - Job demands analysis – Occupational therapy report



Critical Demand Cognitive Behavioural					
		Essential	Frequency	Duration	Ranking
1	Degree of Self-supervision	•	C	L	3
2	Degree of Coordination Exercised	•	N/A		1
3	<u>Deadline</u> (Time) Pressures	•	C	L	2
4	Attention to Detail	•	C	L	3
5	Performance of Multiple Tasks	•	O	S	2
6	Exposure to Distracting Stimuli	•	C	L	2
7	Need to work Co-operatively with Others	•	O	S	2
8	Exposure to Emotional Situations	•	N/A		1
9	Exposure to Confrontational Situations	•	N/A		1
10	Responsibility & Accountability Required	•	O	S	2
11	Reading Literacy	•	R	S	2
12	Written Literacy	•	R	S	2
13	Numerical Skills	•	C	L	2
14	Verbal Communication	•	O	S	2
15	Memory	•	R	S	2
16	Electronic Device Literacy	•	C	L	2

Take Home Messages

- Explain the role of allied health practitioners and know when to make a referral
- Implement a biopsychosocial framework and patient-centred approach in your practice
- Summarize the "Seven principles for successful return to work"

Contact information

Behdin Nowrouzi-Kia

E-mail: behdin.Nowrouzi.kia@utoronto.ca

Telephone: +1-416-946-3249



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