



Public Safety Personnel

MENTAL HEALTH AND WORK 2

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Faculty/Presenter Disclosure

- **Faculty:** Nadia Aleem, MD, MSc, FRCP, Psychiatrist
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- **Potential for conflict(s) of interest:**
- None

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



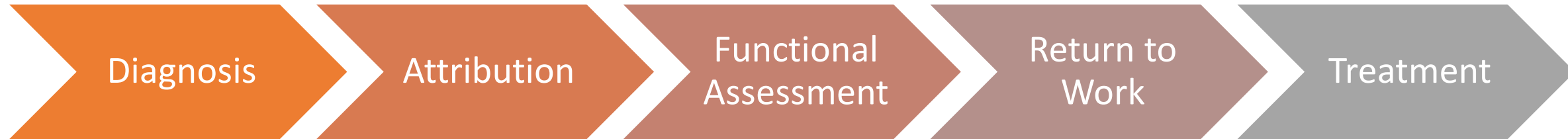
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Learning Objectives

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

1. Understand the components of an occupational mental health assessment
2. Learn strategies and tools that can be used to perform this assessment

OCCUPATIONAL MENTAL HEALTH ASSESSMENT





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DIAGNOSIS

Mental Illness - Diagnosis

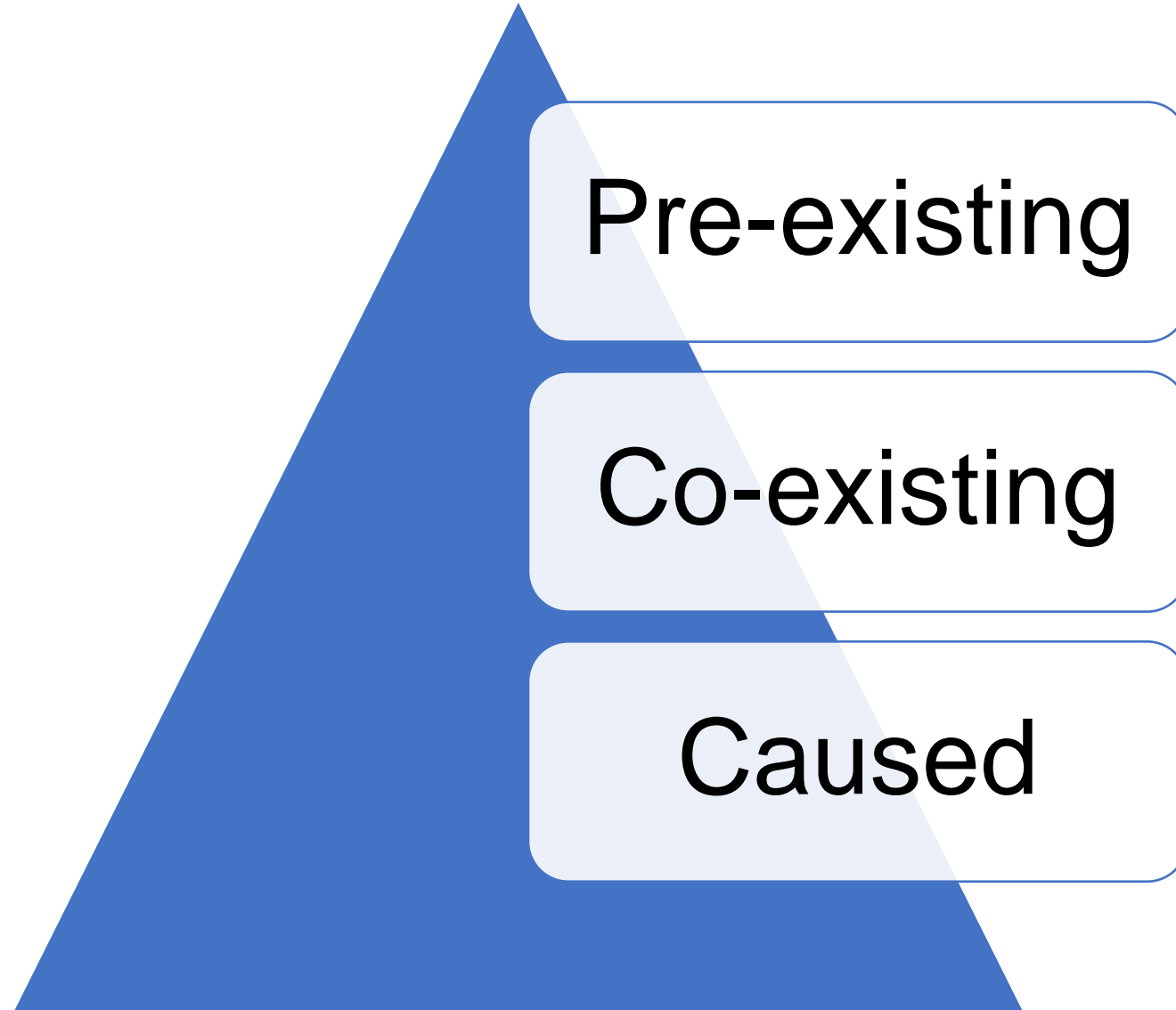
- Symptom description format
- Limited focus on functioning
- No determination of attribution
- Provides timeline for symptoms



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ATTRIBUTION

Attribution





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FUNCTIONAL ASSESSMENT



Observation



Interview



Self-Report Measures



Collateral



Direct Assessment

Self-Report Measures

General

- Short Form Survey (SF 36)
- Functional Abilities Questionnaire
- WHO Disability Assessment Schedule (WHODAS)

Pain

- Pain Disability Index
- McGill Pain Questionnaire

Site Specific

- Back
- Neck
- Upper Extremity

Mental Health

- Symptom measures
- No specific functional measure

WHODAS 2.0

- Self-Report Measure
- Long and Short Forms
- Maps onto the International Classification of Functioning Disability and Health (ICF) domains (functioning and participation)



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RETURN TO WORK

Return to Work Review

- What is the client's current functioning?
- How would that result in functional or behavioural difficulties in the workplace i.e., how does that potentially impact the Job Description (Job Description Analysis)?
- Are there any accommodations that can be recommended to help support the client?
- Does the client need to be restricted from certain types of work?

Return to Work

- Can the client return to work ?
 - In their former capacity
 - In ANY capacity (total disability)**

Abilities versus Disability

Can **restrictions** be recommended that would increase the individual's ability to **safely** return to work (**change the type of work or environment**)?

Can **accommodations** be made so that the work that is being done can be adjusted or modified to help with a client's performance (**change the way the work is done**)?

Restrictions and Accommodations

SYMPTOM: Sleep Impairment

FUNCTIONING: Difficulties with concentration

RESTRICTION: No night shifts, no driving work vehicles

ACCOMMODATION: Work tasks that do not involve >20 min concentration



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TREATMENT

Treatment

- Ground recommendations in functioning and return to work
- Behaviourally-oriented strategies usually most beneficial for mood and anxiety disorders
- Pharmacotherapy if engagement in psychotherapy is limited by symptom severity
- Consider RTW motivational interviewing (MI) based assessments/interventions if treatment plateaus

Maximum Psychological Recovery

- Not a clinical term, does not necessarily mean a full recovery from symptoms
- Need to consider the client in total – response to treatment, likelihood of benefit from treatment
- Does not relate to ability to meet the demands of a specific work environment

Take Home Messages

Occupational mental health assessments are grounded in functional assessments and functionally-oriented treatment recommendations

Use of functional assessment tools can be helpful in your assessments and treatment; focus on reporting abilities in assessments

Consider behaviourally-oriented approaches and review of MI-based interventions if there is a plateau in treatment

Resources

International Classification of Functioning, Disability and Health (ICF)

<https://www.who.int/standards/classifications/international-classification-of-functioning-disability-and-health>

Disability and Insurance: Facilitating the Patient's Return to Work

<https://www.camh.ca/en/professionals/treating-conditions-and-disorders/disability-and-insurance-claims-in-primary-care/disability-and-insurance---facilitating-the-patients-return-to-work>

Ontario Medical Association. (2019). Physician's guide to uninsured services: a guide for Ontario physicians [https://swpca.ca/Uploads/ContentDocuments/2019-Physicians-Guide-to-Uninsured-Services-10Jan19%20\(004\).pdf](https://swpca.ca/Uploads/ContentDocuments/2019-Physicians-Guide-to-Uninsured-Services-10Jan19%20(004).pdf)

Franche, R.L. & Krause, N. (2002). Readiness for return to work following injury or illness: conceptualizing the interpersonal impact of health care, workplace, and insurance factors. *Journal of Occupational Rehabilitation*, 12, 233–256.