

# Return to Work and Disability Management

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## Faculty/Presenter Disclosure

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  - No conflict of interest to declare

## 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. Understand 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





#### Stages of Disability Management

Employee work status	At work	Incidental absences	Sick leave	Short-term disability leave disability leave
Type of intervention	Prevention		Early intervention	Recovery
Employee health status	Healthy	Possible health risks	lliness/injury	Serious or chronic conditions
Employer focus	Health promotion	Health risk management	lnjury/disease management	Disability management
Examples of employer programs	<ul> <li>Life habits assessment</li> <li>Information sessions</li> <li>Work/life balance programs</li> <li>Physical activity promotion</li> </ul>	<ul> <li>Health risk assessment</li> <li>Behavioural change promotion</li> <li>Stress management</li> <li>Physical fitness programs</li> </ul>	<ul> <li>Programs aimed at specific illnesses</li> <li>Targeted education programs</li> <li>Medication adherence programs</li> <li>Care guides</li> <li>Preventative accommodations</li> </ul>	<ul> <li>Management of individual employee claims</li> <li>Specialized care</li> <li>Chronic or episodic illness management</li> <li>Rehabilitation</li> <li>Transitional job options</li> <li>Accommodations</li> </ul>
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

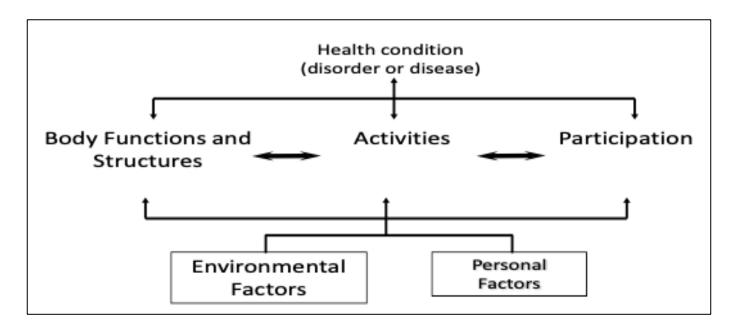






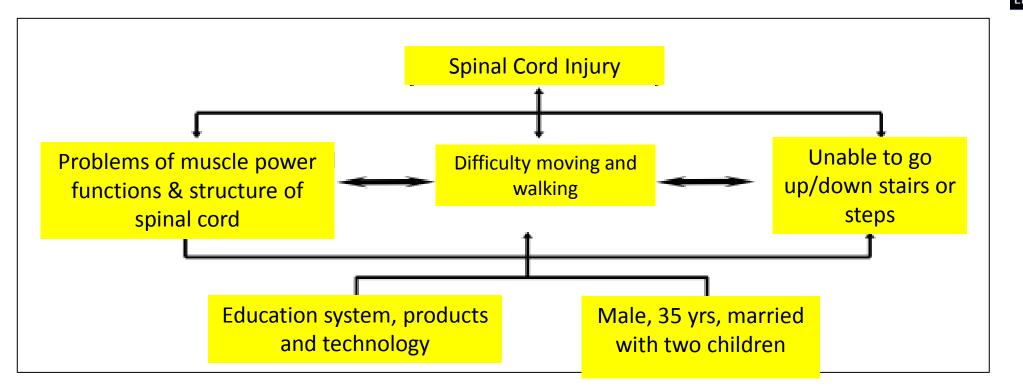
## The International Classification of Functioning Disability and Health (ICF)

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- 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



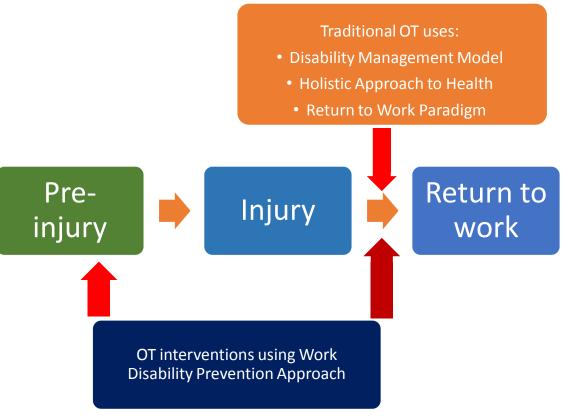


## Example Using the WHO ICF



WHO ICF checklist: <a href="https://www.who.int/classifications/icf/icfchecklist.pdf">https://www.who.int/classifications/icf/icfchecklist.pdf</a>

#### Work Disability and Management Prevention Model





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(McDougall and Nowrouzi-Kia, 2017)



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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 health care professionals to facilitate the ill/injured worker's improvement and safe return to work
- Helps transition from worker readiness (at home/community), to reintegration (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
- Communication between employers and health care providers (consent)





## **Canadian Standards Association**

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#### 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 health care 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 health care professionals

 Health care professionals with expertise in workplace disability may be involved in the case management process



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## **Functional Capacity Evaluations**

- Functional capacity evaluations: standardized tests used to evaluate the capacity of work-related activities
  - Systems/Protocols/Approaches
  - Costs/Coverage
  - Providers



### Job Demands Analysis



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- 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

## Long COVID-19



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I.R.C.C.S. Istituto

Ortopedico Galeazzi



> Eur J Phys Rehabil Med. 2020 Oct;56(5):642-651. doi: 10.23736/S1973-9087.20.06501-6. Epub 2020 Jul 24.

#### Rehabilitation and COVID-19: the Cochrane Rehabilitation 2020 rapid living systematic review

Maria G Ceravolo <sup>1</sup>, Chiara Arienti <sup>2</sup>, Alessandro de Sire <sup>3</sup> <sup>4</sup>, Elisa Andrenelli <sup>5</sup>, Françesco Negrini <sup>6</sup>, Stefano G Lazzarini <sup>2</sup>, Michele Patrini <sup>2</sup>, Stefano Negrini <sup>6</sup> <sup>7</sup>, International Multiprofessional Steering Committee of Cochrane Rehabilitation REH-COVER action

Collaborators, Affiliations + expand PMID: 32705860 DOI: 10.23736/S1973-9087.20.06501-6 Free article

#### Update in

Rehabilitation and COVID-19: the Cochrane Rehabilitation 2020 rapid living systematic review. Update as of July 31st, 2020. Negrini F, de Sire A, Andrenelli E, Lazzarini SG, Patrini M, Ceravolo MG; International Multiprofessional Steering Committee of Cochrane Rehabilitation REH-COVER action. Eur J Phys Rehabil Med. 2020 Oct;56(5):652-657. doi: 10.23736/S1973-9087.20.06539-9. Epub 2020 Sep 1. PMID: 32869962

Rehabilitation and COVID-19: a rapid living systematic review 2020 by Cochrane Rehabilitation Field. Update as of September 30th, 2020. Andrenelli E, Negrini F, De Sire A, Patrini M, Lazzarini SG, Ceravolo MG; International Multiprofessional Steering Committee of Cochrane Rehabilitation REH-COVER action. Eur J Phys Rehabil Med. 2020 Oct 29. doi: 10.23736/S1973-9087.20.06672-1. Online ahead of print.

https://rehabilitation.cochrane.org/covid-19/reh-cover-rapid-living-systematic-reviews



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#### THE CHALLENGE OF UNDERSTANDING AND RESPONDING TO LONG COVID

A focus on Long COVID and its impact on physical and mental health and occupation, with reflections from occupational therapists living with the effects, alongside examples of evolving community rehabilitation services

#### **ALSO INSIDE**

Embedding a whole school sensory approach into an area special school

Increasing access to meaningful activities in community hospitals

The development of SLAM's OPTIMA Mood Disorders Service neurocognitive pathway

#### Take home messages

- Understand 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"





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