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Red Flags/Green Lights: A guide to identifying and solving returnto-work problems

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Research Action Alliance on the Consequences of Work Injury Symposium Toronto, Ontario

May 22, 2009

Funding provided by the Social Science and Humanities Research Council of Canada under their Community-University Research Alliance funding envelope (Grant 833-2005-1012)

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Outline

- 1. Background
- 2. Guide purpose & target audience
- 3. How the Guide was developed
- 4. Appearance of the Guide
- 5. What the Guide contributes
- 6. Next steps

Background

- WSIB "Bridging the Gap" funding
 - To translate existing research into practical applications.
- Enhanced by RAACWI funding to host regional workshops
- Knowledge Transfer from 'Complex Claims' study
- Knowledge Exchange with Return-to-Work (RTW) stakeholders

Existing Research: Complex Claims Study

- Qualitative study of situations of workers with long-term compensation claims, RTW problems
 - How and why do workers fail to return to work as expected?
- In-depth interviews with 69 injured workers, injured worker peer helpers, & service providers across Ontario 2004-07
 - Context and course of RTW problems—detailed accounts of how, when and why events occurred
 - Consistent themes
 - Strong convergence between accounts of IWs and SPs
- Barriers to RTW were often mundane & procedural in nature
 - RTW decision-makers don't always see full picture, or communicate well
- This can contribute to poor decisions & development of RTW problems



Guide Purpose & Target Audience

The Guide to provides advice about how to identify and manage return-towork problems.

Oriented to those rarer (but costly) situations when claims are not proceeding in a straightforward manner

Target audience = problematic RTW trajectory + anyone with a 'hands on' role with making decisions about a compensation claim or RTW situation as it is unfolding, such as:

- »Injured workers
- » Unions
- »Employers/HR staff
- »RTW coordinators
- »Health care providers
- »Legal advisors
- »WSIB staff



Red Flags & Green Lights

Designed to be relevant across jurisdictions

- 1) The guide details these RTW problems and their circumstances
- 'Red flag' warning signs make inquiries about how the situation is proceeding
- knowledge transfer
- 2) The guide offers suggestions for how problems might be managed
- 'Green light' suggestions for problem management -generated by expert consensus among RTW stakeholders
- knowledge exchange

How the Guide was developed

1. Red Flags Advisory Committee

- Advised on overall study design, content and form of final draft
- 2. Content analysis to draw out 'Red flag' situations from Complex Claims Study
- **3. Validation** of 'red flag' content
 - Reviewed by Advisory Committee for Complex Claims study
 - Validated content, commented on layout
- **4. Workshops** (the heart of the process, next slide)
- 5. Revision, production & dissemination
 - Incorporated all changes
 - final product `look'
 - Dissemination via 'Red Flag' networks, IWH networks, community & academic venues.



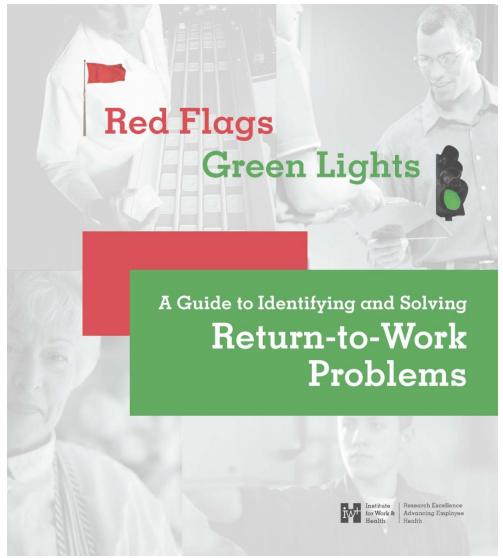
Workshops

Even representation from:

- Employers—LMR providers, OEA, HR reps,
- Worker reps—workers, OWA, unions, paralegal reps
- Health care providers—therapists, psychologists, physicians, RTW coordinators
- WSIB—case managers, Director, Manager
- 4 workshops across Ontario regions to:
- Generate 'green lights'—expert consensus
- Comment on red flags
- Identify target audiences,
- Review guide layout
- Strong recognition by participants of all 'red flags'



Appearance of the Guide



Organized into four 'contexts' sections

- Work
- Health
- Vocational rehabilitation
- Claims

Vignettes throughout

Difficulty travelling to work

Worker compliance

Depression and other mental health problems

Commuting difficulties and non-compliance: Frank's story

Frank had a work-related back injury and could not sit or stand for long periods of time. His employer offered accommodated work, but the commute caused Frank such pain that he arrived at work feeling ill and exhausted. The compensation board decision-maker advised Frank to stop along the way to get out and stretch. However, because Frank commuted along a busy highway, stopping would be dangerous. Because the employer had made an offer of modified work, when Frank was late or did not show up to work, he was judged to be noncompliant and his benefits were cut. This set in place a series of adverse effects including financial and emotional strain for Frank, and diminished workplace relations that would undermine a later RTW attempt.

Consider worker's ability to travel

Communication

Acknowledging difficulty

Details of Red Flags & Green Lights in each context

- Some repetition across contexts
 - Requested by stakeholders
- 'Pull out' quick reference sheets
 - Requested by stakeholders

WORK CONTEXT: RED FLAGS/GREEN FLAGS

		Red Flags	Green Lights
RTW too early	3	 Immediate RTW RTW with unclear injury Work absences after RTW 	Later RTW Functional abilities assessment RTW planning Flexible RTW plan
Difficulty travelling to work	5	 Injury impedes driving Transportation difficulty Long-distance RTW 	Considering worker's ability to travel Providing transportation options
Physically unsuitable work tasks	6	 Worker cannot perform job tasks Worker requests co-worker assistance 	Discussing accommodation details Workplace assessment Ongoing monitoring Job re-orientation
Hazardous RTW	8	 Fear of RTW Worsening health since RTW 	Health and safety review Addressing hazards Alternative work Job re-orientation
Lack of accommodation	9	 Conflicting views of work accommodation Increased medication use since RTW Work absence after injury 	Appropriate workplace accommodations Written accommodation plan Dispute resolution support
Embarrassing modified work	11	Make-work modified workCo-worker harassment	Collaboration with injured worker Productive modified work Educating workplace parties about RTW

Each 'problem' page is broken down into 3 sections:

- Intro paragraph
 - how & why this problem can happen
 - some consequences
- Red flags
- Green lights

RTW too early (intro paragraph)

In certain instances, workers are required to early, before they are well enough to manage consequences worker might feel obliged to return too damaging working relationships or losing income, employment or compensation benefits. Such workers may need to rely on co-workers to keep up with their jobs, and this can lead to strained and uncomfortable workplace relationships. Workers might also use or overuse medications in order to keep up. Such medication use can contribute to cognitive impairment, making the work dangerous to the worker and to others. All these can contribute to delayed RTW, poor recovery or reinjury.

Statement of the

Return to work too early: Red Flags

Immediate RTW

Is the worker expected to return immediately after injury?

Although next-day RTW is not unusual for a worker with a minor or simple injury, a quick RTW can be too early for complicated injuries (e.g. that involve an inconclusive diagnosis or additional surgery). However, if a worker does not return, he or she may be viewed as non-compliant and could lose or face a reduction in compensation benefits.

RTW with unclear injury

Is the worker expected to return before physicians have arrived at a full understanding of the impairment?

In some cases, workers experience pain and health problems beyond the usual symptoms. In these situations, the insurer might prompt the worker to RTW before the injury is fully understood, which can contribute to delayed healing or re-injury.

Work absences after RTW

Is the worker taking time off after returning to work?

Work absences after an initial RTW might signal pain or worsening injury. They might also indicate that the worker could benefit from additional recovery time or treatment.

Return to work too early: Green Lights

Later RTW

If there is concern about the safety of RTW because the extent of worker's injury is unclear or functional abilities are difficult to identify, delaying RTW to give time to heal or further assess the injury could prevent failed RTW.

Functional abilities assessment

A worker who shows visible signs of not recovering might benefit from a functional abilities assessment. This assessment might lead to a new RTW plan that accommodates the worker's need for additional healing time, graduated return or permanent accommodation.

RTW planning

Injured workers should be provided with information that details the RTW process. Additionally, there should be a written RTW plan agreed on by all participants, such as the worker, union, employer, health-care provider, compensation board decision-maker. The plan should be regularly revisited and adjusted as needed to ensure suitability. Face-to-face meetings with decision-makers may facilitate this process. Ideally, the RTW plan refers to the timing of RTW, and identifies all barriers to RTW including those not directly related to the injury.

Flexible RTW plan

The RTW plan should be individually tailored to the worker, the injury and the worker's circumstances. For instance, the plan could accommodate time allotted for treatment during the work day rather than after work hours.

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What the Guide contributes

Provides advice about how to recognise & manage RTW **problems**

Improve workers' experience, reduce claim duration.

Addresses a conceptual gap in RTW management

- Much disability management advice centres on the worker and the health situation.
- This guide addresses the procedural context of RTW, and centres on the decision-makers who shape the environment of workers.

Next steps

- Evaluate dissemination & impact of guide
 - Who uses it?
 - How is it useful & in what situations?
- Phase 2 version?
 - adding jurisdiction-specific detail
 - Sites for help/support
 - Advice on specific RTW/human rights policies
 - expanding guide by incorporating evidence from other studies

Thank You

Questions?



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