

Dr. Marc White and research assistant Jenilyn Ledesma work on the Health and Work Productivity Portal.

Putting return-to-work research into practice

By Gail Johnson

Research has shown that when people have become injured or ill on the job, being able to return to work (RTW) safely is beneficial for their overall well-being. Yet, it can be hard to put findings into practice. In other words, what does a successful return-to-work program actually look like?

According to research led by Dr. Marc White, the CEO and president of the Canadian Institute for the Relief of Pain and Disability (CIRPD), a collaborative approach is crucial for an effective RTW program. With the support of a research grant from WorkSafeBC, White headed a recent study in which he compiled comprehensive data from nearly 50 systematic reviews on RTW. Systematic reviews use scientific, transparent methods to minimize bias and present conclusions based on the best available evidence. A central goal for this project was to create resources to support the development of successful RTW programs and to help shape future policy.

What they found is that workers who have experienced physical or psychological injury typically have many people involved in their treatment, care, recovery, and workplace RTW processes and that research shows the necessity of a collaborative approach. “We used to think that work disability was simply associated with a type of physical, psychological, or disease-based injury or health condition, and under a medical model we just needed to clinically address these concerns and the person would return to work. There is now irrefutable evidence that workplaces, their policies, procedures, and organizational culture — including their safety culture — have a tremendous impact on whether someone returns to work in a timely fashion,” says White.

The benefit of a collaborative approach is something Dr. Shannon Wagner, registered psychologist and co-investigator on the study, sees in her private practice. Wagner specializes in RTW transitions and also works as a professor and chair of the University of Northern British Columbia’s School of Health Sciences, so she has a unique window into the many sides of a RTW program.

“If the client is working against the employer or the employer isn’t working with the union or the union and employer aren’t in concert with the physician ... If that process breaks down at any point, then relationships get strained,” says Wagner. “A collaborative approach is one of, if not the most, important aspects of return-to-work programming.”

Risk factors for work absence

The researchers were also able to learn about the risk factors that contribute to work absence by compiling and analyzing the data of the 50 systematic reviews and including stakeholders who have an investment in return-to-work programs — such as educators, health care professionals, and industry professionals.

“Many stakeholders were surprised that there were many modifiable workplace risk factors that can influence return to work across health conditions,” White says. “These included lack of supervisory support, lack of social support, job strain, increased physical demands, low job satisfaction, increased psychological demands, and lack of job control.”

What often gets overlooked in RTW planning are the injured or ill worker’s own risk factors, which can affect or delay getting back on the job. The study found that emotional distress and increased depressive symptoms, negative recovery expectations, decreased physical activity, pain, lack of family support, poor general health, increased functional disability factors, fatigue, and lack of motivation to return to work are

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—Marc White, CEO and president of the CIRPD

just some of the elements that can come into play outside of the workplace.

Strong social support, meanwhile, was found to contribute to reduced absenteeism for those off work due to disability. There was consistent evidence showing that offers of work accommodation and contact between health care providers and the workplace reduced the duration of a disability leave. Research also found that work disability duration can be reduced through early contact between worker and workplace and by the participation of a RTW coordinator. For workers with back pain, interventions where stakeholders worked together were more effective at assisting employees to return to work.

Making research relevant

With so many diverse and complicated factors potentially affecting a person’s transition back to work, it only makes sense for everyone involved to be on the same page when it comes to RTW: employers, unions, health professionals, human resource professionals, occupational health and safety professionals, insurers, and policy makers.

That’s where the Health and Work Productivity (HWP) Portal (healthandworkproductivity.org) comes in. Developed by the research team, it’s a new, collaborative knowledge exchange platform to help people access high-quality research and practical resources to improve employee and workplace health. Through an academic and community partnership, it helps identify and implement relevant knowledge and tools to facilitate best practices in disability prevention and management.

“An important objective of HWP is to engage stakeholder organizations in the identification, translation, and utilization of credible research and related resources to facilitate safe, healthy, accommodating, and productive workplaces across different audiences,” White says.

The project has garnered interest worldwide and involves the participation of several national organizations such as the Canadian Centre for Occupational Health and Safety, the College of Family Physicians of Canada, and the Occupational Environmental Medicine Association of Canada.

Research for real-world changes


The study emphasized just how crucial solid research is — and how communication and collaboration between stakeholders and researchers ensure that research is relevant, meaningful, and useful.

“The academic-community partnership has been huge in providing information for changes in policy to employers,” Wagner says. “When stakeholders are involved in research from the beginning, they’re invested in it. They’re not just getting a piece of paper on their desk. They’ve helped create it. There’s more ownership and more uptake.”

WorkSafeBC director of research services Lori Guiton says the project makes existing data more accessible to employers and other key stakeholders, with the portal providing a kind of one-stop shop for vital information.

“Sometimes the volume of research knowledge available to policy makers, employers, and OHS experts can be overwhelming,” Guiton says. “This project brings focus to the importance of putting the best scientific evidence into the hands of those who can use it in real-world settings. By taking a methodical, scientifically valid approach, this project gives us a helpful tool for getting key stakeholders engaged with research.” ☺

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