



# INSIGHTS

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## **An Effective Return**

With worker disability costing Canadian employers as much as \$17 billion a year, it makes good business sense to get employees back to work as soon as possible after an illness or injury. But, it's not an easy task these days with psychological claims neck-in-neck with musculoskeletal claims as the number one disability cost. The trend hasn't only made early intervention and return-to-work programs more critical than ever for cutting costs - it's also made such programs more complex to manage.

With back injuries it's relatively easy to objectively measure a person's ability to do a job, but psychological illness is more subjective. There aren't specific lab tests for determining how sick a person is or how effective they can be in their job. Although both musculoskeletal and psychological claims require the same management principles, the way these principles are applied differ. There may be psychological factors linked with musculoskeletal injuries, such as perceived work stress. These injuries primarily involve physical assessment and treatment. On the other hand, psychological illness requires psychological assessment and treatment. Some of that treatment may be physical in nature, such as medication, but for the most part, employee counseling is used.

A couple of months ago I did an INSIGHTS article entitled Dispelling Disability Myths. In the article I stated that few companies take a proactive approach to disability management. RWAM does.

For all disability cases, regardless of the cause - illness, injury, WSIB, it is critical to intervene as early as possible. Our results show a higher degree of success by returning the recovering employee to the workplace if intervention begins at, or soon after, the time of the injury. Further, studies show that organizations with very clear disability management and sick review policies are better at managing disabilities. Alternatively, employers who lose contact with employees and lose the work bonding association have a much more difficult time getting them back to work.

Disability, absenteeism and employee health are important concerns for organizations, but knowing what to do, and when to do it is where RWAM can help. Notify RWAM when an employee has been absent due to illness or injury for 10 days, even if the illness or injury is work related. RWAM's Early Intervention team will guide you from there.



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Once the person is ready to come back to work it's important to focus on the person's capabilities as opposed to work limitations. There can be a difference with how a return-to-work program applies to musculoskeletal and psychological disabilities. For those with a back injury for instance, the person returns to modified work doing the tasks that can be safely accomplished with a gradual increase in duties and hours of work. With a psychological illness, the modified work would include the duties that can be done safely while the person is recovering and learning new coping skills. For employees who are recovering from depression, this may involve low-pressure, task oriented work to begin with, and then increasing gradually towards work that is both task and relationship focused and time sensitive.

Early intervention gets employees back to work and up to full speed more quickly after an illness or injury, but employers should be aware of a common mistake they make when an employee returns. They may not have adequately prepared the workplace, their co-workers or supervisor for the employee's return. Employers may focus so

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An Effective Return..., cont'd

much on getting the employee back to work that they don't take into consideration the value of the work accommodation to the employee's rehabilitation or to the business operations. Modified work should be meaningful and goal-oriented work, not merely a 'make work project' to reduce disability costs. Employers understand when intervention falls by the wayside that the consequences can be disastrous. Statistics Canada reports that an employee absent for more than six months has just a 50 percent chance of returning successfully to work.

Despite the complexity of early intervention and return-to-work programs, the reward for employers can be enormous. When you look at the costs of losing and retraining staff, and the effects of rising insurance premiums, there is no question that effectively and humanely managing sick leave and disability saves everyone money.

Until next time...

## Employee Absenteeism in Canada

In addition to provincial variations, absence rates also vary by industry. According to Statistics Canada, the health care and social assistance industry was at the high end with an average absence rate of 14.4 days per employee. At the other extreme, with an average of 5.6 days, was the professional, scientific, and technical industry.

Employee absence is a costly issue facing all employers, but by using the tools that are available employers can manage employee absenteeism and increase productivity.

Industry	Avg. # of Days
Health care and social services	14.4
Transportation and warehousing	11.1
Public administration	10.9
Utilities	10.2
Manufacturing	9.9
Educational services	8.8
Accommodation and food services	7.9
Finance, insurance, real estate and leasing	7.8
Trade	7.6
Construction	7.2
Professional, scientific, and technical	5.6

Source: Statistics Canada, Days Lost per Worker by Industry

## What RWAM's Early Intervention Team Is Doing For You

Becoming and remaining a healthy organization with healthy employees is a constant challenge. A multitude of barriers make it difficult to ensure that employees are getting the treatment they need, when they need it. Here is what RWAM's Early Intervention Team is doing to assist.

1. Employers experience absenteeism for a number of different reasons. Our rehabilitation consultants can begin at the early stages of the claim to provide assistance in getting employees back to work or ensuring that they are getting medical treatment. Rehabilitation intervention does not usually start until a return to work plan has been authorized by the doctor. Doctors often welcome our plans for a return to the employee's own job as we have more details about the employee's job and availability of modified work. This is at no cost to the employee or employer.
2. The Early Intervention process also provides information to employees who have gone off work or submitted a claim for the first time. We explain how the program works and which forms to complete.

- Persons who have brain injuries or a severe illness often require assistance with their claims in getting their forms completed and processed. We assist the claimant as well as their family by collecting necessary medical information, and dialoguing with their care providers and legal advisors. These situations quite often can be frustrating and difficult to cope with. Our intervention at the beginning of these claims provides support and medical expertise.
3. The Early Intervention Program monitors the timely completion of forms to ensure that the process moves along smoothly. This includes making sure that the Administrators of group benefits understand the program, have up-to-date information and knowledge on how to complete Early Intervention forms, as well

- as making sure they have a supply of current forms on hand.
- Mailing routines to large groups with many different locations can lead to miscommunication. In one case, correspondence was sent out to each site. This left the Group's Plan Administrator out of the loop. We addressed this problem at the Early Intervention stage and we were able to arrange that all correspondence go directly to the group's administrator first.
4. The Early Intervention Program provides a forum for employees to discuss confidential and personal information. Many employees don't feel comfortable discussing their medical condition with their employer. We can often solve problems by listening to both sides and offering simple solutions.