

# U RTW Interventions – B

## Challenges

Work, Wealth and Well-being

**Dr Steven Sadhra and Prof. Beth Grunfeld**

Dr Steven Sadhra  
Institute of Occupational and Environmental Medicine (IOEM)  
School of Health and Population Sciences, University of Birmingham

Prof Beth Grunfeld  
Centre for Technology Enabled Health Research  
Coventry University

# RTW Interventions

- **Populations / conditions**
  - After surgery/ treatment
  - Pain (chronic) related condition
  - Chronic conditions e.g. COPD
  - Sickness absence
  - Education /training
    - GPs, patients, OH professionals, employers, personnel)
  - Diagnosis of work-related disease
    - Workplace adjustments (adapting work to suit)

**All require integrated approach -'shared model approach'**

# RTW Interventions –Outcomes

- ❑ Duration of disability
- ❑ RTW - any duties /normal duties
- ❑ Work retention
- ❑ QoL (at work and away from work)
- ❑ Workers experience (RTW trajectory)
- ❑ Functional assessment
- ❑ General physical health
- ❑ Job satisfaction
- ❑ Perception of stakeholders

**Do interventions have a +ve effect ?**

# RTW-Interventions -Evidence

□ **Moderate / weak**

□ **Reasons**

- **Few studies**
- **Not many RCTs**
- **Studies not well designed**
- **Varied intervention designs, populations and methods of assessment (pooling of findings)**
- **Implementation – limited info.**

# Evidence – RTW enhanced by

- Early contact with workers
- Early treatment (on-site physiotherapy, CBT)
- Educating line manager/supervisors
- Better understanding of RTW processes
- Feasible RTW plans
- Integrated approach –
  - Involvement of rehabilitation, OH and positive work culture.
- Understanding how stakeholder conceptualise ill-health and work

# Govt. Imitative

## Example – ‘Fit note’ -2010

- Now focuses on **what the patient can do**, rather than what they cannot, aiming to return more employees to work via limited /revised duties
  - **Unfit for work**
  - **Fit for work**
    - Phased return
    - Altered hours
    - Amended duties
    - Workplace adaptations

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Work and Cancer

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# Cancer and survivorship

- **UK – 325,000 new cases in 2012**
- **Worldwide – 12 million new cases in 2012**
- **Increase in number of survivors a consequence of:**
  - earlier detection
  - newer/more effective therapies
  - growing attention to long-term surveillance
- **2 million survivors in UK (3% increase per year CR-UK 2011)**
- **> 65 % chance of surviving five years (adult patients)**



# Working post-treatment

- **Benefits of returning to employment**
  - sense of normality
  - secure financial future
  - better physical and psychological outcomes
- **Between 40-85% of cancer survivors RTW**
- **Challenges in the workplace include**
  - changes in functional ability
  - difficulty in achieving productivity levels similar to healthy counterparts
  - fatigue
  - negative attitudes of colleagues and employers

# Cancer and work -challenges

**100,000 people of working age diagnosed with cancer each year in the UK**

- ❑ Emotional response to diagnosis**
- ❑ Treatment times – fitness to work**
- ❑ Recurrence (fears of)**
- ❑ On-going treatments**
- ❑ Residual symptoms**

# “Workplan” study (funded through NIHR-rfpb)

**A feasibility study of "WorkPlan" - a guided workbook intervention to support work-related goals among cancer survivors**

**4 week self-guided intervention focusing on goal setting, beliefs about illness, managing emotions, talking about cancer/disclosure.**

**60 cancer patients will be randomly assigned to one of two arms of the trial (a guided workbook intervention or usual care).**

**The participants will be followed-up using questionnaires and interviews over a 12 month period.**

**We anticipate that a guided self-help treatment might be a valuable and cost efficient strategy that would lead to more positive beliefs about illness, quicker RTW, greater satisfaction with work and the return to work process.**

# Key issues requiring further research

## □ **Factors associated with RTW**

Age, gender cancer type, job demand, perceived workplace support , education of employee workplace interpersonal relationships etc.

## □ **Assessing workability and assessment tools**

– Cognition and functional

## □ **Workplace impact and support mechanisms**

– teams, line managers, culture

## □ **Benefits of early and integrated interventions**

Predictors of Return to Work in Cancer Survivors in the Royal Air Force  
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