Global Professional and Program Standards in Return to Work and Disability Management

Conference Board of Canada
April 9, 2020
Historic challenges

• High levels of unemployment / associated poverty for persons with disabilities (1.2 million in Canada today)
• A social, economic and public policy conundrum for governments around the world
• Led to diverse range of program, policy and legislative interventions
• 0.65% – 0.85% annual outflow rate from disability social security
Challenges in 1970’s and 1980’s

• Increasing disability benefit costs
• Move towards knowledge economy
• Advancing global economy / increased competitiveness
• Escalating technology applications
Leadership by companies, governments, unions

- Pilot projects in early intervention / RTW by self-insured employers
- Unique WCB legislation (COMCARE Australia)
- Innovative collective agreement language (Teck/Cominco & USW)
Early results included

- Significantly lowered disability related costs
- Retention of valuable workers in a knowledge economy
- Reduced inflow into social security system
- Building a “workplace culture of accommodation” regardless of impairment causation
Socio-economic achievements through

• Early intervention, case management and causation-specific accommodation strategies
• Reduced claim duration
• Significantly lowered LTD rates
• Reduction in indirect disability-related admin. costs, incl. replacement and training costs
Codification of key success elements

- ILO Job Retention & RTW Strategies Study (1998)
- ILO Code of Practice on Managing Disability in the Workplace (2002)
ILO Job Retention & RTW Strategies Study (1998)

- Nine country study reviewed job retention, disability employment policies, benefit compensation programs, rehab & employment support services, adaptation of work / workplace, enterprise and other developing strategies
- Canada and USA
- Australia and New Zealand
- France, Germany, Netherlands, Sweden, United Kingdom
What is a Disability Management (DM) Program?

Defined by the ILO, a DM program is a program in the workplace designed to facilitate the (re)integration of people with disabilities through a coordinated effort.

Return to Work (RTW) is a process by which an employee is supported in resuming work after an absence due to injury or illness.
DM Programs are grounded in economic and social imperatives

Global business rationale:

• Every 15 seconds – a worker dies from a work-related accident or disease
• Every 15 seconds – 153 workers have a work-related accident
• Every day – 6,300 workers die from a work-related accident or disease – 2.3 million each year
• 317 million occupational accidents each year
• Economic burden – 4% of global GDP
Across Canada

In 2014:

• 239,462 lost-time accidents
• 919 fatal accidents / occupational disease
• Ratio of permanent disabilities to fatalities – 30:1
• Cost of disability related absence – $16.6 billion or 2.4% of gross national payroll
Across Canada

• Mental health related impairments on the rise
• In any given week, at least 500,000 employed Canadians are unable to work due to mental health problems
• Economic burden of mental illness in Canada estimated at $51 billion each year
• Nearly 4,000 Canadians die by suicide each year – an average of almost 11 per day
• Suicide rate for unemployed persons with disabilities approx. 40 times average population
Across Canada

• Approx. 330,000 individuals collecting CPP-D (average benefit / month = $928.08)
• Employment rate for persons with disabilities in the federally regulated sector = 2.7%
• Hiring rate for persons with disabilities in the federally regulated sector = 1.6%
• Terminations during the same time frame = 2.6%
What are the issues around the world?

- Economic / competitive
- Labour market / demographic changes
- Social justice
- Legislative
What can we achieve with effective DM programs?

- Reduce the socio-economic impact of disabling conditions on employers, workers and society
- Increase competitive position of businesses through cost reduction and increased productivity
- Maximize employer attachment for individuals who acquire a disabling condition
- Increase the labour force participation of people with disabilities
What can we achieve with effective DM programs?

Bill C-81 – The Accessible Canada Act
The number one priority identified by people with disabilities was: employment.

From the December 2019 “Disability and Work in Canada” conference in Ottawa:
The Honourable Carla Qualtrough, federal Minister of Employment, Workforce Development and Disability Inclusion, credited DWC for making the link between accommodating injured workers, with which employers are more familiar, and employing persons with disabilities.

“I thought, ‘What a strategically innovative way to get employers comfortable with disability,’ she said. ‘I think we’re going to be able to talk about inclusion and disability and accommodation a little differently now because of the work you’re doing.’”
What can we achieve with effective DM programs?

• Address current labour market issues:
  ➢ increasing mental health issues
  ➢ aging workforce
  ➢ reduced labour force availability
What can be accomplished with DM?

• Reduce disability-related expenditures by 30 – 50%
• Reduce LTD uptake by up to 50%
• Generate a ROI of $10 : $1
• Maintain attachment to pre-disability employer
DM in Context

What major challenges often influence DM success?

• Structural barriers
• Individual circumstances
• Attitudinal and perceptual factors
• Benefit / insurance program design and delivery
• Statutory framework
Universal Key Success Factors

• Injury prevention and safety programs
• Health promotion and wellness programs
• Early intervention, combined with formal RTW programs
• Policies and procedures jointly endorsed by labour and management
• Benefit program design
• Internal and external communications systems
Universal Key Success Factors

- Education
- Transitional work options
- Workplace accommodations
- Identification of key workplace personnel
- Accountability
- Regulation
- Supportive enterprise cultures
Development of Occupational Standards

Essential Skills and Competencies

- Disability management theory and practice
- Legislation and benefit programs
- Labour-management relations
- Communication and problem-solving skills
- Disability case management
- Return to work coordination
- Health, psycho-social, prevention and functional aspects of disability
- Program evaluation
- Ethical and professional conduct
Elements

• Joint worker-management support and empowerment
• Responsibility, accountability and authority
• Workplace culture and policy development
• Information and communication management
• Benefit design and influences
• Knowledge and skills of the DM practitioner
• Accident prevention and safety programs
• Occupational ergonomics
Elements

- Health promotion and wellness
- Injury, disability and lost time patterns
- Disability cost benefit data
- Early intervention and worker communication protocol
- Case management procedures
- Return to work coordination
- Transitional work options
- Workplace accommodations
### Scores at a Glance

<table>
<thead>
<tr>
<th>Element Name</th>
<th>Unit Score</th>
<th>National Industry Average</th>
<th>Global Industry Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Element 1: Joint Worker-Management Support and Empowerment</td>
<td>76.8%</td>
<td>75%</td>
<td>71.8%</td>
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<tr>
<td>Element 2: Responsibility, Accountability and Authority</td>
<td>91.7%</td>
<td>67.7%</td>
<td>59.7%</td>
</tr>
<tr>
<td>Element 3: Workplace Culture and Policy Development</td>
<td>49.2%</td>
<td>51.7%</td>
<td>50.6%</td>
</tr>
<tr>
<td>Element 4: Information and Communication Management</td>
<td>77.9%</td>
<td>54%</td>
<td>60%</td>
</tr>
<tr>
<td>Element 5: Benefit Design and Influences</td>
<td>52.5%</td>
<td>53.1%</td>
<td>58.3%</td>
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<tr>
<td>Element 6: Knowledge and Skills of the Disability Management Practitioner</td>
<td>100%</td>
<td>81.2%</td>
<td>81.9%</td>
</tr>
<tr>
<td>Element 7: Accident Prevention and Safety Programs</td>
<td>89.5%</td>
<td>82%</td>
<td>81.9%</td>
</tr>
<tr>
<td>Element 8: Occupational Ergonomics</td>
<td>84.4%</td>
<td>59.4%</td>
<td>57.3%</td>
</tr>
<tr>
<td>Element 9: Health Promotion and Wellness</td>
<td>50%</td>
<td>56.2%</td>
<td>66.7%</td>
</tr>
<tr>
<td>Element 10: Injury, Disability and Lost Time Patterns</td>
<td>79.2%</td>
<td>64.6%</td>
<td>64.4%</td>
</tr>
<tr>
<td>Element 11: Disability Cost Benefit Data</td>
<td>70.8%</td>
<td>52.6%</td>
<td>50.7%</td>
</tr>
<tr>
<td>Element 12: Early Intervention and Worker Communication Protocol</td>
<td>86.5%</td>
<td>72.1%</td>
<td>68.2%</td>
</tr>
<tr>
<td>Element 13: Case Management Procedures</td>
<td>79.2%</td>
<td>64.6%</td>
<td>66.2%</td>
</tr>
<tr>
<td>Element 14: Return to Work Coordination</td>
<td>76.9%</td>
<td>67.3%</td>
<td>63.7%</td>
</tr>
<tr>
<td>Element 15: Transitional Work Options</td>
<td>86.1%</td>
<td>79.5%</td>
<td>73.6%</td>
</tr>
<tr>
<td>Element 16: Workplace Accommodations</td>
<td>87.5%</td>
<td>70.5%</td>
<td>61.3%</td>
</tr>
<tr>
<td><strong>Final Score</strong></td>
<td>79.9%</td>
<td>68%</td>
<td>65.4%</td>
</tr>
</tbody>
</table>
Business case for a global re-design

Corporate leadership placed emphasis on DM as a strategy to:

• Lessen lost workdays
• Enhance productivity
• Decrease WCB premiums through safety and accident prevention
• Retain experienced workers and their skill sets
• Achieve compliance with Duty to Accommodate legislation for both occupational and non-occupational cases
• Enhance employee satisfaction
New DM strategy incorporated the following:

- Stronger focus on RTW for non-occupational absences
- No distinction between occ. and non-occ. absences for DM/RTW
- Held business units accountable for RTW to reduce the number of productive days lost, while reigning in the spiralling costs of disability

Business case for a global re-design
Business case for a global re-design

Core program goals established:

• Significant decrease in number of employees injured on the job
• Increase in the rate of return to work with fewer lost days
• Improvement in quality of services provided to injured workers
• Reduction in WCB costs
Business case for a global re-design

Adoption of fundamental principles:

• Courage to care for each other at work by lending assistance to employees in RTW
• Treating all employees with dignity and respect
• Providing injured employees access to highest quality standard of care
• Creating a partnership among employees, health service providers and benefit providers with shared commitment to return the injured/ill employee to work
Business case for a global re-design

Adoption of fundamental principles:

• Make reasonable efforts to provide suitable available employment to an employee who is unable to return to normal duties

• Develop RTW programs at each business unit with goal of returning employees absent due to occ. or non-occ. illness or injury to meaningful and productive work, in a safe and timely manner

• Hold managers responsible for upholding these DM principles
Business case for a global re-design

Adoption of fundamental principles:

• DM/RTW processes to be as transparent as possible

• Each employee empowered to play an important role in ensuring safe operations, preventing illness, injury and disability, and being part of RTW solutions and required accommodations
Business case for a global re-design

Re-design key principles:

• One-company approach focusing on best practices across organizational boundaries
• Clear linkage with safety – company’s #1 priority
• Standardized DM process with clearly defined responsibilities
• Clearly defined, unit-based, RTW program
• End-to-end DM process for all units across North America
• Single point of DM/RTW contact for all employees/managers
• Process to manage LTD cases when RTW not possible
• Improve management/interface with third-party vendors
• Improve tracking/reporting system to measure cost/performance
Outcomes established:

• Improve productive relationship with ill, injured and disabled employees

• Achieve 25% reduction in lost productive workdays due to illness or injury

• Reduce litigation arising from disability cases (in the U.S.)

• Achieve an overall cost reduction of 25%
Business case for a global re-design

Centre of Excellence established:

• The DM Centre of Excellence brought together core group of HR specialists working in DM to be the focal point for all DM processes and transactions

• This core group answered questions, kept track of everyone off work and for how long, helped to minimize frustrations, and reduced the processing time for STD and LTD benefits
Results:

- Reduction in number of productive days lost by 12,000 days
- 47% reduction in duration of claims and 39% reduction in cost of claims – represented $4.8 million decrease in WCB claim costs

Business case for a global re-design
The EDMP was jointly developed in the health care sector in BC between employers/unions and providers for joint program governance, sets out regular reviews and monitoring of individuals and is intended to provide a more seamless process for employees returning to work or requiring support from the Long Term Disability (LTD) Plan.

The EDMP is part of the collective agreement and provides pro-active support to help employees’ timeline and safe recovery when they are absent from work or struggling at work due to an illness of injury.

The EDMP applies across the whole health care sector in BC involving over 200 employers, 4 unions and covers over 150,000 workers.
Enhanced Disability Management Program (EDMP)

The following is from the BCNU website:
The EDMP is a pro-active, customized disability management program. It is designed to support members suffering from an occupational or non-occupational illness or injury. EDMP participants will have a holistic case management plan that may include medical intervention, transitional work, a graduated return to work, workplace modifications and vocational rehabilitation or training.

It is designed to help you when you are absent from work, or struggling at work due to an occupational or non-occupational illness or injury. This may include medical, personal, workplace and/or vocational issues.
The EDMP focuses on your quick and safe recovery with a proactive and customized disability management program that helps you to either stay at work or successfully return to work. Participation is required for all full-time and part-time employees covered by the facilities subsector collective agreement who have:

• missed one shift due to workplace illness or injury, or
• missed five consecutive shifts due to a non work-related illness or injury
The EDMP involves support from a Disability Management Professional and the union’s EDMP representative. The employee’s customized plan may include:

- Support and services to address medical, personal, workplace and vocational barriers;
- Quicker access to medical and rehabilitation services;
- Access to diagnostic services or treatments not covered by MSP or extended health plans;
- Return to work options: temporary assignments, flexible work, duty modifications, or alternate/sedentary work.
Resources

NIDMAR – www.nidmar.ca

PCU-WHS – www.pcu-whs.ca

ILO Code of Practice on managing disability in the workplace

ISSA Guidelines: Return to Work and Reintegration –
https://ww1.issa.int/guidelines/rtw

The Accessible Canada Act (Bill C-81)