

# Return to work following the Covid-19 lockdown

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- SOM RTW toolkit is primarily for health professionals
- VRA toolkit is primarily for rehabilitation case managers
- BPS guidance paper considers psychological needs for people recovering from Covid-19
  - *respective websites listed on last slide* -

Rather than simply reproducing that guidance here, we want to look a little bit deeper, a little bit wider, and a little bit beyond

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- \* **Some scene setting**
- \* **Some biopsychosocial principles**
- \* **Some practical application**

- Key principles around return to work
- The role of the workplace
- Good jobs
- Supportive workplaces
- Making it happen

# Post-lockdown context

- Supporting people back to work is not just about the economy - there are substantial personal and social benefits.
- But the benefits come from *good* jobs, jobs that are safe and acceptable.
- Covid-19 is going to reshape the nature of work – many workplaces will look and feel different
- To maintain work ability as well as safety, we must ensure the altered jobs are *good* jobs



# It's more than RTW

- Some have continued working
  - usual job/workplace
    - e.g. refuse collection
  - altered job/workplace
    - e.g. WFH
- Some have a job, just not working right now (furloughed)
- Some have lost their job
- Different contexts → different challenges

- For those WFH, the challenge is *return to the **workplace***
- For those who have been not-working - the challenge is *returning to **work***
- For those who have continued working – the challenge is ***increased struggling***
- Helping millions return to work is certainly important
- Actually, helping people stay in work under strange circumstances is just as important

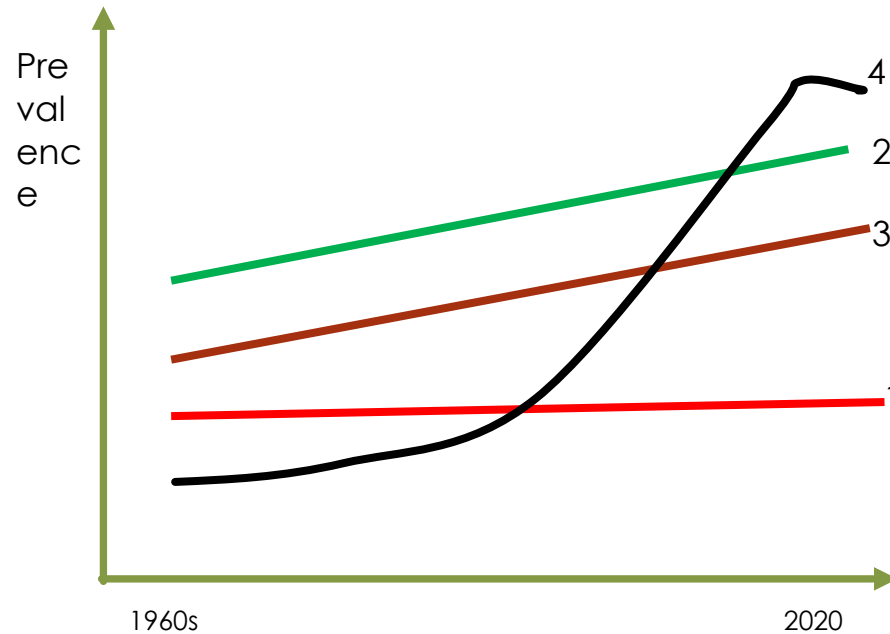
# Differing actions

- New circumstances → new needs
- Return to **Workplace** requires actions to support groups of workers.
- Return to **Work** involves actions to support individual workers.
- Then, there's **Stay at Work**
  - that's about more than safety
- Achieving sustained RTW - **maintaining work ability** - will be challenging
- Needs smart OH support.

# Smart OH Support

- Usual OH activities: risk assessments; fitness for work; filing reports
  - necessary but not sufficient
- Smart OH support
  - flexible; imaginative; responsive; adaptive
  - address new and existing employee needs in changing environments
    - controlling infection risk alongside supporting physical and mental health
- Effective OH Support requires close communication with, and actions by, management and HR.
- Workers without professional OH Support must rely on their line managers having the right understanding, skills, and tools.
- Both scenarios share some common principles.

# Prevailing paradox



- 1. Static prevalence MSK/MH
- 2. More clinical guidelines
- 3. More workplace regulation
- 4. Yet, work **disability** increased!

- What we've been doing simply hasn't worked

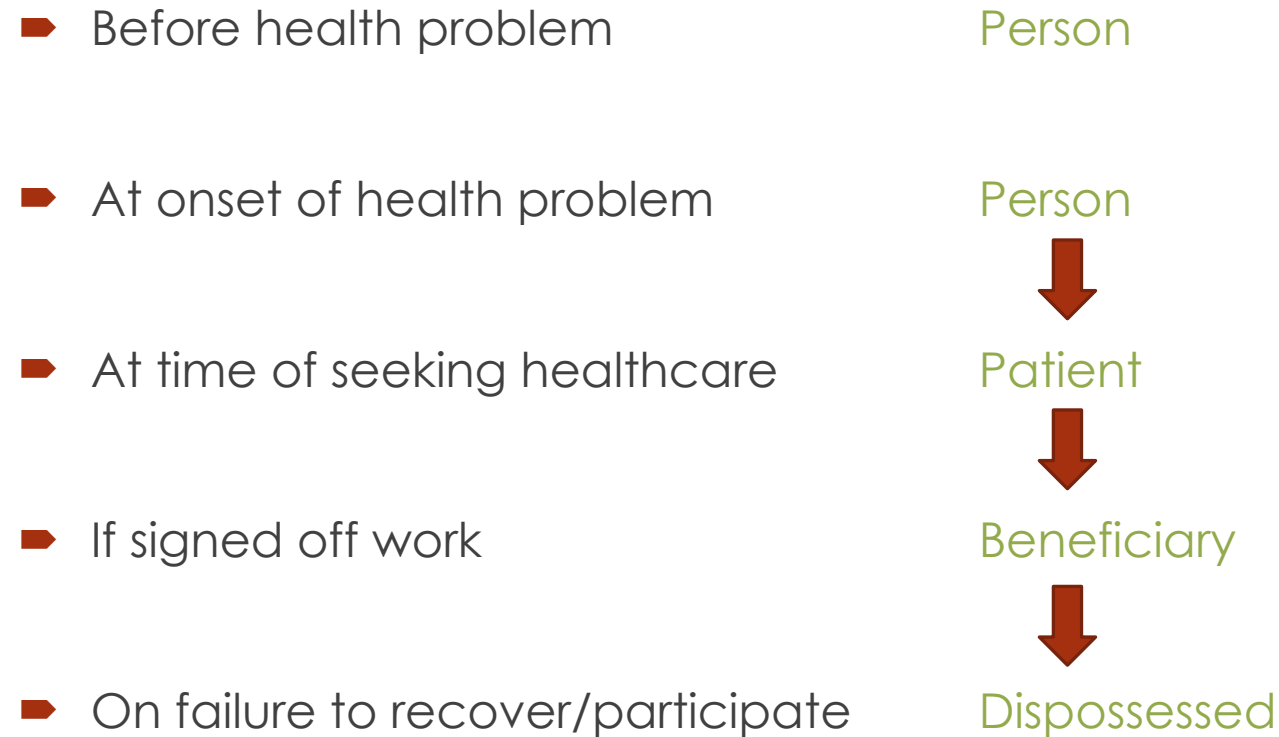
# Common health problems and avoidable work disability

- Most absence and work disability starts with a common health problem
  - Musculoskeletal conditions
  - Common mental health problems
- No reason to think this will change under Covid-19!
- Essentially typical people, with a manageable health problem
  - *given support, opportunities, and encouragement*
- Thus, much work disability should be avoidable.....

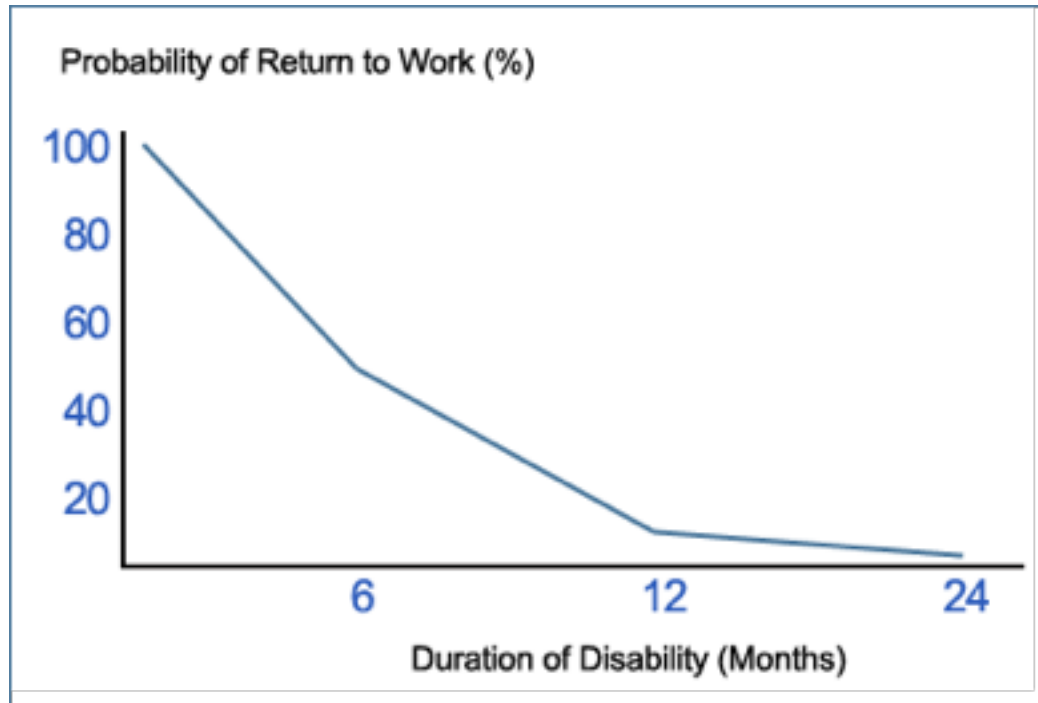


## The slide to disaster

social constructs + separated systems → obstacles to recovery



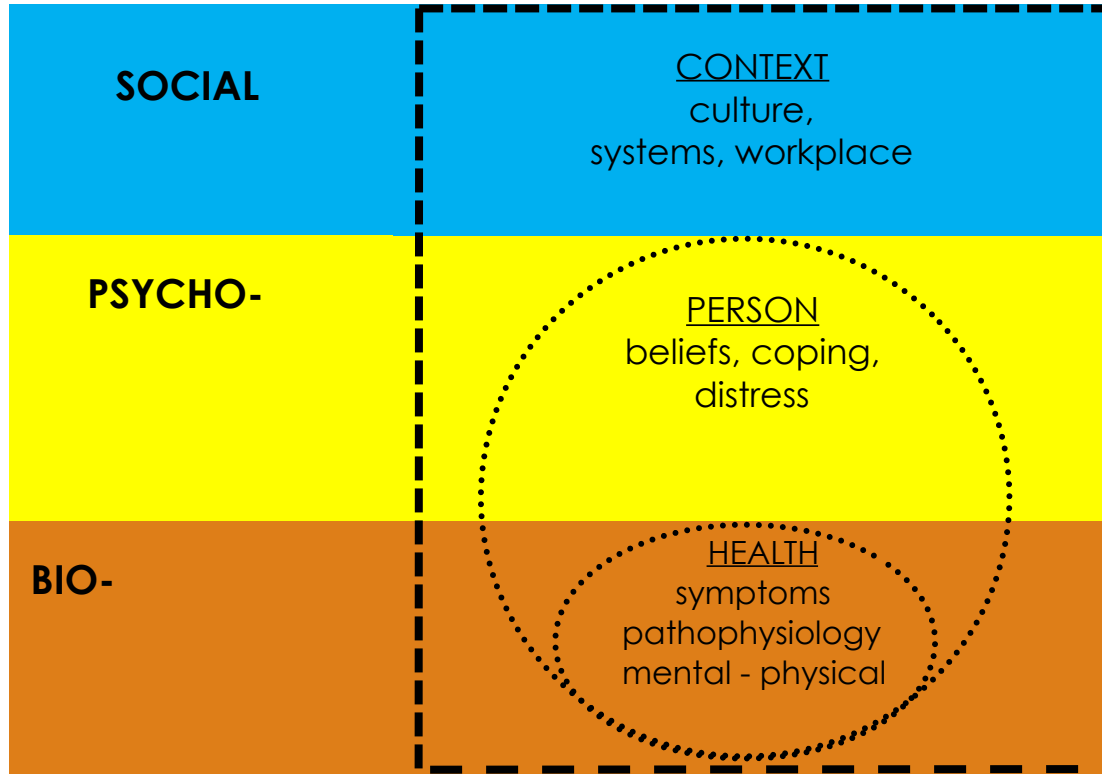
The longer away from work, the more work ability declines - work disability becomes unavoidable



# Why do some people struggle to maintain work ability?

- They do not have a more serious health condition or more severe injury
    - So, it's not about what has happened to them; rather its about why they don't recover as expected
  - It's because they face **obstacles** to recovery and to participation
- biopsychosocial approach

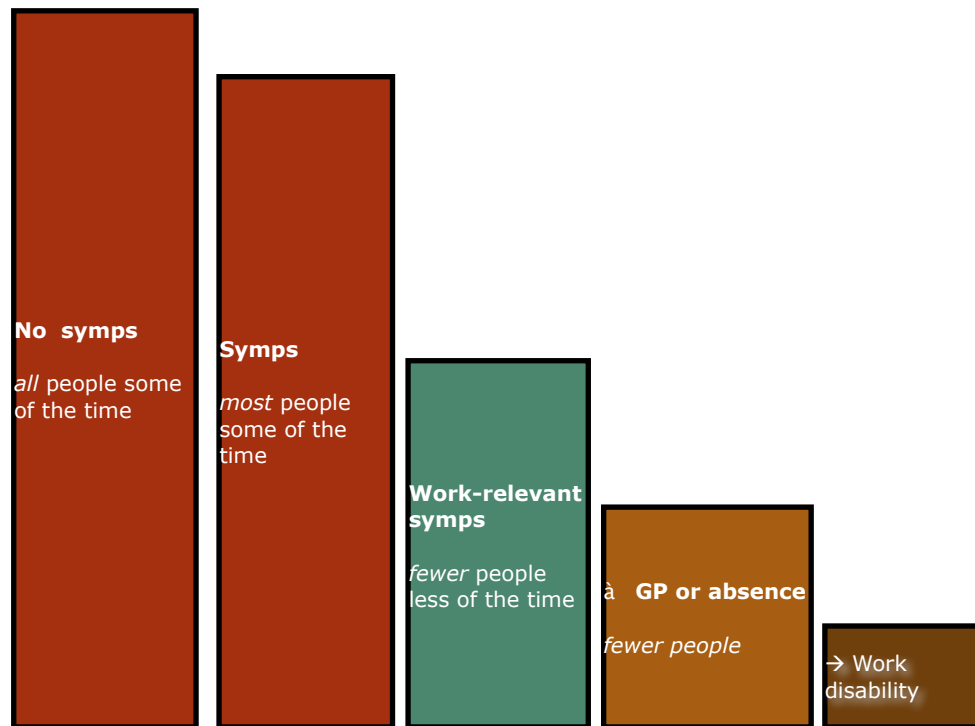
# Biopsychosocial model of disability



- The way illness or injury affects us and how we respond depends on who we are, the work we are doing, and the culture we live in
- A framework for understanding obstacles and their relationship with work participation
- Identifying and tackling obstacles → work ability



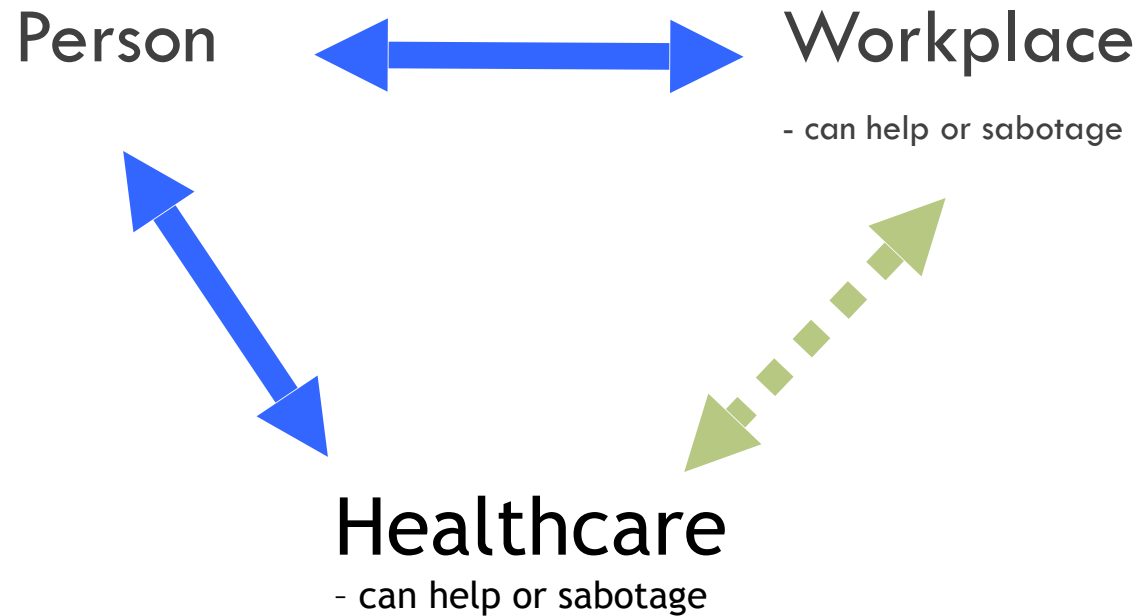
# Epidemiology + concept of work-relevant symptoms



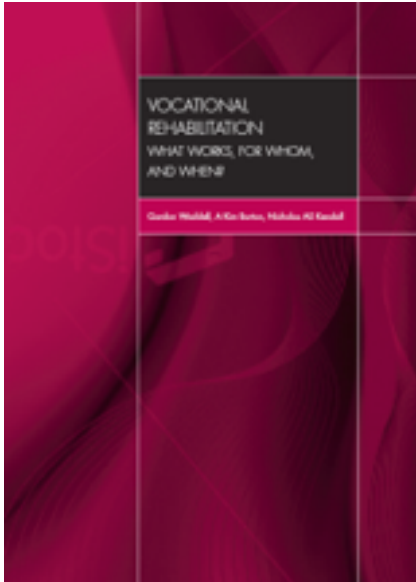
- People with certain job demands may not notice symptoms at work
  - not work-relevant
- People with another set of job demands may struggle
  - **Work-relevant symptoms**
    - Usual work is temporarily difficult or impossible
- Work-relevance is about this person, in this job, with these symptoms, at this time
- Need accommodation
  - (temporary) job modification
  - ➔ recovery while working

# Who's involved at health ↔ work interface

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# Integrated approach



G Waddell, K Burton, N Kendall, 2008  
[www.tsoshop.co.uk](http://www.tsoshop.co.uk)

- RTW and SAW don't just happen – action needed!
  - Healthcare alone is not enough
  - Workplace *must* be involved
- **Integrated approach**
  - **Work-focused healthcare**
  - +
  - **Supportive workplace**
  - both are necessary
  - from day #1 of absence (or before...)

# Supportive workplace

- The logic:
- Worker reports work-relevant symptoms
  - Proportional stepped approach – dependent on extent of struggling
    - Watchful waiting
    - Assess work ability – identify psychosocial obstacles to working
    - Agree a plan of action
    - Temporary job alteration
      - eliminate the troublesome elements/tasks/people
      - risk assess?
    - Refer for medical opinion/OH
- If absence
  - Agree *Return to Work Plan*
  - Implement RTW Plan
    - Change job



# Scale of need and professional resources don't match

- So, we have:
  - Existing workers; returning workers; ?new workers
  - Workers with existing health problems
  - Workers with new health problems
  - Workers with post Covid-19 difficulties
    - some will need rehab
- Much like normal.....just with a few more issues!
  - Reduced healthcare (GP, dental, optical; physio...)
- All are going to need support to maintain work ability: RTW *and* SAW
- Some have OH and VR support
  - Half do not!
- Even with professional OH and VR, workplace input is needed
- Line managers
  - We *really* need them!

# What do we need line managers to do?

- Use a biopsychosocial approach
- Recognise when a colleague is struggling to cope with symptoms or injury
- Respond to anyone who reports symptoms or is off work
- Evaluate someone's work ability (how they feel they are coping with work and health)
- Identify any obstacles to RTW or SAW
- Manage workplace obstacles
- Arrange reasonable temporary job modifications
- Help people build up gradually to usual job

# The line manager's predicament

- Line managers are key players
  - Uncertain
    - about health (incl. Covid-19)
    - about what is safe
    - about the law
    - about what they can do
    - about what the fit note means
- Bereft of confidence and knowledge
  - Need help

# Line manager support

- Managers need the *right* knowledge and tools if we are to expect them to act effectively
  - Often, mixed messages prevail
- Fortunately, evidence-based information does exist to align beliefs, understanding, and actions →
- Additional support online



# The Health ↔ Work Toolbox



- Project developed *principles* as well as tools
- Brings together the two key issues in health and work:
  - Good jobs
  - Supportive workplace
- Biopsychosocial approach

Toolbox is a web-based hub - empower workplace to tackle avoidable work disability



*Matrix of info and tools*

Knowledge

→ baseline understanding

Good jobs

→ comfortable/agreeable

Supportive workplaces

→ accommodation

*Layered content*

→ SMEs + corporate

→ supports OH and VR as well as LMs

Accessible - doesn't look like official 'guidance'

# Transfers knowledge

## Knowledge

- essential component

- Workplace needs confidence to deal with health problems
  - a health problem is not always a medical issue
- Knowledge about work and health
  - understanding → confidence
- Advice and myth busting info
- Signposting and tools

# Conveys principles

## Good jobs

- aspirational goal

- Satisfaction
  - agreeable – acceptable
- Question of balance
  - reasonable demands and conditions
- Supportive management
  - skills development
- Opportunities for social interaction

## Supportive workplace

- working while recovering

- Take *early* action
  - recognise struggling workers
  - early detection of absent workers
- Identify obstacles to work ability
  - person; workplace; context
- Agree a plan to overcome obstacles
  - job modifications



# Provides tools

## The Health<-->Work Culture Tool

Consists of a few simple questions. To get the best out of this, answer as honestly as you can.

## Becoming Committed to Work<-->Health Culture

*Workplace culture is 'the way things are done around here'.*

## Health<-->Work Questionnaire

Find out if you, your workers, line managers, and senior managers have got the health & work message

## Tackling Common Health Problems - Quick Guide for Line Managers

Muscle and joint problems, stress, anxiety, depression

Helping your workers stay active and working

You – the employer, line manager, or supervisor – have an important role to play: use this guide to help you help your colleagues

## Developing a Return to Work Plan

Effective Return to Work Plans:

- Based on a [Return to Work policy](#) - in an environment where supporting early return to work is part of normal workplace practice
- Involve [temporary modifications](#) to duties and job tasks - for any work-relevant problem irrespective of where it began
- Include workers who are [able to work](#) only part-time - then build up to full-time as they recover

Closely related sections: [Developing an Action Plan](#) [Developing a Stay at Work Plan](#) [Graduated Approaches to Work and Activity](#)

## Advice and Facts for Workers with Common Health Problems

Muscle and joint problems, stress, anxiety, depression

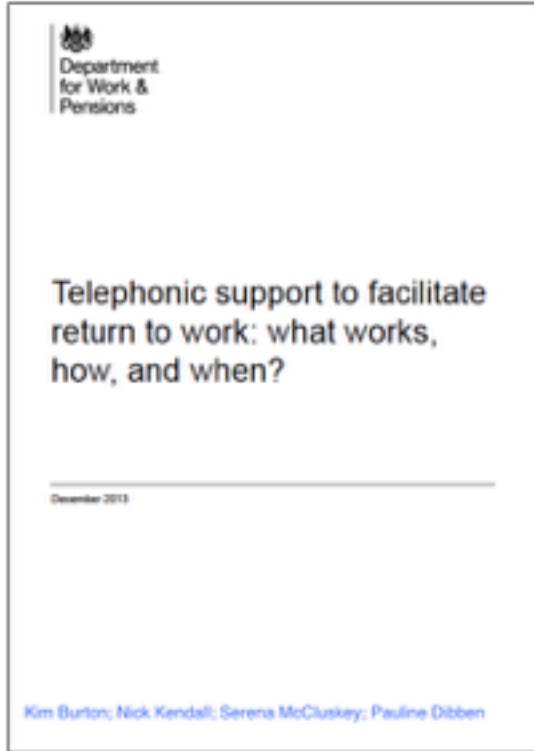
Helping you stay active and working

## Quickly and Easily Evaluate Someone's Work Ability

# ACCESS

- The Health ↔ Work Toolbox is currently hosted by University of Huddersfield
- [www.healthworktoolbox.com](http://www.healthworktoolbox.com)
- Password =
  - goodwork2020
- A work in progress - let us know what you think

# Remote OH case management



*Hanging on the telephone*

- Evidence-base is robust:
  - saves time, money, resources
  - assess needs and help decisions;
  - deliver information and advice;
  - support and coordinate care;
  - facilitate early RTW
- *IF* delivered competently to the right conceptual framework

# Principles and Process

## ➤ PRINCIPLES

- Work is an important health outcome
- Physical and mental symptoms common
- Treatment not always needed
- Most people can stay at work
- Some will struggle with work tasks or environment
  - absence appropriate if work intolerable
- Early return to work beneficial
  - avoids disability

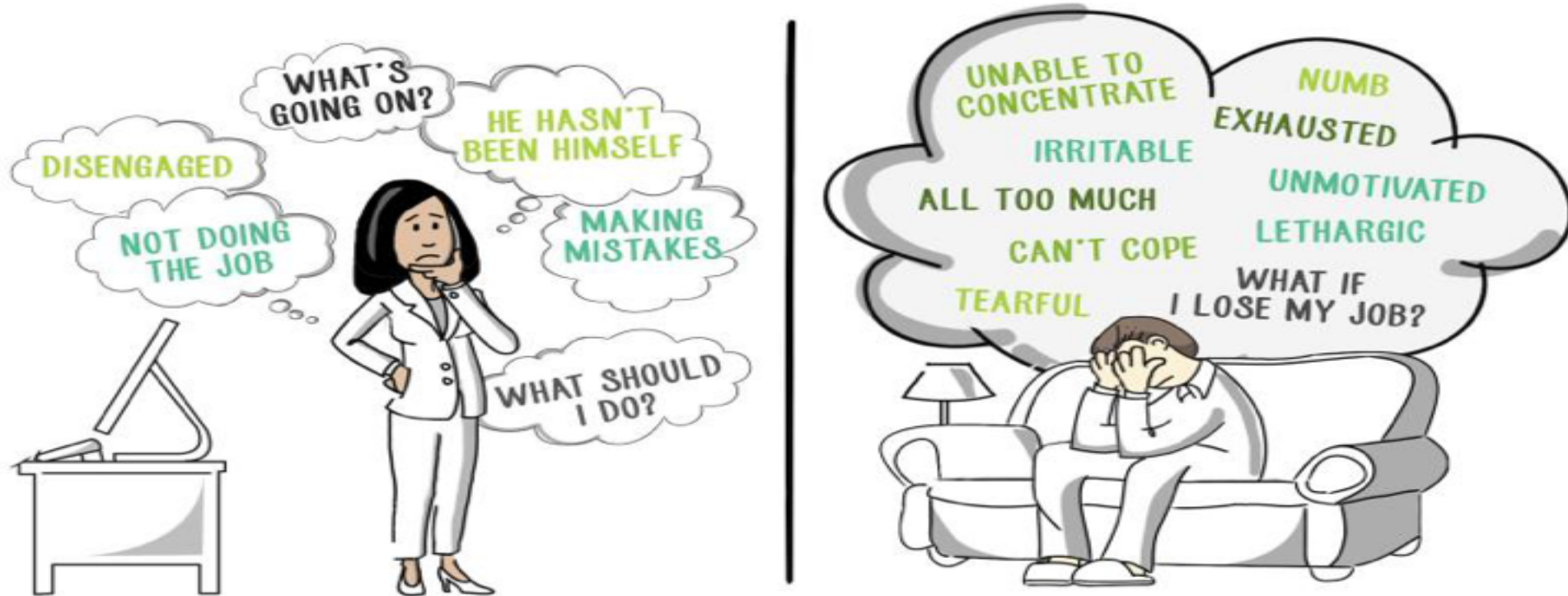
## ➤ PROCESS

- Accurate consistent information/ advice
- Good jobs
- Use stepped care principles
- Work focused healthcare
  - don't overmedicalize
- Workplace action
  - identify obstacles to work ability
  - RTW Plan- single most effective element
  - *temporary* job modifications
- High fidelity to the principles is **crucial**
  - competent providers
  - coordination between workplace, healthcare and society

# We really don't want more mixed messages!

- Getting the evidence across is always a challenge
- The guidance from SOM, VRA, BPS is a great start – now we just need to get....
  - All players onside:
  - Believing the same things, having shared goals, acting together

Dr Jo Yarker  
Affinity Health at Work and Birkbeck,  
University of London



# Return to work implications for people who have had covid-19

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- Diverse impact: Asymptomatic - mild - moderate - acute
- Guidance suggests employees:
  - Can return 7 days after onset of symptoms, if symptoms have gone or only cough or changes to sense of smell or taste remain.
  - Must keep self isolating if any other symptoms such as high temperature, runny nose, vomiting or diarrhoea until symptoms settled.
- Post viral symptoms and impact
  - Fatigue - extreme exhaustion
  - Psychological - fear of the how the virus will progress, hospitalization, ICU
  - Musculoskeletal
- Work adjustments and ongoing support may be needed

# Return to work implications for people who are experiencing stress or mental ill-health

- Pre-covid-19
  - 1 in 4 workers are affected by stress, depression or anxiety
  - 1 in 3 fit notes cite mental ill-health
  - 74% people have felt so stressed they have been overwhelmed at work
- Estimates suggest that there has been a significant increase
  - Fear of coronavirus infection
  - Fear of changed workplace and ways of working
  - Toll of lockdown, isolation, bereavement, furlough, redundancy, childcare, work from home....
- **8%** of managers reported that they had received training on adjustments and rehabilitation (BITC, 2019)

# What work adjustments are used and effective?

Type of adjustment	Examples
Work schedule	Breaks, Leave for appointments, Flexible hours
Role and responsibilities	Review workload, Temp change in duties
Work environment	Home working, relocation of desk, light box
Policy changes	E.g. additional leave
Additional support and assistance	Buddy or mentor, Modified supervision, additional training on skills and duties
Redeployment	To different role, department, location

**We need a better understanding of the impact of work adjustments on return to work and workability outcomes.**

**We know what people use, what they prefer but longitudinal research will help us make better decisions.**

**Need for practitioner-led research**



# Barriers and facilitators

- **Multicomponent** interventions appear to be more successful - work adjustment with therapeutic/ CBT
- Encouraging **disclosure** is important
- **Supervisor support** is important
- **Co-worker support** is important - interestingly, co-workers see flexible hours and time off for counselling as more acceptable than more frequent breaks
- **HR/ Employers focus on work aspects** (e.g. job modifications) while **employees focus on the relational aspects** (support, good relationship)
- **Multi-component interventions** appeared most effective

# Introduction to the Igloo model for sustainable return to work

Collaboration with Professor Karina Nielsen,  
University of Sheffield



# Our findings

## Individual

Beliefs about willingness to support adjustments and relapse, role of job crafting and proactive behaviours

## Group

Support for the returner, good relationships

## Line manager

Good relationship, available and listens, Access to other support, continued support and adjustments

## Organisation

Wellbeing services, CBT

## Outside context

Nielsen, K., Yarker, J., Munir, F., & Bültmann, U. (2018). IGLOO: An integrated framework for sustainable return to work in workers with common mental disorders. *Work & Stress*, 32(4), 400-417.

# Implications for wellbeing and productivity

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We need a whole systems approach to consider resources at all IGL00 levels at home and and work

- I Encourage the **returning employee** to consider their resources and needs
- G Consider how the **team/ colleagues** can support
- L Equip the **managers** with knowledge, skills and confidence
- O **Prevention, compassionate policies and embedded practices**

And do so in a flexible, individualised way, for the long term.

# your IGL00

staying mentally healthy at work  
during the Covid-19 outbreak

individual

leader

group

organisation

## How strong is your IGL00?

Use the checklist here to test the strength of your IGL00 and help you to build a strong IGL00.

1. Look at the checklist. Read the statements in the 'Do I...' column. Think about whether you would answer 'yes', 'no' or 'sometimes'. Mark your answer in the column.
2. Use the checklist here to test the strength of your IGL00. If you answer yes to these questions, you have a strong IGL00. If you answer 'sometimes' or 'no' think about whether this would be helpful to you.
3. What else do you need/need to do? If you answer 'sometimes' or 'no' what needs to happen to make this part of your IGL00 stronger? It may be something you need to do, you need someone else to do, or you need to ask for.
4. How do you make this happen? Think about what you can do to make this happen. If you need someone else to do something, how can you ask them to do it? Need help and advice? Ask friends and family, colleagues, your line manager, GP, Human Resources, Occupational Health, charities/support groups, union reps

## Remember...

For many people, working during the Covid-19 outbreak is not easy, but having support can make a huge difference.

If you are finding it difficult, ask a trusted colleague or friend to help you work through the questions and identify some concrete actions that you, or they, can take to help you build your IGL00.

Resources	Location	Do I...?	Do I... Yes, No, Sometimes	I need to... If you answered 'sometimes' or 'no', what else would be helpful?	I can make this happen by... Need help and advice? Ask friends and family, colleagues, your line manager, GP, Human Resources, Occupational Health, charity/support groups, union reps.
Individual	Work	Create structure in the working day - e.g. divide up tasks into smaller components? Identify work priorities - what must be done today, what can wait?			
	Home	Prioritise self-care? Keep clear boundaries between work and leisure?			
Group	Work	Get feedback on tasks to build confidence? Get help when doing challenging tasks? Maintain social and informal contact with my team?			
	Home				
Leader	Work	Have the necessary equipment to do my job safely? Know what is demanded of me from my work e.g. workload, priorities of job tasks? Have control over the way the work is done? Have emotional and practical support? Have positive working relationships in the team? Know what the organisation's response to Covid-19 is? Have access to work adjustments where appropriate e.g. working hours, review of job tasks? Have access to my line manager if I need them? Have an opportunity to control what my colleagues know about my personal situation?			
	Home				
Organisation	Work	Work in a safe environment? Know what the policies are for flexible working? Know if our organisation provides work-focused counselling, and if so, do I know I can access it? Work in an organisation where mental health and physical health are prioritised?			
	Home				

# Supporting Good Work Practices

**Dr Roxane Gervais**, CPsychol CSci AFBPsS  
Researcher, Practitioner and Consultant  
Practical Psychology Consultancy Ltd

# **BPS Division of Occupational Psychology**

- Occupational Psychology is the applied science of people at work.
- The Division of Occupational Psychology (DOP) is part of the British Psychological Society (BPS).
- We aim to develop and promote occupational psychology for the public good, and we represent the interests of occupational psychologists in the UK.
- Occupational psychologists are regulated by the Health and Care Professions Council, and the title of Chartered Psychologist is the gold standard in our profession.
- For more information or to find an occupational psychologist, visit [www.bps.org.uk](http://www.bps.org.uk).





# This Session

- Explores workers' mental well-being and some of the ways that organisations can support them in the return to work process. It will cover:
  - Current experience of feeling overwhelmed vs mental ill health
  - Maintaining work ability and the importance of healthy work environments
  - Supporting workers returning to work following the lockdown: Risk assessment and the management standards approach



**Feeling overwhelmed**

## Why do we feel overwhelmed?

- Cannot control what is happening in our life
- Challenges in balancing the work-life interface
- Unable to cope with different situations
- Feeling completely helpless
- Not seeing a way forward



# Possible reactions

- Feeling numb, agitated or shocked
- Withdrawing from interacting with work colleagues, family and friends
- Suicidal thoughts
- May self-harm



# Consider...

- Talking to someone: Trusted friend or relative, General Practitioner (GP), Listening helpline (voluntary support organisations), Employee Assistance Programme (EAP), Emergency Department
- Taking it one day at a time – slow down
- Assessing if your distress is a sign to change some part of your life



# Consider...Making a Safety Plan

- Could include
  - Those activities that you enjoy: go for a walk; listen to music that makes you feel happy; look after a pet; do something to help someone else – know we have a purpose in life
  - The names of supportive family and friends
  - A reminder of the people and things you love
  - How to access professional support
  - How to access voluntary support organisations
  - Things to do if your suicidal thoughts are getting stronger or you can't ignore them.
- Keep the Safety Plan in a safe place. Easy for you or someone you care about, to access it.

**Mental ill health**



# Mental disorders

- ...comprise a broad range of problems, with different symptoms
- Generally characterised by some combination of abnormal thoughts, emotions, behaviour and relationships with others
- Includes: schizophrenia, depression, intellectual disabilities and disorders due to drug abuse.
- **Most of these disorders can be successfully treated.**



# Mental health

- ...is a state of well-being in which an individual realises his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community
- ...is fundamental to our collective and individual ability as humans to think, emote, interact with each other, earn a living and enjoy life. **On this basis, the promotion, protection and restoration of mental health can be regarded as a vital concern of individuals, communities and societies throughout the world.'**



# Work-related mental ill health

- Work-related stress
- Work-related anxiety
- Work-related depression
  - May include Work-related fatigue
- **Causes:**
  - Stressful work conditions
  - A negative working environment
  - Poor or ineffective policies, practices and procedures
    - Low autonomy or control, poor support etc.
    - Management Standards

**2018/2019 - 602,000** workers suffered from work-related stress, depression or anxiety (new or long-standing).

- Prevalence rate of 1,800 per 100,000 workers.



# So, how to address?

- Focus on two areas of support
  - Work Ability
  - Healthy Work Environment

# Maintaining Work Ability

# What is Work Ability?

- ...the balance between the characteristics and demands of work; and the health, capacities, competencies, values, attitudes, and motivation of the worker.



# Why is work ability important?

- Work ability allows individuals to understand their own capabilities, and their resources
- Allows organisations and workers to understand what workers can do and how best they can contribute to the workplace
- Should be part of a structured process to ensure workers have the resources they need to work.
  - What can you do?
  - How well can you do it?
  - What do you need to do it?
  - How can I support you to do it?



# Supporting Work Ability

- A good fit between work characteristics and the worker's resources = High levels of work ability
- Work Ability takes account of:
  - Work environment
  - Work (Mental) demands
  - Mental resources
  - Leadership
  - Negative and positive spillover effects from home to work and vice versa
  - Health
    - Healthy lifestyles, interests outside of work
  - Competence

# The Work Ability Index (WAI)

- Work Ability can be measured using the Work Ability Index (WAI)
- Research shows the WAI to strongly indicate the likelihood of sickness absence from work, work disability, and early retirement from the labor market.

# Healthy Work Environments

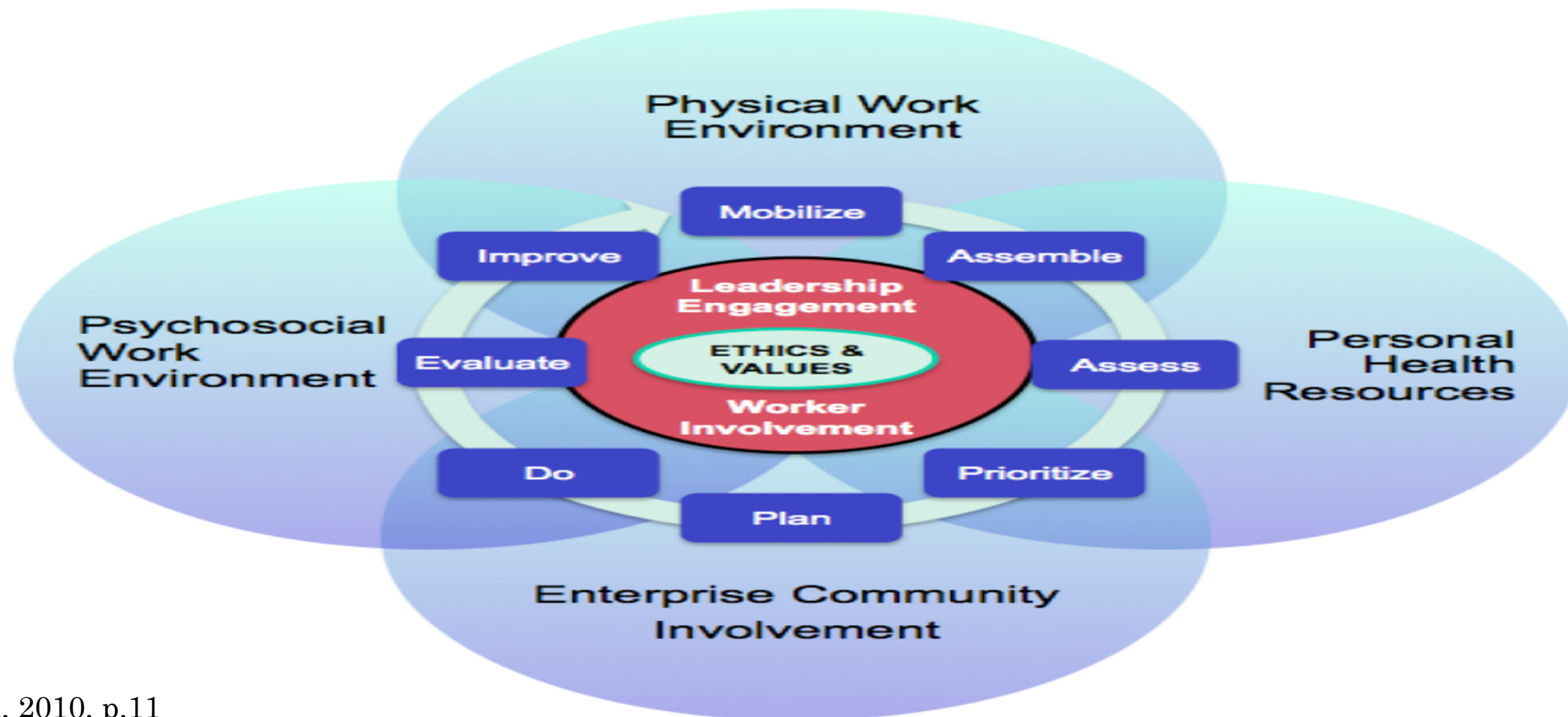
## Why?

- Business ethics
- Business case
- Legal requirement
- Should focus on primary prevention
- Worker participation in decision-making
- Psychological safety
- Leadership engagement based on core values
- Supportive culture - trust, honesty, fairness

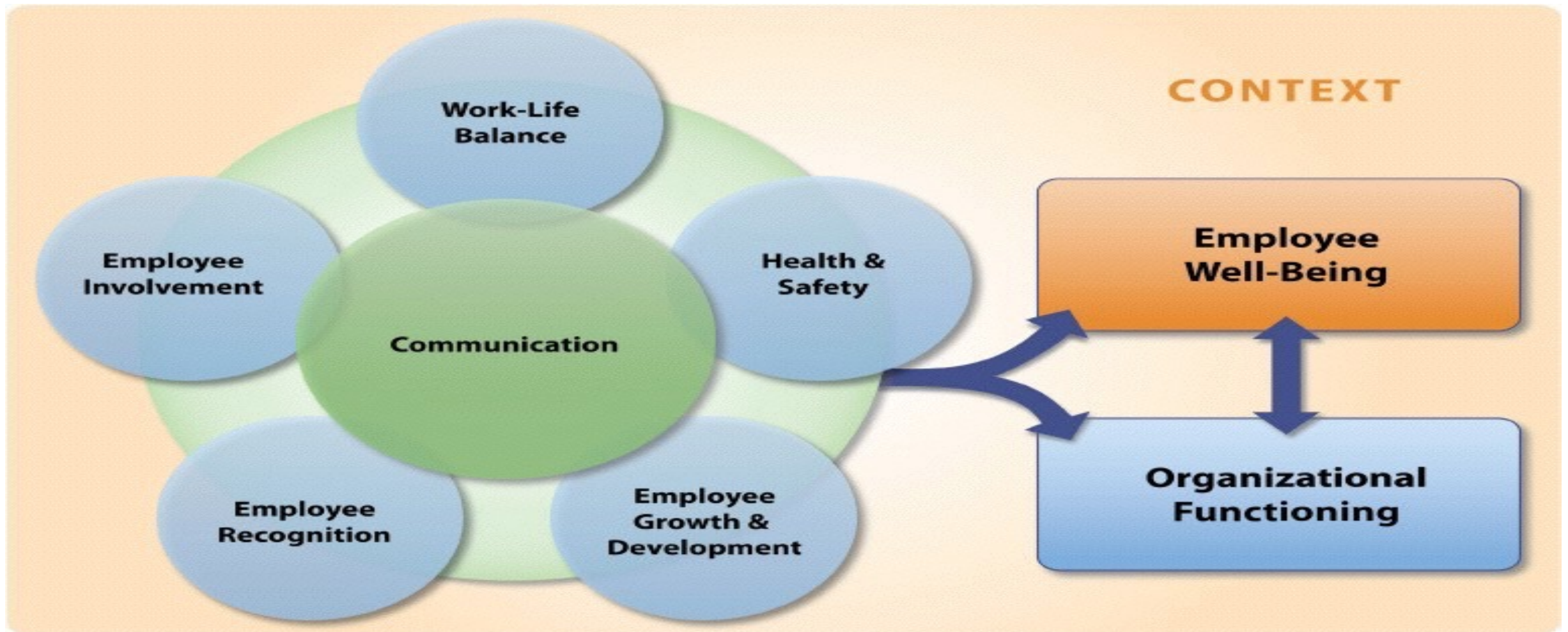




# Healthy Workplace Framework and Model



# The psychologically healthy workplace





# Assessing risks

- identify what could cause injury or illness in your business (hazards)
- decide how likely it is that someone could be harmed and how seriously (the risk)
- take action to eliminate the hazard, or if this isn't possible, control the risk



# Why assess risks?

- To prevent occupational risks
  - Eliminate or mitigate
    - As low as reasonably practicable
- To provide information to workers
- To provide training to workers
- To provide the organisation with the process to implement the necessary measures



# The HSE's Management Standards Approach

- Three elements:
  - ✓ the MS approach (the model)
  - ✓ the Indicator Tool (the instrument)  
and
  - ✓ the Management Standards (the six identified work characteristics)



# Risk Assessment

- The Implementation of the Management Standards is a Risk Assessment.
- The probability of suffering from work-related stress is the risk.
- The Management Standards are the potential hazards.



# The Management Standards

- **Demands:** e.g. workload, work patterns and the work environment
- **Control:** how much say the person has in the way they do their work
- **Support:** e.g. encouragement, sponsorship and resources provided by the organisation, line management and colleagues
- **Relationships:** e.g. promoting positive working to avoid conflict and dealing with unacceptable behaviour
- **Role:** workers understand their role within the organisation and the organisation ensures that workers do not have conflicting roles
- **Change:** how organisational change (large or small) is managed and communicated in the organisation

# Demands

## **The standard is that:**

- Employees indicate that they are able to cope with the demands of their jobs; and
- Systems are in place locally to respond to any individual concerns.

## **States to be achieved are:**

- The organisation provides employees with adequate and achievable demands in relation to the agreed hours of work;
- People's skills and abilities are matched to the job demands;
- Jobs are designed to be within the capabilities of employees; and
- Employees' concerns about their work environment are addressed.



# Change

## **The standard is that:**

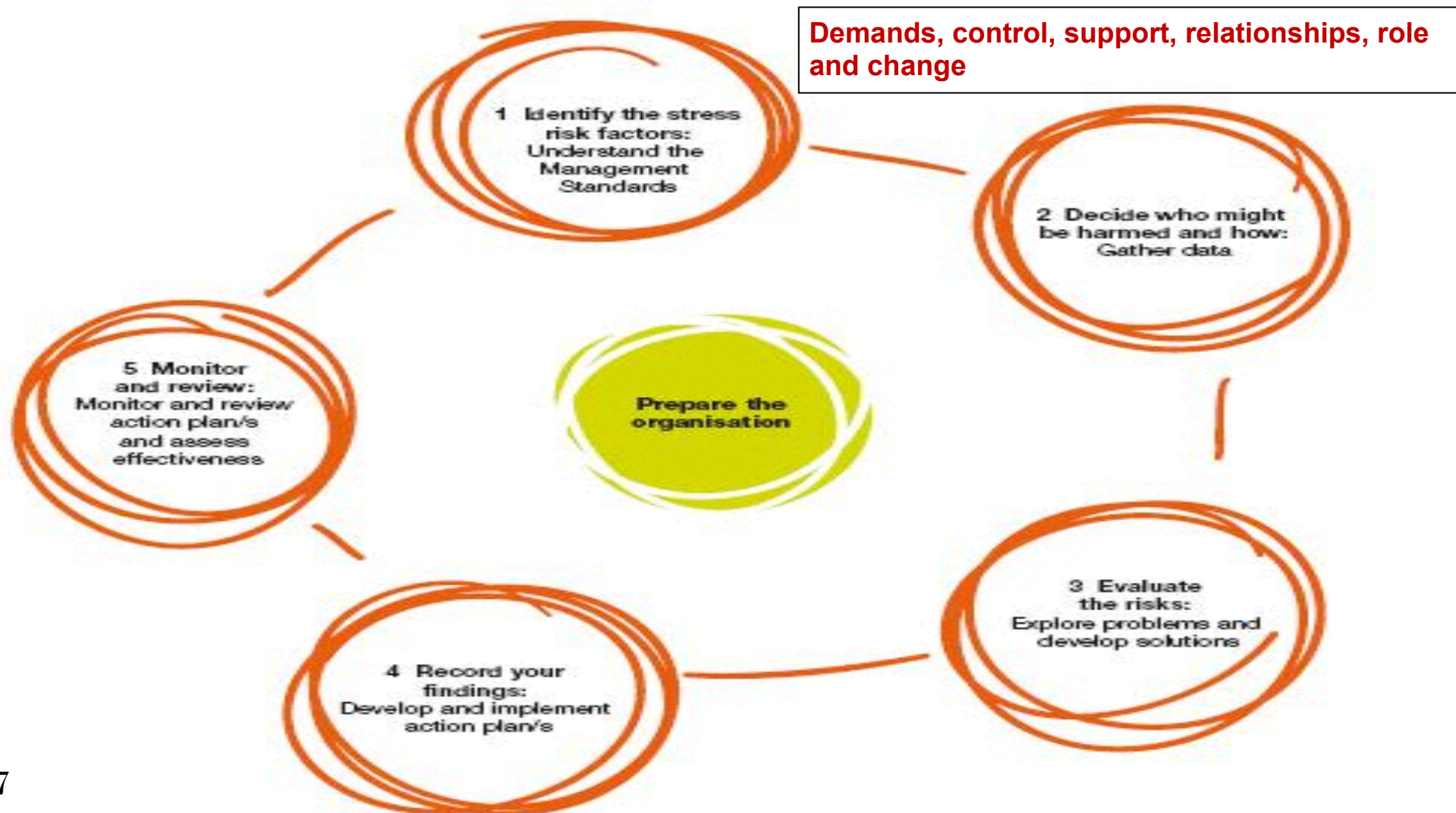
- Employees indicate that the organisation engages them frequently when undergoing an organisational change, and
- systems are in place locally to respond to any individual concerns.

## **States to be achieved are:**

- The organisation provides employees with timely information to enable them to understand the reasons for proposed changes;
- The organisation ensures adequate employee consultation on changes and provides opportunities for employees to influence proposals;
- Employees are aware of the probable impact of any changes to their jobs. If necessary, employees are given training to support any changes in their jobs;
- employees are aware of timetables for changes; and
- employees have access to relevant support during changes.



# The Management Standards Approach





# Stressor versus Reaction

- |                      |   |
|----------------------|---|
| ➤ Excessive demands  | ➤ Assess what is feasible and what is not.  |
| ➤ Low control        | ➤ What can you control? Focus on what is meaningful in your job   |
| ➤ Poor relationships | ➤ Build personal networks in and out of work, while keeping a professional attitude towards those challenging relationships |



# Stressor versus Reaction

- |                          |  |
|--------------------------|--|
| ➤ Poor support           | ➤ Request support / assistance when needed                                 |
| ➤ Undefined role         | ➤ Raise this with your line manager and work together to redefine the role |
| ➤ Poor change management | ➤ What and how can you contribute?   |

# Thank you for your time

Contact us for further information:

[kim@spineresearch.org.uk](mailto:kim@spineresearch.org.uk)  
[jo@affinityhealthatwork.com](mailto:jo@affinityhealthatwork.com)  
[roxane\\_gervais@alumni.fdu.edu](mailto:roxane_gervais@alumni.fdu.edu)

## Key resources:

**Society of Occupational Medicine:** <https://www.som.org.uk/return-to-work/>

**Vocational Rehabilitation Association:**  
<https://vrassociationuk.com/wp-content/uploads/2020/05/return-to-work-toolkit-V2.0.pdf>

**British Psychological Society:**  
<https://www.bps.org.uk/sites/www.bps.org.uk/files/Policy/Policy%20-%20Files/Meeting%20the%20psychological%20needs%20of%20people%20with%20learning%20or%20intellectual%20disabilities%2C%20and%20their%20families%20and%20staff.pdf>

**CIPD:**  
<https://www.cipd.co.uk/knowledge/fundamentals/emp-law/employees/workplace-guide-returning-after-coronavirus>