Return to Work Toolkit

For return to work practitioners in the rehabilitation
and occupational health fields during and post Covid-19

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The advice from the Vocational Rehabilitation Association has been invaluable in the
preparation of this toolkit.
The VRA has also assembled additional resources which can be found here .

Please send any suggestions and feedback to joy.reymond@workandwellbeing.co.uk

Introduction

In your day-to-day work as a return to work case manager, you have dealt with a multitude of different RTW scenarios, and have more experience in handling them than most workplaces. This places you in an excellent position to help workforces manage RTW following the Covid-19 lockdown. In addition to skills you may have in in clinical, psychological, ergonomic and functional abilities assessments, you are able to bring your skills in problem-solving, negotiation, and creative solution-finding that will be invaluable to employers, as they navigate this uncharted territory.

What you Need to Consider:

As companies re-open for business and welcome their staff back into work they will be looking for your advice and assistance to do so safely, effectively, and efficiently. How you assist will depend on your role and your special area of expertise, as well as the specific needs of the company.

You may be called on to provide input at the *individual* level (e.g. helping an individual to successfully RTW), or at the *organisational/operational* level (e.g. designing a re-opening strategy), or both.

Organisational Level

Here are some initial considerations:

1. What kind of workplace is it:

Are there specific workplace risks of Covid-19 exposure that require additional protection? Some workplaces will result in employees being at greater risk whilst at work than elsewhere e.g. frontline health staff are likely to be at greater risk of being exposed to infection. Additionally, some employees may, by the nature of their job, have the potential to put others at greater risk just by doing their job – E.g. health care workers and the vulnerable people they are serving. A good example of this is the guidance required for people working in GP practices.

If there is any question of these workplace risks, then Health & Safety officers and OH physicians will need to assess the medical considerations regarding worker and client Health & Safety. For example, the Society of Occupational Medicine's Toolkit[1] for protocols for testing for Covid-19 infection in these employees, along with PPE requirements.

An excellent reference to understand the risk assessments associated with exposure to Covid-19 is the guidance provided by OH physicians, primarily Dr. Tony Williams,

Additionally, the H&S Executive provides advice on protecting employee health and safety.

In the majority of workplaces it is not the work itself that will elevate the risk but the people (employees and clients) who are entering the workplace, and in these instances, the focus in the workplace will more likely be on what social and operational measures can be implemented to avoid elevating the risk.

2. What is already in place:

Most, if not all, employers will have a Covid-19 Emergency Taskforce in place. Amongst its many other responsibilities, the Taskforce will be overseeing major operational issues that relate to the re-opening of the business. They will need good advice on the risks, and recommendations on the ways to reopen without exposing their employees to this risk.

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[1] Reference to this OHP/OHA toolkit be added when published. See, meanwhile, this guidance.

In order to provide the greatest value to your client, it is vital that you are a member of, or a senior advisor to, this Taskforce. If you are an employee, you should already be part of that group. However, as most consultants and advisors are external, it is important at an early stage to establish close links to this group.

Not all Taskforces are the same and they may delegate the RTW planning to a specialist working group. It will most helpful to the implementation of a RTW process if this group includes representatives from Communications, Facilities, IT, HR (employee relations, comp & bens, sickness absence), senior administrators, and at least one influential ExCo representative. If they are not part of the working group, make sure their input is sought at the appropriate times.

3. Communication

We know that it is crucial to the success of any plan that it be communicated with empathy, clarity, and transparency. This is especially true when looking to bring back a large number of employees following a highly disruptive and potentially highly traumatic series of events. As an adviser you can provide the perspective to help the organisation craft communications about RTW which address the many anxieties and fears that staff will be experiencing.

Trust is key. Early messages must emphasise the importance of creating a safe physical work environment that you want them to return to. Providing information on how the organisation is going to ensure this is crucial to developing and maintaining trust.
Early messages must also focus on having a *mentally* healthy workplace, by acknowledging the importance of looking after their mental wellbeing and by saying what the organisation is doing to support this.

Share with management the insight that the most powerful influence on an employee's wellbeing is the strength of their relationship with their immediate manager. It's essential that the organisation ensure its management team is capable of doing so, and helps them to be able to connect with their team empathically and clearly. You can help management prepare for the reopening of the workplace by ensuring that each manager connects to their direct reports to talk about what the return will look like, what is planned etc., and at the same time is able to assess their team's readiness to return to work.

It's key that the organisation makes sure that managers have the skills to manage this communication well, and are comfortable to ask for help with difficult situations that may well arise during these conversations. It's also an excellent time for seeking feedback on employee anxieties and perceived roadblocks, and feeding their observations back into the Taskforce.

We also know that employer initiatives and communications can bolster employee mental health. Such initiatives can include recognition and mourning for any employees who have died due to the virus, and celebrations for those who survived; charity events in support of NHS, etc.; and simply warmly welcoming people back into the workplace. Something for each individual on their return (e.g. pocket-sized bottle of sanitizer?) which feels thoughtful & relevant, and makes the employee feel valued, can go a long way in creating goodwill and loyalty in returning employees.

4. Office Design & Work Methods

Assuming Social Distancing is still required, the organisation will be looking at ways in which it can run the business, while still operating within these constraints. Administrators will be seeking advice from office designers and ergonomists, and may seek your input on how to put this in place. You may need to flag any likely consequences on employee motivation, engagement and mental wellbeing, with the absence of many of the usual sociable 'water cooler' interactions which have been so commonplace in the workplace up till now. For instance, you may need to advise on the impact of these new working conditions, such as:

- Ergonomic risk assessments for people who are going to continue to work from home for the foreseeable future
- Desk spacing to ensure sufficient space between employees
- Changing start and finish times for people using public transport, to avoid rush hours
- Contact-free customer service for delivery and receipt of goods
- One-way (clockwise) flow design for use of office space, marking walkways
- Takeout-only cafeterias
- Partitioning workforce into 2-3 subgroups rotating between work at home and work in office
- Working two ½ day shifts or adding a full evening shift, to halve the number of people in the office at any one time.
- Job sharing as an alternative to layoffs, should there be insufficient work for everyone
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5. Making Best Use of Employee Benefit Resources

Employers all have a range of benefits available to their employees. Work with your compensation and benefits HR colleagues and Communications to ensure that these are well publicised, particularly employee support services such as EAP programmes, Mental Health First Aiders, gym memberships, etc.

Identify if there are other private mental health services available, and if not, recommend that they identify and negotiate with the providers of such services as CBT, counselling etc., to address possible mental health problems encountered during RTW. Other recommended services include online MH services and Apps such as Headspace, Unmind, etc.

6. HR interventions

Work as closely as you can with the HR team. Many of them will have been run off their feet during the lockdown, dealing with an unprecedented number of government interventions; the implications for some of these changes are still being worked out, and the ambiguity and uncertainty around issues of furlough, sick pay, performance management, disciplinary actions, and the like, will have resulted in problems for many of them.

Many HR departments will also take a leading role in employee wellbeing. Many employees will be concerned and anxious about being in workplaces or travelling to workplaces, and will need clear guidance on these questions before they are comfortable setting foot in the workplace again. They will want to know that their organisation is retaining their support for physical and mental health and are changing their thinking about flexible and remote working. HR will need to be rethinking and reframing the organisation's approach to working from home, based on everyone's recent experience, and this may help (or hinder) any workplace adjustment plans you are putting in place for your clients.

You can get a bit of an appreciation for the breadth of issues being tackled by HR in the [CIPD guidance on RTW](#) under Covid-19.

Your assistance in disentangling health and other issues with regards to sickness absence and RTW will be a valuable resource for HR while they are dealing with the other pressing issues on their plate.

7. Employee Concerns

Anxiety and uncertainty can be very destabilising; help your organisation understand the importance of providing as much clarity as possible, as early as possible. Share the evidence on the particular importance and benefits of compassionate and caring leadership at this time.

If the organisation does not yet have a confidential helpline for employees get guidance on their particular circumstances, work with HR to help them design and implement guidelines around this, and where appropriate a service pathway. There are some concerns which can be easily predicted, for instance:

- Employees anxious but with no excessive risk factors

- Employees caring for sick or vulnerable relatives
- Employees who are currently sick (Covid and non-Covid) or vulnerable
- Employees who want to continue to work at home
- Employees with children out of school
- Employees with job security and finance concerns (their own or others within the family group).
- Employees who rely on public transport or car share to get to work

Other questions will inevitably arise. Encourage HR to assign a manager with high problem-solving skills and emotional intelligence/empathy to advise both the organisation and the individual on how to resolve these unexpected issues creatively, whilst still within the company's principles for sound and compassionate leadership.

8. Mental Health

Provide resources and advice on MH issues which employees can expect to experience, and how to prepare management to handle these problems proactively, compassionately and effectively.
(References to Mind item 2 v in OH toolkit).

Encourage communication and uptake of wellbeing initiatives, supporting your organisation to develop a strategy if there is currently none.

Current advice for MH at home can be retrofitted to being mentally healthy at work:
[Government guidance on the mental health and wellbeing aspects of covid-19](#)
[Mind guidance on coronavirus and your wellbeing](#)
This should be at the heart of any decisions and plans that organisations make.

9. Reorientation/re-induction for every employee

Your client may benefit from introducing a re-induction process for their employees once they return to work. We understand that when employees return from a sickness absence or a maternity leave, they often benefit from having an adjustment period, and you can also apply these same principles to people retuning after Covid-19 lockdown.

For a smooth transition, it is important that every employee feels they are returning to a supportive and caring environment. The pandemic has had an unequal impact across the workforce in many ways, as different groups of employees, and individuals, will have been affected in diverse ways according to

their job role and individual circumstances. Helping the organisation recognise that it's reasonable to expect a variety of coping responses, and to be able to assist employees through this transition.

There may be a longer tail to the RTW process. The uneven nature of people's work and personal experiences and the challenging nature of the lockdown and ongoing situation, means there could be potential for some negative feelings creeping into the employment relations climate. You can assist the employer to anticipate these reactions and intervene early to prevent long-term negative consequences.

Individual Interventions

1. Medical Management Relating To Covid19 Exposure:

Where the RTW involves Covid-19 considerations, the Society of Occupational Medicine's Toolkit[2] guidelines should be applied. This includes, for example, if the employee has an elevated risk of exposure in the workplace, is classified as vulnerable themselves due to age or health condition, or is a risk to vulnerable populations in the workplace, such as in care homes, or is caring for vulnerable people at home.

Occupational health input is necessary to ensure the health and safety of the workplace whenever the possibility of a risk other standard is suspected. If this does not fall within your scope of practice you should obtain input from an OH physician. Once this advice has been obtained for such individuals, you may then be able to proceed with case management. For most workplaces and most employees, the exposure risks are standard ones and, barring any of these risk factors, you may be able to proceed directly with case management to help individual employees resolve their RTW problems.

2. Case Management

Most employees will RTW without any difficulties and without needing any additional support. Some instances will present with RTW challenges, even when the issue is not directly related to the medical management of a Covid-19 condition.

A case manager can address these individual challenges. Their scope of practice may include:
- Taking an overview of a client's needs and their goals (employer and employee);
- Work with employee and employer to identify barriers to RTW and ways to remove those barriers; getting agreement;
- Formulating a plan of intervention and support;
- implementing this plan; Commissioning services where necessary;
- Monitoring interventions for their efficacy;
- Assessing and minimising risk;
- Ensuring interventions are evidence-based, wherever feasible

[2] Reference to this OHP/OHA toolkit be added when published

3. RTW Case Management Scenarios

There are numerous possibilities. These are just a few that can be expected to show up relatively frequently:

- Employee has become disengaged from the workplace and colleagues during lockdown and it is difficult to re-engage them effectively
- Employee has been so strongly emotionally impacted by events (- e.g. they may be struggling with employer's decision regarding furlough, experiencing depression and anxiety as a result of the abrupt changes and isolation and uncertainty) that they can't contemplate being back at work
- Employee afraid that if they RTW they will be infected, even when there is no evidence of elevated risk factors at home or work
- Employee can no longer use grandparents for essential childcare
- School is still closed or partially closed, and employee has no substitute home care
- Employee has a vulnerable family member that they are supporting
- Employee wishes to continue work-at-home and doesn't want to return to the workplace
- Employee cannot make it into the office (transport restrictions)
- Employee anxiety about finances making it difficult to focus on RTW. The VRA website has numerous [resources](#) such as [Turn2Us](#) for information on benefits.
- Employee was already on modified work/duties, and this needs to be reconsidered in light of the new circumstances surrounding RTW for the rest of the population
- Employee's personal circumstances changed as a result of lockdown - e.g. moved away to live with parents)[3]

4. Case Management Approaches

In these instances the RTW case manager follows the [case management](#) and [VR standards of practice](#).

The RTW case manager will work in collaboration with both the employee and their manager (including HR, OH and their GP wherever necessary) to come to an understanding of the circumstances surrounding the problem.

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[3] Please let us know about other examples we should be adding to this list - we know it is woefully incomplete!

There are many assessment tools available, but in the Covid-19 circumstances, the two that are most likely to be of use are ergonomic assessments of home-working for those who are able to, and wish to, continue working remotely (see for example [workright at home](#)), and mental health reviews to understand the psychological difficulties being experienced by some employees. For example:

[CIPD Wellbeing at Work](#)

[IES Working at home wellbeing survey](#)

The RTW case manager will then:
- research opportunities to overcome these barriers,
- build agreement and support for a plan to resolve the absence, and
- work with all parties to implement, monitor and where necessary adjust the programme to achieve a RTW.

Many RTW case managers use standardised reporting protocols and RTW plan templates. However, there is no uniform template for RTW case management, as the RTW case manager needs to use or engage a wide range of interventions, in accordance with their scope of practice, their understanding of the physical and psychological demands of the workplace, the workplace dynamics, their problem-solving abilities and their persuasion and negotiation skills.

5. Transition Strategies

We know that, following an extended absence from the workplace, it can be difficult for an employee to make a jump back to full-time work in a single leap, even if they were not unwell during their absence. As a case manager you will have a number of tools at your fingertips to resolve the absence. In these instances, it's most likely that you will need to
- identify ways to motivate and re-motivate the employee and
- help the employer understand the need for a transition back to work.

The employee's psychological reserves may be depleted, and confidence lost. They may need help with a graduated re-entry to rebuild their resilience and wellbeing. Usually this can be achieved through the development of a flexible working pattern for a limited period of time, with the employee perhaps continuing to do some of their work from home, again for a limited time.

Understandably, many employees may be anxious about using a crowded public transport. A gradual reintegration is most likely to help them make the adjustment, and it may also help to change start and finish times so that they are not commuting in rush hour.

Likewise, working with management to build a positive engaging workplace will make RTW easier for all employees. (see workplace interventions above).

6. Tracking and Reporting

The RTW case manager is in a prime position to notice emerging issues, and to help the workplace recognise these and intervene early. The RTW case manager should monitor trends that they observe, and report on their effectiveness/success rates, particularly highlighting any hot spots – e.g. departments which are struggling more than others, and managers who need help to rebuild and reintegrate their teams.

Summary

As a RTW case manager, you can be an invaluable asset to the workplace and to the employees returning to work post Covid-19. However, many employers will not be familiar with your role and how you can assist them. Please use this toolkit if it will help explain your role, and please provide feedback on how it might be improved. Thank you!

About Vocational Rehabilitation and the Return to Work Process

Vocational Rehabilitation (VR) is any process that enables people with functional, physical, psychological, developmental, cognitive or emotional impairments to overcome obstacles to accessing, maintaining or returning to employment or other occupation.

About Work and Wellbeing

Joy Reymond is a Director at Work & Wellbeing, a company devoted to workplace wellbeing and sickness absence management. Joy is also a Trustee for the VRA and promotes the VRA's mission of a multidisciplinary approach to workplace health and wellbeing. She is also a passionate proponent of the role of the Return to Work Practitioner, having introduced into the UK the certification of RTW Co-ordinators and Disability Management Consultants.