

Barriers to RTW - the health condition

In the EEF's 2007 survey of members the "employee health condition" was cited as the No. 1 Barrier to return to work for companies to deal with.

I expect that this is a common experience for many managers dealing with HR or H&S. Just as you think you are making progress, you get presented with a sick note with "back pain" or "depression" emblazoned across it and your heart sinks. Probably you don't know a huge amount about the condition and how it should be managed or treated, and you become dependent on information from the medical professionals.

And, you've been there before - asked for a GP report and got a letter that really wasn't very helpful. In defence of the GP, they probably have never visited your work site and are being cautious. But where does that leave you?

Firstly, try to establish that the health condition is the main reason for the absence. Did you know (HR managers I'm sure will be the first to say yes to this one!) that the health condition is just one of over 30 ish reasons why someone may be off sick, and only about 5 of these relate to health at all, such as the standard of OH services.

Even though they have a sick note, the other underlying factors may be the real reason for the absence. That is not to say that they don't have a genuine medical condition, just that it is not the only reason they are not at work. Many people work with all sorts of conditions with no problems as all, then something else pushes them over the edge and their pain or function changes and they can't work and the health condition gets put on the paperwork as the explanation.

So what else should we consider:

1. Geographical factors

Region, level of social security, standard of health services, any epidemics going on, level of employment and unemployment, social / cultural attitudes.

2. Organisational factors

Type and size of your organisation, industrial relations, sick pay arrangements, supervision, working conditions, personnel policies, environmental hazards, existing OH services or not, labour turnover

3. Personal factors

Age, gender, occupation, job satisfaction, personality, life crisis?, medical conditions, smoking, alcohol and drug abuse, family responsibilities, social activities, journey to work, length of service with the company, gender integration

So, when someone goes off sick over the self certification period, explore with them what other factors may be involved. One good reason for doing this early is that there is no point in paying for assessment and treatment of something that doesn't need it, but also being aware of other barriers that may prevent a RTW even when the medical condition appears to have been successfully treated.

Secondly - once you have considered the other factors that may be contributing to the absence, organise a proper assessment of the condition by someone who specialises in that area - so for musculoskeletal problems someone such as a physio, for anxiety and depression - a psychologist, for general medical problems the GP may be the best person, or possibly a hospital specialist. If this is the case the business should consider funding these assessments to make sure they don't get caught in a waiting list delay.

What do you need to know about the condition from the health professional:

1. Does it need treatment? If so, it may be cost effective to pay for it. usually the faster treatment is started (especially if it is for a new problem) the quicker it will work and the less time it will take. And the person can come back to work while still receiving treatment in many cases.

2. Can the person perform their usual duties or not? You will need to provide the assessor with clear guidance on what the person does at work in terms of the actual activities and duties - not just a job description. For instance - a person with a painful knee may need to be able to climb stairs, and ladders, and crawl and kneel. If the assessor doesn't know this they cannot advise you accordingly.

3. What duties can they perform at work? there may be elements of the job that someone can do, so make sure you include everything - they may be able to walk around the site delivering post, or doing odd jobs, if not able to climb ladders. Ask for suggestions of what they are fit to do.

4. When are they likely to be able to return to the normal duties, and when could they return if you could provide suitable alternatives. Is there anything you can do / provide that may help get the person back to work sooner?

A suggestion is to build up a good relationship with local GP practices and hospital and private physios - invite them to visit the work site - show them the common sorts of jobs done on site. Then next time they have one of your employees they will have a better idea of what they do and be able to give you more useful information.

(NB. Consent and confidentiality has to be addressed for any feedback to be given, but this can be resolved in a straight forward way. I will write a subsequent article on this, but also consult your employment law advisors, or an organisations such as EEF.)