

## Getting Ill and Injured Workers back to Work

It's often said that your staff are an asset in your business; this is more than a cliché. Good staff can be hard to find, hard to retain and when they are ill or injured it can be equally difficult to return them to work.

Actively working to return staff to work as soon as possible can be a win/win situation for all parties. In the past, being away from work in order to recover from injury or illness has been seen as a good thing. New research now suggests work is good for people. It's now well known long-term absence from work has a negative impact on the health and wellbeing of people. Employees trying to return to work after a period of injury or illness can find it very difficult and success very illusive. The culture of the workplace, the work practices, relationships with colleagues, injury management and rehabilitation programmes can all have an important bearing on the success of a return to work. The general practitioner or occupational doctor and



nurse can have a very important role to play in managing the transition from being off work to returning to employment.

A surprising number of homes in New Zealand (NZ) have no one in paid employment. In 2007 this was approximately 1 in 8 NZ households. The second most common reason for New Zealanders being on a Sickness

Benefit is musculoskeletal conditions. Long-term unemployment is now recognised as quite damaging to health. Overall, death rates are increased – particularly from cardiovascular disease and suicide (in particular in young men out of work). There is also an increased risk of health conditions such as lung cancer, infections and poor mental health. Human nature being what it is, long term unemployment appears to have a de-motivating effect on people and this becomes deeply entrenched in their psyche. Even children in homes where there has been no income from paid employment for a long period of time are far more at risk of death or injury by accident.

### So what can be done about this unfortunate situation?

It's important for employers to be aware of the importance of work and it's health benefits. Of course work must be safe and staff members must not put themselves at risk by returning to work too early, but the importance of either staying at work or returning to work as soon as possible (even part time after injury or illness) cannot be under-estimated. Encouraging a workplace culture which allows for staff to return to some level of work activity before they are 100% fit is vital. It is important to discard the old notion that staff should be 100% fit before they return to work; in fact following this type of philosophy can often be destructive and lead to prolonged periods away from work. It is now recognised that staff away from work, for health reasons, 20 days have a 70% chance of returning to work. Those away from work for 70 days have only a 35% chance of successfully getting back to work and after one year's absence from work, the chances are almost nil.

## WELCOME TO OUR SPRING NEWSLETTER



Dr Simon Ryder-Lewis

Welcome to our spring newsletter! We always aim to keep you up to date with the latest developments in Occupational Health and Safety. If you have any questions about the articles here, or if we can help with any issues you have at work, please give us a call.

### Our Services

- Individual Work Site Assessment
  - Walk through surveys
  - Hazard identification and management
  - Noise, lighting and air quality (dust) monitoring
  - OOS hazard identification and management
  - Health and Safety Compliance
- Pre-employment Medical exams
  - UKOOA / OGUK exams
- Training for Staff and Management
  - Use of personal protective equipment
  - Stress and fatigue
  - Understanding the HSE Act
  - Influenza pandemic planning
  - Manual handling
- Health Monitoring
  - Work site clinics
  - Absenteeism management
  - Accident investigation
  - Hearing and respiratory testing
  - Injury management and rehabilitation
  - Gradual return to work programmes
  - Influenza vaccinations
  - Drug and alcohol testing
  - Occupational vaccinations
  - Travel medicine
- Healthy Workforce Programme
- Independent Medical Opinions

*Getting Ill and Injured Workers back to Work cont.*

The occupational health doctor can play an important role in facilitating an early return to work and coordinating rehabilitation. Managers who are concerned their staff have been away from work for prolonged periods should consider referring to an occupational doctor. After a review of the diagnosis, treatment and rehabilitation (including physiotherapy, occupational therapy or surgery for example) in conjunction with the employer, an individually tailored plan for return to work can be drawn up.

After all parties have agreed on this, the staff member may be able to return to work at least part time initially. As their health improves, they may well be able to increase their hours and work duties – eventually returning to a full and active role in the workplace. With good workplace practices, a positive work culture and involving the right health professionals, an early and effective return to work can be achieved in many cases. This has benefits for both the employer and the staff member.

**Case Example**

Bill was a 46 year old truck driver who fell off the trailer of his truck, fracturing his ankle. Following surgery he was discharged with a cast on his leg. Bill's manager phoned him to check on his progress and arranged for the company doctor to review him. The doctor found that although Bill was not fit to drive a truck, he was able to get around with crutches and was keen to return to some part time light duties. The doctor arranged for Bill's return to work for two hours per day, undertaking some dispatch duties in the office. Bill was able to sit with his foot up on a stool and found this to be reasonably comfortable. Over a period of three weeks, he increased his work hours until he was working almost full time. After a review with his surgeon and a course of physiotherapy, he was able to gradually return to driving duties as well. Although his injury was severe, within three months Bill was back to his normal work duties and was very pleased to be an active and full member of the staff again.

# Are you sure your staff can read and write?

**Have you considered whether your staff have adequate literacy skills to function and keep themselves safe at work?**

We assume everyone who goes to school and comes to work has the basic ability to read, write, communicate well and do maths. Did your staff fill out their job applications in front of you or at home? Have you wondered why specific workers keep very quiet at meetings or avoid them altogether?

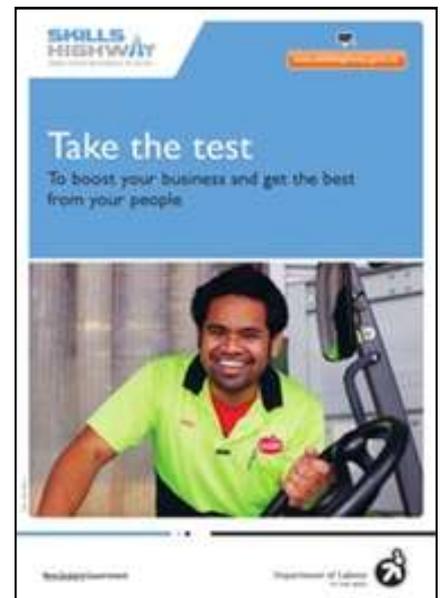
Poor literacy is not isolated - it is widespread. The 2006 Adult Literacy and Life skills Survey tells us that 4 in every 10 NZ employees have difficulties with reading, writing, maths and communication. This has an impact on every business in NZ through accidents and injuries, high wastage, mistakes, missed deadlines and low productivity. Teamwork can be poor, morale low and people feel isolated at work. Literacy problems are an invisible health issue in our workplace. It can be very embarrassing for our employees who are effected.

Help is available. Firstly assess your workplace to determine how widespread the problem is.

The Department of Labour has put out a free resource kit to assist employers to establish if this is an issue for them. It is available from their website:

[www.skillshighway.govt.nz](http://www.skillshighway.govt.nz)

Then seek outside help to put together a literacy programme which suits your needs. Run the programme during company time to get as many people as possible to attend. Make literacy a health focus within your organisation. Make it clear that the company backs the programme 100% and watch the confidence and morale of your employees grow.



The general health information in this publication has been researched using reliable sources and is believed to be correct. However individual situations differ and no liability of any kind is undertaken to any person in respect of the information produced. Decisions on your own or others personal health and medical care must be made in consultation with your doctor. These materials are not intended to be legal advice. Therefore, readers should not rely on anything stated, and the author is not liable for any errors or omissions, in the materials in respect of a particular issue or circumstance. The reader must seek his or her own legal advice.