

Barriers and Enablers for Return to Work: Findings from a Survey of RTW Professionals.

COMPARE Project Team

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About the Study

Funding

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Project team

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Ethical Statement

This project received ethics approval from the Monash University Human Research Ethics Committee in March 2020 (Project ID 21227).

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Background and Objectives

Background

There are many potential barriers and enablers to return to work (RTW). These include factors in the workplace, in the healthcare and insurance systems and worker-related factors.

RTW stakeholders may have different views on the relative importance of certain barriers and enablers, depending on their role in the RTW process, their training/expertise and their level of experience.

Understanding these different perspectives can support development of multi-stakeholder RTW interventions, which have been shown to be effective.

Objectives

This study sought to understand and describe the perspectives of Australian RTW professionals regarding the barriers and enablers to RTW among injured and ill workers.

Specific objectives are to:

- Determine the barriers and enablers that have the greatest influence on return to work as rated by Australian return to work professionals.
- Determine whether ratings of barriers and enablers differ according to the professionals job role/expertise, the nature of their employer and level of experience.

Participants & Data Collection

N=206 adult participants working in a professional role within an Australian workers' compensation system were recruited via professional networks and social media to complete an online survey.

The survey requested that participants state whether they considered each of 47 barriers and enablers to be helpful or unhelpful for RTW using 5-point Likert scale.

The 47 barriers and enablers were derived from a systematic review of RTW literature completed by the study team, and were categorised into seven broad domains:

- Worker personal / family circumstances
- Worker health
- Job related
- Employer / workplace related
- Treatment and rehabilitation
- Claims management
- Disputation

Data Analysis

Likert-scale responses for Enablers were reverse-coded to ensure the same directionality of response as for Barriers.

Responses for each barrier / enabler were then dichotomised into "Not important" (score of 1-3) and "Important" (score of 4-5).

For each barrier/enabler, the % of respondents agreeing that the barrier was important was calculated. The average % agreement was then calculated and visualised for each of the seven domains and for each individual barrier/enabler.

The list of barriers/enablers were ranked from highest to lowest agreement and those with less than 75% agreement (most disagreement) were extracted for further analysis.

Non-parametric (Chi2) analysis was used to compare agreement between respondents with different job roles and employers.

Survey Respondent Characteristics

Characteristic	Description	Number	Percentage	
Total	Whole cohort	206	100	
Primary Jurisdiction	NSW	71	34.5	
	QLD	46	22.3	
	VIC	39	18.9	
	WA	29	14.1	
	Other	21	10.2	
Main Employer	For-Profit Organisation	106	51.5	
	Public Service	38	18.4	
	Self-Employed	37	18.0	
	Not-For-Profit Organisation	25	12.1	
Nature of Employer	Occupational Rehabilitation Provider	62	30.1	
	Insurer	32	15.5	
	Other	32	25.5	
	Govt Organisation/Regulators	28	13.6	
	Healthcare Organisation	27	13.1	
	Employers	24	11.7	
	Job Role	RTW / Injury Mgmt Coordinator	69	33.5
		Healthcare Provider	42	20.4
Executive/Manager		40	19.4	
Other		32	15.5	
Insurance Claims Manager		23	11.2	
Job Tenure	<5 years	44	21.4	
	6 – 10 years	45	21.8	
	>10 years	117	56.8	
Experience	Single jurisdiction	81	39.3	
	Multiple jurisdictions	124	60.2	

Groups with small N of respondents were collapsed for analysis.

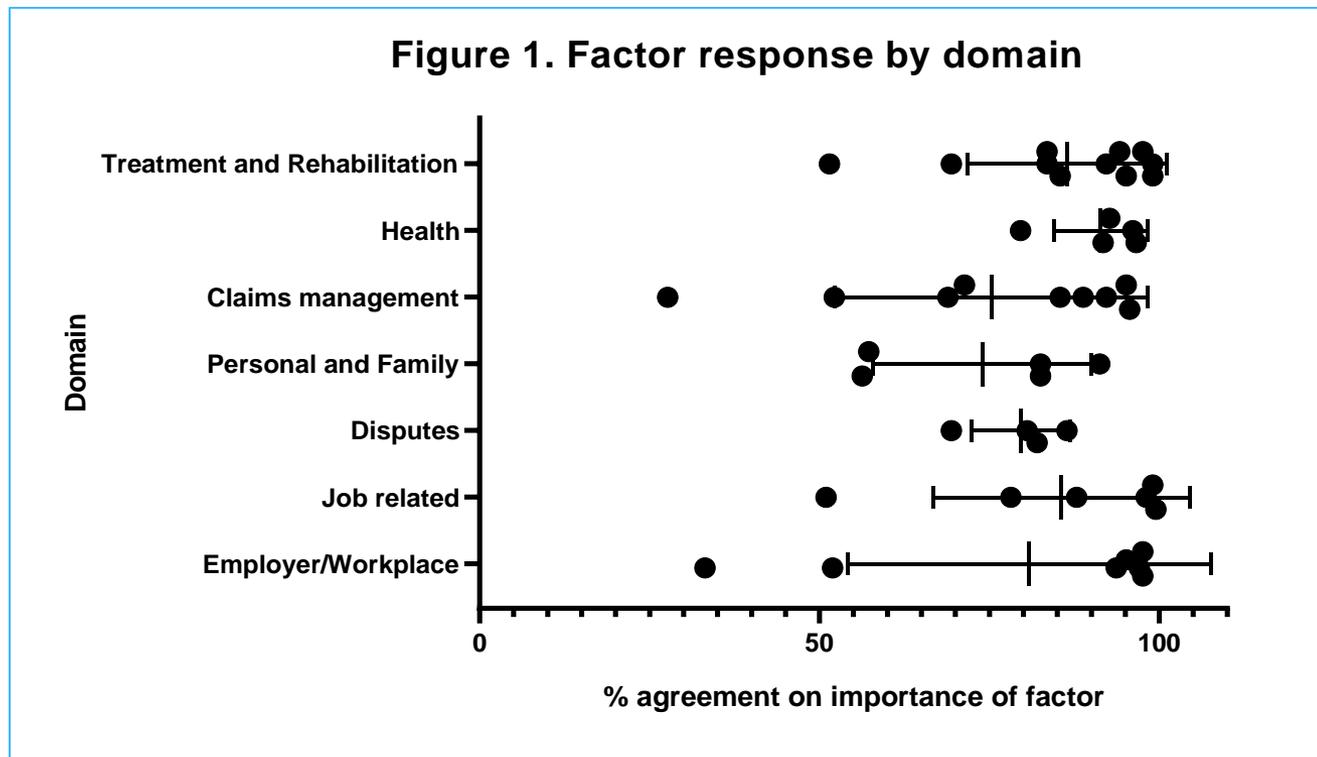
← Includes respondents from SA, ACT, TAS & NT

← Includes legal firms, trade unions, advocacy/support organisations, actuarial firms, research organisations, employer associations, management consultancy.

← Includes lawyers, trade union staff, researchers OHS officers.

Results – Overview

- More than 75% of respondents agreed that 35 of the 47 barriers and enablers were important for RTW.
- There were 20 barriers and enablers which at least 95% of respondents agreed were important.
- The percent agreement for barriers/enablers in each domain is shown in the figure below.
- With the exception of factors in the health and disputes domains, there was a substantial amount of variability about the importance of individual barriers/enablers within each domain.



Results – Barriers and Enablers with at least 95% consensus

Barrier / Enabler	Domain	% respondents rating barrier / enabler as important
Strong positive relationships with co-workers	Job-related	100%
Good quality healthcare / medical treatment	Treatment and Rehabilitation	99%
Early access to healthcare / medical treatment	Treatment and Rehabilitation	99%
Access to graduated re-entry / return to work	Job-related	99%
Access to modified duties / job tasks	Job-related	98%
Effective coordination of workplace and healthcare response to injury	Treatment and Rehabilitation	98%
Involvement of the employer in developing a return to work plan	Employer / workplace	98%
Employer offer of modified working hours or conditions	Employer / workplace	98%
Early communication by the employer after injury	Employer / workplace	97%
Positive recovery expectations of the injured worker	Health	97%
Strong worker coping ability	Health	96%
Poor communication by the insurer case manager	Claims management	96%
Receiving healthcare that is work focussed	Treatment and Rehabilitation	95%
Delays in insurer approvals for treatment	Claims management	95%
Strong employer understanding of workers' compensation	Employer / workplace	95%

Results – Barriers and Enablers with less than 75% consensus

Barrier / Enabler	Domain	% respondents rating barrier / enabler as important
Face-to-face (in person) interaction with insurer case manager	Claims management	71%
Having a lawyer represent the worker in dealings with insurers	Disputation	69%
Receiving too much medical treatment	Treatment / Rehabilitation	69%
Complex claims management / administrative processes	Claims management	69%
Low level of worker education	Worker personal / family circumstances	57%
Older age of worker at time of injury	Worker personal / family circumstances	56%
The ability to lodge claims online or via smart phone	Claims management	52%
Being employed by a large organisation	Workplace / Employer	52%
A pre-existing relationship with the healthcare provider	Treatment / Rehabilitation	51%
Being employed in a physically demanding job	Job-related	51%
Being employed by a self-insured organisation	Workplace / Employer	33%
Having a high percentage of pre-injury wages replaced by benefits	Claims management	28%

Results – Low agreement by respondent job role

- There were six barriers / enablers with overall low agreement regarding their importance, in which agreement varied significantly by the respondents job role.
- The table below shows the percent of respondents in each job role group reporting that barriers or enablers are important for RTW.
- For example, 26% of insurance claims managers agreed that a pre-existing relationship with a healthcare provider was important for RTW compared with 65% of executives, 48% of healthcare providers and 69% of people with other jobs.

Barrier or Enabler	% respondents reporting barrier/enabler as important by job role group					Pearson's χ^2
	RTW/Injury Mgmt Coordinator	Executive / Manager	Insurance Claims Manager	Healthcare Provider	Other	
A pre-existing relationship with the healthcare provider	46%	65%	26%	48%	69%	p=0.01
Being employed by a large organisation	54%	60%	78%	33%	44%	p=0.01
Low level of worker education	48%	63%	39%	64%	75%	p=0.03
Complex claims management / administrative processes	54%	88%	70%	64%	84%	p=0.001
Receiving too much medical treatment	72%	80%	70%	74%	44%	p=0.01
Having a lawyer represent the worker in dealings with insurers	74%	90%	70%	67%	38%	p<0.0001

Results – Low agreement by nature of employer

- There were five barriers / enablers with overall low agreement regarding their importance, in which agreement varied significantly by the respondents job role.
- The table below shows the percent of respondents in each employer group reporting that barriers or enablers are important for RTW.
- For example, 88% of respondents employed by insurers reported that face-to-face interaction with the case manager is important for RTW compared with 65% of people employed by occupational rehabilitation companies, 63% of people in healthcare organisations, 54% of people in employers of injured workers.

Barrier or Enabler	% respondents reporting barrier/enabler as important by nature of employer						Pearson's χ^2
	Occ Rehab company	Insurer	Health Care Org	Employers	Govt Org / Regulator	Other	
A pre-existing relationship with the healthcare provider	48%	28%	52%	58%	57%	69%	p=0.04
Being employed by a large organisation	37%	78%	33%	50%	64%	59%	p=0.001
Receiving too much medical treatment	71%	75%	85%	71%	68%	47%	p=0.04
Having a lawyer represent the worker in dealings with insurers	79%	75%	70%	71%	68%	44%	p=0.02
Face-to-face (in person) interaction with the insurer case manager	65%	88%	63%	54%	82%	78%	p=0.03

Conclusions

Main Findings

There was a high degree of consensus among Australian RTW professionals about the important barriers and enablers for return to work.

These barriers and enablers crossed multiple domains including items related to the injured worker, their job, the workplace, treatment, rehabilitation and claims management.

Many of the barriers/enablers with the highest degree of consensus about their importance, are modifiable.

There was less consensus on a 12 of 47 barriers and enablers surveyed, including items related to claims management, treatment, the workplace, disputation and the workers personal and family circumstances.

For a small number of barriers and enablers, the level of agreement regarding their importance varied significantly by the respondents job role or the nature of their employer.

What does this mean?

Australian RTW professionals recognise that there are many barriers and enablers for return to work across multiple domains.

Australian RTW professionals generally agree on the most important barriers and enablers for RTW. Ratings of importance for the majority of barriers and enablers were not associated with the respondents job role or employer.

Professionals position in the return to work process (defined by their job role and their employer) affects their view of the importance of a small proportion of barriers and enablers.

Findings support recent intervention studies and systematic reviews demonstrating that effective RTW interventions address barriers and enablers across multiple domains.