

Workplace 2020 - How it Will Impact Disability Management

By Shivi Thusoo and Dianne Dyck

The novel coronavirus (COVID-19) pandemic has “resulted in the ‘Great Pause’, as we pivot our new normal to a future normal” (Conference Board of Canada (CBC), 2020, p.1). Organizations have spent decades resisting flexible and remote working, citing lack of productivity and efficiency. As recently as May 2020, when many public health orders across Canada were starting to be lifted and allowing the resumption of office-based activities, “only 8% of workplaces were prepared to go back to work upon re-opening, with 279 workplaces polled indicating that only 4% of their workers were needed in the office” (CBC, 2020, p.1). Additionally, the billions of lost economic productivities were more subdued in office-based work environments because those organizations with cloud-based digital platforms, were able to transition working from home solutions with reasonable efficiency. The net result has been that office-based workers have proven that work from home can be productively and efficiently completed.

“This revolutionary change has caused organizations to reflect and update and/or develop their working from home policies” (Gross, Wanfor & Jackson, 2020, p. 1). Integrated disability management programs (IDMPs) should be able to influence this policy change by allowing the injured/ill worker to contribute to the company/organization by re-entering the workplace by working at home. “As workplace culture continues to be a primary driver for influencing the social determinants of health and creating an environment where employees want to come back to work each day” (Howatt, 2015, p. 1), the IDMP can become a selling feature for maintaining the right staff for short- and long-term business success.

The purpose of this article is to show how the acceleration of formal work-from-home (WFH) policies help facilitate disability management because the option to work from home in the 2020 workplace assists with bringing about better skill re-training opportunities and shorter return-to-work (RTW) time periods. As well, the focus will be on how an Occupational Health Nurse (OHN) can add to that value.

THE SCOPE

Disability management is defined as “a collaborative partnership that involves employers, employees, unions, health care providers, and vocational rehabilitation professionals for the goal of minimizing the impact of injury or disability on an employee’s capacity to perform his or her job” (Ahrens. & Mulholland, 2000, p. 39). Hence, a Disability Management Program (DMP) is a workplace program designed to facilitate the employment of persons with a disability through a coordinated effort that addresses individual needs, workplace conditions, and legal responsibilities. Ideally, DMPs are proactive as well as reactive in nature, and incorporate stakeholder involvement and accountability. Most DMPs are designed to control the human and economic costs of employee injury, illness, or diminished functional capacity; to convey a message that employees are valued; and to demonstrate compliance with the applicable legislation.

In comparison, an IDMP is a planned and coordinated approach to facilitate and manage employee health and productivity. It is a Human Resources risk management and risk communication approach designed to integrate all organizational/company programs and resources to minimize or reduce the losses and costs associated with employee medical absence regardless of the nature of those disabilities. It is aimed at:

- assisting ill/injured employees and employees experiencing diminished work capacities;
- providing early intervention and support measures;
- facilitating a collaborative approach to managing employee disabilities;
- restoring the disabled employee's work/functional capacities to an optimal level;
- maximizing the disabled employee's capabilities;
- integrating the organization's/company's various employee support and group benefit programs;
- measuring program performance and outcomes in human, legal and business terms;
- evaluating the organization's/company's various disability management efforts and performance with a focus on continuous improvement; and
- attaining a healthy workforce through injury/illness prevention (Dyck, 2017, p. 12).

This article will centre on Canadian office-based workplaces with enough technological solutions to allow a worker to access their work and remotely provide results. This includes access to a reasonably current computer, basic computer software (e.g., MS-Office), and a dependable and "fast" network communications system (e.g., fibre optic cable). Given the publication constraints, manufacturing, resource development, or most occupations that are not completed within an office environment, will not be addressed. Additionally, those office-based occupations with specialty computing needs, including specialty software and/or equipment needs that may not be reasonable or practical to have accessible outside the office environment, will not be covered.

BACKGROUND

The 2020 Global Trends survey of 7,300 employees completed by Mercer worldwide, shows that "balance is the 'now' with the future" (Mercer, 2020, p. 1). Upon examination of the future workforce of Baby Boomlets (born in the 1980s to 2000s) and their comfort in working at home with strong transferable skills, compelled nature to 'leave no one behind', and their pursuit of lifelong learning, "we need to adapt workplace processes to strengthen partnerships and breed loyalty" (Curpen & Singh, 2020, p. 1). The employee experience needs to reflect on the percentage of workers who want to work because they 'want to' rather than those that 'have to'. Allowing work from home, and thereby, strengthening the IDMP through the technological ability to remotely provide employees care, support, and the expected empathy, can become a measure of productivity. The ability to complete a partial set of tasks at home after sustaining an injury/illness, will help the RTW transition process for the employee and employer.

EVIDENCE

To explain the rationale for working at home, a few key issues need to be considered, namely:

Technological Ability to Support IDMP from Home

A significant part of an effective IDMP is being able to provide timely care to an injured/ill employee so that their RTW can be smooth, even if it starts from home. Recent policy changes at the provincial level across Canada, have showed that tele-medicine is growing during the COVID-19 response with many benefits increasingly going virtual, including a “12% increase in psychological support and 16% increase in virtual healthcare services” (CBC, 2020, p. 1). “The medical support for a remote and mobile workforce is growing with advances in virtual fitness, mental health resources, increased spot surveys, and financial well-being” (Mercer, 2020, p. 9).

Even without an injury or illness to be managed, “over 79% of accommodations are applied when hours are worked at home or remotely, including flex time (83%), flex time around core hours (56%), and having a compressed work week (34%)” (CBC, 2020, p. 1). These trends in the data prove that an IDMP can support a worker’s recovery remotely, which will result in the opportunity for earlier intervention after an injury or illness. Additionally, workplaces are adapting with “a 60% increase in video conferencing capability, and a 46% increase in remote work” (WTW, 2020), which helps facilitate the interface with those either in the office or also working from home for other reasons.

Expected Empathy of Employees to Support IDMP from Home

In a survey completed by Willis Towers Watson, “87% of workers ranked dignity and engagement as highly linked to their productivity, and empathy sits at the heart of that mandate” (WTW, 2020, p. 21). “49% of employees want to work at an organization that protects employee health and well-being, where re-skilling is a priority” (WTW, 2020, p. 14). In the post pandemic environment, “9% of organizations having formal work from home policies in place [shifted] to 48% [who] either implemented or [have in] in development” (CBC, 2020, p. 1). Hence, an IDMP that can function remotely, helps to build reliable connections, and improve the employee-employer’s experience. It is imperative for that to happen so, the employee-employer relationship remains strong and the occupational bond, intact.

A joint labour-management partnership spearheaded by champions from management and employee will allow employers to reduce their risk, save costs, and increase their productivity and creativity (Howatt, 2020). With the de-escalation of jobs and tasks, the IDMP can also adapt to the exponential rise of blurred lines between physical, digital, and biological care. Working at home can be used as means to remove the stigma associated with seeking disability care and help revitalize the work agreement or collective agreement. “Energized employees contribute to the employee-employer experience, which is accomplished through empathy, providing enriching learning opportunities, embracing a climate of trust, and having an efficient, frictionless work environment” (Mercer, 2020, p. 54).

IDMP: Potential Concerns from a Working at Home

Some concerns associated with an IDMP facilitating employees to work from home include the effective monitoring for mental health issues, the perception of favouritism for those with skill sets that can be accommodated from home, the lack of co-worker interaction and social support, and limited access to ergonomic aids and tools.

A more remotely based workforce reduces the inherent process of “checking in” upon arrival at the physical place of work. To address this issue, a formal and prescribed check-in procedure may help to address the mental health concerns.

There may also be a mistaken illusion of “work demand” where the recovery process is stymied by the employee not knowing when to turn “work on or off” (CBC, 2020). To counter this situation, clearly defined “in scope” and “out of scope” job functions can help establish fairness and consistency of application. The perception of favouritism can be further debunked by having a clear WFH Policy and related procedures.

Co-worker interaction and social support is known to promote successful recovery and RTW. Through the IDMP, this type of encouragement can be facilitated.

Regarding the employee’s accessibility to proper ergonomic tools and equipment; a WFH policy that includes employee access to discounted ergonomic equipment and subsidized internet access, are some possible mitigation efforts that could be offered by the employer.

DISCUSSION

“Purpose-driven companies out-perform the market by 42%, and employee engagement outperforms the market by 93%” (WTW, 2020, p. 16). A formal WFH policy with clearly defined optional and mandatory positions, stated duration of their application, concisely communicated expectations for work hours, and “processes to manage remote connectivity and security issues will breed loyalty into the organization” (Gross, Wanfor & Jackson, 2020, p. 1), is required. An effective WFH policy that is non-discriminatory (e.g., race, colour, ethnicity, religion, gender, age, and/or sexual orientation), and that allows for social, can help the future of work (ILO, 2013). This policy can be leveraged by an IDMP, to enhance the employee experience and create a safer workplace by understanding human behaviour and building a successful safety and loss management system.

THE ROLE OF THE OHN

The OHN is in an ideal position to educate and coach employers and employees on how to adapt to the new world of work, particularly in relation to a WFH policy and the related practices. Knowing the IDMP principles and practices, and knowing the workplace and its players, the OHN can broker workable solutions that enable successful recovery and return to work by ill/injured employees. For example, helping the employer to craft a WFH policy and the related procedures.

A WFM Policy should clearly state the employer’s performance expectations, required hours of work and availability and that unauthorized overtime will not be compensated. The corporate confidentiality policies must be upheld, as must be the provincial OH&S

regulations. As for client/company video meetings, employees must observe the corporate dress code (Mathews Dinsdale, 2020).

The employer's health and safety obligations continue while the employee is working at home. The OH&S Act general duty clause for providing a safe and healthy workplace and taking every reasonable precaution to protect the worker and public, generally holds. However, there are some exceptions – some provincial OH&S Acts clearly state that work in private residences is not covered.

Likewise, make sure that the employer and employee are aware of the provincial Workers' Compensation Board (WCB) requirements. Even while working at home, employees can get injured/ill. If the injury/illness is work-related or exacerbated by the work performed, the employee is entitled to apply for WCB benefits. Just like in the workplace, undertaking an incident investigation should occur, including the implementation of corrective actions to prevent recurrence.

Critical to the IDMP efforts is comprehensive documentation of the disability situation, the interventions, RTW planning and placement in the home, and the recovery progress. The return-to-full-duty date must be noted. This is one aspect that only the OHN can complete.

CONCLUSION

The new world of work due to COVID-19, has forced dramatic workplace changes. For employers to succeed, they need to adapt. Enabling workers to work from home is a major option. The IDMP can be used to complement this option, and the OHN can enable this to happen.

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