Little conclusive evidence about the effectiveness of workplace disability management programs in promoting return to work

What is the aim of this review?
This Campbell systematic review assesses the effectiveness of workplace disability management programs in promoting return to work. The review summarises findings from 13 studies, eight conducted in the USA and five in Canada. Participants were employees on sick leave, from the private and public sectors, with an inability to work due to physical injury, illness or mental disorders.

Workplace disability management programs offer a wide array of policies and practices for injured or ill employees. However, there is very scant evidence to draw any definite conclusion on their effectiveness in promoting return to work.

What did the review study?
The share of the working-age population relying on disability and sickness benefits has tended to increase in OECD countries, resulting in negative impacts for the individuals concerned, their families, their employer and society more generally. Workplace disability management (WPDM) is a comprehensive and cohesive employer based approach to managing complex needs of people with a work disability within a given work environment.

This review assesses the effectiveness of workplace disability management programs in promoting return to work. It focuses on successful job maintenance and return to work (RTW).

What studies are included?
Included studies assess WPDM interventions implemented within the workplace setting, i.e. onsite-WPDM or RTW-programmes, provided by the employer in collaboration with key players in the workplace, and which address the duration of an inability to work due to physical injury (musculoskeletal disorder) or mental illness. The studies must have used either randomized controlled trials or non-randomized control study designs or single group study designs with before and after measures. Studies that included unemployed persons as well as persons with a pre-existing permanent or total impairment were not included.

A total of 13 studies were included in the review which reported on RTW measured as first return to work, reduction in lost days from work and duration of sickness absence measured continuously via time to event data. Secondary outcomes were modification or change of job function and job functioning, as well
as sustainability of RTW. Two of the studies included a comparison group; the others conducted before versus after analysis. All the studies were carried out in North America.

What are the main results in this review?
WPDM programmes typically comprise multiple components, such as early and considerate contact, modified/tailored work schedule or duties, a revision of workplace roles, education of workplace staff, and rehabilitation activities. Programmes typically involved an inter-disciplinary team of competences from several corporate located key parties such as: occupational physicians and physiotherapists, occupational therapist/ergonomists, case managers/RTW coordinators, union representatives, supervisors, and managerial HR staff. A RTW policy was used to describe procedures, and stakeholder engagement with roles and responsibilities written into the policy. A joint labour-management committee may serve as a vehicle for developing consensus among key decision makers in the design, implementation and evaluation of each component, and inclusion of senior management may drive corporate support and commitment.

The available evidence was not suitable for quantitative synthesis, so no overall conclusion on the effectiveness of WPDM programmes can be made. It cannot be determined if specific program components or specific sets of components are driving effectiveness.

The majority of studies programs focused on musculoskeletal disorders during the off work/pre-return phase of the RTW process. There is little evidence regarding programmes targeting mental health conditions.

What do the findings in this review mean?
There is a lack of concrete evidence to draw conclusions on the effectiveness of workplace disability management programs promoting return to work.

The findings show that further rigorous research is needed. Given that the majority of the studies focused on the first phases of the RTW process, future program evaluations should ensure a broader focus. Future research should also concentrate on identifying the specific program components that taken together, or in different combinations, contributes to safe and timely RTW.