You – the employer, line manager, or supervisor – have an important role to play: use this guide to help you help your colleagues

#### what

Most people get episodes of muscle and joint pain. The onset may be from physical activity but more often there's no obvious cause. Usually there is nothing to worry about: serious injury or damage is rare.

Recovery is expected, but the pain may recur. Back pain is a good example: activity is generally helpful – prolonged rest is not; most people get better and back to work quickly - but some hit problems.

Muscle and joint pain is very costly when people are off work for too long. The old approach of staying off work actually makes matters worse. Early return to work is usually beneficial

But people need help to stay at or get back to work. And, it's not enough to rely on doctors and other clinicians - the workplace needs to be accommodating.

People often struggle to get back to work. It's usually not because of a more serious injury. It's because they face obstacles: things about the **person**, the **workplace**, or the **context**.

Manu's Story
HOW IT ALL GOES WRONG



I got a back problem that made my work a bit difficult. The doc signed me off work, saying work probably caused the injury. The people at work didn't call, so I couldn't discuss getting back to work. The company have this rule that you have to be fully fit to go back - the pain kept coming and going so I was stuck. I got really worried and depressed. I don't get out much now and I've lost the job. To start with it wasn't too bad – all I needed was some help with the job for a while and I could have stayed in work.

# identify obstacles

You can spot the obstacles by looking for flags – signals that things will get in the way Mostly you'll be looking for workplace obstacles, but you need to work with the other players (doctors, health and safety reps, etc).

Identification is about looking for unhelpful behaviours and circumstances. Anything about the person, the workplace or the circumstances (including influential others) that stands in the way of early return to work is an obstacle.

### myths are obstacles

#### These are all myths:

- Muscle and joint pain means something is seriously damaged
- Work/activity is the cause
- Time off work is needed as part of the treatment
- Cannot return to work until 100% pain free
- Contacting the absent worker is intrusive

What's the truth? Muscle and joint pain is very common, and often not caused by work, yet work may make the pain worse. Time off work is often not needed. Early return to work (with temporary modifications) is helpful. Funders, payers, & insurers support early return to work. Workers appreciate you staying in touch and having your support to get back to work.

## plan of action

**Goals:** set a time for getting back to modified duties and to usual work.

Can do? list can-do tasks and jobs (not just can't do)

**Obstacles:** list what's getting in the way of getting back to work: job factors, personal factors, context factors – list who needs to tackle them

What and when? figure out the steps needed to overcome the obstacles, set a timeline: appoint someone to act as a support buddy/case manager.

#### how to act

Taking action is all about overcoming obstacles at work. It means providing an accommodating workplace, with helpful policies and coordinated actions. It's not rocket science!

- Contact the absent person within a day or two
- Tell them the workplace will be supportive
- Point out the return-to-work buddy who will be their case manager (perhaps the supervisor)
- Ask the person to come in to work to sort out the return plan
- Ask the doctor what the worker can do:
   Get their permission to talk with the doctor: use
   a confidentiality waiver (the worker gives explicit
   written permission for (selected) people to talk
   freely with the doctor/therapist)
- Assess the job, and offer modified work (if necessary) for a fixed period
- Allow graduated return to work plans, that offer gradual increase in hours and participation
- Monitor progress: revise the plan if any setbacks

#### modified work

Early return to work can be helped by simple modifications to the person's job. This is a temporary step simply to gradually ease them into usual work. Getting over the obstacles:

Alter the work to reduce physical demands: e.g. reduce reaching; provide seating; reduce weights; reduce pace of work/frequency; enable help from co-workers; vary tasks.

Alter the work organisation: e.g. reduced work hours/days; additional rest breaks; graded return to work; home working

Flexibility: e.g. daily planning sessions with a buddy; allow time to attend healthcare appointments; help with transport Kamala's Role

# The supervisor can make things happen



We're a small company with a simple protocol for managing pain and injury. It's my job to put it into action. Basically, I act as a case manager with support from professionals, to coordinate things. I get informed at day one of absence, and stay in contact. I liaise with the doc, but also send our people to a local clinic. They tell me what my colleague car do (we use a confidentiality waiver), which helps me figure out how best to help my colleague back to work. They point out the obstacles and what needs to be done to overcome them, as well as giving treatment. I devise the Plan with my colleague and we sort out any work modifications as a team. I also use information leaflets to help bust the myths. It works well!