

## Building a Culture of Accommodation in the Workplace

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# Disability Management Programs are grounded in economic and social imperatives

Global business rationale:

- Every day 7,500 workers die from a work-related accident or disease = 2.78 million each year\*
- An additional 374 million workers suffer non-fatal occupational accidents each year\*
- Economic burden 4% of global GDP\* (6% in some countries)



### Across Canada

Annually:

- 251,625 occupational lost-time injury claims\*
- 951 fatalities from work-related accidents and occupational diseases\*\*
- Ratio of permanent disabilities to fatalities 25:1\*\*\*
- Cost of disability-related absence \$16.6 billion or 2.4% of gross national payroll\*\*\*\*

\* 2019 Report on Work Fatality/Injury Rates in Canada – University of Regina
 \*\* 2017 Assn of Workers Compensation Boards of Canada
 \*\*\*2017 WorkSafeBC
 \*\*\*\*2014 Conference Board of Canada



#### Across Canada

- Mental health related impairments on the rise.
- In any given week, at least 500,000 employed Canadians are unable to work due to mental health problems.
- Economic burden of mental illness in Canada estimated at \$51 billion each year.
- Nearly 4,000 Canadians die by suicide each year an average of almost 11 per day.
- Suicide rate for unemployed persons with disabilities approx.
  40 times average population.



### **Historic challenges**

- High levels of unemployment / associated poverty for persons with disabilities (1.4 million in Canada today).
- A social, economic and public policy conundrum for governments around the world.
- Led to diverse range of program, policy and legislative interventions.
- 0.65% 0.85% annual outflow rate from disability social security.



#### Socio-economic achievements through

- Early intervention, case management and causation-specific accommodation strategies.
- Reduced claim duration.
- Significantly lowered long term disability rates.
- Reduction in indirect disability-related administrative costs including replacement and training costs.



#### What can we achieve with effective DM programs?

- Address current labour market issues:
  - increasing mental health issues
  - aging workforce
  - reduced labour force availability
- Accommodate Long-COVID health challenges



### **DM in Context**

What can be accomplished with DM?

- Reduce disability-related expenditures by 30 50%
- Reduce long term disability uptake by up to 50%
- Generate a ROI of \$5 : \$1
- Maintain attachment to pre-disability employer



#### **Codification of key success elements**

- ILO Job Retention & RTW Strategies Study (1998)
- ILO Code of Practice on Managing Disability in the Workplace (2002)
- Development of Occupational Standards, best practice Professional and Program Standards in DM / RTW, principally supported through Government of Canada (1998 – 2003)
- United Nations Convention on the Rights of Persons with Disabilities (2008)
- International Social Security Association (ISSA) best practice Guidelines on Return to Work & Reintegration (2013)



### **Universal Key Success Factors**

- Injury prevention and safety programs
- Health promotion and wellness programs
- Early intervention, combined with formal RTW programs
- Policies and procedures jointly endorsed by labour and management
- Benefit program design
- Internal and external communications systems



### **Universal Key Success Factors**

- Education
- Transitional work options
- Workplace accommodations
- Identification of key workplace personnel
- Accountability
- Regulation
- Supportive enterprise cultures



### **Strategy for the Federal Government Initiative**

In June 2019, the Accessible Canada Act was passed by the Federal Parliament.

- It identifies greater equitable employment for persons with disabilities as the #1 public policy challenge.
- It reflects the 1 + 1 rule on average, an individual with a mental or physical health impairment, after 1 year on disability support, will have a 1% (or less) chance of ever working again.



### Strategy for the Federal Government Initiative

- How do we increase the employment rate for persons with disabilities, which has remained unchanged for the last 10 years?
- Recognizing that employers are key evidence-based research indicates that employers with a dedicated DM program will:
  - Accommodate their own employees who acquire a mental or physical health impairment
  - Will, over time, develop appropriate accommodation strategies, policies and practices
  - "Build a Culture of Accommodation"
  - Remove the disability stigma, often associated with the hiring of persons with disabilities from outside their organization



### Strategy for the Federal Government Initiative

The 3 pillars of the Initiative:

- 1. Focus on education Academic and Continuing Education
- 2. Promote professionalization through Disability Management certification
- 3. Employer support to implement / improve Return to Work / Disability Management programs



### Strategy for the Initiative

### First pillar: Education strategy

Building a specialist workforce through:

- Offering scholarships in the full-time and part-time academic Bachelor of Disability Management program offered through Pacific Coast University for Workplace Health Sciences (PCU-WHS): <u>https://www.pcu-whs.ca/programs/bdm/</u>
- Provide residents with free upskilling through Continuing Education courses offered by PCU-WHS:

https://www.pcu-whs.ca/programs/continuing-professional-education/



### Strategy for the Initiative

### Second pillar: Professionalization strategy

Promoting individuals to obtain the Certified Disability Management Professional (CDMP) designation

- Offered under the auspices of the International Disability Management Standards Council (IDMSC).
- Administered through NIDMAR in Canada over 800 CDMPs in Canada.
- More than 4,000 CDMPs globally, located in 20 different countries.
- This strategy provides funding for 50 individuals/year x 3 years to write the CDMP examination.



### **Development of Occupational Standards**



### **Essential Skills and Competencies**

- Disability management theory and practice
- Legislation and benefit programs
- Labour-management relations
- Communication and problem-solving skills
- Disability case management
- Return to work coordination
- Health, psycho-social, prevention and functional aspects of disability
- Program evaluation
- Ethical and professional conduct



### **Strategy for the Initiative**

### Third pillar: Employer support strategy

Supporting workplaces to undertake a program assessment

- Employers offered free RTW / DM program assessments through the internationally recognized CBDMA / WDMA program assessments.
- Delivered under the auspices of the IDMSC.
- Psychometrically stable, legally defensible forensic program assessment protocols.







### **Elements**

- Joint worker-management support and empowerment
- Responsibility, accountability and authority
- Workplace culture and policy development
- Information and communication management
- Benefit design and influences
- Knowledge and skills of the DM practitioner
- Accident prevention and safety programs
- Occupational ergonomics







### **Elements**

- Health promotion and wellness
- Injury, disability and lost time patterns
- Disability cost benefit data
- Early intervention and worker communication protocol
- Case management procedures
- Return to work coordination
- Transitional work options
- Workplace accommodations







#### **Scores at a Glance**

	Element Name	Unit Score	National Industry Average	Global Industry Average
Element 1	Joint Worker-Management Support and Empowerment	76.8%	75%	71.8%
Element 2	Responsibility, Accountability and Authority	91.7%	67.7%	59.7%
Element 3	Workplace Culture and Policy Development	49.2%	51.7%	50.6%
Element 4	Information and Communication Management	77.9%	54%	60%
Element 5	Benefit Design and Influences	52.5%	53.1%	58.3%
Element 6	Knowledge and Skills of the Disability Management Practitioner	100%	81.2%	81.9%
Element 7	Accident Prevention and Safety Programs	89.5%	82%	81.9%
Element 8	Occupational Ergonomics	84.4%	59.4%	57.3%
Element 9	Health Promotion and Wellness	50%	56.2%	66.7%
Element 10	Injury, Disability and Lost Time Patterns	79.2%	64.6%	64.4%
Element 11	Disability Cost Benefit Data	70.8%	52.6%	50.7%
Element 12	Early Intervention and Worker Communication Protocol	86.5%	72.1%	68.2%
Element 13	Case Management Procedures	79.2%	64.6%	66.2%
Element 14	Return to Work Coordination	76.9%	67.3%	63.7%
Element 15	Transitional Work Options	86.1%	79.5%	73.6%
Element 16	Workplace Accommodations	87.5%	70.5%	61.3%
Final Score		79.9%	68%	65.4%



### Resources

NIDMAR – <u>www.nidmar.ca</u>

PCU-WHS – <u>www.pcu-whs.ca</u>

ILO Code of Practice on managing disability in the workplace <u>https://www.ilo.org/global/topics/safety-and-health-at-work/normative-instruments/code-of-practice/WCMS\_107777/lang--en/index.htm</u>

ISSA Guidelines: Return to Work and Reintegration –

https://ww1.issa.int/guidelines/rtw