Early Intervention, Recovery and Return to Work

Review your current return to work policies and procedures. Identify how they might need to be adapted to fit psycho-social hazards, like PTSD. Consider what types of intervention services your organization offers and highlight these in this policy, this could include peer support, EAP, etc.

# Purpose

Click here to enter text. is committed to establishing, implementing and maintaining an effective return to work program for all employees. Our Organization has established a program to assist all employees in intervention, recovery and return to work. Click here to enter text. will make every reasonable effort to help workers return to work and provide suitable work that is meaningful and productive. Through the implementation of the Early Intervention, Recovery, and Return to Work Program, aims to

* Reduce the number of days lost to psychological injury or mental illness
* Lessen the financial and emotional impact of mental illness on the worker by intervening for an early and safe return to work
* Reduce the individual and organizational costs related to mental illness
* Educate workers on mental illness management
* Comply with all legislation, including the Workplace Safety and Insurance Act and the Human Rights Code
* Reduce the number of future trauma-related injures by improving the health and safety of the workplace

# Scope

The success of the Early Intervention, Recovery, and Return to Work program depends on all employees being informed of the program. All workers shall be made available to all information and notified to any changes that may be made.

# Definitions

**Incident/Accident**: A workplace incident that results in an employee injury, illness, first aid, medical attention, fatality, serious injury, or near miss. An incident can involve an employee or visitor.

**Critical Incident**: An event or series of stressful events that overwhelms an individual’s ability to cope. It disrupts an individuals and organizations ability to function normally.

**Critical Injury**: an injury of a serious nature that

1. Places life in jeopardy
2. Produces unconsciousness
3. Results in substantial loss of blood
4. Involves the fracture of a leg or arm but not a finger or toe
5. Involves the amputation of a leg, arm hand or foot but not a finger or toe
6. Consists of burns to a major portion of the body, or
7. Causes the loss of sight in one eye, R.R.O 1990, Reg 834, s.1.

**Event**: An event is an occurrence that does not result in an injury or illness.

**Near Miss**: An incident that does not result in injury or illness but could have. A serious near miss is defined as a near miss, which could have resulted in a serious injury, critical injury, or fatality.

**Occupational Illness/Injury**: An injury or illness that occurs as a result of work related duties or the work environment and occurs while in the course of employment.

**Lost Time**: A workplace incident that caused injury/illness for which medical treatment was required (family physician/walk-in clinic, physiotherapist, and hospital emergency room) and the injury/illness is such that an employee is unable to return to work at any capacity beyond the day of the incident itself.

# Roles and Responsibilities

## Senior Leadership Roles

Our Senior Leadership will:

* Understand the impact that PTSD, and other occupational stress injuries have on the organization
* Identify what health and safety programs already exist and how a PTSD Prevention program can be integrated into existing systems. This should consider:
	+ Management Training,
	+ Employee Engagement,
	+ Anti-stigma Awareness,
	+ Communication Strategies,
	+ Civility and Respect, Anti-Stigma,
	+ Critical Incident response and management,
	+ Employee Assistance Programs (EAP) or other benefits that support a mental health and wellness program,
	+ Training individuals in strategies for resiliency and health behaviour.
* Identify gaps that need to be addressed using an assessment.
* Determine how the organization should monitor trauma exposures.
* Establish policies, procedures, initiatives and services to support the Prevention Plan and Program and monitor implementation.
* Engage Managers and Supervisors in the development pf policies and procedures.
* Set the tone and lead by example, reducing stigma and encouraging conversations and take every reasonable precaution to protect workers.
* Enforce the policies, procedures and program.
* Maintain the Prevention Plan and Program, evaluate it and look for opportunities to improve it.
* Invest in a coordinated Return to Work program that supports recovery and stay-at-work practices.
* Makes early and considerate contact with an injured/ill worker during all stages of recovery and return to work.

## Managers and Supervisors

Our Managers and Supervisors will:

* Be involved in the workplace assessment and participate in identifying controls.
* Participate in training to be aware and ready to address the day to day aspects of PTSD prevention and management.
* Receive training on how to recognize signs and symptoms of PTSD and understand the causes and risk factors and understand how to support workers suffering from PTSD.
* Participate and contribute in establishing policies, procedures, initiatives and services to support the program.
* Enforce the policies, procedures and the Prevention Plan Program.
* Provide advice on how to monitor trauma exposures.
* Be prepared through training, coaching or other means to engage workers in discussions about psychological health and safety.
* Encourage active discussion with workers about mental health and psychological safety.
* Identify individuals at risk of PTSD.
* Implement processes to report concerns and provide support to workers in need.
* Help identify control methods that support PTSD prevention such as workplace rotations for highly exposed individuals.
* Reduce stigma by participating in positive conversations.
* Understand how to accommodate a worker suffering from PTSD.
* Actively participate in a systematic, structures and coordinated Return to Work process and plan.

## Health and Safety Committee

Click here to enter text.’s Health and Safety Committee, or Health and Safety Representative, will be engaged in the development of a PTSD Prevention Plan and Program. To actively participate the committee will:

* Understand the factors of the job that impact psychological health and safety, in particular PTSD. They should develop awareness about what PTSD is, as well as the symptoms causes and risk factors.
* Be involved in the workplace assessment of risk factors, barriers and gaps to reducing the impact of PTSD.
* Assist the organization in developing a process for identifying workplace mental health and wellbeing issues, and in particular PTSD.
* Help identify controls that can be put in place to address psychological health and safety.
* Help reduce stigma related to mental illness by participating in identifying the need for education, training, and resources to address PTSD, and participating in delivering these to the organization.
* Participate in training to enable support of the workforce as required.
* Engage in the development of a communication plan and strategies related to address psychological health and safety, particularly PTSD.
* Reduce stigma by participating in positive conversations.

## Employees

Our Employee’s will

* Comply with policies, procedures and the program.
* Participate in training and education about PTSD, and required training (resiliency, anti-stigma, policies, etc.).
* Report concerns, incidents to that they can be investigated and addressed.
* Listen to coworkers and encourage engagement in the program if needed.
* Reduce stigma by participating in positive conversations.

## Return to Work Coordinator

You may want to specifically define who fulfills this role in your organization

The Return to Work Coordinator will:

* Assist the injured/ill worker to remain or return to work while they recover, while also ensuring that the workers return to work date is sensible, flexible and safe for the worker.
* Help the worker return to the workplace post-injury/illness.
* Connect and consult with the injured/ill worker, treating health professional, and WSIB representative and make sure that everyone understands what to expect and what is expected of them.
* Monitor the workers progress towards returning to work.
* Take steps to prevent further injury/illness or relapse.
* Help resolve issues or disputes related to the return to work.

## Unions

The union will:

* Be consulted about policies and procedures
* Work collaboratively with initiatives designed to reduce the impact of PTSD
* Educate and train their stewards/leadership to assist in recovery and return to work of their membership with PTSD

# **Early Intervention Strategies**

An important part of preventing and managing the crisis is helping your workers minimize stress when they return to work. Consider implementing all or some of these post-event interventions to support workers exposed to trauma.

When workers are exposed to a traumatic event, Click here to enter text. will provide those workers with the following early interventions to minimize stress and promote prevention of PTSD. The specific early interventions that will be utilized include:

* Allowing time off for the workers who have been involved in a traumatic event.
* Providing workers with stigma-free counselling services to address the emotional aspects of what they have experienced.
* Using of debriefing sessions that focus on helping the worker put their experiences in perspective and validate what they have seen, done, thought and felt.
* Providing ongoing education that gives information on PTSD, stress management and actions that workers can take for themselves.
* Offering peer support programs.
* Encouraging the worker to seek medical care if they are experiencing symptoms of PTSD.

# Return to Work Program

Click here to enter text. Return to Work program is built on the 7 Principles of Return to Work which supports positive outcomes for our workers. The return to work process is highlighted below:

* The employer will make early and considerate contact with the injured/ill worker.
* The employer will make an offer of modified work to the injured/ill worker so they can return to work safely.
* The return to work plan will be developed so that it supports the returning worker, their coworkers and their supervisor.
* The supervisor will receive training in work disability prevention and be will included in the development of the workers return to work plan.
* The worker will be provided an individualized Return to Work plan that focuses on the workers initial and ongoing needs.
* The employer will maintain ongoing communications with healthcare providers and the WSIB to ensure that they understand the workers job and the workplaces ability to accommodate.

## Supervisor and Return to Work Coordinator Considerations

When considering how to accommodate a worker the Supervisor and Return to Work Coordinator will review the following:

* What is the worker experiencing (signs and symptoms) and what are the limitations?
* How will these limitations impact the work that the worker needs to do?
* Are there certain job tasks that should be restricted as they may be problematic?
* What accommodations can help address or remove these limitations?
* Has the worker been asked about possible accommodations, can they help identify specifically how the organization can assist?
* Does the workers Sr. Leadership team, Supervisor or Coworkers need training on PTSD to help facilitate a successful return?
* Is the worker currently receiving care or treatment and if so, are they continuing to follow a treatment plan (if this is known) while at work?

## Providing Accommodation

This section should include direction on the specific types of accommodations that can be made within your organization

Our organization will work with the worker suffering from mental illness to ensure the workers are supported when returning to work. If the worker is unable to return to their pre-injury position, modified duties and accommodations will be made and determined in accordance with the Manager, Supervisor, and Return to Work Coordinator.

The chart below can be utilized by the Manager, Supervisor and Return to Work Coordinator to identify types of accommodations that can be used to support a worker suffering from PTSD. This chart is aligned to specific signs and symptoms and how they can manifest themselves at work.

### Potential Accommodations

| Signs and Symptoms | What this could look like at work | Impact on job tasks | Potential Accommodations |
| --- | --- | --- | --- |
| Triggered memories, emotions or physical symptoms related to the trauma | Intense distress or uncontrolled physical responsesUnexpected breaks Reduced concentration when on task or seeming “out of it”Increased errors in tasks well known to the workerDifficulty completing complex tasks, particularly when under stressReduced organizational skills | Difficulty tolerating tasks of certain type or in certain locationsDifficulty completing tasks with deadlines, time pressures or high expectationsPerformance below expected for training or experienceInability to complete tasks or multi-task | Identify and remove environmental triggers such as particular smells, or noisesAllow tasks be completed in an area that is “safe” for the individualGradual increase time spent performing distressing tasks over weeksAllow for breaks and provide a place where the worker feels comfortable to use relaxation techniques or contact a support personWork with a supportive “buddy”Allow support animalsReduce distractions/triggers in the workplace* Sound proofed areas
* Use of white noise/soothing music
* Uninterrupted work time

Manage completion of work* Flexible scheduling
* Working within a supportive team
* Breaking large projects into smaller chunks, with easily achievable goals
* Provide memory aids such as schedulers, organizers, use of auditory or written cues
* Weekly meetings with supervisor or mentor to assist with determining goals, achievable daily work assignments and deadlines

Restrict tasks with immediate risk for injury if concentration lapses or they need to leave the work area |
| Avoidance or trauma-related reminders | Inconsistent attendanceLatenessLeaving earlyExtended breaksSocial withdrawalKeeping in the “background”Being the last to respond to callsExpressed feelings of guilt, depression or worry | Difficulty reliably attending work or completing tasksRefusal to work in certain areas or complete certain tasksDeclining to participate in team based activities or trainingReduced motivation and productivityReduced capacity to cope with stressful situations or conflictInterpersonal difficulties with customers, supervisors and co-workers when pushed to take on new roles | Review need for psychological restrictions with the treating clinicians and ensure they are being respected by supervisorsOffer engagement in exposure-based therapy in the work placeEncourage use of stress management techniques Allow for a flexible work environment – scheduling, breaks, leaves for counseling, work from homeMake modifications to the work environment such as partitions or closed doorsAllow telephone calls to doctors or peers for needed supportProvide awareness training to supervisors and co-workersConsider requests for privacy with others/public if feeling insecure in their modified role Allow a support animal |
| Hyper-arousal | Intense focus on safety and potential hazards at workIncreased conflict with coworkers and/or superiorsExaggerated startle response to noises or when approachedExcessive fatigue or appearing tiredIncrease in self-medication or substance use to manage sleep   | Frequent complaints about safety-related issuesPreference to work in certain areas or with certain peopleComplaints from the staff or public Potential intoxication or being “hungover” at work | Assign supervisor or mentor to be available to answer worker’s questions Encourage the worker to walk away from frustrating situations and confrontationsAllow the worker to work one consistent schedule or on a consistent crewProvide goal-oriented workloadUse a mentor or supervisor to alert employee if behaviour is becoming unprofessional or inappropriateProvide a place for the employee to sleep during breaks if neededRestrictions from safety-sensitive duties while actively seeking help for substance use  |

# Medical Confidentiality

All persons involved in the return to work process are required to maintain appropriate confidentiality of all medical or private information, consistent with Click here to enter text. requirements and applicable provincial laws.

# Training

Click here to enter text. is committed to providing PTSD and anti-stigma awareness training to all Sr. Leadership, Managers, Supervisors and Workers within our organization. Our organization will develop, implement and maintain the awareness training program so that all staff are familiar with the signs and symptoms of PTSD as well as all of our policies and procedures related to prevention, intervention and return to work. The Sr. Leadership team requires that all employees are involved and participate in this training program.

# Evaluation

The Recovery and Return to Work policy and program will be evaluated at planned intervals and reviewed by the Joint Health and Safety Committee or Health and Safety Representative. The purpose of the evaluation is to determine if the objectives are being met and to evaluate effectiveness. Our Organization is committed to using the results of our evaluation for continuous improvement.

# Reporting and Recordkeeping

Recovery and Return to work recordkeeping is maintained with the HR manager.