

Co-operation with the labour market for effective Vocational Rehabilitation



Jain Holmes,
Rehabilitation
Director,
MSc, Dip COT,
HPC Registered

- Work and health
- Vocational rehabilitation
- Co-operative working
- Trustworthiness

- Successes
- RTW stories
- Business benefits
- Quality services

Today's talk

- Paid
- Unpaid
- Hidden
- Substitute

Ross J (2007)

What is Work?

- The risk is equivalent to smoking 10 packs of cigarettes per day (Ross 1995)
- Young men who have been out of work for 6 months have a 6 fold increase in suicide
- There is a greater risk to health and life expectancy than many 'killer diseases'
- It is a greater risk than the most dangerous jobs in building sites or the North Sea

Waddell and Aylward, 2005

Absent from work...

- Links are not new knowledge – 1970's
- Health benefits
 - Individual
 - Family
- Social benefits
- Old view “vs” new evidence-based view
- 28.5 million Google hits in 0.35 secs for “unemployment & health”

Health and work

modern clinical and occupational management emphasises that return to work as early as possible is an essential part of treatment for many health problems, even with some persistent symptoms. Thus work is not only the goal of and outcome of treatment: work itself is therapeutic; aids recovery and is the best form of rehabilitation.

Waddell & Aylward (2005)

“the combined and coordinated use of medical, social, educational and vocational measures for training or retraining the individual to the highest possible level of functional ability.”

1974

World Health Organisation

“... Is a process to overcome the barriers an individual faces when accessing, remaining or returning to work following injury, illness or impairment.”

It involves procedures to support an individual and or the employer or others.

And ... Involves practically managing the delivery of VR services.

DWP (2004)

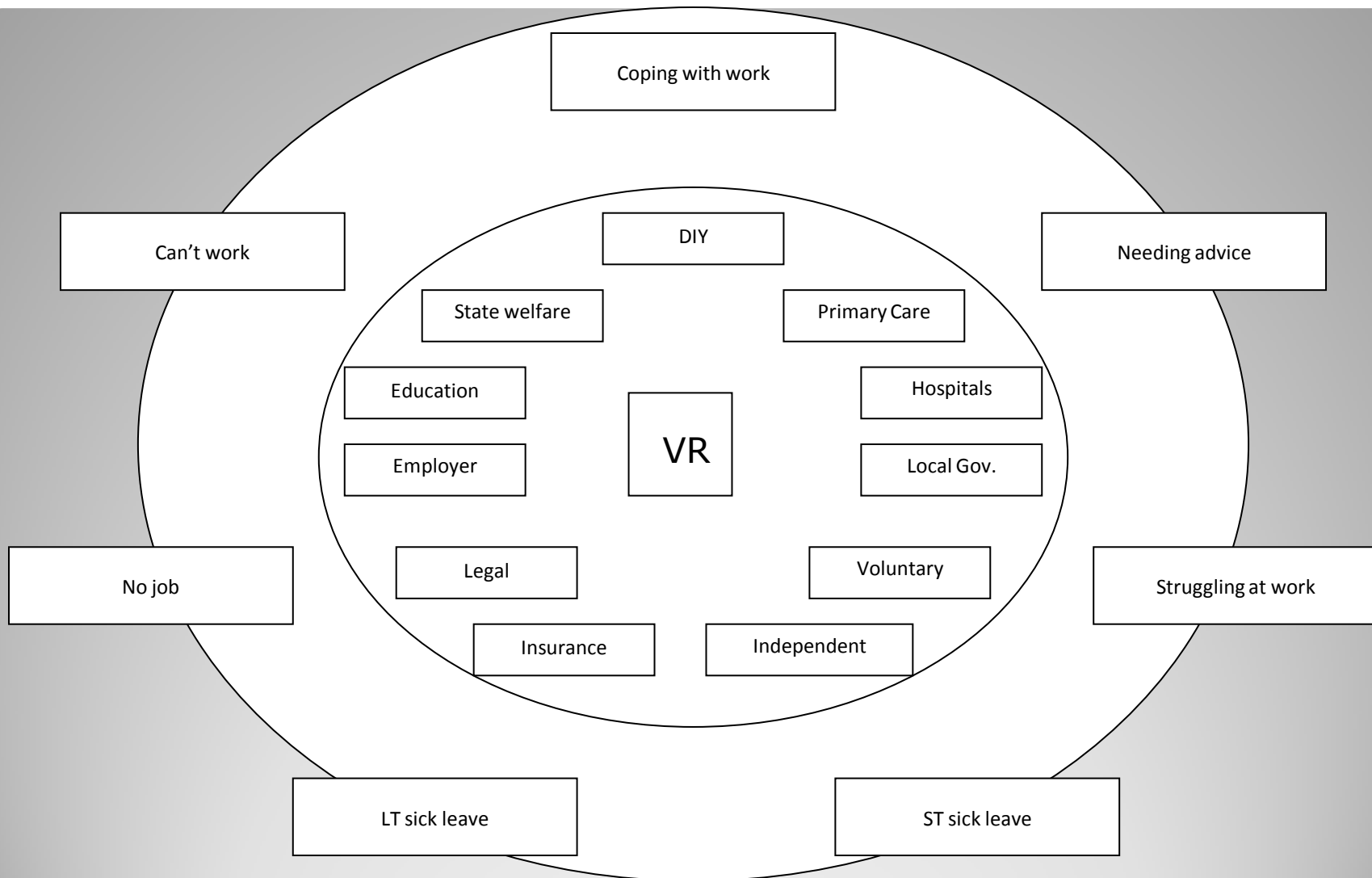
Vocational Rehabilitation

“is whatever helps someone with a health problem to stay at, return to and remain in work. It is an idea and an approach as much as an intervention or a service.”

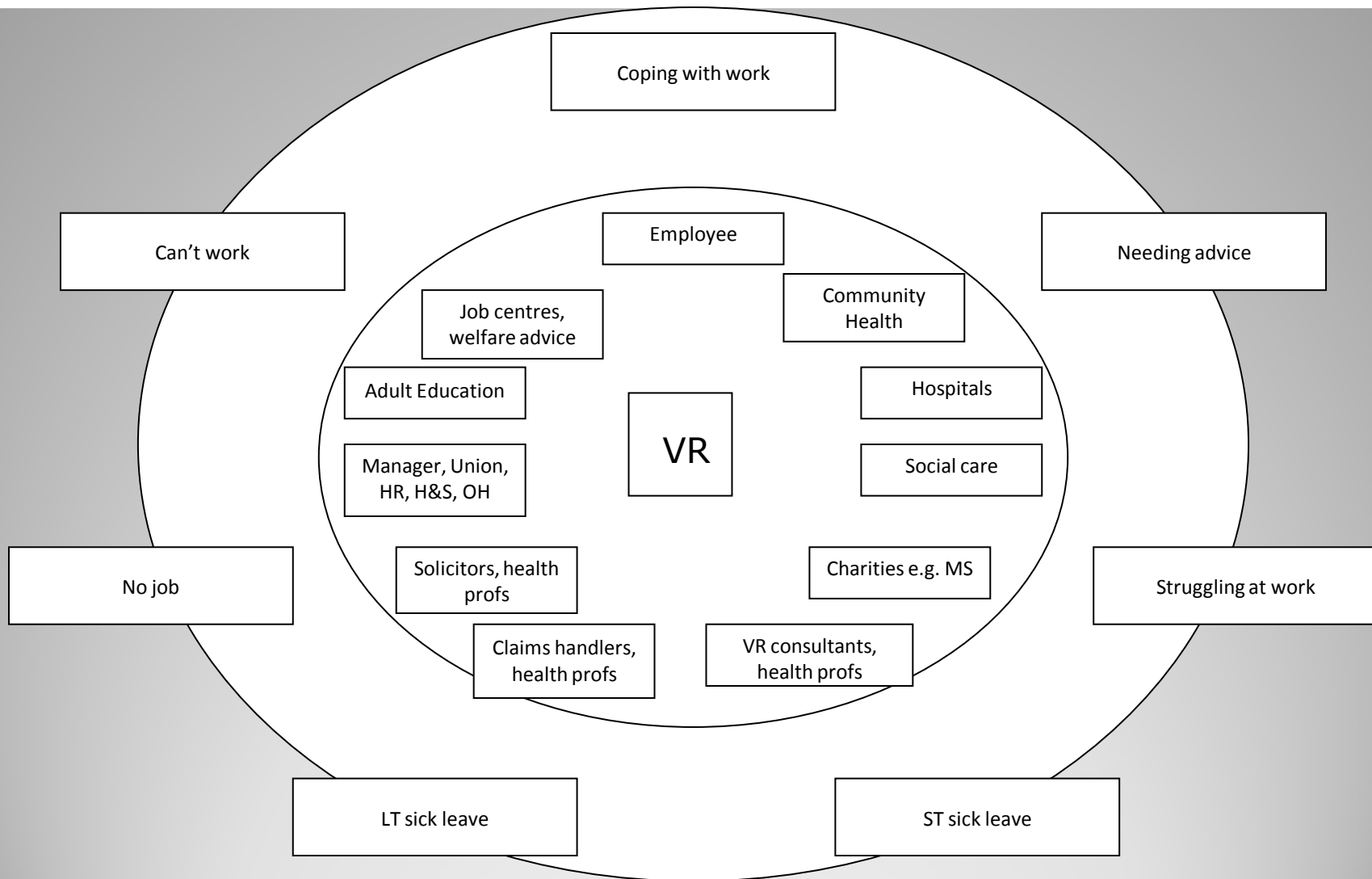
Waddell, Burton, Kendall (2008), p8



VR in Context



Holmes, 2007



Holmes, 2007

- Employee/ service user
- VR consultant
- Employer
- Trades Union
- Health & Safety
- Welfare benefits
- Health professional recommendations and contraindications.

Interested in working

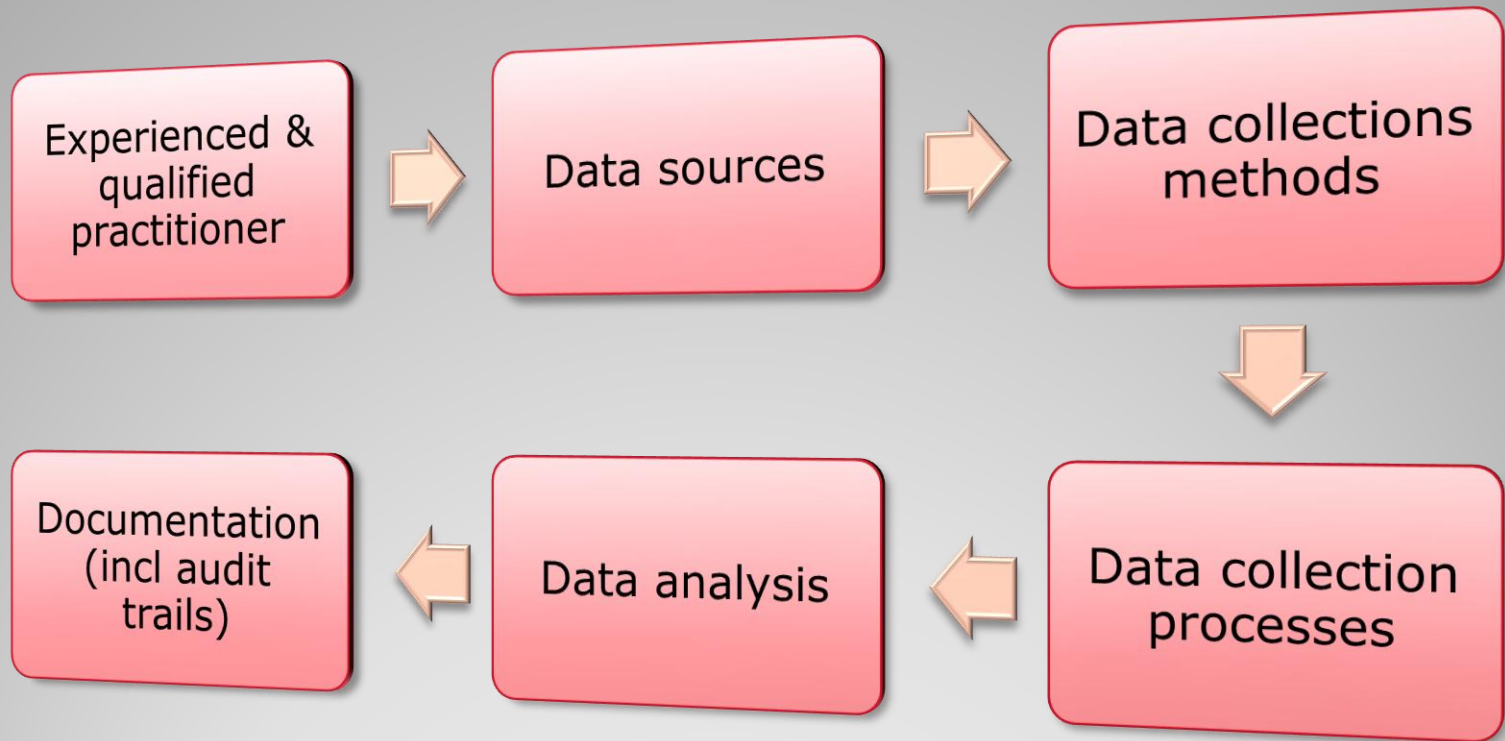
Preparation	Choosing	Engaging
Activity control of symptoms Work conditioning/hardening Job Simulation Cognitive Behaviour Therapy	Careers Job matching New job New education Own business	Workplace adjustments Modified work Planned GRTW Supported Employment Monitoring Follow-up

Holmes, 2007

Helping co-operation

- What is the goal of VR?
- What is understood to be the obstacles for RTW?
- Who best understands the obstacles?
- Who has sufficient training?
- Who is influential?
- Who can provide adequate time to support an individual and an employer?

Who can be a VR Consultant?



Innes & Straker 2002

Trustworthy data



What does success look like?

- What is the gap between where the employee is now... And where they need to be?
- How is the gap narrowed?
- Who needs to be involved?

RTW implementation

- **Return to same job, same employer**
- Return to same job modified, same employer
- **Return to different job, same employer**
- **Return to same job, different employer**
- Return to same job modified, different employer
- **Return to different job, different employer**
- On the job training
- New skill training or retraining
- Other educational/academic program; and
- **Other**

New Hampshire Department of Labor

Outcomes

- What do you think the benefits are?
- It's your business – not mine...

Benefits for business

- The right model of practice
- The right funding
- The right personnel
- VRA standards - 2007
- UKRC Rehabilitation Standards – 2009
- Professional ethics and standards of practice

Establishing Quality