

For Your Insight: Research and Practice From the Field

January 8, 2020

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This biweekly update highlights relevant research for RETAIN states and summarizes key takeaways that may benefit program implementation. Each summary includes a link to the article, resource, or formal abstract.

Red Flags/Green Lights: A Guide to Identifying and Solving Return-to-Work Problems

MacEachen, Chambers, Kosny, and Keown (2009), in collaboration with a team of “knowledge transfer professionals and communication experts,” developed this guide based on results of their previous study that examined “how and why some injured workers fail to return to work as expected.” The goal of the guide is to help return to work (RTW) decision-makers (e.g., employers, workers compensation staff, healthcare providers, RTW specialists) support injured workers who are in the RTW process by providing suggestions for support—“green lights”—and to identify warning signs of problems that might impede a worker’s RTW after illness or injury—“red flags.” Specifically, this guide “Helps decision-makers to recognize warning signs of problems; identifies issues that can escalate; helps pinpoint possible explanations for RTW problems; [and] offers helpful approaches and suggestions [to decision-makers].” The guide uses real life examples of “red flag” situations in which workers’ RTW processes were not going as expected. The vignettes also explore how decision-makers could manage these “red flag” situations to improve injured workers’ recovery and the RTW process—“green lights.”

The guide includes four sections with red lights and green lights highlighted in vignettes at the beginning of each section: (1) “workplace-based problems that can delay return to work” (e.g., RTW too early, difficulty traveling to work, physically unsuitable work tasks);” (2) “problems with vocational rehabilitations processes...that may affect the worker’s ability to successfully re-enter the labour [sic] market;” (3) “health or medical management issues that may hinder the worker’s recovery or engagement in [RTW];” and (4) “claim process and communication issues that can complicate or prolong the claims process.”

Guide available: [MacEachen, E., Chambers, L., Kosny, A., & Keown, K. \(2009\). *Red flags/green lights: A guide to identifying and solving return-to-work problems*. Toronto, Ontario, Canada: Institute for Work & Health.](#)

Tags: Return to work, sample vignettes, RTW coordination

Requesting Workplace Accommodations: Impact of Self-Efficacy, Outcome Expectancy, and Positive Affect

To create “improved understandings of the cognitive and emotional factors contributing to an employee’s decision to request a workplace accommodation,” Dong, Fabian, and Xu (2016) surveyed 714 persons with disabilities (PWDs) who needed workplace accommodations in the three months prior to examine how three variables—self-efficacy, outcome expectancy, and positive affect—influence a person’s intent to request a workplace accommodation. The authors define self-efficacy as a person’s beliefs about their ability “to successfully perform particular behaviors or courses of action”; and they describe outcome expectancy as a person’s “beliefs about the consequences of given actions.” PWDs “who felt determined, enthusiastic, and positive about the accommodation process were more likely to express an intention to request an accommodation.” The authors also found that PWDs who had higher levels of self-efficacy “were more likely to request workplace accommodations.” Finally, the authors found that PWDs who “feel that their employer supports their accommodation requests, who believe that accommodations requests do not post personal cost, and who believe that others on the job deem their accommodation requests appropriate are more likely to request accommodations.” The authors conclude that a person’s intent to request a workplace accommodation is a complex process that is influenced by both cognitive and emotional factors. They suggest that rehabilitation professionals who work with PWDs in navigating the accommodation request process strive to help PWDs build their self-confidence and coping skills and to improve their outlook regarding “the likelihood of positive outcomes” in their requests.

Abstract available: [Dong, S., Fabian, E., & Xu, J. \(2016\). Requesting workplace accommodations: Impact of self-efficacy, outcome expectancy, and positive affect. *Rehabilitation Psychology*, 61\(4\), 371–379.](#)

Tags: Workplace accommodation, persons with disabilities, self-efficacy, outcome expectancy, positive affect

Length of Disability and Medical Costs in Low Back Pain: Do State Workers’ Compensation Policies Make a Difference?

Shraim, Cifuentes, Willetts, Marucci-Wellman, and Pransky (2015) explored associations between total medical costs and the number of workdays missed (“length of disability,” or LOD). They also explored associations between state workers’ compensation (WC) policies related to wage replacement and medical benefits among workers with low back pain (LBP). The authors looked at a large, national WC administrative database of records filed between 2002 and 2008 for 59,360 workers with LBP from 49 states. Average medical costs across the sample were \$8,296, and average LOD was 98 days. The authors found significant variation among states in both average medical costs and LOD, even when controlling for individual-level characteristics such as age, sex, wage, length of employment, industry, and severity of the LBP. Results demonstrated that longer retroactive periods, defined as the “number of days before the injured worker is eligible for indemnity benefits covering the waiting period” and state WC laws that allow injured workers treating provider choice were both associated with higher medical costs and longer LOD. In addition, “limiting the option to change providers and having a fee schedule were associated with longer LOD, except that allowing a one-time treating provider change was associated with lower medical costs and shorter LOD.” The authors conclude that many of the state-to-state differences in medical costs and

LOD among people with LBP are “... explained by state-level WC policies regarding wage replacement and medical benefits.”

Full text available: [Shraim, M., Cifuentes, M., Willetts, J. L., Marucci-Wellman, H. R., & Pransky, G. \(2015\). Length of disability and medical costs in low back pain: Do state workers' compensation policies make a difference? *Journal of Occupational and Environmental Medicine*, 57\(12\), 1275–1283.](#)

Tags: Workers compensation policy, low back pain, medical cost

Workplace Accommodation: Low Cost, High Impact

The Job Accommodation Network (JAN) surveyed 2,744 employers that previously contacted JAN for information regarding workplace accommodations and the associated cost of accommodations. JAN asked employers about the situation that caused them to contact JAN originally, the outcome of the situation after the initial contact, and the employer’s thoughts on “the quality of the services JAN provided.” The report details five findings: (1) “Employers want to provide accommodations so they can retain valued and qualified employees”; (2) “most employers report no cost or low cost for accommodating employees with disabilities”; (3) “employers report accommodations are effective”; (4) “employers experience multiple direct and indirect benefits after making accommodations”; and (5) “employers find JAN helpful during the accommodation process.” Finally, the report includes 10 examples of real-life situations in which employers contacted JAN, the accommodations made by the employers for their employees, and any costs related to those accommodations.

Research report available: [Job Accommodation Network. \(2019, September\). *Workplace accommodations: Low cost, high impact*. Retrieved from <https://askjan.org/topics/costs.cfm>](#)

Tags: Workplace accommodations, accommodation cost, employers

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