



## For Your Insight: **Research and Practice From the Field**

#### October 7, 2020

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This monthly update highlights relevant research for RETAIN states and summarizes key takeaways that may benefit program implementation. Each summary includes a link to an article, resource, or formal abstract. An accessible version of For Your Insight is attached to this email.

### How Can Workers' Compensation Systems Promote Occupational Safety and **Health?**

Dworsky and Broten (2018) conducted a literature review to identify concerns with the current workers' compensation system from the perspectives of workers, employers, claim administrators, state agency leaders, and occupational health care providers and how to make workers' compensation policy more effective. The report includes four main sections: (1) objectives and recent critiques of workers' compensation policy; (2) stakeholder views of system challenges; (3) policy options and system needs; and (4) suggestions for a research agenda to improve workers' compensation policy. The report's first section identifies policy challenges related to workers' compensation, including how return-to-work (RTW) outcomes are unequal across income levels because some workers are pushed to RTW too early, while others work at companies that do not focus on RTW initiatives. Other challenges discussed in this section include information about workers' compensation excluding small businesses, the complexity of the workers' compensation system slowing down the claim process, and the lack of coordination between occupational and general health care. In section two, the authors summarize views on system challenges from five stakeholder groups. The themes in this section include: (1) problems in system coverage, benefit adequacy, and cost spillovers; (2) problems with the claim management process such as the process resulting in too many lawsuits and in difficulty navigating the system; (3) problems with occupational health such as the lack of timely medical care to injured workers; and (4) problems with the health care system not promoting health outcomes other than RTW. In the paper's third section, the authors summarize policy options to improve workers' compensation and future research needs. For policy options, themes include: (1) removing barriers to claims and system navigation; (2) strengthening the focus on injury and disability programs; (3) improving health care delivery; (4) integrating workers' compensation with the health care system; and (5) improving health care records, communication, and education. For research needs, themes include: (1) causes of occupational health and disability outcomes; (2) identifying best practices; (3) models for improving dispute resolution; (4) cost shifting to social programs and families; and (5) impacts of changing work arrangements. In the fourth section, the authors conclude with recommendations on workers' compensation policy for research funders' future priorities. On the federal level, for example, the authors recommend that the National Institute of Aging focus more sharply on "disability prevention; return-to-work efforts for older workers." On the state level, the authors recommend that workers' compensation agencies prioritize state-specific policy evaluations and design policy reforms.

Report available: <u>Dworsky, M., & Broten, N. (2018)</u>. *How can workers' compensation systems promote* occupational safety and health? Stakeholder views on policy and research priorities. Santa Monica, CA: RAND.

Tags: Workers' compensation, occupational safety, policy

# An Approach to Assess the Burden of Work-Related Injury, Disease, and Distress

Schulte and colleagues (2017) developed a new approach for assessing the societal and individual burdens of work-related injuries. Their approach is composed of four elements. The first element focuses on the interactions between work-related injuries, family, community, the employer, and society. The second element focuses on a broader view of work-related injuries that expands the description of such injuries (i.e., occupational disease and injury, work-related disease and injury) to include non-work factors. Non-work factors may include, for example, injuries not caused solely by the workplace (e.g., arthritis, hearing loss), but that may be exasperated by performing work duties. Accounting for how non-work factors influence work injury is important for prevention considerations. The third element of the authors' approach focuses on "both occupational and workrelated components of burden within the context of an individual's entire working life." Workers may experience different occupational hazards throughout their work life that influence the overall burden of work-related injuries. Periods of unemployment may also increase stress that makes work related injuries worse. The fourth element focuses on well-being, defined as "flourishing and aspiring to a good life." Well-being also includes factors related to motivation, productivity, lower health care costs, and lower absenteeism. The authors conclude that a broad understanding of burden related to work injury can help policymakers determine what levels of prevention and risk management employers need.

Full text available: <u>Schulte, P. A., Pana-Cryan, R., Schnorr, T., Schill, A. L., Guerin, R., Felknor, S., & Wagner,</u> <u>G. R. (2017). An approach to assess the burden of work-related injury, disease, and distress. *American* <u>Journal of Public Health, 107(7), 1051–1057</u>.</u>

Tags: Work-related injuries, occupational health, risk management

#### Challenges of "Return to Work" in an Ongoing Pandemic

Barnes and Sax (2019) identify challenges that employers may face in implementing innovative disease measures to keep their employees safe. The first challenge—low-tech prevention measures such as wearing masks, frequent hand washing, and social distancing at work—can be labor intensive and may require active monitoring of the workplace. Even with low-tech measures, employers also cannot control the risk of transmission outside the workplace. To reduce the risk, employers may administer daily health questionnaires and require temperature screening at the start of each workday. The second challenge-environmental, engineering, and administrative controls such as installing barriers between workers or between workers and customers, following ventilation standards, and improving air exchange—are more expensive to implement than low-tech solutions. The third challenge involves how to protect employees with preexisting conditions or higher health risk. Employers might encourage employees with higher health risks to work from home when possible, rather than mandate exclusion from the physical workplace. The fourth challenge focuses on how to stagger work shifts and encourage remote working when possible to reduce the risk of transmission, especially for employees who travel for work. However, the "timing of shifts, shift duration, degree of necessity of on-site work, feasibility of continued remote work, and degree of personal health risk" may make this harder and may require an employee-by-employee review. The fifth challenge focuses on how to test employees for COVID because COVID test results typically can be returned to the employer only with the employee's explicit consent. As a result, the employer must rely on employees to report positive test results. The sixth challenge concerns the implementation of contact tracing to reduce transmission, because employers can trace employee contacts within the workplace but cannot track private contacts. Employers may request contact tracing support from local and state health departments, but these departments also have staff shortages that may limit their ability to provide adequate support. The seventh challenge focuses on mobile applications that can help trace employee telephone contacts, but adoption of these apps may not be consistent among employees, and employers may consequently fail to identify at-risk workers.

Full text available: <u>Barnes, M., & Sax, P.E. (2020)</u>. Challenges of "return to work" in an ongoing pandemic. *New England Journal of Medicine*, 383, 779–786.

Tags: return to work (RTW), COVID, occupational health

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