

For Your Insight: Research and Practice From the Field

February 3, 2021

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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, a resource, or a formal abstract. An accessible version of For Your Insight is attached to this email.

Supervisor and Organizational Factors Associated With Supervisor Support of Job Accommodations for Low Back Injured Workers

Kristman and colleagues (2017) examined organizational factors that lead to work supervisors supporting temporary job accommodations for individuals with lower back pain (LBP). The authors identified three main organizational factors: 1) increasing use of a leadership style that emphasizes the development of a personal relationship with employees based on cooperation and showing concern for their needs, also called a considerate leadership style, 2) strong workplace disability management policies and practice, and 3) supervisor freedom to design and provide workplace accommodations. The authors found that a considerate leadership style had the greatest influence on whether a supervisor accommodates workers with LBP. Considerate leadership may also result in greater trust among employees and supervisors and improve the social environment of the workplace. The authors found that workplace disability management policies were the second greatest factor influencing supervisors to provide accommodations. Finally, the authors found that supervisors with the authority to design accommodations were more likely to support accommodations. The authors recommend workplace interventions that focus on these three factors to improve work disability prevention outcomes.

Research available: [Kristman, V.L., Shaw, W.S., Reguly, P., Williams-Whitt, K., and Loisel, P. \(2017\). Supervisor and organizational factors associated with supervisor support of job accommodations for low back injured workers. *Occup Rehabil.* 2017 March; 27\(1\): 115–127.](#)

Tags: RTW, supervisor support, job accommodation

Recession, Fear of Job Loss, and Return to Work

Bogdan and Savych (2010) examined economic conditions related to workers' concerns about job security and return to work (RTW) outcomes. The authors surveyed injured workers during the economic expansion of the late 1990s, the recession of 2001, and the economic recovery from 2002 through 2006. The authors found that a serious recession can change worker behavior related to RTW efforts. Changes in RTW behavior are highlighted by two key findings from the survey data: 1) workers may be more determined to RTW earlier to increase the prospects that their job will exist after RTW, and 2) injured workers in fields where unemployment is high are more likely to pursue RTW because they are fearful about losing their job. Both key findings highlight how workers who fear being fired are less likely to face long-term unemployment after injury. Motivation to RTW from fear of job loss may help offset "a significant portion of the traditional negative effects of recessions on return-to-work outcomes of injured workers." The authors conclude that their findings provide evidence that fear associated with job loss may play an important factor in how quickly an injured worker returns to work.

Report available: [Victor, R.A., & Savych, B. \(2010\). *Recession, fear of job loss, and return to work*. Cambridge, MA: Workers Compensation Research Institute.](#)

Tags: RTW, job security, recession

Using Electronic Health Records and Clinical Decision Support to Provide Return-to-Work Guidance for Primary Care Practitioners for Patients With Low Back Pain

McLellan and colleagues (2017) examine a clinical decision support (CDS) tool designed to help primary care physicians provide RTW support for individuals with LBP. Subject matter experts designed the CDS tool to support the prevention of work disability, facilitate communication between the physician and employer, help physicians consider the interactions between a patient's work and health, and increase occupational health data in electronic health records. The CDS tool is a health information technology system meant to be embedded into electronic health record systems, which then generates an activity prescription report using actuarial data (i.e., statistics used to calculate various sorts of risk that insurance companies insure people against) and expert consensus. Primary care physicians then give the activity prescription report to the patient, which provides information about both occupational and non-occupational limitations. The activity prescription also serves as a report to employers and other stakeholders (e.g., workers' compensation insurers) about patient limitations. The CDS tool is evidence based and is consistent with findings from other observational studies. The authors conclude that the CDS could be expanded from LBP to cover other work- and non-work-related conditions.

Research available: [McLellan, R.K., Haas, N.S., Kownacki, R.P., Pransky, G.S., Talmage, J.B., & Dreger, M. \(2017\). *Using electronic health records and clinical decision support to provide return-to-work guidance for primary care practitioners for patients with low back pain*. *J Occup Environ Med*. 2017 November; 59\(11\): e240–e244.](#)

Tags: RTW, primary care physicians, clinical decision support

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