Return to Work (RTW) Coordination Manual

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Acknowledgements

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Preface

In 2018, the State of Connecticut was one of eight U.S. states awarded a Phase I cooperative funding agreement by the U.S. Department of Labor, Office of Disability Employment Policy (ODEP), to launch a pilot system-level early return-to-work program combining elements of Return-to-Work (RTW) coordination, medical provider education and training, and multi-stakeholder engagement and cooperation. This Federal funding authorization is titled “RETAIN” (Retaining Employment and Talent after Injury/Illness Network), and the stated goal of the program was to increase employee retention and labor force participation of individuals who acquire and/or are at risk of developing work disabilities.

The Connecticut RETAIN program engaged the help of healthcare providers, a medical and ergonomic advising team from UConn Health, and a local workforce development board, to provide a more proactive approach to disability prevention after musculoskeletal pain or injury. The goal was to help workers and their employers with optimal accommodations to facilitate a safe and sustainable return-to-work. The Connecticut Department of Labor was the lead agency for the RETAIN-CT Phase I project, with major partners including the University of Connecticut Health Center (UCHC), Community Health Center Association of Connecticut (CHCACT) and Capital Workforce Partners (CWP).

One aspect of the study was to provide RTW coordination services to those who were unable to return to work within 30 days of injury/disability. This service was provided by workforce professionals employed with a local workforce development board, and represented a new and innovative effort to build capacity in existing employment service systems. The specific focus was on disability prevention for workers with existing jobs who had new or chronic injuries or illness that resulted in health-related absences. The purpose of this manual is to specify methods and tools recommended for use by local workforce development professionals, when serving individuals seeking assistance to return to work after an injury or illness.
Chapter I: Background and Goals

On average, working is good for your health and helps to sustain your financial well-being and self-esteem. Injuries and illnesses that are serious enough to result in a prolonged absence from work, however, can present many lifestyle challenges, both at work and at home. For common musculoskeletal conditions, recurring and episodic pain can feel unpredictable, uncontrollable, and overwhelming. When musculoskeletal pain persists for more than a few days, afflicted workers can face all sorts of new problems: finding ways to avoid pain flare-ups; performing physical job tasks differently; maintaining most of their normal roles, responsibilities, and schedules; getting adequate care and support; and avoiding stigma and embarrassment. While many workers manage to stay at work under these circumstances, others struggle with the number of problems they face and the multi-faceted complexity of these problems. Return-to-work coordination is one intervention strategy that supports workers’ efforts to overcome these unique workplace challenges related to an episodic disability problem.

The global COVID-19 pandemic presented a whole new work landscape, and with it, unique challenges for returning to work. One scenario are workers who have contracted the virus who must quarantine and may be out of work sick at home or worse, hospitalized. Another is that workers who are parents are facing challenges as schools “go virtual” and children are learning from home. As the virus passes among family members and children, the immediate short-term need for medical care and attention, often involve quarantine and time off from work. A long term challenge is from what Dr. Anthony Fauci, Chief Medical Advisor to the President of United States is calling, post-acute sequelae of SARS-CoV-2 infection or “PASC”.

According to the Centers for Disease Control (CDC) “Post-COVID conditions” is an umbrella term for the wide range of health consequences that are present four or more weeks after infection. This is oftentimes referred to as “Long-COVID” as well. Post-exertional malaise (PEM) is the worsening of symptoms following even minor physical or mental exertion, with symptoms typically worsening 12 to 48 hours after activity and lasting for days or even weeks. It can be difficult to distinguish symptoms caused by post-COVID conditions from symptoms that occur for other reasons.

The most commonly reported persisting Post-COVID symptoms are: Dyspnea or increased respiratory effort, Fatigue, Post-exertional malaise and/or poor endurance, “Brain fog,” or cognitive impairment, Cough, Chest pain, Headache, Palpitations and/or tachycardia, Arthralgia Myalgia, Paresthesia, Abdominal pain, Diarrhea, Insomnia and other sleep difficulties, Fever, Lightheadedness, Impaired daily function and mobility, Pain, Rash (e.g., urticaria), Mood changes, Anosmia or dysgeusia, and Menstrual cycle irregularities.¹

Workers describe many reasons that staying at work or returning to work can seem impossible. In addition to fears of escalating pain or re-injury, or in the case of COVID-19 and/or “long-COVID”, fears about returning to work in-person and/or suffering from chronic side effects of the virus, workers have concerns about relationships with peers, performance metrics and expectations, organizational policies and practices, their perceived trust and dedication, and supervisory support and empathy. These social, interpersonal, and organizational factors in working lives can become magnified at the time of an injury or illness, and for some, these circumstances can become significant barriers to staying or returning to work. A strictly biomedical approach to care that does not include attention to psychosocial factors or address workplace concerns. This approach may fail to identify and address the holistic need of these workers and fail to support them in overcoming obstacles for a successful return to work, therefore resulting in needless disability.

Workers who experience COVID-19 symptoms and return to work after a period of illness and quarantine may experience fatigue, anxiety, and/or reduced work tolerance. They may face difficulties in access/travel to work, restrictions in social contact with others, and new training, equipment, or responsibilities. The social stigma associated with a COVID-19 diagnosis may alter social relationships and access to or interactions with colleagues. Workers who preform physical tasks for their work, and have been away from work for an extended period, may experience deconditioning that poses risks upon returning to work because their bodies are no longer used to their former role.

Our approach to return-to-work coordination in RETAIN-CT was an individualized, worker-centered approach that applied problem-solving principles to encourage a safe and sustainable return to work. The goal of this approach was to understand from the worker perspective their job demands, workstyle and work habits, pain coping strategies, organizational and financial constraints, and other psychosocial or workplace circumstances that may need to be considered in planning an effective return-to-work process. In addition to a worker receiving quality, evidence-based health care treatment and evaluation for a musculoskeletal disorder, they may also benefit from a facilitated analysis with solution-based brainstorming, along with coaching, support, and workplace communication and outreach, uniquely tailored to their specific situation.

Why do some workers fair better than others when it comes to potentially disabling injuries or illnesses? Factors that correlate with longer absences include both individual factors (e.g., pain catastrophizing, psychological worries and distress) and workplace factors (e.g., physical demands, job tenure, and supervisor support). Three psychological mechanisms have been

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shown to mediate the disabling effects of pain: **self-efficacy, distress, and pain-related fear**.\(^4\) Pain self-efficacy is the degree to which individuals feel a sense of mastery and control over their pain problem. Psychological worries and distress can complicate pain recovery by fueling feelings of helplessness, hopelessness, and self-blame. Pain-related fear can contribute to immobility, poor physical function, and isolation. Although return-to-work coordination does not constitute a mental health intervention, providing guidance and support to help plan return-to-work strategies can help to mitigate these negative, automatic thoughts and fears. Specifically, the **goals** of the RETAIN-CT return-to-work coordination approach were to:

1. restructure RTW planning efforts to revolve around worker-centered goals and problems;
2. develop problem-solving skills and strategies of the worker to overcome RTW barriers;
3. improve workplace communication and outreach to individualize RTW plans;
4. increase stakeholder support and engagement for a safe and sustainable RTW.

By providing face-to-face or telephonic, individualized RTW coordination sessions in a neutral setting, we hoped to establish greater rapport, understand workplace demands in more detail, identify more explicit and solvable problems, and identify and implement more employer accommodations, all under the direction and involvement of the worker and their employer, with oversight from their care provider. The two primary components of the RETAIN-CT RTW coordination efforts were to **engage in problem solving skills training** with the worker and to orchestrate a **work-site walk-through** that would enable a more individualized RTW plan between the worker and their employer. The paragraphs below provide additional background about the principles of pain self-management and pain-related fear avoidance:

**Pain self-management**: For non-malignant pain that lasts more than a few days, it becomes increasingly important for the individual to begin finding ways to know their pain, understand how best to control pain symptoms, know what triggers pain flare-ups, identify activities that can be tolerated, and be aware of activities that exacerbate pain. A related construct is **self-efficacy**, which, in the context of pain, is the certainty with which individuals feel able to maintain some level of control over pain and its life impacts. An important part of musculoskeletal rehabilitation is to give individuals a central role in their recovery and to provide opportunities for shared-decision making and personal reflection when it comes to choosing treatments, activities, and return-to-work.

**Worker Response to new challenges:**

**Pain-related fear-avoidance**: A natural tendency when experiencing musculoskeletal pain is to limit movement altogether, as movements tend to cause momentary pain flare-ups. Under most circumstances, we react to pain signals automatically with withdrawal behaviors to avoid

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danger or reduce the risk of serious injury (e.g., accidentally touching a hot stove). In the case of lingering musculoskeletal pain, however, these instinctive habits to withdraw from activity and avoid movement can lead to more disuse, deconditioning, and ultimately to greater risk of depression, social isolation, and disability. Therefore, an important part of musculoskeletal rehabilitation is to encourage slow and steady increases in activity and mobility, even when some movements can exacerbate the experience of pain in the moment.

**Stress and uncertainty about the future:** COVID-19 has created unprecedented challenges both physical and mental as well as at work and at home. Workers are facing a novel form of work-related exposure; profound overlap between family, work and health; changing workplace rules and structures; and inconsistent information about virus transmission and prevention. Challenges working from home include but are not limited to: lack of social interaction, extended work hours, increased workloads, and meeting at-home challenges with things like childcare. Those who work in healthcare or at other in-person positions face staffing shortages and increased workloads and work hours. All of this is also partnered with increased risk of infection.

Among adults 18 and over in the U.S., mental distress, substance use and suicidal ideation all have increased, more significantly among the essential worker category. COVID-19 impact on mental health includes: anxiety symptoms tripling (from 8.1% to 25.5%); depression symptoms nearly quadrupling (from 6.5% to 24.3%) and 51% of workers report worse mental health at work since COVID-19 started. Workers are reporting burnout symptoms and workplace re-entry stress. Most employees who have worked from home during the pandemic would prefer never to return to the workplace. Thirty percent of returning workers report a negative effect on their mental health and fifty percent of workers at home anticipate that returning to work will have negative mental health impacts. Many of those who have had COVID-19 face lost work time (reduced earnings), increased housing and food costs (due to changes in the American economy), medical bills, and ongoing health challenges.

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Chapter II: Making initial contact

RETAIN-CT RTW Coordinators (also referred to as RTW Navigators), reached out to the workers referred to the study by their healthcare providers. Examples of providers are physicians, physical therapists or chiropractors. The goals of the initial telephone contact were to establish rapport, identify major sources of problems or challenges, provide a brief explanation of the role of the RTW Coordinator, and establish a date and time for an initial discussion. An important aspect of the call was to allow the worker a chance to explain their current predicament in their own words (if they were willing) and to avoid any unnecessary jargon, data collection, or advice at this early stage. Ideally, workers should have left the call feeling like they had an experienced but neutral professional (who is unaffiliated with their employer, insurer, or physician) who had time and interest to listen and help. An open-ended, empathic approach with active listening is best.

Information that might be conveyed as part of the initial telephone contact might include:

- *My role is to help you and your employer with RTW plans and job modifications.*
- *I am unaffiliated with your employer, insurer, and provider.*
- *I will work with you individually first, and then we may schedule an employer visit.*
- *I can talk with your healthcare provider and employer only if you allow it.*
- *We will work together to identify and solve problems using a structured approach.*
- *You will be totally in charge of this process.*

Chapter III: The intake interview

One hallmark of the RETAIN-CT RTW Coordination strategy was to begin with information about injury or illness, healthcare, functional capabilities, coping, and job description from the perspective of the worker. The RTW Coordinator started with little or no information about the individual, the nature of their work, and their current medical status. At times, RTW Coordinators did have basic intake information that was collected from the workers when visiting the referring healthcare provider, but the approach was to let the worker provide the information verbally in their own words. By going to the worker first, the goal was to build stronger rapport for problem solving and show the importance of understanding RTW barriers from the individual worker perspective.

A copy of the recommended intake form and interview questions is included as Appendix A. The four predominant areas of questioning relate to: (1) an initial check-in and orientation; (2) the nature of injury/illness and medical treatments; (3) function at home; and (4) the workplace. We recommended a semi-structured interview style, with open-ended questions allowing the worker to emphasize areas of greatest concern or impact. At the conclusion of the interview, it was important to leave time to summarize primary points raised by the worker and
to request any permissions for communicating with workplace, health care provider and employer. If the worker agreed, they were sent an Authorization for Release and Exchange of Information form to sign (Appendix H).

Initial check-in: Before launching into interview questions, it was advised to simply check-in with the worker and see how they were doing. Some individuals immediately shared all sorts of history, some expressed anger and frustration, and some had little to say until they felt more comfortable. In any event, it was important to know if the worker was facing any immediate problems and to answer any questions. This demonstrated respect for their immediate needs and provided RTW Coordinators with helpful background information to help this individual.

Injury/Illness: It was important to collect this information about injury/illness in a way that emphasized functional abilities and limitations over the need to identify an exact and medically accurate diagnosis. The way the employee described and labeled their injury and how they characterized the severity and prognosis was relevant to problem solving efforts. It was not necessary to have health information independently verified, but with the worker’s consent, RTW Coordinators were able to get more information from healthcare providers, employers and others. Some recommended questions were:

- Please explain the nature of your injury or illness.
- Please tell me about your current medical care and treatment plan.
- Please tell me about your current level of functional difficulties or activity restriction.
- What seems to aggravate your pain symptoms the most?
- Any other personal health history that might be helpful for me to know?
- What are the ways that you cope with pain?

Function at home: Before launching into workplace concerns, it was helpful to understand how the worker was functioning outside of the work domain. Musculoskeletal pain tends to affect nearly every aspect of life, and you may hear about some very specific challenges (e.g., nowhere to sit comfortably) or some general role difficulties (e.g., trouble picking up my infant from the crib). The same is true for “long-COVID” symptoms. Challenges these individuals face include fatigue, shortness of breath, “brain fog” and joint pain. These too can result in difficulty completing general role functions (e.g. sleeping through the night or concentrating long enough to complete work tasks). RETAIN-CT musculoskeletal pain information from the workers was helpful to understand their normal level of social and physical functioning and to what extent pain had altered their daily routines. RTW Coordinators probed into some specific activity domains to get a clear picture. These questions helped them understand whether family members were providing support and assistance and what family members were communicating to the worker about their pain. Some recommended questions were:

- Any trouble with normal daily activities (sleep, transportation, family care, etc.)?
- Current living situation, family roles, caregiving responsibilities?
- Levels of social support and assistance available to you at home?
Workplace: One goal of the initial interview was to learn as much as possible about the worker’s normal job tasks and responsibilities. More detailed assessment methods came later, but the initial interview was important to understand the employee/employer relationship, the nature of the job, and the effects of pain on worker’s function. This was also an opportunity for the worker to serve as a subject matter expert and educate RTW Coordinators about the many “ins and outs” of their job. There was no need to identify specific return-to-work issues at that stage, but rather to ask if there had been communication with the employer and whether the employer had made previous efforts to contact the worker, offer any job modifications, or facilitate an early return-to-work. Overall, the goal was simply to understand the worker’s normal workplace demands, culture, and work environment. This provided an important backdrop for any workplace outreach or problem solving that came later. Some recommended prompts and questions were:

- Please describe your type of work before the injury/illness.
- What are the most demanding physical aspects of your work?
- What are the most stressful or challenging aspects from an organizational perspective?
- Can you lead me through a typical day at your job before your injury/illness?
- Please describe any communications with your employer since you left work.
- How would you describe your personal workstyle?
- Are there factors at work that help you feel more productive and satisfied?
- Are there factors at work that make you feel less productive and less satisfied?
- What are typical interactions with your co-workers and supervisors?
- Any efforts by your employer to support your return-to-work?
- Other aspects of your work that might be relevant?

Timeline/Summary: One method for closing the interview and acknowledging the worker’s explanations was to draw a brief timeline of events with their help to summarize some of the most important events and circumstances shared in the interview. This type of reflection provided closure to the interview and highlighted some areas that might be the subject of problem solving and employer communication efforts later. It showed deference to the worker’s way of thinking about their pain, their job, and their return-to-work challenges.

Close: The last action item for the initial intake was to describe the type of help the RTW Coordinator may be able to provide and to schedule a second conversation. It was not necessary to make any specific plans for problem solving at this point (unless it is clear from the intake interview that a return-to-work was imminent and there were only minor issues left). Some of the ways that RTW Coordinators described the return-to-work coordination effort were:

- We will work collaboratively to solve problems related to your workplace
- We will try to get more help from your employer and healthcare providers
- We will analyze the situation before we start brainstorming solutions
Chapter IV: Problem solving basics

We solve problems every day. Most of the time, potential solutions are obvious and there’s no need to belabor the process that we use to make good decisions. Options instantly emerge, and we can make decisions independently without negotiation or cooperation from others. But some life problems can become complex, involving many parties, and often these decisions have serious life implications and deserve more thoughtful contemplation. Problem-solving is a methodical strategy that has been recommended for use in business management, in lifestyle and health counseling, in science and math, and in other educational settings. The six steps of the problem-solving process are shown in the circular figure below. The six steps are: (1) Identifying and selecting a problem; (2) Analyzing the problem; (3) Generating potential solutions; (4) Selecting and planning a solution; (5) Implementing the solution; and (6) Evaluating the solution. The problem-solving process is shown in the shape of a circle to reflect that the problem-solving process is iterative and may require several solution attempts.\(^8\)

Problem solving is the process by which individuals attempt to resolve day-to-day problems. Although we are all bombarded by problems that we somehow find a way to sort out, effective problem solving is a skill that is developed through knowledge of specific processes and implementation of certain practices. Applying a problem-solving approach is especially important for pain and chronic illness, because adding some logic to daily decision-making can help to overcome the affective component of pain and chronic illness that causes emotional suffering and discouragement when pain and/or symptoms linger. Rather than focus exclusively on pain and symptom alleviation as the

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primary goal, the problem-solving process can help to redirect attention to functional deficits and challenges at work and home.

In technical terms, problem solving is defined as “a behavioral process ... which (1) provides a variety of potentially effective responses to the problem situation, and (2) increases the likelihood of selecting the most effective response from among these various alternatives”. ⁹ For workers who have had musculoskeletal pain and injuries or “long-COVID” with at least a 30-day absence from work, the application of problem-solving skills to the RTW process may increase the likelihood of:

- overcoming barriers to RTW;
- implementing workplace accommodations; and
- preventing long-term disability.

Although the steps are numbered, people seldom proceed from step 1 to step 6 without making several loops back to revisit and revise earlier steps. By asking questions and monitoring progress at each step, this can teach workers to generate ideas and sort, select, and evaluate options in a systematic way that can facilitate a healthy return to work.

**Why problem solving?** When is the right time to step back from a stressful, frustrating, or seemingly unsolvable problem and reconsider your approach? Here are some of the instances where problem solving may help:

- **When emotions take over.** Family, social, personal, financial, and workplace problems can all lead to stress, anger, and frustration. Strong emotions can hamper our ability to think clearly about a problem, and we are much less likely to make good decisions when those decisions are impulsive efforts to alleviate uncomfortable emotions. One goal of the problem-solving process is to produce a more methodical, rational approach that can replace these purely emotional responses to threats.

- **When numerous people are involved.** Problems that involve many players are more difficult to solve because solutions may require cooperation, information, or endorsement of others. Some solutions require actions of just one individual, but many problems involve multiple individuals, sometimes with competing interests or perspectives. Feasible solutions may require mutual agreement of everyone involved.

- **When there are multiple, complex factors.** Some problems have many moving parts, and the solution requires simultaneous consideration of many combinations of information and resources. The problem-solving process is helpful to list individual factors and to consider their impact individually before advancing to brainstorming.

- **When decision-making has serious implications.** We make decisions every day, but some decisions have life-changing implications, and these require some extra thought and deliberation. The problem-solving process can be useful to promote soul-searching

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and contemplation for those problems that represent serious life decisions and where hasty decisions are likely to be short-sited.

- **When you want to have a greater say in the matter.** In the midst of problems, it is easy to feel a victim of circumstances, tossed in the wind, or left out of decision-making processes altogether. The problem-solving process can help a person establish a position and participate with others as a partner in a planning process. Problem solving can help to bolster arguments and recommendations.

**Who uses problem solving?** The suggestion that we solve problems using a stepwise analysis of factors and options has been around for a very long time, but today, the problem-solving wheel and its variations can be seen in the training of senior business executives, in parenting handbooks, in lifestyle coaching programs, and among meeting planners and construction schedulers. Sometimes problem solving is focused more on social problem solving, and in other cases focused on materials, timelines, and costs.

**What generally works the best?** No matter which problem-solving booklet or method you follow, most agree on the basic elements that make for effective and ineffective problem solving. Characteristics of effective problem solving are:

- Viewing problems as challenges to be solved
- Being optimistic and solution-focused
- Having confidence in one’s ability to succeed
- Recognizing that some problems require time/effort
- Seeking more information about reaching conclusions
- Clarifying personal goals, obstacles, and factors
- Generating and comparing alternatives
- Evaluating solutions after implementation
- Taking charge of your problem

The least effective strategies are:

- Viewing problems as threats
- Doubting one’s ability to succeed
- Feeling worried or discouraged
- Missing the “big picture”
- Acting impulsively, without weighing options
- Waiting until the last minute
- Waiting for others to solve problems

**Problem solving and return to work.** You can see from the bullets above, that problem solving requires a certain level of motivation and persistence. RTW Coordinators used this information to discuss with the worker how returning to work after musculoskeletal
pain/injury might be conceptualized as a problem that could be analyzed using the problem-solving process. Some of the problems experienced were:

- Complications of the medico-legal system
- Educating insurers, providers, and HR representatives about job tasks
- Experiencing functional limitations that would make work difficult
- Having miscommunications or lack of communication with employer
- Experiencing unpredictable pain flare-ups
- No modified duty options

Despite the challenges of returning to work, being back at work has benefits as well:

- Greater income and peace of mind
- Getting back to life as usual
- Avoiding negative impact of unemployment, work absence
- Support from colleagues
- Feeling productive again
- Stepping stone to new positions or career decisions
- Other reasons?

Having a brief discussion with the worker about the various pros and cons of their job helped to set the stage for future discussions.

**Personal problem-solving examples:**

At this point, RTW Coordinators discussed some examples of everyday problem-solving. They shared some personal examples of situations they encountered that seemed appropriate for the problem-solving process or to illustrate examples of good and bad problem solving. The best examples at this stage were topics that everyone can relate to in life. Personal examples were about home or auto repairs, planning events or occasions, negotiating help from others, or dealing with family or childcare issues. It didn’t need to be workplace examples. RTW Coordinators then asked the worker to generate some of their own examples as well. In each case, the questions reflected on were:

- What was the problem? What are different ways to define the problem?
- Did the problem involve others? Did this complicate things?
- What seemed to help? What seemed to make matters worse?
- Did you need more information or other resources to solve the problem?
- Were there several options and how did you decide what to do?
- How did things work out in the end?
After the discussion, RTW Coordinators reviewed with the worker the “helpful hints” page in the Employee Workbook. They reviewed some of the basic strategies that are fundamental to good problem-solving and how to maintain a positive attitude, even when problems feel overwhelming.

**Step-wise presentation of the 6-step problem-solving process**

Next, RTW Coordinators included a step-by-step description of the problem-solving process in their discussion with the worker. The problem-solving wheel was included in the worker hand-out, to provide a good starting place. It’s important to emphasize that Steps 1 and 2 (identifying and analyzing the problem) were the most significant steps, because they provided a strong foundation for problem-solving directions and choices that came later. Ordinarily, we may rush to brainstorming and trying out solutions, but when problems are complex or difficult, it pays to back up and slow down. The sections that follow provide some points that were emphasized as RTW Coordinators described each of 6 steps in the problem-solving wheel.

RTW Coordinators found it helpful to have a few of their own examples to illustrate each of the problem-solving steps.
Step #1: Identifying and selecting the problem

GOAL: The goal of Step #1 is to select a solvable problem, decide whether the problem can be divided into smaller or more manageable problems, and describe the extent of the problem as clearly as possible.

PROCESS: Here are some steps that can be applied when trying to define a problem:

- **Reduce the scope, if possible**: Some problems seem impossible to solve because the scope of the problem is too large. Try dividing up the problem into smaller problems, and the problem begins to feel more manageable. Begin with a general area of concern, then try dividing it up into smaller problems that are more amenable to the problem-solving process.

- **Add more detail**: Add information to the description of the problem that provides more details about the nature of the problem, factors such as person, time, and place, and other qualifiers. In what context and under what circumstances has the problem emerged? Vague statements of the problem lack the specificity necessary to identify and develop target solutions.

- **What are its implications?**: Ask why this problem has importance and what are its effects on well-being. Why is this problem of particular importance? Questions of this nature may help to steer the problem-solving process toward things that matter the most and reflect the values and feelings of the person.

- **Make it personal**: It’s best to state or define problems in a way that reflects personal relevance and responsibility. One pitfall is to start out by identifying a triggering event or the behavior of others as the central problem. The problem should be defined as something that can be steered, changed, or influenced by the person.

- **Identify the desired end state**: The problem should be defined in a way that makes it clear how solving the problem would make things better. How does this problem pose a barrier in terms of well-being, function, activities, and relationships? If there’s a way to quantify the end goal, that can also be worked into the problem statement (e.g., “…so that I have at least an hour of exercise each day”).

HELPFUL HINTS/ COMMON PITFALLS

- Put off thoughts about causes of the problem or possible solutions at this point.
- Avoid placing blame, recognize that most problems involve multiple factors.
- Be as specific as possible, vague problems are hard to solve.
- Avoid choosing a problem over which the person has no influence or control.
- Try to discuss or define the problem more clearly without offering solutions.
**Step #2: Analyzing the problem**

**GOAL:** The goal of Step #2 is to identify factors that might be affecting the problem. These can be causal factors, hindering factors, exacerbating factors, or helping factors. List as many factors as possible; be as detailed as possible. This will begin to show the complexities of the problem and how solutions may need to address multiple areas, people, or barriers.

**PROCESS:** Here are some steps that can be applied when trying to analyze a problem:

- **List all the factors:** It’s important to understand not just how the problem arose, but also why the situation is becoming more difficult and what circumstances are affecting the ability to solve the problem. Writing them down on a piece of paper will be useful for the steps that follow.

- **Look for unseen linkages:** Explore the problem as deeply as possible, even if some of the factors described are small or remote influences. All factors may provide opportunities in subsequent steps, even if they seem relatively unimportant at first. After considering causal factors, spend time thinking about things that are making the problem worse or making it more difficult to solve. Under what circumstances does the problem become more severe?

- **Collect information:** Analyzing the problem may lead to a realization that there are many unanswered questions or missing gaps in what is known or understood about the problem. To get more information, have the person talk to others, monitor their behavior or communications with others, look up information on the internet, or use whatever searching that will help to fill in gaps about problem circumstances.

- **Label factors:** After there is a list of factors, try to organize them into one of the following categories: (1) factors that caused the problem; (2) factors that are helping to make the problem more manageable; (3) factors that are making the problem worse; and (4) factors that represent constraints around problem-solving.

**HELPFUL HINTS/COMMON PITFALLS**

- Consider multiple factors simultaneously, avoid single-cause explanations.
- Try to keep an open mind, avoid placing all the blame on one factor.
- Avoid vague descriptions of factors, detailed explanations of factors are better.
- Try to come up with small, distinct factors, and avoid vagueness.
Step #3: Generating potential solutions

GOAL: The goal of Step #3 is to produce an exhaustive brainstorming list of as many candidate solutions as possible. The easiest way to start brainstorming is to look at the list of factors generated in Step #2 and try to generate a potential solution for each factor. No idea is too crazy for consideration in Step #3, the more ideas the better.

PROCESS: Here are some steps that can be applied when trying to generate solutions:

- **Look for factors that can be altered:** Some of the factors listed in Step #2 are clearly beyond one’s control or represent unchangeable constraints. Try to focus on the factors that may be modifiable in some way.
- **Review the problem statement:** It might be useful to keep focus on the problem you’re seeking to solve, just to be sure solutions are still on target. Remember the goal if problem solving is effective.
- **Try solutions that eliminate or reduce causal factors:** The problem may be relieved if there’s a way to change some of the circumstances that contributed to the problem in the first place.
- **Try solutions that minimize hindering factors:** There are probably many reasons that the problem has gotten worse or feels more complicated now. How can these factors be changed? What types of solutions do these factors suggest?
- **Try solutions that maximize helping forces:** This is definitely a time to look for any assistance and support. Although ownership of the problem is important, it’s helpful to stay aware of support systems and other assets for problem solving.
- **Brainstorm solutions:** The more the better! Write down ideas in as much detail as possible.

HELPFUL HINTS/COMMON PITFALLS

- List ideas even if they seem ineffective or very difficult to carry out.
- List ideas even if it’s something that’s already been tried.
- Try to be imaginative and leave no stone unturned.
- Don’t discard any ideas until they are all listed and then move on to Step #4.
Step #4: Selecting and planning a solution

**GOAL:** The goal of Step #4 is to decide on the optimal solution and plan its implementation. A solution may have several component parts, but all of these should be reasonable to achieve with a little planning and help from others. A smaller, more concise solution may be easier to achieve, even if it only solves part of your overall problem.

**PROCESS:** Here are some steps that can be applied when trying to compare alternatives and plan the solution:

- **Compare alternatives on feasibility:** Rate each of the alternate solutions from Step #3 based on how easy or difficult it would be to actually put this solution into action. Consider how many people need to be involved, how many steps are involved in implementing the solution, and whether the resources and support are available to make it happen.

- **Compare alternatives on effectiveness:** Go back and look at the problem definition. How likely is it that each of the alternatives would actually produce the desired changes? To what extent does each potential solution target important factors? What are the reasons each alternative would be successful or unsuccessful?

- **Try out ideas:** Try out ideas on others (trusted colleagues, family members, friends, professionals) to help assess the feasibility and effectiveness of specific alternative options. Getting advice from a friend or colleague can be invaluable.

- **Choose the best option:** Based on analysis of feasibility and effectiveness, choose a solution that seems most likely to succeed. It may be possible to combine some options or plan them sequentially. If implementation of the alternatives under consideration involves personal costs, risks, or hardship, these can be weighed opposite potential long-range benefits.

- **Define a plan for implementing a chosen alternative:** Identify the steps involved in implementing the alternative, who needs to be involved, and what information or resources might be needed to see it through. Make a timeline of events that would help to implement the alternative successfully. Divide the solution process into sequential, easily manageable steps.

**HELPFUL HINTS/ COMMON PITFALLS**

- Don’t get distracted by very small differences between options.
- Don’t assume that solutions are completely beyond your control.
- Being proactive about the problem even if it feels new or uncomfortable.
- Develop a commitment strategy to keep motivated.
Step #5: Implementing the solution

GOAL: The goal of Step #5 is to start the process of implementing the chosen solution and following the implementation plan through as far as possible. It’s almost certain that the plan be adjusted along the way, so being persistent and optimistic is key.

PROCESS: Here are some steps that can be applied when trying to implement the solution:

- **Implement the chosen alternative.** JUST DO IT! This may involve several actions or steps. The hallmark of step 5 is persistent attention to the activities necessary to comply with the plan. Implementation may involve coordination with others. Whenever possible, divide the implementation plan into small, manageable steps for easier monitoring. Be prepared to modify plans as expected – or unexpected – events occur.
- **Follow the plan.** Follow the plan established in step 4. If possible, quantify changes implemented or plan results; this will help to monitor progress. For example, monitoring may include a weekly log of activities or behaviors. This information will help to check whether or not intended changes actually took place as originally planned.
- **Anticipate obstacles.** If serious obstacles to plan implementation arise, try returning to Step 4 and reconsider the feasibility and effectiveness of other alternatives.
- **Have a contingency plan.** Sometimes only minor adjustments to our original plan can lead to significantly improved outcomes. Try not to visualize immediate success – this may only come after refinements are made to the plan.

HELPFUL HINTS/ COMMON PITFALLS

- Motivation is a key to the success of this step in the problem-solving process. This is a good time to mobilize supports and maximize available energy.
- Self-reinforcement (either verbal or tangible) is very important for achieving changes or milestones associated with the plan.
- Don’t get discouraged. As described by the circular shape of the problem-solving wheel, some problems may require several attempts to solve.
Step #6: Evaluating the solution

GOAL: The goal of Step #6 is to judge how effectively the implementation of the plan helped to solve the problem, in whole or in part. Sometimes, options will show little benefit, but other times there may be some progress. Even if the solution tried was ineffective, new information was learned for trying a different approach.

PROCESS: Here are some steps that can be applied when trying to evaluate a solution:

- **Assess results:** Not all solutions work. Work-related injuries can involve complex solutions for returning to work. In this step, both enthusiasm about plan implementation and critical thinking about its effects toward solving the problem are needed. To judge successes, you can ask the following questions:
  - Did it work?
  - Did I allow enough time to notice a change?
  - Has the problem become less severe or less overwhelming?
  - Do I feel better about my efforts?
  - Have I learned something more about the problem?

- **Return to Step 1:** If the solution was successful, start again at Step 1 with a different smaller problem definition. If the solution was not successful, begin the process again at Step 1 using the information about obstacles known from previous attempts at solving the problem. There are options and solutions. Problems are inevitable, but there are ways to deal with them.

HELPFUL HINTS/COMMON PITFALLS

- Although the chosen solution may have unsuccessful, it may become evident later that circumstances change, solutions change, people change, and priorities, preferences and values change. Therefore, solutions can be adapted to account for changes.
Chapter V: Understanding job demands

On average, working is good for one’s health and helps to sustain financial well-being and self-esteem. However, injuries and illnesses that are serious enough to result in a prolonged absence from work, can present many lifestyle challenges, both at work and at home. One way of analyzing workplace challenges after pain or injury is to consider the field of ergonomics.

Introducing the concept of ergonomics can be important when working with someone with pain or other challenges. According to Merriam-Webster Dictionary, ergonomics is “the study of people’s efficiency in their working environment;...designing and arranging things people use so people and things interact safely and efficiently”. “Ergonomic” labels on consumer products include everything from desk chairs to backpacks to brush handles. Employers generally accept ergonomic principles as a way to make their workplace run more smoothly, safely, and efficiently. That’s why knowing a little about ergonomics can be a useful resource when talking with employers about possible job modifications, work adjustments, assistance from others, or temporary leeway so workers can return to work safely and remain safe and as pain-free as possible.

The modern ideal of a safe and healthy workplace is the notion that employers should not only be protecting workers from injury, but also promoting health and well-being of employees while they’re working. In an ideal world, every workplace should provide ways for workers to:

- Maintain their highest level of productivity
- Work at a pace that can be maintained comfortably throughout the work day
- Be relatively free of workplace discomforts wherever possible
- Have protections in place to minimize workplace hazards or injury risk
- Have a work environment and benefit package that promotes health
- Have work that can be engaging and satisfying at least some of the time
- Have a work environment where efforts are made to reduce stress

But most workplaces are not ideal, and almost every job has either physical and psychological challenges (or both). After the onset of musculoskeletal pain or injury, normal challenges and stressors at work may become much bigger problems, so it’s a good time to think about work demands in a more detailed way. Typical workplace problems are:

- Job stress
- Monotonous or repetitive tasks
- Dissatisfying job tasks or working relationships
- Low wages or limited benefits
- High productivity demands or long hours
- Uncomfortable or awkward postures
- Conflicts with supervisors or peers
Not all of these workplace issues are problems that can be easily solved; however, returning to work may require that workers first spend some time thinking about their usual job tasks, the way their work is organized, and their normal work habits.

**Ergonomics** includes a body of scientific knowledge regarding human abilities, human limitations, and other human characteristics that are relevant to design for safe, comfortable, and effective human use. Ergonomic principles may be a useful way to identify workplace factors that might contribute to physical discomfort and functional limitations and prevent workers from being able to return to work.

**Ergonomic design** is the application of this knowledge to the design of tasks, tools, machines, work systems and products, workstations, job assignments, and work environments. Ergonomic design is usually referred to as a multi-disciplinary science that applies information from human anatomy and physiology, industrial and biomedical engineering, industrial/organizational psychology, anthropometry (variation in human dimensions), and biomechanics. Ergonomic design represents a balance of capacity and demands.

**A word of caution.** Ergonomics is an over-used term in consumer products.

**Myth:** “Everything is now ergonomically designed”

“Ergonomically designed equipment will cure all your problems”

**Fact:** “Something is ergonomically designed when it is designed to fit the population who will be using it.”

**Bias:** “Carefully consider claims of ergonomic design”

The key to ergonomic design is to design things for the way people are, not for the way that we want them to be. Good ergonomic design involves understanding **differences in normal human variation**. We will be focusing the application of ergonomics to facilitate the return-to-work process. This will involve the following goals:

- Obtain a good match between the worker, the work setting, and work environment
- Decrease musculoskeletal discomfort
- Decrease the risk of re-injury or pain exacerbation
- Maintain productivity as close to normal as possible
Ergonomic design involves an interaction between worker, work setting, and work environment.

- **Worker**: size, strength, range of motion, intellect, education, expectations, and other physical/mental capacities.
- **Work setting**: parts, tools, furniture, control/display panels and other physical objects.
- **Work environment**: climate, lighting, noise, vibration, and other atmospheric qualities.

**Ergonomic risk factors** are attributes, experiences, or exposures that increase the probability of occurrence of disease or disorder, though it is not necessarily a causal factor; for example, a sustained awkward posture (a risk factor) can lead to neck discomfort (a health outcome). Ergonomic risk factors are those things that have a realistic potential, in part, to initiate, exacerbate, and/or maintain physical discomfort and fatigue during the work day. These include elements of work that are known, through scientific research, to contribute to physical harm, if present with enough duration, frequency, and intensity. Risk factors can fall within many categories:

- Forceful exertions
- Awkward joint postures (this can apply to any joint)
- Constrained postures
- Sustained postures
- Direct mechanical pressure
- Vibration
- Temperature extremes
- Extreme metabolic demands

Other risk factors can include job stress; incentive work, quotas, low control of work processes, new or unaccustomed work, working unassisted. The ergonomic risk factors that are commonly a concern for workers with musculoskeletal pain include lifting, twisting, bending, repetitive tasks, lack of task flexibility or control, and sitting or standing for long periods.

**Risk factor amplifiers** are influences that heighten the chance of musculoskeletal disorders, should a risk factor be present. These include:

- frequently preformed tasks
- high intensity tasks
- long duration tasks
- There is no recovery time between tasks
- Psychosocial factors are also present with the tasks
- Combinations of risk factors are present at the same time as the tasks
Personal risk factors can also amplify or reduce the effects of ergonomic risk factors, and these can place some individuals at higher risk, on average, of developing musculoskeletal disorders. Personal risk factors of those with higher risk include:

- Older age
- Female
- Anthropometric measurements (height, weight, limb length, body type)
- Body mass
- Anatomical/physiological differences
- Alcohol, smoking, medications, drug use
- Mood and personality
- History of neuromuscular disorders
- History of metabolic diseases
- Pregnancy
- Recent episode of musculoskeletal pain or injury

Non-occupational risk factors are non-work-related activities that stress the musculoskeletal system to produce the same types of disorders. These can include:

- Athletic activities such as racquet sports and throwing activities
- Hobbies such as knitting, sewing, playing musical instruments, home computer use
- History of traumatic musculoskeletal injuries

Forceful exertions can be measured in terms of percentage of maximum capacity or strength (also called maximum voluntary contraction [MVC]). High force exertion is associated with:

- Decreased duration of effort
- Increased need for recovery time
- Lower number of repetitions that can be achieved per unit of time

If forceful exertions and maximum voluntary contractions are sustained, this can have a deleterious effect on blood flow to joints. At more than 60% of MVC, blood flow to the joint is almost completely interrupted. From 15-20% of MVC, blood flow becomes nearly normal, and exertion of less than 8% of MVC can be sustained for several hours.

Repetition of tasks can be an ergonomic risk factor, and repetition is usually indexed as follows:

- **Very High**: Body parts in constant motion, it is difficult to keep up.
- **High**: Body parts are in rapid motion. If there is wasted motion, the worker immediately gets behind.
- **Medium**: Body parts are in steady motion, but the worker does not experience any difficulty keeping up with the required rate. There is some time allowed for the worker to pause briefly.
- **Low**: Conspicuous pauses in each work cycle are observed.
• **Very Low**: The hands are idle most of the time.

**Extreme metabolic demands** (constant vigorous activity) can be associated with whole body fatigue. This is characterized by high heart rate, high respiration rate, and a high rating of perceived exertion. Examples include stair climbing, repetitive lifting, pushing/pulling, etc.

**Job accommodation** is a term that refers to changes made to workplace physical and psychosocial demands in order to work around a physical impairment or other functional limitations related to health. Whether or not musculoskeletal pain is related to the work tasks performed, employers still have a responsibility to provide reasonable accommodation, unless these changes are not allowing the worker to complete essential functions of the job or it represents a hazard to others.

**Summary of ergonomic principles**

- Risk factors can **initiate, exacerbate, and/or maintain** physical discomfort and fatigue.
- A single risk factor of **sufficient frequency, intensity, and duration**, by itself can contribute to physical discomfort.
- Several **risk factors acting in combination** represent the greatest risk for physical discomfort and functional limitations.
- **Minimizing ergonomic risk factors** should improve physical comfort and productivity.

**Ergonomic Resources**

The State of Washington provides some general ergonomic tip sheets and workbooks on their website that may be photocopied and shared with workers (there are no copyright restrictions).\(^\text{10}\) Some of the methods for reducing exposure to ergonomic risks are:

- Having Neutral Postures,
- Effectively Organizing the Work Area,
- Avoiding Eye Strain,
- Avoiding or reducing excessive forces, and
- Using Optimal Lifting Procedures.

A more extensive compilation of publicly available industry-specific ergonomic recommendations and resources are listed in Appendix F.

Using Ergonomic Principles for Return-to-Work Planning

Return-to-work coordination strives to use ergonomic principles to facilitate the work site accommodation process. Ergonomics can be helpful to:

- **Identify and evaluate** exposure to known ergonomic risk factors that may be contributing to physical discomfort using a systematic approach.
- **Develop and implement recommendations** to minimize risks and reduce physical discomfort and functional limitations to enhance productivity.

Administer the Job Requirements and Physical Demands Scale (JRPDS)

Ask the worker to complete the 2-page Job Requirements and Physical Demands Scale (JRPDS) to get the worker’s views on potential ergonomic risk factors inherent in their work. The JRPDS was developed by the US Air Force to provide a brief measure of ergonomic exposure across a wide range of job types. Afterwards, review all of the items in the questionnaire (other than those marked “never”) and ask for more details about the impact of these factors on the ability to return to work. This will provide you with some additional details about the worker’s perceptions of the workplace and the need for changes to reduce the risk of re-injury.

Query the worker for more details regarding each endorsed item:

- How are these factors affecting your ability to return to work?
- How important is each item in terms of completing vital tasks related to your work?
- How flexible is that aspect of your job?
- What could be done to reduce the risk?

Administer the Job Leeway Scale (JLS)

Ask the worker to complete the 1-page Job Leeway Scale (JLS) to get their views on types of flexibility that might be possible in their work. The JLS was developed by RETAIN-CT collaborators to provide a brief measure of how adjustable the workplace is for an individual who is having health problems that limit functionality at work. Afterwards, review all of the items in the questionnaire, noting those items with the most extreme scores (either “completely disagree, 0-1” or “completely agree, 5-6”). Ask for more details about how this type of flexibility is provided and to what job tasks it applies. This will provide some additional details about the worker’s perceptions of the workplace and the levels of flexibility or inflexibility inherent in different job tasks. It’s important to let workers know that many job modifications don’t require new equipment, just certain allowances to work differently. Also, some job modifications are probably possible without any explicit written permission from the company, as this level of flexibility is already available to everyone in their position.

Query the worker for more details regarding each endorsed item:

- How does the lack of flexibility in your job affect your ability to return to work?
• How important are different aspects of flexibility in terms of essential job tasks?
• At what level in the organization are decisions made about job latitude and flexibility?
• What could be done to provide more flexibility?

Administer the Job Accommodation Scale (JAS)

Ask the worker to complete the 1-page Job Accommodation Scale (JAS) to get their views on the feasibility of certain types of temporary job modifications that might help facilitate their return to work. The JAS was developed by RETAIN-CT collaborators to provide a brief measure of organizational practices and barriers around different kinds of job accommodation measures. Afterwards, review all of the items in the questionnaire, noting those items with the most extreme scores (either “very likely, 4” or “very unlikely, 1”). Ask for more details about how this type of job modification is provided or why it seems easy or difficult to provide it in their work setting. This will provide you with some additional details about the worker’s perceptions of the workplace and the levels of cooperation and feasibility for requesting job changes to enable a safe return to work.

Query the worker for more details regarding each endorsed item:

• Would this type of job modification be helpful to you?
• How would this type of job accommodation be planned and implemented in your workplace?
• At what level in the organization would these decisions be made?
• If job modifications are impossible, are there alternate jobs you could perform in your workplace instead?

Complete the “Summary of your Job” document jointly with the worker.

After the worksite walk-through, sit down with the worker and complete the one-page “summary of your job” document jointly. This is a chance to summarize with the worker some of the major opportunities and challenges they’ve explained about their job and the difficulties of returning to work. List job tasks that would be most difficult, potential sources of job leeway and flexibility, key job constraints, some potential opportunities for job modification, and the names of supervisors and others who might be able to help to orchestrate and approve job modifications.
Chapter VI: Worksite walk-through

Seeing the employee’s work space and talking with a supervisor or other decision-maker can be extremely useful to gain a clearer picture of the workplace and to understand organizational, physical, environmental, or interpersonal factors in greater detail. The work-site walk-through should be conducted with the worker unless the employer forbids it. If the worker is unable to join you, ask to observe or interview another worker performing similar tasks. Use of ergonomic checklists and other types of data gathering tools might add to credibility and provide some structure to employer questions and discussions. The stated purpose of the work-site walk-through should be to gather data and understand and observe the worker’s job in the context of their musculoskeletal pain condition. The goal should be to appreciate real worksite constraints, understand the flow of work and who controls it, and to offer possibilities for job modification.
Chapter VII: Solving RTW challenges

This is now the most critical stage of worker engagement, combining job information, ergonomic principles, and problem-solving skills in a collaborative discussion with the worker. Workers will show varying levels of confidence and willingness to discuss workplace options, but the overarching goal should be to move the individual one step closer to taking action by returning to work at their current job with modifications (if needed and allowed) or to find a more suitable job that they can perform safely. The information presented here should be used in combination with federal, state, city/town and other resources as a way to explore all options to determine if returning to work in some capacity (i.e. with modifications) is possible for the worker.

Given the differences among workers, their jobs, and their functional limitations, it’s difficult to have a precise roadmap for solving workplace challenges. Try to use the problem-solving wheel as a fundamental basis for discussions. As a starting place, ask the worker to go back and review their current level of function, explain what activities seem to cause the most trouble, and review the organizational and physical aspects of the job. The next phase would be to return to the problem-solving wheel and choose one or more discrete problem areas that would need to be solved for the worker to return to work. Many workers will start by identifying pain as the problem to be solved, but a constant striving for pain relief can lead to misdirected and often futile problem-solving efforts. Try reframing the problem in the context of specific functional limitations at home and work instead, and address each individually to see where there may be room for modifications or support.

An important goal of the problem-solving process is to make the worker a central part of fact-finding, brainstorming, and making solutions a reality. It may be tempting to jump in and solve the problem for the worker without their active participation (which may seem far more expedient), but this may inadvertently lead the worker to feel even more dependent and helpless in the end. Remember that the worker may continue to have discomfort and other challenges at work, so the goal of problem solving is to give them a tool for the future to use on their own.

When applying the problem-solving process to return-to-work challenges, here are some specific stepwise suggestions:

Step 1: Identifying the problem

Now it’s time to define problems related to workplace challenges and other barriers to return to work. Start off with some general problem areas, then try reducing the scope of some problems, adding more detail, and then restating some specific, solvable problems for which the individual has some level of control or influence. The goal is to have several problem
Transition the discussion from pain to function: Obviously, the worker’s biggest problem is that the musculoskeletal pain has not subsided as quickly as they had hoped, and it seems logical to focus exclusively on getting more effective pain relief. Getting good medical care and attention is, of course, a very important part of getting better, and the aggravation of pain should not be ignored. However, with the pain problem lingering on, it’s important to explain the importance of keeping active and trying to resume normal activities as much as possible, and breaking things down into smaller more manageable parts. Moving the discussion from pain to function is a critical first step for the problem-solving process, and this may ultimately lead the worker to feel more in control and less discouraged. Focus on things the worker CAN do instead of what they cannot do.

Tackle smaller workplace problems first. Even when a worker is unable to entertain the possibility of returning to work, they may be able to engage in problem-solving over smaller, more well-defined challenges they might face when returning to work. Start with something that is likely to have some element of success, and then move on to larger challenges later. Having some success will build confidence and get momentum moving for the workers to take action on solving larger problems in the future.

**Step 2: Analyzing the problem**

In Step 2, you will ask the worker to analyze at least 2 of the problem statements that were defined in Step 1, hopefully those that seemed most likely to yield possibilities. Pick two problem statements, then list out and explain causal factors at work, hindering forces that can be expected at work, helping forces at work, and organizational or material constraints on problem solving. This should begin to point the discussion in directions that might generate possible solutions that can be evaluated. Here are a few tips:

Question assumptions. One impediment to problem-solving will be the worker’s presumptions about workplace roles and organizational practices and their presumed inability to assert their views into the return-to-work planning process. Most employers actually appreciate worker’s efforts to communicate with the company about current levels of functioning and to voice concerns about specific aspects of returning to work. If an employer is unresponsive, the worker might be able to communicate these concerns through their health care provider instead.

Dig into the details. Blanket statements that an employer provides no modified duty or is unable to provide any adjustments should be questioned. What is it that is causing these constraints? Are there ways to get more information? Do they know of anyone else in the
workplace who has gotten their tasks modified at work? Keep dissecting and explaining factors until you get to the level where there is an opportunity for potential change.

**Step 3: Generating solutions**

In Step 3, you will work with the worker to generate possible solutions (even crazy ones) that address each of the factors addressed in Step 2. For the two leading problem statements, try to brainstorm ways that one might try to reduce causal factors or hindering forces, leverage helping forces, or overcome workplace constraints. Prompt discussions based on what you’ve learned from the worker’s description of their job and how they describe the reasons that returning to work feels impossible. Here are a few tips:

**Adopt ergonomic terminology:** Whenever possible, try to frame workplace challenges using ergonomic terminology and principles (awkward postures, sustained forces, high exertion, etc.). Most factors that might make pain better or worse can be framed in this way. This may also lend technical support for the worker’s ideas and build a logical case to present to their employer for temporary accommodations that might be necessary for them to return to work.

**Think outside the box:** Some of the best solutions might be changes that don’t normally fit within our ideas about job accommodation. Some workers may simply want assurances that an early return to work with job modifications will not reflect poorly on them for performance evaluations. Others may feel embarrassed or stigmatized, and return-to-work barriers are of a more organizational or supervisory nature.

**Step 4: Selecting and planning a solution**

In Step 4, choose an initial direction for solving the problem based on the solutions that seem most feasible, most effective, least complex, and where resources and time are available to make it happen. For the worker’s chosen solution (or back-up solution), have them write out the answers to each of these questions in their workbook, and review the information to select the solution and begin planning the steps necessary to implement the solution.

**Step 5: Implementing the solution**

In Step 5, you will work with the worker to refine the specific steps they will need to take or facilitate to implement their chosen solution. Split the plan up into discrete actions, identify who would be involved, the best timeline for each activity, and whether certain adjustments might be expected or anticipated. Complete these steps for both the chosen solution and a back-up solution plan.
Step 6: Evaluating the solution

In Step 6, work with the worker to evaluate various aspects of how the plan was implemented and whether any progress was made toward solving the problem. For the solution that was implemented, ask whether there was any benefit, whether there was enough time and effort spent, if there were lessons learned, whether the worker now feels differently about the problem, and whether there are logical next steps.
Chapter IX: Conclusion

As previously stated, the purpose of this Manual is to specify methods and tools recommended for use by local workforce development professionals, when serving individuals seeking assistance to return to work (RTW) after an injury or illness. The RETAIN-CT Team learned a tremendous amount from the research study, by using these methods and tools while working with employees, each with their own unique RTW and stay at work (SAW) challenges due to their muscular skeletal injuries or illnesses. During this time, COVID-19 arrived and with it, new, unique challenges for RTW and SAW. It was never just one thing that workers needed help with, sometimes it was help communicating to bosses or medical providers, sometimes it was an ergonomic assessment that lead to a supportive tool to increase comfort and assist in healing and prevent re-injury. Sometimes assistive technology (AT) helped to support the “long-COVID” worker in their organization and focus. Sometimes it was modified duty with reduced weight allowances or breaks to stretch throughout the day. Whatever the case, RTW Navigators were able to compile CT-specific and some national resources for those working with individuals who are experiencing RTW and SAW challenges, including specific COVID-19 resources. See Appendix G for Return to Work Resources to assist workers.
Appendices

Appendix A: Return to Work (RTW) Coordination Intake Interview

Return to Work (RTW) Coordination Intake Interview

EMPLOYEE NAME: ________________________________

INTAKE DATE: ________________________________

INTERVIEWER: ________________________________
INTRODUCTION

The goal of the initial interview is to understand how the employee has been affected by their injury/illness including daily function, current medical treatments, areas of worry and concern, the nature and demands of their work, and their prospects for returning to work. The reason for conducting this type of open-ended interview is to focus subsequent efforts on the types of problem areas and barriers to return to work (RTW) identified by the employee.

The employee should be informed that all detailed notes and identifiable information collected by the RTW Coordinator will be kept confidential, though some information about number and type of visits will be reported to the RETAIN-CT research team as part of an overall RETAIN-CT program evaluation. If the employee provides written consent to communicate with their provider, employer, or others, this should be done only after getting a full account from the employee and explaining your intentions for contacting others. If possible, the employee should be encouraged to make these contacts on their own and report back to you, but sometimes your involvement will be needed.

The employee should be informed that there are no right or wrong answers, that everyone’s job is different, and pain experiences can be different, too. The employee can decline to answer any questions, in that case just go on to the next question.

INITIAL CHECK-IN

1. Please tell me about how you’re doing right now:

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

2. Any immediate problems or challenges I may be able to help you with?

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

3. Questions or comments before we get started?

________________________________________________________________________________________

________________________________________________________________________________________
NATURE OF INJURY/ILLNESS AND MEDICAL TREATMENT

4. Please explain the nature of your injury or illness:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

5. Please tell me about your current medical care and treatment plan:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

6. Please tell me about your current level of functional difficulties or activity restriction:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

7. What seems to aggravate your pain symptoms the most?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

8. Any other personal health history that might be helpful for me to know?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

9. What are the ways that you cope with pain?
________________________________________________________________________
________________________________________________________________________
FUNCTION AT HOME

10. Any trouble with normal daily activities (sleep, transportation, family care, social events)?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

11. Current living situation, family roles, caregiving responsibilities:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

12. Levels of social support and assistance available to you at home:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

WORKPLACE

13. Please describe your type of work before the injury/illness:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

14. The most demanding physical aspects of this work:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
15. The most stressful or challenging aspects of this work from an organizational perspective:

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

16. Can you lead me through a typical day at your job before you left for injury/illness?

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

17. Please describe any communications with your employer since you left for injury/illness?

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

18. How would you describe your personal work preferences (solitary vs. team, shift, etc.)?

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

19. Factors at work that made you more productive and satisfied with work?

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

20. Factors at work that made you less productive and dissatisfied with work?

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________
21. Please describe typical types of interactions with co-workers and supervisors:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

22. Efforts by your employer to support your return-to-work?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

23. Other aspects of your work that might be relevant?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

24. Please help me construct a timeline of events since you left work due to injury/illness.

(draw on reverse side)

PERMISSIONS

25. It may be helpful for me to communicate with your employer, health care provider, and/or others but this is up to you. Would you be willing to authorize this? (Use Authorization for Release and Exchange of Information template in Appendix H).

SUMMARY

26. So now let me review our discussions so far and see if I have left out anything important...
Appendix B: Problem-Solving Basics Employee Workbook
Problem Solving (Definition):

“a behavioral process...which (1) provides a variety of potentially effective responses to the problem situation, and (2) increases the likelihood of selecting the most effective response from among these various alternatives”¹¹

When adopt a problem-solving approach?

- When emotions tend to take over
- When several people are involved
- When there are multiple, complex factors
- When decision-making has serious implications
- When there are multiple steps or moving parts
- When you want to have a greater say

Who uses problem-solving?

- Business managers and executives
- Computer programmers and engineers
- Meeting and event planners
- Lifestyle coaches and counselors
- Everyday people

What generally works best?

- Viewing problems as challenges
- Being optimistic
- Being confident in one’s ability to succeed
- Recognize that some problems require time/effort
- Being committed to solutions
- Seeking more information to inform decisions
- Clarifying goals, obstacles, potential solutions
- Generating and comparing alternatives
- Evaluating solutions after implementation

...and what is least effective?

- Viewing problems as threats
- Doubting one’s ability to succeed
- Feeling worried or discouraged
- Missing the big picture
- Acting impulsively, without weighing options
- Waiting until the last minute
- Waiting for others to solve problems for you
Why return to work at all?

- Financial benefits
- Poor health impacts of unemployment
- May be a step to other long-term solutions
- Workplace may offer benefits beyond pay
- Getting back to life as usual
- Other reasons?

What makes return to work tough?

- Complicated medical and legal system
- Others don’t understand the nature of my job
- Functional roadblocks that interfere with work
- Miscommunications or lack of communication
- Pain or pain flare-ups, re-injury
- Need for modified duty or accommodations
- Other factors?
Problem-solving examples?

- What was the problem?
- Did it involve others?
- Things that seemed to help?
- Things that made matters worse?
- Did you need more information to decide?
- Were there several options?
- What did you do about the problem?
- How did it work out?

Hints: Common problem areas

- Planning a birthday party or event
- Changing something about your work
- Giving bad news to a friend
- Car and home repairs
- Asking for a refund
- Childcare or other family challenges
- Need to ask someone for a special favor
## HELPFUL HINTS FOR MAXIMIZING PROBLEM SOLVING STRATEGIES

<table>
<thead>
<tr>
<th>Basic strategy:</th>
<th>How to implement:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Viewing problems as challenges</td>
<td>Limit problem definition to a smaller scope that may seem more controllable and less universal.</td>
</tr>
<tr>
<td>Being optimistic</td>
<td>Recognize and counter negative self-statements.</td>
</tr>
<tr>
<td>Being confident of one’s ability to succeed</td>
<td>Reflect on past successes.</td>
</tr>
<tr>
<td>Recognizing that some problems require substantial time and effort</td>
<td>Construct a realistic timeline for intermediate and ultimate goals.</td>
</tr>
<tr>
<td>Having commitment to solutions</td>
<td>Keep ultimate goals in mind throughout the problem-solving process.</td>
</tr>
<tr>
<td>Seeking more information when confronted with obstacles</td>
<td>Ask more questions before deciding how to overcome a problem.</td>
</tr>
<tr>
<td>Identifying goals, obstacles, and potential solutions</td>
<td>Acknowledge that accomplishments often involve challenges.</td>
</tr>
<tr>
<td>Generating and comparing multiple alternatives</td>
<td>Brainstorm many ideas before deciding on a course of action.</td>
</tr>
<tr>
<td>Implementing and evaluating each course of action</td>
<td>Have back-up plans.</td>
</tr>
</tbody>
</table>
The problem-solving wheel\textsuperscript{12}

\[\text{Identifying \\
& Selecting \\
Problem}]

\[\text{Analyzing \\
Problem}]

\[\text{Generating \\
Potential \\
Solutions}]

\[\text{Selecting \\
& Planning \\
Solution}]

\[\text{Implementing \\
Solution}]

\[\text{Evaluating \\
Solution}]

\[\text{Problem-
Solving 
Process}]

Step 1: Defining the problem

Goal: Select a problem and describe the problem as clearly as possible

- Start with a shortlist of problems
- Try to reduce the scope of problems
- Specify the problems in more detail
- Make it personal
- What is the desired end state?
- Choose the problem(s) to focus on first

Common pitfalls:

- Jumping immediately to brainstorming
- Picking a problem that is too large
- Placing blame
- Overly vague descriptions of the problem
- Choosing a problem that you cannot change

Examples?
Step 2: Analyzing the problem

**Goal:** Identify factors that are contributing to the problem

- List as many contributing factors as possible
- List as many limiting factors as possible
- List as many helping forces as possible
- List possible roadblocks
- Get info from other sources or from other people
- Try self-monitoring your behavior
- Include factors related to both you and others

**Common pitfalls:**

- Avoid single-cause explanations
- Resist clumping limiting factors into single reasons
- Need to cast a wide net, think openly
- Avoid vagueness, provide detail instead

**Examples?**
Step 3: Generating potential solutions

Goal: Produce as many ways as possible to solve the problem

- Think of factors that can be altered
- How can causal factors be reduced?
- How can limiting forces be minimized?
- The more the better, no idea is too wild
- Try to name a solution for each factor/force in Step 2

Common pitfalls:

- Discounting solutions too quickly
- Feeling like no solutions will ever succeed
- Forgetting to include new, untested ideas
- Ideas that haven’t worked may still have merit

• Examples?
Step 4: Selecting and planning the solution

Goal: Decide on the optimal solution and plan its implementation

- Compare ideas on how effective they might be
- Compare ideas on how likely they are to work
- Combine, match, or pull apart solutions
- Choose a solution that seems likely to work and effective
- Make a list of small, easily manageable steps
- Make a timeline with each step
- Assign responsibilities and engage helpers

Common pitfalls:

- Don’t get distracted by small differences in options
- Avoid feeling the solution is beyond your ability
- OK to access additional resources or helpers

Examples?
Step 5: Implementing the solution

Goal: Implement and monitor the solution using the plan in Step 4

- Feel committed to seeing it through
- Set milestones and controls to check on status
- Have a back-up plan
- Be ready to make corrections and adjustments
- Know how you will evaluate progress
- Just do it!

Helpful hints:

- Motivation is key to success
- Mobilize supports and maximize available energy
- Provide yourself with reinforcement
- Celebrate interim milestones

Examples?
Step 6: Evaluating the solution

Goal: Judge how effectively your solution contributed to solving the problem

- (Not all solutions work! Return to Step 1)
- Could the solution have been implemented better?
- Was it partially successful?
- Did I leave enough time to notice a change?
- Do I feel less overwhelmed by the problem?
- What next?

Common pitfalls:

- Not leaving enough time to notice changes.
- Failing to acknowledge small successes
- People or circumstances changing from the start of working with the problem
- Giving up!

Examples?
# Summary of the problem-solving process

<table>
<thead>
<tr>
<th>STEP</th>
<th>QUESTION TO BE ANSWERED</th>
<th>BRAINSTORM</th>
<th>SELECT</th>
<th>WHAT'S NEEDED TO GO ON TO NEXT STEP?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Identify &amp; Select Problem</td>
<td>What do you want to change?</td>
<td>List problems for consideration</td>
<td>One problem statement, one &quot;desired state&quot;</td>
<td>Identification of the gap &quot;Desired state&quot; described in observable terms</td>
</tr>
<tr>
<td>2. Analyze Problem</td>
<td>What's preventing you from reaching the &quot;desired state?&quot;</td>
<td>List potential causes &amp; factors</td>
<td>Rank and verify primary factors.</td>
<td>Key factors identified and ranked.</td>
</tr>
<tr>
<td>3. Generate Potential Solutions</td>
<td>How could you make or facilitate the change?</td>
<td>List potential ideas to solve the problem</td>
<td>Potential solutions clarified &amp; ranked.</td>
<td>Solution list created.</td>
</tr>
<tr>
<td>4. Select &amp; Plan the Solution</td>
<td>What's the best way to do it?</td>
<td>Generate ideas on how to implement and evaluate the selected solution</td>
<td>Establish plan for implementing and evaluating solution.</td>
<td>Detailed plan in place for making and monitoring change.</td>
</tr>
<tr>
<td>5. Implement the Solution</td>
<td>Is the plan being followed?</td>
<td></td>
<td>Implementation of contingency plans established</td>
<td>Solution in place</td>
</tr>
</tbody>
</table>
Ergonomics (Definition):
“the study of people’s efficiency in their working environment; …designing and arranging things people use so people and things interact safely and efficiently”

Reasons Good Ergonomics Should Matter to Employers:

- Maintain productivity
- Maintain speed
- Discomforts are minimized
- Injury risks are minimized
- Healthy work environment
- Work supports healthy behavior
- Work is engaging and satisfying
- Work supports my psychological well-being

BUT work is not always ideal:
Job stress
Monotonous or repetitive tasks
Dissatisfying job tasks
Low wages or limited benefits
High productivity demands or long hours
Uncomfortable or awkward postures
Conflicts with supervisors or peers

Targets of ergonomic job redesign

- Modifying job tasks
- Modifying tools and processes
- Modifying human-machine interface
- Altering work systems or schedules
- Improving the physical environment
- Improving the social environment
- Altering workstations
- Reducing job demands
Workers differ in size and strength

- Normal human variation
- Effects of age, sex, body mass, strength
- Sickness, illness, and injury
- Recovery from musculoskeletal injury

Concept of *job accommodation*

- Provide job design to accommodate differences
- Provide flexibility in cases of illness or injury
- Require that essential job tasks be maintained
Recognized ergonomic risk factors

- Forceful exertions
- Awkward joint postures
- Constrained postures
- Sustained postures
- Repetition of tasks
- Direct mechanical pressure
- Vibration
- Temperature extremes
- Extreme metabolic demands

Potential other job risk factors

- Job stress
- Quotas and incentives
- Lack of job control
- Lack of job training or orientation
• Bullying and harassment

Common musculoskeletal risk factors

• Lifting, twisting, and bending
• Repetitive tasks, lack of task flexibility or control
• Sitting or standing for long periods

Job Requirements and Physical Demands

Job tasks can be assessed regarding:

• Frequency; how often this task is required
• Intensity; amount of force required
• Duration; how long the activity lasts
Tasks that might be important to note:

- Awkward postures
- Forceful exertions
- Positioning of joints and limbs
- Precision movements
- Rapid movements
- Postures maintained for long periods of time

Complete the Job Requirements and Physical Demands (JRPDS) Job Inventory

Flag and discuss:

- Job tasks with highest frequency occurrence
- Infrequent tasks involving high physical loads
- Job tasks you would find most difficult to resume
# Job Requirements and Physical Demands (JRPD) Scale

**Instructions:** Please indicate (with a checkmark) how much time you spend performing each of the tasks below when you are working your usual job. If you are not working, please refer to your most recent work experience.

<table>
<thead>
<tr>
<th>Task Description</th>
<th>Never</th>
<th>Less than 5 hours per week</th>
<th>Less than 2 hours per day</th>
<th>2-4 hours per day</th>
<th>More than 4 hours per day</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. I work with my hands at or above chest level (Figure A).</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. To get to or do my work, I must lay on my back or side and work with my arms up.</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>3. I must hold or carry materials (or large stacks of files) during the course of my work.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. I force or yank components of work objects in order to complete a task.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. I reach/hold my arms in front or behind my body (e.g., using keyboard, filing, handling parts, perform inspection tasks, pushing/pulling carts) (Figure B).</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. My neck is tipped forward or backward when I work (Figure C).</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>7. I cradle a phone or other device between my neck and shoulder (Figure D).</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>8. My wrists are bent (up, down, to the thumb, or little finger side) while I work (Figure E).</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>9. I apply pressure or hold an item/material/tool (e.g., screwdriver, spray gun, mouse, etc., in my hand for longer than 10 seconds at a time).</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>10. My work requires me to use my hands in a way that is similar to wringing out clothes. (Figure F).</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. I perform a series of repetitive tasks/movements during the normal course of my work (e.g., using keyboard, tightening fasteners, cutting meat).</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. The work surface (e.g., desk, bench, etc.) or tool(s) that I use presses into my palm, wrist, or against the sides of my fingers leaving red marks on or beneath the skin.</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>13. I use my hand/palm like a hammer to do aspects of my work.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14. My hands and fingers are cold when I work.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15. I work at a fast pace to keep up with the machine production quota or performance incentive.</td>
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<td></td>
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</tr>
<tr>
<td>16. The tool(s) I use vibrates and/or jerks my hand or arm.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>17. My work requires that I repeatedly throw or toss items.</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>18. My work requires me to twist my forearms, such as turning a screwdriver.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Figures A, B, C, D, E, F are included and represent the activities described in the tasks.*
<table>
<thead>
<tr>
<th></th>
<th>Never</th>
<th>Less than 5 hours per week</th>
<th>Less than 2 hours per day</th>
<th>2-4 hours per day</th>
<th>More than 4 hours per day</th>
</tr>
</thead>
<tbody>
<tr>
<td>19. I wear gloves that are bulky or reduce my ability to grip.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20. I squeeze or pinch work objects with a force similar to that which is required to open a lid on a new jar.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21. I grip work objects or tools as if I am gripping tightly onto a pencil.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22. When I lift, move components, or do other aspects of my work, my hands are lower than my knees (Figure G).</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23. I lean forward continually when I work (e.g., when sitting, when standing, when pushing carts).</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24. The personal protective equipment or clothing that I wear limits or restricts my movement.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25. I repeatedly bend my back (e.g., forward, backward, to the side, or twist) in the course of my work.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>26. When I lift, my body is twisted and/or I lift quickly (Figure H).</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>27. I can feel vibration through the surface that I stand on, or through my seat.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28. I lift and/or carry items with one hand (Figure I).</td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>29. I lift or handle bulky items.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>30. I lift materials that weigh more than 25 pounds.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>31. My work requires that I kneel or squat (Figure J).</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>32. I must constantly move or apply pressure with one or both feet (e.g., using foot pedals, driving, etc.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>33. When I’m sitting, I cannot rest both feet flat on the floor (Figure K).</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>34. I stand on hard surfaces.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>35. I can see glare on my computer screen or work surface.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>36. It is difficult to hear a person on the phone or to concentrate because of other activity, voices, or noise in/near my work area.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>37. I must look at the monitor’s screen constantly so that I do not miss important information.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Job Leeway and Flexibility

Jobs can be assessed regarding:

- Your ability to control work pace or task frequency
- Your ability to alter your workstyle and habits
- Latitude to alter your job to fit you better
- Leeway to do work differently if you’re not 100%
- Need for uniformity across workers

Items that might be especially important:

- Required work attire or equipment
- Visibility, exposure to clients and customers
- Ability to sit or stand as you please
- Flexibility of machines and work systems
- Ability to manage pain appropriately at work
- Ability to work in solitary or from home

Complete the Job Leeway Scale (JLS)

Flag and discuss:

- Sources of leeway in your normal job
- Organizational constraints that limit leeway
- Potential sources of help or task modification
**The Job Leeway Scale (JLS)**

**Instructions:** We are interested in how much freedom and flexibility you have to modify the way you get your work done when you're not feeling well. Please rate your level of agreement with each of the following statements from 0 = completely disagree to 6 = completely agree.

<table>
<thead>
<tr>
<th></th>
<th>Completely disagree</th>
<th>Completely agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. When I'm not feeling well, I can rotate between a number of job tasks.</td>
<td>0 1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>2. When I'm not feeling well, I can control the pacing of my work.</td>
<td>0 1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>3. When I'm not feeling well, I can choose easier job tasks.</td>
<td>0 1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>4. When I’m not feeling well, I can choose special tools or equipment that help at work.</td>
<td>0 1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>5. When I’m not feeling well, the physical aspects of my job can be altered.</td>
<td>0 1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>6. When I’m not feeling well, uncomfortable or stressful aspects of my work can be avoided.</td>
<td>0 1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>7. When I’m not feeling well, I can choose between physical and seated tasks.</td>
<td>0 1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>8. When I’m not feeling well, I still need to perform my work exactly like everyone else.</td>
<td>0 1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>9. When I’m not feeling well, I am able to vary my work.</td>
<td>0 1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>10. When I’m not feeling well, I can work from home.</td>
<td>0 1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>11. When I’m not feeling well, I can reschedule some of my work activities for another time.</td>
<td>0 1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>12. When I’m not feeling well, people can shift responsibilities to help me.</td>
<td>0 1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>13. When I’m not feeling well, I can depend on others to help get the work done.</td>
<td>0 1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>14. When I’m not feeling well, I can find a more comfortable place to work.</td>
<td>0 1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>15. When I’m not feeling well, I can dress more comfortably at work.</td>
<td>0 1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>16. When I’m not feeling well, I can take more micro-breaks.</td>
<td>0 1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>17. When I’m not feeling well, my job can be flexible.</td>
<td>0 1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>18. When I’m not feeling well, my job provides me the leeway I need to get through the day.</td>
<td>0 1 2 3 4 5 6</td>
<td></td>
</tr>
</tbody>
</table>
Temporary job modifications - likelihood of implementation

Jobs can be modified by:

- Altering physical workloads, pace, or quota
- Modifying work environments or workstations
- Changing work hours or work schedule
- Finding an alternate job for the time being
- Arranging for occasional assistance from others

Items that might be important for you:

- Knowing what productivity would be expected
- Knowing what to do if pain gets worse
- Knowing how to get assistance from others
- Recognizing core, unmodifiable tasks
- Understanding adjustability in your work setting

Complete the Job Accommodation Scale (JAS)

Flag and discuss:

- Who controls or monitors job modifications?
- What makes some modifications impossible?
- How to gain employer support for modifications?
**Job Accommodation Scale (JAS)**

**Instructions:** Below is a list of possible job modifications that are sometimes offered to injured or ill workers to help facilitate their return to work or help them stay on the job. Based on your current circumstances, how likely is it that your employer would be able to provide each of the following?

<table>
<thead>
<tr>
<th></th>
<th>Very likely</th>
<th>Somewhat likely</th>
<th>Somewhat unlikely</th>
<th>Very unlikely</th>
<th>Not an option for this job</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Arrange for others to help you do your work?</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>9</td>
</tr>
<tr>
<td>2. Shorten your work days?</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>9</td>
</tr>
<tr>
<td>3. Change the time you came and left work?</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>9</td>
</tr>
<tr>
<td>4. Arrange more breaks and rest periods for you?</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>9</td>
</tr>
<tr>
<td>5. Replace normal job tasks with things that are easier to do?</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>9</td>
</tr>
<tr>
<td>6. Reduce long periods of prolonged sitting?</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>9</td>
</tr>
<tr>
<td>7. Rotate your work between job tasks?</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>9</td>
</tr>
<tr>
<td>8. Move you to a different site or location?</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>9</td>
</tr>
<tr>
<td>9. Use special equipment or tools to make your job less painful?</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>9</td>
</tr>
<tr>
<td>10. Rearrange your workspace to be more comfortable?</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>9</td>
</tr>
<tr>
<td>11. Alter the height of your work surface?</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>9</td>
</tr>
<tr>
<td>12. Avoid twisting or bending of the back?</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>9</td>
</tr>
<tr>
<td>13. Limit you from pushing or pulling heavy objects?</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>9</td>
</tr>
<tr>
<td>14. Allow you to avoid prolonged periods of standing?</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>9</td>
</tr>
<tr>
<td>15. Allow you to avoid lifting of heavy objects?</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>9</td>
</tr>
<tr>
<td>16. Allow you to avoid awkward postures?</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>9</td>
</tr>
<tr>
<td>17. Find a more comfortable place for you to sit?</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>9</td>
</tr>
<tr>
<td>18. Find someone else to do the heavy work?</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>9</td>
</tr>
<tr>
<td>19. Get you assigned to another job temporarily?</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>9</td>
</tr>
<tr>
<td>20. Avoid you having to work with objects at floor level?</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>9</td>
</tr>
<tr>
<td>21. Ask co-workers to assist you as needed?</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>9</td>
</tr>
</tbody>
</table>

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Summary of your job

Job tasks you would find most difficult: __________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

Potential sources of existing job leeway and flexibility: __________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

Roadblocks around job modifications: __________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

Potential opportunities for job modification: _____________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________
Individuals who might be able to help:
Appendix D: Solving Return-To-Work (RTW) Challenges Employee Workbook

Solving Return-to-Work (RTW) Challenges Employee Workbook
Why return to work at all?

- Financial benefits
- Poor health impacts of unemployment
- May be a step to other long-term solutions
- Workplace may offer benefits beyond pay
- Getting back to life as usual
- Other reasons?

What makes return to work tough?

- Complicated medical and legal system
- Others don’t understand nature of the job
- Physical and functional limitations that interfere with work
- Miscommunications or lack of communication
- Pain or pain flare-ups, re-injury
- Need for modified duty or accommodations
- Other factors?
The problem-solving wheel\textsuperscript{13}

\begin{itemize}
  \item \textbf{Identifying \\ & Selecting \\ Problem}
  \item \textbf{Analyzing \\ Problem}
  \item \textbf{Generating \\ Potential \\ Solutions}
  \item \textbf{Selecting \\ & Planning \\ Solution}
  \item \textbf{Implementing \\ Solution}
  \item \textbf{Evaluating \\ Solution}
\end{itemize}


\textbf{RETAIN CONNECTICUT}
Step 1: Defining the problem

Goal: Select a problem and describe the problem as clearly as possible

- Start with a shortlist of problematic work tasks
- Try to reduce the scope of problems/tasks at work
- Specify workplace problems in more detail
- Make it personal – why is this job task important?
- Choose the problem(s) to focus on first

Common pitfalls:

- Jumping immediately to brainstorming
- Focusing exclusively on solving pain
- Placing blame
- Overly vague descriptions of the problem
- Choosing a problem that cannot be changed
Defining RTW problems

Problem Area: ______________________________________________________
  Reduce scope? ____________________________________________________
  More detail? ______________________________________________________
  Restate the problem? _____________________________________________

Problem Area: ______________________________________________________
  Reduce scope? ____________________________________________________
  More detail? ______________________________________________________
  Restate the problem? _____________________________________________

Problem Area: ______________________________________________________
  Reduce scope? ____________________________________________________
  More detail? ______________________________________________________
  Restate the problem? _____________________________________________

Problem Area: ______________________________________________________
  Reduce scope? ____________________________________________________
  More detail? ______________________________________________________
  Restate the problem? _____________________________________________

Problem Area: ______________________________________________________
  Reduce scope? ____________________________________________________
  More detail? ______________________________________________________
  Restate the problem? _____________________________________________

Problem Area: ______________________________________________________
  Reduce scope? ____________________________________________________
  More detail? ______________________________________________________
  Restate the problem? _____________________________________________
Step 2: Analyzing the problem

**Goal:** Identify factors that are contributing to the problem

- List causal factors for pain problems at work
- List workplace factors that make things worse
- List workplace factors that may help
- List possible workplace roadblocks
- Get info from other sources or from other people
- Include factors related to both the employee and others

**Common pitfalls:**

- Single-cause explanations, it’s never simple
- Clumping factors into single reasons
- Not casting a wide net, thinking openly
- Vagueness, provide detail instead
Problem Statement #1: ________________________________

Causal factors at work? ________________________________

Limiting factors at work? ________________________________

Helping forces at work? ________________________________

Workplace roadblocks? ________________________________

Problem Statement #2: ________________________________

Causal factors at work? ________________________________

Limiting factors at work? ________________________________

Helping forces at work? ________________________________

Workplace roadblocks? ________________________________
Step 3: Generating potential solutions

**Goal:** Produce as many ways as possible to solve the problem

- Ways to alter causal workplace factors?
- Ways to reduce limiting factors?
- Ways to increase helping forces?
- Ways to overcome workplace roadblocks?
- The more the better, no idea is too wild
- Try to name a solution for each factor in Step 2

**Common pitfalls:**

- Discounting solutions too quickly
- Feeling like no solutions will ever succeed
- Forgetting to include new, untested ideas
- Disregarding ideas that haven’t worked, but may still have merit
Problem Statement #1: ________________________________

How to reduce causal factors at work? ____________________________

__________________________________________________________

How to reduce limiting factors at work? __________________________

__________________________________________________________

How to use available help at work? ______________________________

__________________________________________________________

How to overcome workplace roadblocks? __________________________

__________________________________________________________

Problem Statement #2: ________________________________

How to reduce causal factors at work? ____________________________

__________________________________________________________

How to reduce limiting factors at work? __________________________

__________________________________________________________

How to use available help at work? ______________________________

__________________________________________________________

How to overcome workplace roadblocks? __________________________

__________________________________________________________
Step 4: Selecting and planning a solution

Goal: Decide on the optimal solution and plan its implementation

- Compare ideas on how effective they might be
- Compare ideas on how likely they are to work
- Combine, match, or pull apart solutions
- Choose a solution that seems likely and effective
- Make a list of small, easily manageable steps
- Make a timeline with sequential steps
- Assign responsibilities or helpers

Common pitfalls:

- Getting distracted by small differences in options
- Avoiding feeling the solution is attainable
- Not using additional resources or helpers
Problem Statement #1: ____________________________

Solution A: ________________________________
  How likely to implement? ______________________
  How effective would it be? ____________________
  Steps to implement? __________________________
  Timeline/others involved: ______________________

Solution B: ________________________________
  How likely to implement? ______________________
  How effective would it be? ____________________
  Steps to implement? __________________________
  Timeline/others involved: ______________________

Problem Statement #2: ____________________________

Solution A: ________________________________
  How likely to implement? ______________________
  How effective would it be? ____________________
  Steps to implement? __________________________
  Timeline/others involved: ______________________

Solution B: ________________________________
  How likely to implement? ______________________
  How effective would it be? ____________________
  Steps to implement? __________________________
  Timeline/others involved: ______________________

Best solution to start with? ____________________________
**Step 5: Implementing the solution**

**Goal:** Implement and monitor the solution using the plan in Step 4

- Feel committed to seeing it through
- Set milestones and controls to check on status
- Have a back-up plan
- Be ready to make corrections and adjustments
- Know how to evaluate progress
- Just do it!

**Helpful hints:**

- Motivation is key to success
- Mobilize supports and maximize available energy
- Ask for reinforcement and support from others
- Celebrate interim milestones
Problem Statement #1: ________________________________

Chosen solution: ________________________________

Action 1 (who/what/when)? ____________________________

Action 2 (who/what/when)? ____________________________

Action 3 (who/what/when)? ____________________________

Possible adjustments? ________________________________

Who is involved? ____________________________

Timeline? ________________________________

Back-up solution: ________________________________

Action 1 (who/what/when)? ____________________________

Action 2 (who/what/when)? ____________________________

Action 3 (who/what/when)? ____________________________

Possible adjustments? ________________________________

Who is involved? ________________________________

Timeline? ________________________________
Problem Statement #2: ________________________________

Chosen solution: ________________________________

  Action 1 (who/what/when)? ______________________

  Action 2 (who/what/when)? ______________________

  Action 3 (who/what/when)? ______________________

  Possible adjustments? __________________________

  Who is involved? ______________________________

  Timeline? ____________________________________

Back-up solution: ________________________________

  Action 1 (who/what/when)? ______________________

  Action 2 (who/what/when)? ______________________

  Action 3 (who/what/when)? ______________________

  Possible adjustments? __________________________

  Who is involved? ______________________________

  Timeline? ____________________________________
Step 6: Evaluating the solution

Goal: Judge how effectively the chosen solution contributed to solving the problem

Reminders, review and next steps:
- (Not all solutions work! Return to Step 1)
- Could the solution have been implemented better?
- Was it partially successful?
- Was there enough time to notice a change?
- Was there a feeling of less overwhelm?
- What next?

Common pitfalls:
- Not leaving enough time to notice changes
- Failing to acknowledge small successes
- People or circumstances changing from the start of working with the problem
- Giving up!
Problem Statement #1: ________________________________

Chosen solution: ________________________________

   Any benefit? ________________________________

   Enough time and effort spent? ________________________________

   Lessons learned? ________________________________

   Feeling differently? ________________________________

   Next steps? ________________________________

Back-up solution: ________________________________

   Any benefit? ________________________________

   Enough time and effort spent? ________________________________

   Lessons learned? ________________________________

   Feeling differently ________________________________

   Next steps? ________________________________
Problem Statement #2: 

Chosen solution: 

Any benefit? 

Enough time and effort spent? 

Lessons learned? 

Feeling differently? 

Next steps? 

Back-up solution: 

Any benefit? 

Enough time and effort spent? 

Lessons learned? 

Feeling differently 

Next steps?
Appendix E: Solving Workplace Challenges Employee Workbook

Solving Workplace Challenges Employee Workbook
Applying problem solving to work

**Step 1:** Identifying the most important challenges you face to return to work

**Start with some general categories:**
- Functional limitations
- Physical job demands
- Need for assistance at work
- Stigma or embarrassment
- Physical workplace environment
- Working hours
- Meeting deadlines, pace of work
- Being prepared for pain flare-ups
- Conflict with co-workers

**Then get more specific:**
- Try to reduce the scope of problems
- Add details, make it personal
- Prioritize problems and choose one

**Then restate as a challenge**
# Problem identification worksheet

<table>
<thead>
<tr>
<th>Problem Domain</th>
<th>Problems Identified</th>
<th>Problems Restated</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1)</td>
<td></td>
</tr>
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<td></td>
<td>2)</td>
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<tr>
<td></td>
<td>2)</td>
<td></td>
</tr>
</tbody>
</table>

**Problem domains** may include: **Domain**
- Educational
- Health Care
- Manufacturing
- Retail
- Transportation
- Manufacturing
- Government
- Non-Profit
- Technology
- Other

**Example problem statements**
- Lack of communication between departments
- Inadequate training for new employees
- Slow response times for customer service
- Inconsistent delivery times
- High inventory costs
- Low employee morale
- Decreased sales revenue
- Increased operational costs
- Poor customer satisfaction
- Limited product availability

**Restating problems**
- Improve communication protocols
- Develop comprehensive training programs
- Implement real-time tracking for deliveries
- Reduce the inventory level
- Enhance employee engagement strategies
- Expand marketing campaigns
- Implement cost-saving measures
- Improve delivery schedules
- Increase product availability
- Offer more competitive pricing

**Tips**
1. Identify the root cause of each problem
2. Prioritize problems based on impact and feasibility
3. Consider the long-term and short-term solutions
4. Collaborate with stakeholders for input
5. Monitor progress and adjust strategies as needed
Step 2: Analyze the factors that are contributing to this work challenge

Analyze the relevant factors:

• Identify possible causes
• List limiting factors
• List helping forces
• List possible roadblocks
• Get more information?

Which factors might be altered?

Which factors are most critical?

Who needs to be involved?

What resources might be needed?
Problem analysis worksheet

Problem statement: ____________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Potential causes for the problem: ____________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Helping Forces: _____________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Limiting Factors: ___________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Constraints: _________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

People and Resources involved: _______________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
Step 3: Generating solutions to address return-to-work challenges

Where to start:
- What factors can be altered?
- Can causal factors be removed?
- Can limiting factors be minimized?
- Can helping forces be improved?

Brainstorming:
- No idea is too wild
- What was learned by failed attempts?
- Try to name solutions for every factor
Generating solutions worksheet

Possible solutions for reducing or eliminating the problem?

Possible solutions for minimizing limiting factors:

Possible solutions for maximizing helping forces:

Possible ways to avoid roadblocks or use available resources:
Step 4: Detailing some possible options to discuss with your employer and health care provider

Rate options based on:

- Likelihood of implementation
- Effectiveness
- Simplicity
- Cost

Choose 2-3 options based on:

- Apparent likelihood for your employer to implement
- Match with your functional limitations
- Manageable steps, timelines, and help from workplace
- Reduction of potential risk factors and exposures

Make a plan for:

- Discussion with your health care provider
• Discussion with your supervisor/HR
• Work-site walk-through
Planning tentative options

**ALTERNATIVE 1**

Description: ______________________________________________________________

Why you chose this option: ________________________________________________

Necessary steps: __________________________________________________________

Who to involve: __________________________________________________________

**ALTERNATIVE 2**

Description: ______________________________________________________________

Why you chose this option: ________________________________________________

Necessary steps: __________________________________________________________

Who to involve: __________________________________________________________

**ALTERNATIVE 3**

Description: ______________________________________________________________

Why you chose this option: ________________________________________________

Necessary steps: __________________________________________________________

Who to involve: __________________________________________________________
Appendix F: Ergonomic Resource Links

Work Safe British Columbia

Washington State Department of Labor & Industries

Army Public Health Center: Ergonomic Publications

Easy Ergonomics: A Practical Approach for Improving the Workplace
Appendix G: Return to Work (RTW) Resources (including COVID-19 information)

Connecticut Return to Work Resources

*Please note that many of these resources are CT-specific but in some cases there are also federal and national resources listed as well. These listings were compiled in the first quarter of 2022.

Workers with Injury, Illness or Disability

This guide was created by the Retaining Employment and Talent after Injury/Illness Network (RETAIN-CT) Team to help people in Connecticut return-to-work (RTW) and stay-at-work (SAW) by offering resources and strategies that can help with the process. There are many different programs and agencies listed this guide.

Who to contact about work

Supervisors and Human Resources Departments

Workers should contact their supervisors and/or human resource department to report illness or disability. Likely documentation is needed from the doctor who treated or is treating their condition.

State of Connecticut (CT) Workers’ Compensation Commission

The Workers’ Compensation Act of the Connecticut General Statutes provides medical treatment, "wage replacement" benefits, and other benefits for employees who, unfortunately, have been injured at work or who have become ill from their jobs.

1-800-223-9675

https://wcc.state.ct.us/

Information on how to file a claim:

https://www.wcc.state.ct.us/gen-info/if-injured/todo.htm
Employee Assistance Programs (EAP)s

Some employers have a voluntary, work-based program that offers free and confidential assessments, short-term counseling, referrals, and follow-up services to employees who have personal and/or work-related problems. Human Resource Departments often have information on their web pages or can direct workers to an EAP, if the company has one.

Unions

Some jobs are unionized. Unions establish collective bargaining agreements or “labor contracts” which outline the employment rights that members will receive. In a collective bargaining agreement, unions will often specify the workers’ compensation benefits their members will receive if they are injured on the job.

Workers Seeking Accommodations

Job Accommodation Network (JAN)

The leading source of free, expert, and confidential guidance on job accommodations and disability employment issues

https://askjan.org/

Department of Labor (DOL) Americans with Disabilities Act (ADA)

Federal Law, ADA Title I states that a reasonable accommodation is a modification or adjustment to a job, the work environment, or the way things are usually done during the hiring process.

https://www.dol.gov/agencies/odep/program-areas/employers/accommodations

Requesting and Negotiating Reasonable Accommodations under the ADA Law

Job Accommodation Network’s (JAN) Guide

https://askjan.org/publications/individuals/employee-guide.cfm
**ADA Coalition of CT**

Promotes compliance with Americans with Disabilities Act. It is the only organization in the state singularly devoted to educating individuals with disabilities, businesses, and governmental entities about the ADA.

[https://www.adacc.net/](https://www.adacc.net/)

**Connecticut Tech Act Project (CTTAP)**

CTTAP operates out of the State of CT, Depart of Aging and Disability Services (ADS). Their goal is to help individuals with disabilities of all ages and all disabilities, as well as family members, employers, educators and other professionals have access to Assistive Technology (AT) devices and services. [http://cttechact.com](http://cttechact.com)

**Job Search Exploration**

**Self Service**

**CTHires**

Connecticut Department of Labor's new comprehensive workforce development system designed to provide integrated services via the Internet to individuals and employers 24 hours a day, 7 days a week.


**Career One Stop**

Career exploration, training and jobs:

[https://www.careeronestop.org/LocalHelp/AmericanJobCenters/american-job-centers.aspx](https://www.careeronestop.org/LocalHelp/AmericanJobCenters/american-job-centers.aspx)

**Employment and training helpline:**
1-877-US2-JOBS
(1-877-872-5627)
TTY: 1-877-889-5627
O*NET OnLine

A tool for career exploration and job analysis! O*NET OnLine has detailed descriptions of the world of work for use by job seekers, workforce development and HR professionals, students, researchers, and more.

https://www.onetonline.org/

Employment and Training Assistance

American Job Centers (AJC)s

If illness or injury prevents a worker from returning to their original position, AJCs offer employment and training assistance. Services are free to all individuals of working age.

https://portal.ct.gov/ajc

Injured and/or Disabled Workers

Department of Aging and Disability Services (ADS) Workers' Rehabilitation Program (WRS)

Workers’ Rehabilitation Services (WRS) is dedicated to assisting the eligible injured worker in returning to gainful employment by providing quality Vocational Rehabilitation (VR) services.

https://portal.ct.gov/AgingandDisability/Content-Pages/Programs/Workers-Rehabilitation-Program

ADS Bureau of Rehabilitation Services (BRS) Vocational Rehabilitation (VR)

Designed to help individuals with permanent documented disabilities prepare for, obtain, maintain or advance in employment.

https://portal.ct.gov/AgingandDisability/Content-Pages/Programs/Vocational-Rehabilitation---Bureau-of-Rehabilitation-Services

Department of Mental Health and Addiction Services (DMHAS) - Supported Employment

Employment Services are integral to the DMHAS’ goal of offering a recovery-oriented system of care for persons in recovery who experience behavioral health conditions.

https://portal.ct.gov/DMHAS/Initiatives/Evidence-Based/Supported-Employment-Services
Transportation for Workers with Injury/Illness

First, check with employers or employees to see if they have a carpool program.

If not, employers may be interested in setting up a carpool program – reach out to CTRides.com for assistance https://ctrides.com/.

Check Rideshare for existing carpools based on location – https://www.rideshare.com/

ADA Paratransit Bus Services

Mandated by the Americans with Disabilities Act (ADA), statewide paratransit services are provided in multiple areas with local fixed route bus services for people who can't use the local bus system due to their disability, https://portal.ct.gov/DOT/Publictrans/Bureau-of-Public-Transportation/Paratransit-service

These vans run on the bus schedule and require advance notice for pickups; therefore, it may not be the best option for some towns or work schedules.

Greater Hartford Transit District Freedom Ride

Available to ADA eligible passengers who need transportation beyond the traditional ADA paratransit service area and hours or for same-day service. This program allows paratransit users to receive a half-price taxi voucher through the M7 Cab Company. They have accessible cabs for people who use a wheelchair too.

https://www.hartfordtransit.org/freedom-ride/ or call 860-247-5329 extension 3086

Assistance Navigating Accessible Transportation

2-1-1 CT

For transportation and other resources, call 211 or visit their website at www.211ct.org

CT Department of Aging and Disability Services (ADS) Vocational Rehabilitation (VR) program

Helps individuals with disabilities to prepare for, find and keep a job. Those receiving vocational rehabilitation services, may be eligible for driver training/financial assistance for modified vehicles.

https://portal.ct.gov/AgingandDisability/Content-Pages/Programs/Driver-Training-Program
Help with Finances

Connecticut Association for Human Services (CAHS)

Financial coaching and more.

https://cahs.org/

860-951-2211

Practical Money Skills

Offers interactive tools and educational resources to help individuals and communities build stronger financial futures.

www.practicalmoneyskills.com

Additional Tips

Create a budget. Consider where assistance is needed and where spending cuts can be made.

When thinking of personal budgeting some ideas include:

• Help getting connected to social service assistance in CT: call 2-1-1 or visit https://www.211ct.org/

• Operation Fuel for year-round energy and utility assistance across CT: https://operationfuel.org/

• Mediation or help with landlords or mortgage companies

Remember that each city and town likely has assistance for their residents, especially for seniors and individuals with disabilities. Check city or town websites for:

• Utility and or heating assistance
• Tax breaks or credits
• Affordable housing - Senior/disability housing
• Locations and times for local food pantries
Volunteer Income Tax Assistance (VITA)
Free tax help
https://uwc.211ct.org/taxhelp/

COVID-19 Specific Resources
Centers for Disease Control (CDC) and Prevention- Workplaces and businesses

Survivor Corps
Post COVID Care Centers (PCCC) in CT
https://www.survivorcorps.com/pccc-ct

Mount Sinai
Guidance on, Returning to work after Covid-19 infection and Post-Acute COVID-19 Syndrome (PACS)

Connecticut Tech Act Project (CTTAP)
CTTAP operates out of the State of CT, Depart of Aging and Disability Services (ADS). Their goal is to help individuals with disabilities of all ages and all disabilities, as well as family members, employers, educators and other professionals have access to Assistive Technology (AT) devices and services.

CTTAP Resources for workers with “Long COVID” under the AT Act Program can provide access to AT for fatigue and mobility and AT for Work. Examples include workstation adaptations, training on setting reminders on devices and loans on AT equipment.
https://cttechact.com/how-assistive-technology-can-support-those-experiencing-long-covid/
U.S. Department of Labor: Office of Disability Employment Policy (ODEP)


The U.S. Department of Labor is committed to protecting the health and safety of America's workers and providing resources to help them respond to and recover from the Coronavirus pandemic. Find resources for Workers, Employers, Youth and Policymakers.


Job Accommodation Network (JAN)

Coronavirus (COVID-19) related workplace issues vary widely. JAN does not provide public health, safety, or legal advice, but does offer Americans with Disabilities Act (ADA) compliance assistance and practical job accommodation strategies for returning individuals with disabilities to work during the COVID-19 pandemic. These strategies can enable workers with disabilities to return to the work environment, work at home, or access leave when other accommodations are not reasonable.

https://askjan.org/topics/COVID-19.cfm

Occupational and Environmental Health Network (OEHN)

Provides occupational health solutions, offering consultation, clinical services and disability management to employers across all industries.

https://www.oehn.net/

Mental Health Resources

Speak to a Doctor

For those recovering from an injury or illness, who need emotional support, should talk to their doctor about how they are feeling. Medication, counseling or other resources may be appropriate to help.
Employee Assistance Programs

Encourage workers to explore or ask human resources at their company if they have an Employee Assistance Program (EAP) with counselors who can help with emotional support and return to work decision-making.

The Connecticut Mental Health Association

Dedicated to the promotion of mental health, prevention of mental illness, and improved care and treatment of persons with mental illness.

800-842-1501 or 860-529-1970

https://www.mhconn.org/

The National Alliance for the Mentally Ill - Connecticut (NAMI of CT)

NAMI of CT is a statewide organization for the families and friends of persons who have a psychiatric disability. Its activities include support, education and information, and advocacy.

800-215-3021 https://namict.org/

CT Department of Mental Health and Addiction Services (DMHAS)

DMHAS includes 24-hour crisis numbers, advocacy and support groups, and regional directories of their many state-operated and funded programs.

860-418-7000

https://portal.ct.gov/DMHAS/Programs-and-Services/Finding-Services/Programs-and-Services

National Suicide Prevention Lifeline

800-273-8255

Crisis Text Line 741741

Hours: Available 24 hours/ 7 days a week. Languages: English & Spanish.

Nationwide Mental Health Crisis and Suicide Prevention Number

The National Suicide Designation Act of 2020 establishes that by July 2022, 9-8-8 will be a universal number for mental health crises and suicide prevention.
CT Adult Crisis Telephone Intervention and Options Network - A.C.T.I.O.N. Line

For adults in distress who are 18 years of age or older. Mobile Crisis Teams (MCTs) provide mobile emergency crisis services that are mobile, readily accessible, rapid response, short-term services for individuals and families experiencing mental health or substance use crises.

Available 24/7, 365 days a year

1-800-HOPE-135 (1-800.467.3135) or 2-1-1

*For children under 18, please call 2-1-1 for help

https://portal.ct.gov/CrisisServices

CT Access Line

For 24/7 access to substance use treatment, including detox and transportation

1-800-563-4086

CT Infoline Crisis Services

Caseworkers can help make it easier for workers to find information, discover options or deal with a crisis. Infoline is certified by the American Association of Suicidology. This line can also be used for Crisis Services for Youth, to help children under age 18

Dial 2-1-1 from anywhere in Connecticut

Prevent Suicide CT

For suicide resources

1-800-273-8255

https://www.preventsuicidect.org/
Further Information

RETAIN-CT

A federally-funded quality improvement project designed to improve return-to-work (RTW) outcomes for workers in Connecticut with musculoskeletal (MSK) pain and injuries. The project provided a unique opportunity for the collaboration of providers, insurers, injured workers, employers and state return-to-work resources. The RETAIN-CT approach includes provider training, improved employer communication and outreach, the use of very early RTW coordination and planning, and access to medical peer physician advice on best occupational health practices.

http://retainct.com/

U.S. Department of Labor RETAIN Initiative

https://www.dol.gov/agencies/odep/initiatives/saw-rtw/retain

UConn Health (UCH) Occupational and Environmental Medicine (OEM) - Clinical Services

UCH OEM offers a comprehensive occupational medicine resource for workers and their employers. With a focus on prevention as well as prompt treatment, we work with employers, organized labor and other medical providers to promote and maintain a healthy workforce. Our professional staff includes experienced physicians who are board certified in occupational medicine and primary care, advanced practice nurses, industrial hygienists, ergonomists and behavioral health specialists. Our clinical services range from treating minor work injuries to evaluating complex occupationally related medical conditions.

860-679-2893

https://health.uconn.edu/occupational-environmental/clinical-services/

The Healthy Work Campaign (HWC)

A public health campaign focused on raising awareness in the U.S. about the health impacts of work stress on working people. Learn about (un)healthy work and solutions to it, access the level of work stressors in your workplace, and equip yourself or your organization with healthy work tools for individuals, employers and unions.

healthywork.org
Appendix H: Authorization for Release and Exchange of Information

Authorization for Release and Exchange of Information

I, __________________________ authorize the release of information between and among the identified individuals, whom will be planning and coordinating services with me for staying or returning to work.

Representatives of these agencies/providers will meet and share information regarding job retention, return to work, training and employment services at scheduled planning and review meetings. In addition, this release will permit follow-up communication between the listed agencies or treatment providers.

Representatives may include the following:

___ American Job Center
___ Capital Workforce Partners
___ Department of Labor
___ Department of Aging and Disability Services
___ Department of Mental Health & Addiction Services
___ Senior Community Service Employment Program
___ Adult & Continuing Education
___ UConn Health Center – RETAIN Training and Consultation Center
___ Treatment Provider (name) ____________________________
___ Employer (name & contact information) __________________

This release authorizes a free exchange of information between agencies/providers in order to give the most complete and thorough employment services available. It does not authorize release to any other person or agency except those agencies listed above. Unless revoked in writing, this release and exchange shall remain in force for a period of 12 months from the date of authorization.

Customer’s Signature __________________________ Date __________________

Work Navigator Signature __________________________ Date __________________