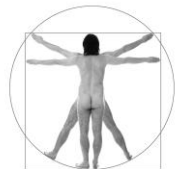


Return to work for temporary agency workers and unemployed workers, sick listed due to musculoskeletal disorders

Cost-effectiveness of a participatory RTW program

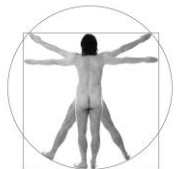
Sylvia J. Vermeulen, MD, PhD



The next 15 minutes...



The STEP-UP study

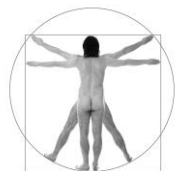


**Global integration of
economies**



**Need for a
flexible
workforce**

Why this study?



“PRIVATE EMPLOYMENT SERVICES HAVE DEVELOPED AS PART OF THE SOLUTION TO MEET AN INCREASED VOLATILITY IN LABOUR DEMAND AND TO SUPPORT ORGANISATIONS IN ADAPTING TO THE IMPACT THAT EACH CYCLE HAS ON THEIR EMPLOYMENT LEVELS.”

European Commission European Social Situation Quarterly Review,
March 2012

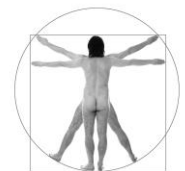
1998
4.8 million
agency workers
(FTE)



2008
9.5 million
agency workers
(FTE)

2011
12.4 million
agency workers (FTE)

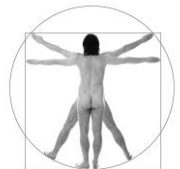
Why this study?



“WORKERS WITHOUT EMPLOYMENT CONTRACT”

- are agency workers and unemployed workers who report sick at the Dutch Social Security Agency (SSA)**
- have no (longer) an employment contract**
- receive Sickness Benefit**
- are entitled to occupational health care by the SSA for health promotion, recovery of functioning and RTW**

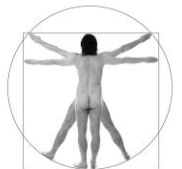
Why this study?



VULNERABLE GROUP within the working population

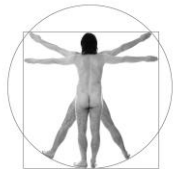
- **poorer health status**
- **greater distance to the labour market**
- **increased risk for (long-term) work disability**

Why this study?

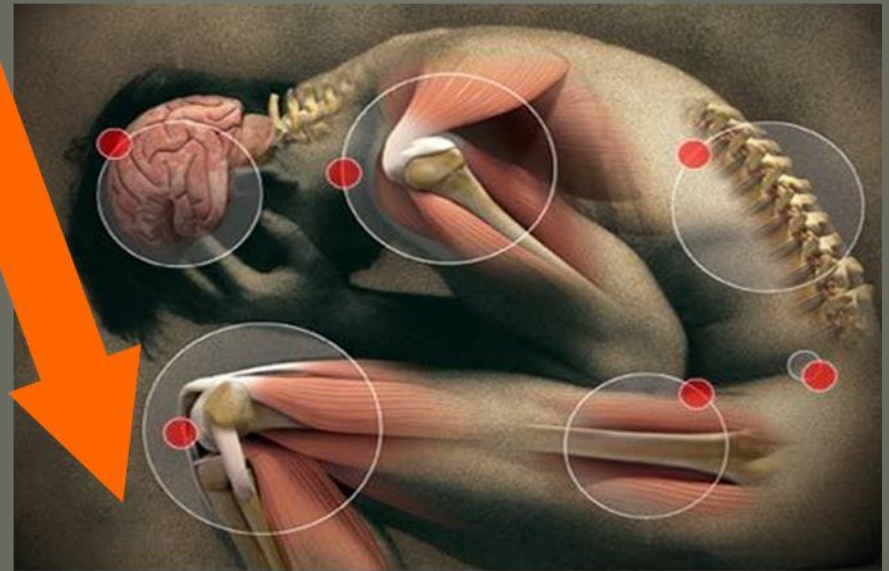




Why this study?



Participatory RTW program for temporary agency workers and unemployed workers



2-8 weeks sick-listed due to musculoskeletal disorders

How? Study design



Participatory RTW program

- Stepwise program
- Consensus-based
- Guided by an independent RTW coordinator



Problem analysis & Assessment of functional abilities

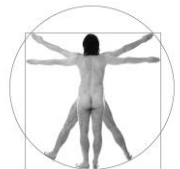
Inventory of obstacles for RTW

Brainstorm possible solutions to achieve RTW

Consensus-based RTW action plan

Optional: placement in temporary workplace

How? Study design



Temporary agency
workers and unemployed
workers 2-8 weeks
sick-listed due
musculoskeletal disorders

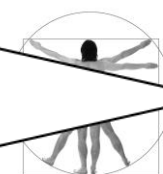


Usual care
&
Participatory RTW program



Usual care

1 YEAR FOLLOW-UP





compared to



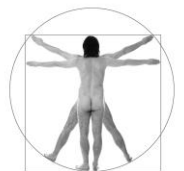
Median duration until sustainable RTW

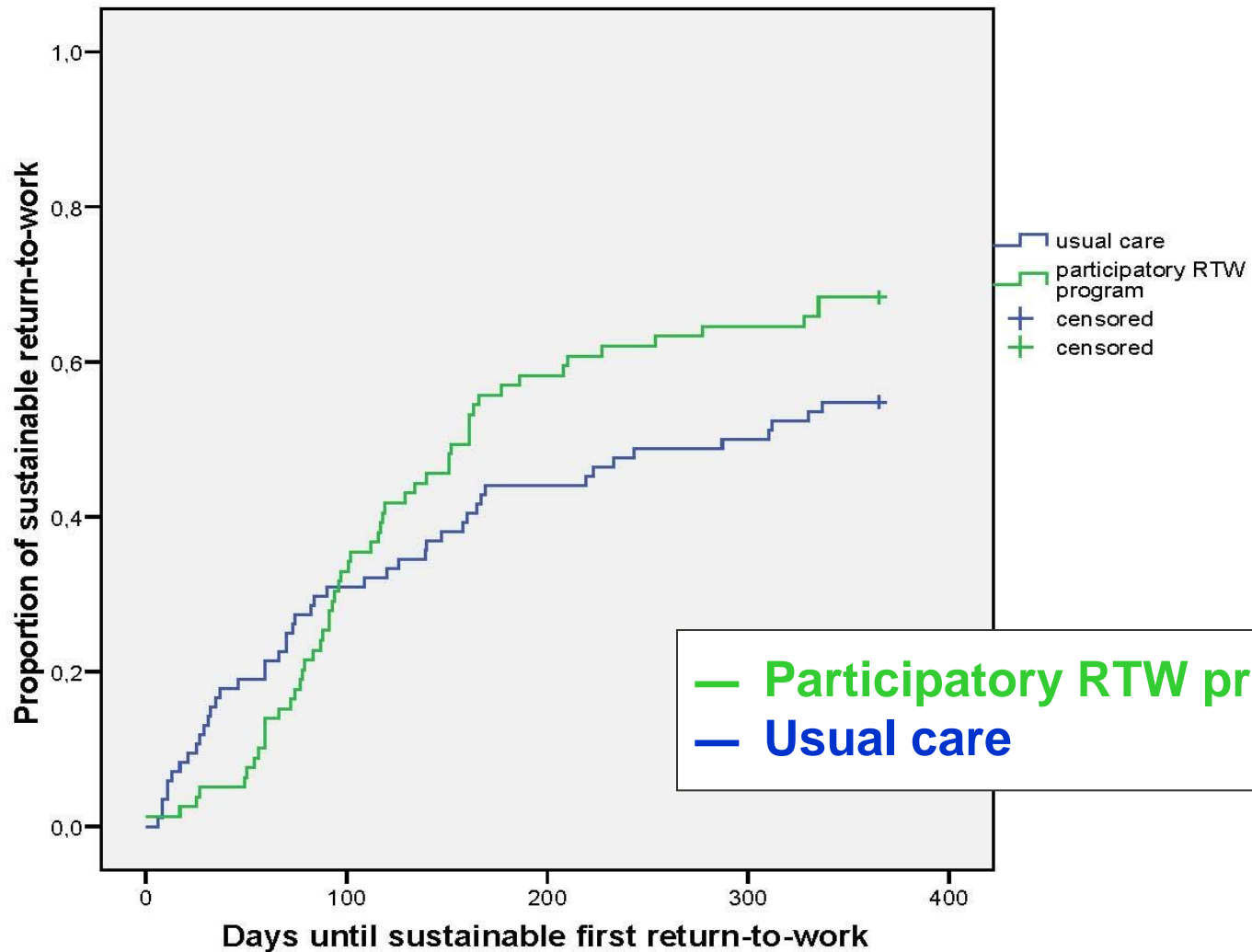
161 days (IQR 88-365) versus 299 days (IQR 71-365)

$P=0.10$

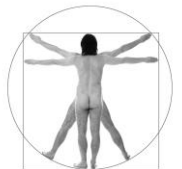
Sustainable RTW: at least 28 consecutive days without relapse

What are the results?





What are the results?





compared to

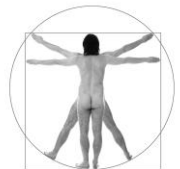


Duration of sickness benefit → 69 days longer *

*

Mainly due to placement in
temporary workplace with
supportive sickness benefit
(95% of difference)

What are the results?





compared to



Functional status

Health status

Pain intensity

Equal
improvement

What are the results?





compared to



MORE COSTS

→ **€2327**

GAIN IN PRODUCTIVITY

→ **€4400**

NET SOCIETAL BENEFIT

→ **€2073**

What are the results?

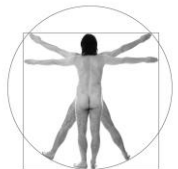


More social participation and inclusion of vulnerable workers into the labour force

Net economic benefit due to productivity gain

More social insurance costs

What are the results?





TODAY, ABOUT HALF OF THE GLOBAL WORKFORCE IS ENGAGED IN WAGED EMPLOYMENT, BUT MANY DO NOT WORK FULL TIME FOR A SINGLE EMPLOYER. THE SUPPOSEDLY "ATYPICAL" HAS BECOME TYPICAL; THE "STANDARD" HAS BECOME THE EXCEPTION.



Mr Guy Ryder, ILO Director General in his speech
at the 2013 International Labour Conference on the future of work.

- Enhance access to vocational rehabilitation support
Integrated health care approach
- Facilitate access to suitable (therapeutic) workplaces to RTW
Enhance corporate social responsibility
Strengthening of responsibilities of private employment agencies to offer suitable workplaces for RTW
- Explore possibilities to share costs and benefits
Offering subsidised workplaces (e.g. Danish flexjobs)

Challenges?

