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Health & Work

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How to get better and back to work:

- a flexible approach
- everyone working together to overcome obstacles
This leaflet is about helping you get back to health and work. You will learn what you need to do, and what you should expect from health care and your workplace. You will get practical advice on overcoming obstacles to recovery and work.

**WORK AND HEALTH**

Work is an important part of life. And research shows that work is good for physical and mental health.

We now have good evidence that returning to work as soon as possible actually helps recovery. It is the best way to avoid long-term sickness.

**COMMON HEALTH PROBLEMS**

Most sickness absence is due to:

- Mental health conditions such as ‘stress’ or depression
- Muscle and joint conditions such as back pain or whiplash
- Heart and chest conditions such as blood pressure or asthma

All of us suffer these kinds of problem at some time in our lives. They can certainly be distressing and may make life difficult, but there is usually no serious disease or lasting damage. Most episodes settle quickly, even if some symptoms may continue or come back from time to time. Most people remain at work, or return quite quickly.

Why do some people with common health problems end up with long-term sickness? There is usually no good medical explanation. Rather, it’s because something has gone wrong with the way things have been handled. We need to look at what can go wrong.
MYTHS AND REALITIES

There are many unhelpful myths, which cause unnecessary fear and uncertainty. Fortunately, we now have the knowledge to dispel them:

Myth: Common health problems are caused by work.

Usually, they’re not! Everyone gets these kinds of problems.

Work may make symptoms feel worse at times, but that does not mean work caused the problem.

False!

- most people with common health problems stay at work most of the time, and come to no harm
- in fact, working will often help you feel better.

Myth: Working will make my health condition worse.

Myth: You should not return to work until you are 100% OK.

Actually, you should – and the earlier, the better!

- work is often part of treatment, and getting back to work is part of the recovery process
- simple changes to your job may be the key to getting back quickly.

Wrong! A sick note is not a medical order to stay off work

- it just says that you met the criteria for sick pay or benefits
- you can arrange to get back to work at any time
OBSTACLES TO RECOVERY
Various things can get in the way of recovery, and getting back to work.

• Personal issues, such as how people think and feel
• Work issues, which can block return to work

Personal obstacles
• Unhelpful attitudes and beliefs about health and work
• Uncertainty
• Anxiety and depression
• Loss of routine and work habits

Work-related obstacles
• Loss of contact with work
• Negative attitudes by people at work
• Lack of modified duties
• Legal claims

SAM’S STORY
Last year I just wasn’t feeling too good. The doc gave me tablets and told me to stay off work - but that didn’t make any difference. Then I had to sit around for six weeks waiting for treatment – and then it didn’t help all that much. They said it was probably my job that caused it, so I shouldn’t go back till I was fully fit. By that stage I was getting really worried - and depressed. Then out of the blue I got a letter from work saying they were paying me off. So now I’m on Benefits. The union’s helped me put in a claim, but that could take 2-3 years to go to court! This whole saga has just taken over my life, yet to begin with I thought I’d soon get over it. Looking back, I never thought it would end like this. All I wanted was a bit of help.

What went wrong?
Sam’s story shows how easy it can be to drift into long-term sickness. As time passes, obstacles multiply. Beliefs and actions – or lack of action - can block your recovery. The people who were supposed to help actually created obstacles.
THE RISK OF LONG-TERM SICKNESS

The longer you are off, the harder it is to get back. Most of the warning signs are then about what you feel and do, rather than your medical condition:

• Believing there is something seriously wrong.
• Unable to accept reassurance and help.
• Avoiding activity in case it makes things worse.
• Getting withdrawn and depressed.
• Fears and uncertainty about going back to work.

The faster you get back to normal activities and back to work, the sooner you will feel better.

GETTING BACK TO WORK

Recovery

Recovery depends on working with the health professionals who are helping you - and on your own motivation and effort.

Treatment can help to reduce your symptoms, but you are the one who has to get active. No one can do it for you.

Look at it this way; you can be an ‘avoider’ or a ‘coper’: if you want to recover, you need to be a coper.

Those who are helping you should also take this can-do approach. Make it clear to them that what you really want is help to get on with your life.

RETURN TO WORK

Getting back to work depends on you and your employer working together, and that needs communication. The key thing is to stay in touch with the people at work – if you don’t you lose the chance for them to help you. Talk about any obstacles you see, and how you can sort them out together.
YOUR RETURN-TO-WORK PLAN
Getting back to work needs planning.

Take control:
You have to take responsibility for making sure that you recover – making the best use of whatever help you need.

Set realistic goals:
Set a clear time-line to get back to full activity and your usual work – aim for weeks rather than months.

List what you can do:
Don’t dwell on what you can’t do. Think positive. What are you still able to do? You will probably find it is more than you think. List the obstacles to getting back to work. Now list what you, your doctor, and your work can do to overcome these obstacles.

Talking with your doctor:
Talk about how and when you can get back to work. You know your job best, and will need to explain what it involves. Discuss which work tasks you feel you could do and that they are OK with your health problem. You could even ask for a letter that tells your employer what you can do rather than what you can’t – a ’fit note’ rather than a sick note.

Increasing activity:
Start with those activities you find easiest. Do a little more, a little longer, every day. You will have good days and bad days. Pace yourself – keep up your activities on the bad days. Most people get set-backs, so don’t give up!

Talking with your therapist:
Ask for treatment designed to get you ready for work. And then go back as soon as you are ready – you can complete the treatment once you are back.

Changing your mind-set:
Illness and injury often lead to anxiety and depression. Many people feel uncertain about getting active, about return to work,
and about whether they will be able to cope. Loss of confidence is often a real issue.

These can all be obstacles to recovery. So, an important part of your return to work plan is to re-think your mental approach. Getting active will help you feel more positive and is the best treatment to dispel many of these worries. As you get fitter things will improve.

**Talking with your employer:**
If your employer has not been in touch, you can make the first move. Look in to see your boss or line manager – at a time you know they’ll be free.

Make it clear that you want to get back to work as soon as possible. Temporary changes to your work are one of the best ways to help you return quickly. If you think some adjustments to your job would make getting back easier, ask. Adjustments are almost always possible, so talk about your ideas to overcome obstacles.

**Putting it all together:**
You need to prepare your own return to work plan. Make sure that you, your GP, therapist, and employer all know what is going on. Make sure they are all working together to get you back to work. Make sure they are all in contact.

Write out your return to work plan. This can be a simple list or table of all that needs to happen and when. It is important that everyone agrees on a date for getting back to your usual job.

All that remains is to check off the stages and make it all happen - on time!

**BANJÍ’S STORY**

My shoulder problem cropped up again, but this time it seemed worse, so I asked the doc to check it out. Probably muscular he said, and it should settle OK - no need to stop doing anything. That made sense – my dad had a dodgy elbow that flared up now and then, but it
never laid him up. Anyway, after a week the shoulder wasn’t any better and I couldn’t manage at work. So back to the doc. He said I needed some therapy. As it happens the firm has this arrangement with a local physio, so we agreed I’d try that. One of my friends tried to tell me it must have been caused at work. That just had to be rubbish – I know I’ve got a physical job but I’ve been doing it for years and nothing’s changed. I reckoned that all I really needed was some treatment to get my shoulder working again. The physio agreed, and when I told her that my job could be made easier for a while, she said going back could actually help. The doc wrote to my boss about what I could manage, and when I went in to see the people at work they were really helpful. A few weeks later I was back at my usual work!

Remember:

• Most common health problems can be accommodated at work
• Work is an important part of recovery
• The longer you are off work, the harder it will be!
• Share responsibility for your own recovery
• Beware the myths!
• Identify the obstacles and plan how to overcome them
• Everyone working together, doing what’s needed when it’s needed
• Make a return to work plan

You know what needs to be done. There is a lot you can do. There is a lot that your doctor and therapist, and your employer, can do to help. It is up to you to encourage everyone to work together to help you get on with your life.

A longer version of Health & Work in booklet form is available from The Stationery Office: www.tso.co.uk/bookshop

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