

IMPERIAL

Effective signposting and referral pathways

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Intro



- General Practice
- Occupational health
- Imperial College London: research/ policy lab
- Teaching on MBBS and MPH
- Current interest: transatlantic learning

Researchers at Imperial College London are working on a solution to the high levels of economic inactivity due to ill health in the UK. Together, with occupational health clinicians and a team at the **Department for Work and Pensions**, researchers at **The Self-Care Academic Research Unit (SCARU)** are delivering and evaluating a pilot study that places job centre work coaches and disability employment advisors in GP surgeries, where people's work and health needs can be addressed together.

'This project represents a watershed for work and health in the UK, and a first step to universal access to occupational health.' - Dr Shriti Pattani, National Expert in Occupational Health & Wellbeing and Honorary Senior Lecturer, Imperial College, London

Evidence generation: EMBED study

Agenda

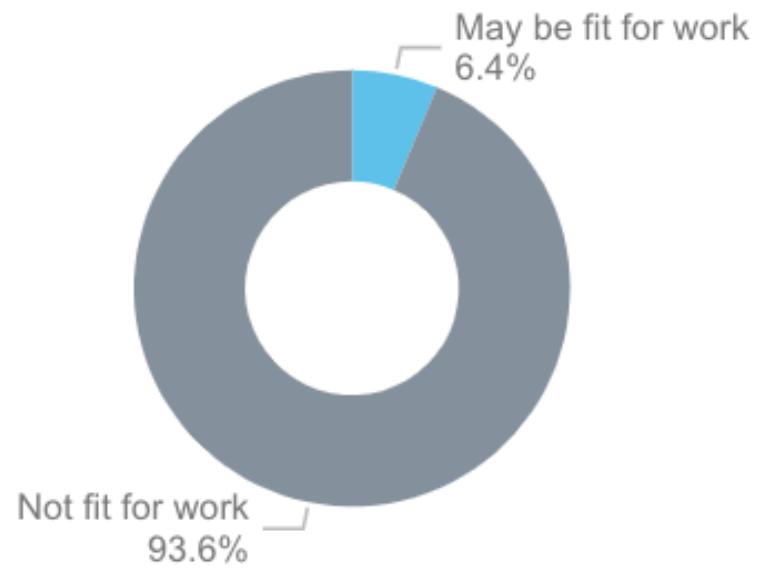
- 1** Current landscape
- 2** Components of an ideal pathway
- 3** Takeaways/ questions

Current landscape

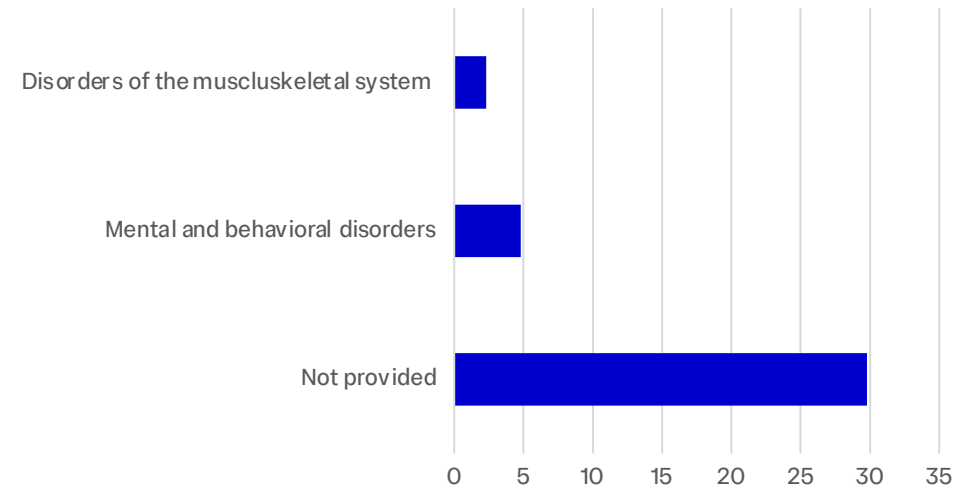
Current pathway

- Day one: individual calls in sick
- **Day seven**: individual firsts sees GP team for fit note

Use of the fit note in GP since 2017



Number of fit notes (millions)



Current pathway

- **Day one**: individual calls in sick
- **Day seven**: individual firsts sees GP team for fit note
- **Day 112**: Individual can begin to apply for Employment and Support Allowance up to three months from when their statutory sick pay ends
- **Day 196**: Statutory sick pay ends- individual moves on to Employment and Support Allowance

Organisational offering



What does a good organisational offering look like?

Variables in organisational policy

? Manager conversation

? Access to healthcare through work

? Occupational Health Referral

? Corporate sick pay timeline

Employers

How do we leverage employer buy in?

Supporting employers to develop best practice

- Navigating provider landscape
- Investment in evidence-based interventions...the corporate wellbeing industry 'trap'

Demonstrating return on investment

Case study

Mr K

48 year old male

works in retail on shop floor

recent MI which led to CCF

poor exercise tolerance

- breathless while walking/ more fatigued

Components of an ideal pathway

Referral pathways

- 1** Managing expectations
- 2** Timely interventions
- 3** Data gathering
- 4** Tiered approach
- 5** Shared decision making
- 6** Resource knowledge
- 7** Feedback loop

1) Managing expectations

Signposting to a 'may be fit for work' conversation

Public dialogue and media dialogue



The image is a screenshot of the BBC News website. At the top, the BBC logo is on the left, followed by navigation icons for a user profile, a notification bell, and links to Home, News, Sport, Weather, and iPlayer. Below this is a red navigation bar with the word "NEWS" in white. Underneath the red bar is a secondary navigation bar with links to Home, Israel-Gaza war, Cost of Living, War in Ukraine, India Election, and Climate. Below that is a "Politics" section with a link to Wales, which is underlined. Further down, there are links for Wales Politics, Wales Business, North West, North East, Mid, and South. The main headline reads "Tory plan to remove GP sick note powers criticised". Below the headline is a photograph of a person in a white lab coat, likely a doctor, looking at a document.

Case study

Mr K

48 year old male

Recent cardiac issues leading to poor exercise tolerance

“There’s no way I can work like this...I need a sick note”

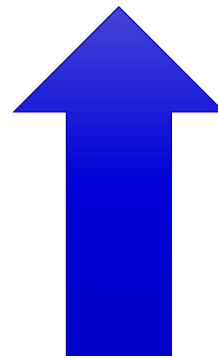
2) Timely intervention

The earlier the intervention the better

Once someone is off for four weeks, there is already a 20% chance they will never return to work

Use of the fit note in GP since 2017

Duration of fit notes (year and diagnosis filters only)



3) Data gathering

Clear identification of needs

Triage

Health

Function

Psychosocial

4) Tiered approach according to needs

Risk assessment

- Need for sickness absence
- Need for adaptations

Health management

- Medical
- Physiotherapy
- Psychological therapy

Psychosocial return to work support

- Communication with employer

Case study: Mr K

Risk assessment

- Need for sickness absence
- Need for adaptations: *“My job is really physical- walking around the shop floor would be impossible in this state”*

Health management

- Medical: Secondary prevention? Cardio follow up for optimization?
- Physiotherapy: Cardiac rehab?
- Psychological therapy: Mood post MI?

Psychosocial return to work support

- Communication with employer: *“They aren’t keen on people staying on tills- they want everyone to rotate roles so its fair”*

5) Shared decision making

Person centred management

- Psychosocial context

“I have always liked work- gets me out of the house. But I have to help with my partner’s care and I think we’re both going to struggle now my health isn’t great either”

6) Comprehensive resource knowledge

1. Interagency collaboration

- **psych/ physio/ cardio**

- ? **GP/ social prescriber/ social services re partner's care**

- **work and health support**

2. Timely and place-based support

- timely MDTs/ clinics in surgery

7) Feedback and Follow Up

1. Individual follow up

2. Quality Improvement and system learning

“I got back to work thanks to the letter the work support officer gave me, so that’s been going well. I was on the waiting list for psychological support and that appointment has come through. My employer isn’t sure about giving me time off during the working day though...”

- Write to employer
- In future... indicate that time off to attend appointments may help

Referral pathways

- 1** Managing expectations
- 2** Timely interventions
- 3** Data gathering
- 4** Tiered approach
- 5** Shared decision making
- 6** Resource knowledge
- 7** Feedback loop

Questions

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work and health

Fixed leave...unlimited leave

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MAY 09, 2024

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Share



Foundry Dock Park, Cold Spring, New York, April 2024

Since 2021, LinkedIn has given its employees an additional fixed paid week off, in response to an increase of work-related mental ill health following the covid-19 pandemic. At the time, the Chief People Officer described the thought process behind the initiative *“what we think is most valuable right now is time for all of us to collectively*