

Appendices

- 1) [Methodological details](#)
- 2) [Details about each identified synthesis](#)
- 3) [Details about each identified single study](#)
- 4) [Programs and guidelines identified through a jurisdictional scan of other countries](#)
- 5) [Programs and guidelines identified through a jurisdictional scan of Canadian provinces and territories](#)
- 6) [Documents that were excluded in the final stages of review](#)

Examining the features and impacts of incentive programs for return to work after a period of disability

20 December 2023

[MHF product code: REP 60]

Appendix 1: Methodological details

We use a standard protocol for preparing rapid evidence profiles (REP) to ensure that our approach to identifying research evidence is as systematic and transparent as possible in the time we were given to prepare the profile.

Identifying research evidence

For this REP, we searched Health Systems Evidence and Social Systems Evidence for evidence syntheses and PubMed, PsychInfo, and Web of Science for single studies published in the last five years.

In Health Systems Evidence, we performed an open search for “Return to Work.” In Social Systems Evidence, we performed an open search for “Return to Work” with filters for “employment” under “programs and services.” In PubMed, we used the following combination of terms: “Return to Work”[MeSH Major Topic] OR “Return to Work”[Title/Abstract] OR “returning to work”[Title/Abstract] AND “disabled persons”[MeSH Terms] OR “disab*”[Title] OR “handicap*”[Title] OR “impair*”[Title] AND “incent*”[Title/Abstract] OR “motivat*”[Title/Abstract]. For PsychInfo, we searched for: (((title: (Return to Work)) OR (abstract: (Return to Work)) OR (Index Terms: (Return to Work))) AND ((Year: [2018 TO 2023]))) AND (((MeSH: (disabled persons)) OR (Index Terms: (disabled persons)) OR (title: (disabled)) OR (title: (handicapped)) OR (title: (impaired))) AND ((Year: [2018 TO 2023])). The PsychInfo searches were limited to peer-reviewed journals. Lastly, in Web of Science, we searched for (WC=(“Return to Work”)) OR TS=(“Return to Work”) AND Year 2019–2023 AND (WC=(disabled persons)) OR TS=(disabled persons) and Disabled People (Should – Search within topic) and Persons With Disabilities (Should – Search within topic) and Person With Disability (Should – Search within topic) and Mentally Ill And Disabled Persons (Should – Search within topic) and Disabled Person (Should – Search within topic) and Disabled Persons (Should – Search within topic) Year 2019–2023. This search was limited to article or review article or early access under document type.

Each source for these documents is assigned to one team member who conducts hand searches (when a source contains a smaller number of documents) or keyword searches to identify potentially relevant documents. A final inclusion assessment is performed both by the person who did the initial screening and the lead author of the rapid evidence profile, with disagreements resolved by consensus or with the input of a third reviewer on the team. The team uses a dedicated virtual channel to discuss and iteratively refine inclusion/exclusion criteria throughout the process, which provides a running list of considerations that all members can consult during the first stages of assessment.

During this process we include published, pre-print, and grey literature. We do not exclude documents based on the language of a document. However, we are not able to extract key findings from documents that are written in languages other than Chinese, English, French, or Spanish. We provide any documents that do not have content available in these languages in an appendix containing documents excluded at the final stages of reviewing. We excluded documents that did not directly address the research questions and the relevant organizing framework.

Assessing relevance and quality of evidence

We assess the relevance of each included evidence document as being of high, moderate, or low relevance to the question.

Two reviewers independently appraised the quality of the guidelines we identified as being highly relevant using AGREE II. We used three domains in the tool (stakeholder involvement, rigour of development, and editorial independence) and classified guidelines as high quality if they were scored as 60% or higher across each of these domains.

Two reviewers independently appraise the methodological quality of evidence syntheses that are deemed to be highly relevant. Disagreements are resolved by consensus with a third reviewer if needed. AMSTAR rates overall methodological quality on a scale of 0 to 11, where 11/11 represents an evidence synthesis of the highest quality. High-quality evidence syntheses are those with scores of eight or higher out of a possible 11, medium-quality evidence syntheses are those with scores between four and seven, and low-quality evidence syntheses are those with scores less than four. It is important to note that the AMSTAR tool was developed to assess evidence syntheses focused on clinical interventions, so not all criteria apply to those pertaining to health-system arrangements or to economic and social responses. Where the denominator is not 11, an aspect of the tool was considered not relevant by the raters. In comparing ratings, it is therefore important to keep both parts of the score (i.e., the numerator and denominator) in mind. For example, an evidence synthesis that scores 8/8 is generally of comparable quality to another scoring 11/11; both ratings are considered 'high scores.' A high score signals that readers of the evidence synthesis can have a high level of confidence in its findings. A low score, on the other hand, does not mean that the evidence synthesis should be discarded, merely that less confidence can be placed in its findings and that the evidence synthesis needs to be examined closely to identify its limitations. (Lewin S, Oxman AD, Lavis JN, Fretheim A. SUPPORT Tools for evidence-informed health Policymaking (STP): 8. Deciding how much confidence to place in a systematic review. *Health Research Policy and Systems* 2009; 7(Suppl1): S8.)

Identifying experiences from other countries and from Canadian provinces and territories

For each REP, we work with the requestors to collectively decide on what countries (and/or states or provinces) to examine based on the question posed. For other countries, we search relevant government and stakeholder websites including the webpages of worker's compensation and governing bodies of workplace safety. In Canada, a similar approach was used, searching the websites of provincial workers' compensation boards as well as ministries of labour. While we do not exclude content based on language. Where information is not available in English, Chinese, French, or Spanish, we attempt to use site-specific translation functions or Google Translate. A full list of websites and organizations searched is available upon request.

Preparing the profile

Each included document is cited in the reference list at the end of the REP. For all included guidelines, evidence syntheses, and single studies (when included), we prepare a small number of bullet points that provide a summary of the key findings, which are used to summarize key messages in the text. Protocols and titles/questions have their titles hyperlinked, given that findings are not yet available.

We then draft a summary that highlights the key findings from all highly relevant documents (alongside their date of last search and methodological quality) as well as key findings from the jurisdictional scan.

Appendix 2: Details about each identified evidence synthesis

Dimension of organizing framework	Declarative title and key findings	Relevance rating	Living status	Quality (AMSTAR)	Last year literature searched	Availability of GRADE profile	Equity considerations
<ul style="list-style-type: none"> Type of worker <ul style="list-style-type: none"> Full-time Type of injury <ul style="list-style-type: none"> Physical injury Stage of return to work <ul style="list-style-type: none"> Return to work Nature of incentive program <ul style="list-style-type: none"> Non-financial incentives Outcomes <ul style="list-style-type: none"> Worker satisfaction Cost related to incentive program Productivity 	<p>Job accommodations by modifying work environment and roles are a return-to-work incentive that can maintain employment productivity and well-being for people with physical disabilities</p> <ul style="list-style-type: none"> The purpose of this systematic review was to summarize the use of workplace accommodations for employees with physical disabilities. This review focused on job accommodations as an incentive for return to work. Accommodations included providing assistive technology and modifying work environments, policies, responsibilities, and schedules. Accommodations were reported to maintain employment as well as increase work productivity, symptom management, and overall health and wellness. Accommodations were found to be cost effective, typically costing less than USD \$500. 	High	No	6/9	2020	Not available	<ul style="list-style-type: none"> Occupation Disability
<ul style="list-style-type: none"> Type of injury <ul style="list-style-type: none"> Mental-health injury Outcomes <ul style="list-style-type: none"> Worker satisfaction Productivity 	<p>Among employees with mental disorders, work participation is improved with a supportive work environment that reduces stigma and accommodates employees' needs, as well as internal motivation and external support</p> <ul style="list-style-type: none"> This review examined facilitators, barriers, and need for support in the workplace among employees with mental disorders. The six categories of findings are: <ul style="list-style-type: none"> handling work tasks and demands facing unpredictability and disability prejudices and negative perceptions readiness for change need for support from professionals troubled by and unsupportive work environment. Findings indicated that employees require external support, as well as acceptance from the employer/workplace, when returning to work. 	Low	No	5/9	2016	Not available	<ul style="list-style-type: none"> None
<ul style="list-style-type: none"> Stage of return to work <ul style="list-style-type: none"> Recovery Transition Return to work 	<p>Using motivational interviewing to facilitate return to work may lead to more people achieving open employment</p> <ul style="list-style-type: none"> The Norwegian Labour and Welfare Administration strives to include as many people as possible in employment and in 	Low	No	7/10	2016	Not available	<ul style="list-style-type: none"> None

Dimension of organizing framework	Declarative title and key findings	Relevance rating	Living status	Quality (AMSTAR)	Last year literature searched	Availability of GRADE profile	Equity considerations
<ul style="list-style-type: none"> • Nature of incentive program <ul style="list-style-type: none"> ○ Non-financial incentives • Outcomes <ul style="list-style-type: none"> ○ Return-to-work timeline ○ Worker satisfaction 	<p>alliance with its growing popularity, motivational interviewing is suggested to be a suitable method to achieve this goal.</p> <ul style="list-style-type: none"> • Despite the scarce evidence, the results of this systematic review suggest that motivational interviewing may be an effective method to facilitate return to work. 						

Appendix 3: Details about each identified single study

Dimension of organizing framework	Declarative title and key findings	Relevance rating	Study characteristics	Equity considerations
<ul style="list-style-type: none"> • Type of worker <ul style="list-style-type: none"> ○ Full-time • Type of injury <ul style="list-style-type: none"> ○ Physical injury • Nature of injury <ul style="list-style-type: none"> ○ Serious <ul style="list-style-type: none"> ▪ Long-term • Stage of return to work <ul style="list-style-type: none"> ○ Recovery ○ Transition ○ Return to work • Nature of incentive program <ul style="list-style-type: none"> ○ Non-financial incentives • Outcomes <ul style="list-style-type: none"> ○ Return-to-work timeline ○ Injury-related outcomes ○ Worker satisfaction 	<p>Government employment services have the capacity to deliver more engagement, assessment, and planning despite being provided less resources</p> <ul style="list-style-type: none"> • Seventy-two participants with severe traumatic brain injury were supported in returning to either pre-injury employment or new employment delivered by two types of vocational rehabilitation providers (Australian Government Disability Employment Service and Private Providers). • Disability Employment Service providers recorded significantly greater amounts of time undertaking engagement, assessment, and planning, and emotional/motivational support actions compared to private providers. 	Medium	<p><i>Publication date:</i> 2022</p> <p><i>Jurisdiction studied:</i> Australia</p> <p><i>Methods used:</i> Quantitative analysis</p>	<ul style="list-style-type: none"> • Occupation • Disability
<ul style="list-style-type: none"> • Type of worker <ul style="list-style-type: none"> ○ Full-time • Type of injury <ul style="list-style-type: none"> ○ Physical injury • Nature of injury <ul style="list-style-type: none"> ○ Serious <ul style="list-style-type: none"> ▪ Long-term • Nature of incentive program <ul style="list-style-type: none"> ○ Financial incentives • Outcomes <ul style="list-style-type: none"> ○ Return-to-work timeline ○ Injury-related outcomes ○ Costs related to incentive program ○ Productivity 	<p>Targeted policies may be the most effective in encouraging disability insurance recipients to return to work</p> <ul style="list-style-type: none"> • This study investigated whether many individuals who are deemed totally and permanently disabled by the Social Security Administration have considerable work capacity and examined how elastic their labour supply is to changes in financial incentives. • The study found disability insurance recipients have considerable capacity to work that can be effectively induced by providing financial work incentives and by encouraging disability insurance recipients to work, which not only increases their disposable income but also reduces program costs. 	High	<p><i>Publication date:</i> 2014</p> <p><i>Jurisdiction studied:</i> Norway</p> <p><i>Methods used:</i> Quantitative analysis</p>	<ul style="list-style-type: none"> • Occupation • Disability
<ul style="list-style-type: none"> • Nature of incentive program <ul style="list-style-type: none"> ○ Financial incentives ○ Non-financial incentives • Outcomes <ul style="list-style-type: none"> ○ Return-to-work timeline ○ Injury-related outcomes 	<p>There are considerable differences as to the assessment of work incapacity and resulting monetary benefits in the three countries</p> <ul style="list-style-type: none"> • This study looked at differences in return-to-work practices and social security to understand why social reforms aimed at reducing disability scheme inflow in some European countries proved effective and in others it did not. 	High	<p><i>Publication date:</i> 2018</p> <p><i>Jurisdiction studied:</i> Netherlands, Finland, and Germany</p>	<ul style="list-style-type: none"> • Occupation • Disability

Dimension of organizing framework	Declarative title and key findings	Relevance rating	Study characteristics	Equity considerations
<ul style="list-style-type: none"> ○ Worker satisfaction ○ Costs related to incentive program ○ Productivity 	<ul style="list-style-type: none"> • Financial incentives for the employer to get sick employees back to work are strong in the Netherlands (e.g., long duration of sick pay, experience-rated premiums) as well as in Finland (e.g., large companies must reimburse disability pensions). It pays for the employer to invest in health prevention and to help sick workers back into their job. • Proactive interventions (e.g., case management, monitoring of sickness absence, reassessment of disability) also provide a strong incentive and have proven to be effective in supporting return to work. 		<p><i>Methods used:</i> Comparative analysis</p>	
<ul style="list-style-type: none"> • Type of injury <ul style="list-style-type: none"> ○ Physical injury • Stage of return to work <ul style="list-style-type: none"> ○ Recovery ○ Transition ○ Return to work • Nature of incentive program <ul style="list-style-type: none"> ○ Non-financial incentives • Outcomes <ul style="list-style-type: none"> ○ Return-to-work timeline ○ Worker satisfaction 	<p>Motivational interviewing can be effective in the patients' decision-making regarding their return-to-work process</p> <ul style="list-style-type: none"> • Return to work may be facilitated by motivational interviewing and this study uses a qualitative realist-informed approach to gain in-depth insight into what it is about MI that works, under what conditions, for whom, and to what extent amongst participants with low back pain. • Motivational interviewing consists of four processes: engaging, focusing, evoking, and planning. <ul style="list-style-type: none"> ○ Practitioners first establish a trustful relationship with their patient. ○ Next, they determine the focus of the consult (i.e., the desired behaviour change) and through conversational techniques – such as affirmations, summaries, and reflections – they evoke and reinforce patients' motivation. ○ Finally, practitioners guide the patient in coming up with a structured action plan. • The results stress the importance for autonomy, relatedness, and competence together with a solution-focused approach when stimulating patients' engagement regarding return to work. 	Medium	<p><i>Publication date:</i> 2023</p> <p><i>Jurisdiction studied:</i> Belgium</p> <p><i>Methods used:</i> Qualitative analysis</p>	<ul style="list-style-type: none"> • Occupation
<ul style="list-style-type: none"> • Type of injury <ul style="list-style-type: none"> ○ Physical injury ○ Mental-health injury • Stage of return to work <ul style="list-style-type: none"> ○ Transition • Nature of incentive program <ul style="list-style-type: none"> ○ Non-financial incentives • Outcomes <ul style="list-style-type: none"> ○ Return-to-work timeline ○ Worker satisfaction 	<p>Prevocational training on care farms can facilitate motivation, functions, and well-being for clients</p> <ul style="list-style-type: none"> • The purpose of this study was to understand how the main elements of the prevocational training context on care farms can lead to healthy functioning, motivation, and well-being. • Care farms comprise practical and varied work experience that can include livestock farming, forest management, the cultivation of grain, fruit, or vegetables, or other activities on a farm and is one of the work rehabilitation programmes offered by the Norwegian health and social service system. • The results explained how prevocational training can stimulate participants' functionality, motivation, and well-being. 	Medium	<p><i>Publication date:</i> 2016</p> <p><i>Jurisdiction studied:</i> Norway</p> <p><i>Methods used:</i> Cross-sectional analysis</p>	<ul style="list-style-type: none"> • Occupation

Dimension of organizing framework	Declarative title and key findings	Relevance rating	Study characteristics	Equity considerations
<ul style="list-style-type: none"> • Type of worker <ul style="list-style-type: none"> ○ Full-time • Type of injury <ul style="list-style-type: none"> ○ Physical injury • Nature of injury <ul style="list-style-type: none"> ○ Serious <ul style="list-style-type: none"> ▪ Long-term • Stage of return to work <ul style="list-style-type: none"> ○ Return-to-work • Nature of incentive program <ul style="list-style-type: none"> ○ Financial incentive • Eligibility for incentive program <ul style="list-style-type: none"> ○ Who assesses eligibility • Outcomes <ul style="list-style-type: none"> ○ Return-to-work timeline ○ Worker satisfaction 	<p>Multidisciplinary and early return-to-work initiatives facilitated by communication between employers, social workers, and employees can improve worker satisfaction with the return-to-work process</p> <ul style="list-style-type: none"> • The purpose of this study was to explore how employers support the return-to-work process for persons with a spinal cord injury. • The Swedish Social Insurance Agency (SSIA) determines the eligibility of sick leave and provides financial compensation after injury. ○ The SSIA also provides a sickness certificate that is completed by a medical professional and contains information about a person's work ability that is used to inform procedures for the return-to-work process. • Facilitators for the return-to-work process include communication between employers and employees, early initiation of return-to-work procedures, and multidisciplinary supports. 	High	<p><i>Publication date:</i> 8 July 2020</p> <p><i>Jurisdiction studied:</i> Sweden</p> <p><i>Methods used:</i> Constructivist grounded theory</p>	<ul style="list-style-type: none"> • Occupation
<ul style="list-style-type: none"> • Type of worker <ul style="list-style-type: none"> ○ Full-time • Type of injury <ul style="list-style-type: none"> ○ Physical injury • Stage of return to work <ul style="list-style-type: none"> ○ Return to work • Nature of incentive program <ul style="list-style-type: none"> ○ Non-financial incentive • Outcomes <ul style="list-style-type: none"> ○ Return-to-work timeline ○ Worker satisfaction 	<p>Vocational re-training involving classroom and practical education can increase employment and worker satisfaction</p> <ul style="list-style-type: none"> • The purpose of this study was to investigate the utility of a vocational re-training program in persons with a disability. • The training program taught participants specific job skills in both a theoretical classroom setting and practical job placement. • This program was found to increase employment and worker satisfaction. 	Medium	<p><i>Publication date:</i> 28 November 2019</p> <p><i>Jurisdiction studied:</i> Germany</p> <p><i>Methods used:</i> Retrospective, quasi-experimental, cohort study</p>	<ul style="list-style-type: none"> • Occupation • Disability
<ul style="list-style-type: none"> • Type of injury <ul style="list-style-type: none"> ○ Physical injury ○ Mental-health injury • Stage of return to work <ul style="list-style-type: none"> ○ Return to work • Nature of incentive program <ul style="list-style-type: none"> ○ Non-financial incentives • Outcomes <ul style="list-style-type: none"> ○ Return-to-work timeline 	<p>Stakeholders involved in the decision-making processes required agreement on the goals and intervention plan that aligned with the workers' capacity for return-to-work success</p>	Low	<p><i>Publication date:</i> 2017</p> <p><i>Jurisdiction studied:</i> Canada</p> <p><i>Methods used:</i> Qualitative</p>	<ul style="list-style-type: none"> • None identified
<ul style="list-style-type: none"> • Type of injury <ul style="list-style-type: none"> ○ Physical injury ○ Mental-health injury 	<p>Interviews with case managers of return-to-work programs in Indonesia indicated that focusing on personal skill, literacy, guidelines, and stakeholder</p>	Low	<p><i>Publication date:</i> 2023</p>	<ul style="list-style-type: none"> • None identified

Dimension of organizing framework	Declarative title and key findings	Relevance rating	Study characteristics	Equity considerations
<ul style="list-style-type: none"> • Stage of return to work <ul style="list-style-type: none"> ○ Return to work • Nature of incentive program <ul style="list-style-type: none"> ○ Non-financial incentives • Outcomes <ul style="list-style-type: none"> ○ Return-to-work timeline 	support were important aspects but further career development services for employees with disabilities are needed		<i>Jurisdiction studied:</i> Indonesia <i>Methods used:</i> Case study	
<ul style="list-style-type: none"> • Type of injury <ul style="list-style-type: none"> ○ Physical injury ○ Mental-health injury • Stage of return to work <ul style="list-style-type: none"> ○ Return to work • Nature of incentive program <ul style="list-style-type: none"> ○ Non-financial incentive 	Being offered support and services for disabilities within companies in Germany was often related to the company's characteristics, health-promoting culture, job satisfaction, and professional qualifications	Low	<i>Publication date:</i> 2023 <i>Jurisdiction studied:</i> Germany <i>Methods used:</i> Logistic Regression	<ul style="list-style-type: none"> • None identified
<ul style="list-style-type: none"> • Stage of return to work <ul style="list-style-type: none"> ○ Return to work • Nature of incentive program <ul style="list-style-type: none"> ○ Financial incentives ○ Non-financial incentives 	Return to work is positively facilitated by workplace social support, supervisor and co-worker pressure, and supervisor-frontline worker communication and negatively facilitated by work disability-related policies <ul style="list-style-type: none"> • This study investigated return to work (RTW) and examined the impact of relationships between individual, psychosocial, and organizational factors on the work disability system and RTW. • Stakeholders within two companies participated in model-building sessions. • In a simulation where a bonus was provided as incentive to prevent work injuries, no bonus and reduced bonus scenarios had better RTW outcomes. • In another simulation it was found that light duty facilitated RTW in the short term. 	Low	<i>Publication date:</i> September 2016 <i>Jurisdiction studied:</i> United States <i>Methods used:</i> Multi-staged model building	<ul style="list-style-type: none"> • None

Appendix 4: Detailed jurisdictional scan about incentive programs for return to work after a period of disability in other countries

Jurisdiction	Approaches to workers' engagement and participation	Dimension of the organizing framework
Australia	<ul style="list-style-type: none"> In Australia, programs such as the Re-employment Incentive Scheme for Employers (RISE) and the JobCover placement program provide incentives for employers to help people who have been injured at work to return to employment if they are unable to return to their pre-injury employer Businesses who employ people with a work injury through RISE can receive reimbursement of up to 100% of gross wages during the first four weeks of employment and 50% of gross wages after this period for up to 22 weeks of employment <ul style="list-style-type: none"> These businesses also receive payments for the cost of minor workplace modifications and equipment as well as support from a claims manager to assist with the transition into the new job The JobCover placement program offers incentive payments for up to 12 months, protection against costs for changes occurring to the worker as a result of their existing injury for up to two years, and an exemption from workers compensation premium calculation of the worker's wages for up to two years 	<ul style="list-style-type: none"> Type of worker <ul style="list-style-type: none"> Full-time Part-time Occasional/casual Type of injury <ul style="list-style-type: none"> Physical injury Mental-health injury Stage of return to work <ul style="list-style-type: none"> Return to work Nature of incentive program <ul style="list-style-type: none"> Financial incentives Outcomes <ul style="list-style-type: none"> Worker satisfaction Productivity
Denmark	<ul style="list-style-type: none"> The Nordic Council of Ministers provides back-to-work schemes for workers after experiencing a period of disability and this includes supports along various stages of the return-to-work process such as: <ul style="list-style-type: none"> job assessments, which involve caseworkers arranging various activities to help the worker and includes measures covered by employment law such as work experience placements, jobs with wage subsidies or a gradual return to work for those who already have a job resource clarification programs, which are designed to develop the worker's ability to work and find a job or a form of education or training that matches their abilities flexi-jobs, which are forms of employment that tailors the nature of work and hours according to the worker's abilities rehabilitation programs in the form of education, training, or retaining to allow the return-to-work process to be achieved in the most efficient way possible 	<ul style="list-style-type: none"> Type of injury <ul style="list-style-type: none"> Physical injury Mental-health injury Stage of return to work <ul style="list-style-type: none"> Recovery Transition Return to work Nature of incentive program <ul style="list-style-type: none"> Financial incentives Non-financial incentives Outcomes <ul style="list-style-type: none"> Return-to-work timeline Worker satisfaction Productivity
New Zealand	<ul style="list-style-type: none"> The New Zealand income insurance scheme (NZIIS) protects workers who stop working due to a health condition or disability Claimants of the NZIIS are expected to search for work or partake in training or rehabilitation <ul style="list-style-type: none"> Claimants are expected to search for and accept any work that pays a similar income to previous levels where health conditions allow, or they will need to be in a return-to-work training or rehabilitation program Available supports to assist people looking for work or to connect them with training or rehabilitation programs: 	<ul style="list-style-type: none"> Type of worker <ul style="list-style-type: none"> Full-time Part-time Occasional/casual Stage of return to work <ul style="list-style-type: none"> Recovery Return to work Nature of incentive program

Jurisdiction	Approaches to workers' engagement and participation	Dimension of the organizing framework
	<ul style="list-style-type: none"> ○ Case managers consider the cultural and personal needs of those returning to work (e.g., Māori or Pacific peoples) and help to develop individualized return-to-work plans and provide encouragement during the job search process ○ In line with international schemes, financial support is provided to those partaking in training or rehabilitation programs for up to six months, with the option for an extension of up to 12 months • While job seeking and returning to work, claimants can be earning up to 20% of previous income with no impact on insurance payments by partaking in occasional or part-time work <ul style="list-style-type: none"> ○ Additional income in excess of this level results in a dollar-for-dollar reduction in insurance payments • Supported employment agencies across New Zealand assist those with disability with job seeking <ul style="list-style-type: none"> ○ Workbridge is a free employment service that administers government funding as well as work placements for disabled people • Workwise Employment Agency assists people with mental health conditions with returning to work 	<ul style="list-style-type: none"> ○ Financial incentives • Eligibility for incentive program <ul style="list-style-type: none"> ○ Nature of eligibility
Finland	<ul style="list-style-type: none"> • Kela, the Social Insurance Institution of Finland, is responsible for implementing the Finnish social security system, including providing medical rehabilitation, psychotherapy, and adjustment training for vocational rehabilitation recipients • People who are entitled to Finnish social security and meet one of the following conditions can apply for vocational rehabilitation from Kela to help them return to work after an illness or injury: <ul style="list-style-type: none"> ○ they are unemployed ○ they are students ○ they have only been working for a short time • Vocational rehabilitation may include work counselling, work try-outs or training and is arranged by Kela for those within the earnings-related pension scheme as well as those who are self-employed <ul style="list-style-type: none"> ○ If a vocational rehabilitation application is accepted by Kela, the decision is valid for nine months and rehabilitation must begin within that time period ○ During the vocational rehabilitation, a rehabilitation allowance is provided equal to the amount of the recipient's disability pension plus 33 percent ○ When the rehabilitation programme ends, the recipient will no longer be paid rehabilitation allowances • Kiila rehabilitation is offered by Kela to those with longer employment histories if they: <ul style="list-style-type: none"> ○ are employed or self-employed and have an illness or injury that makes it difficult for them to work ○ are in need of additional assistance after having already received assistance from an occupational health provider or their workplace ○ are in need of expert advice on occupational issues related to their well-being at work and their health and life management • Kiila rehabilitation is arranged in the form of group courses or individual visits 	<ul style="list-style-type: none"> • Type of worker <ul style="list-style-type: none"> ○ Full-time ○ Part-time ○ Occasional/casual • Nature of leave from work <ul style="list-style-type: none"> ○ Short-term ○ Long-term • Stage of return to work <ul style="list-style-type: none"> ○ Recovery ○ Transition ○ Return to work • Nature of incentive program <ul style="list-style-type: none"> ○ Financial incentives ○ Non-financial incentives • Eligibility for incentive program <ul style="list-style-type: none"> ○ Who assesses eligibility ○ Nature of eligibility
Sweden	<ul style="list-style-type: none"> • There are two primary sources of return-to-work assistance in Sweden <ul style="list-style-type: none"> ○ Job Security Councils offer tailored support during the notice of dismissal period, including counselling and coaching, competence development activities, and training ○ Public Employment Service provides assistance to workers after collective redundancies, and the majority of displaced workers receive comprehensive adjustment support • Return-to-work responsibility in public institutions is divided among four sectors: 	<ul style="list-style-type: none"> • Type of injury <ul style="list-style-type: none"> ○ Physical injury ○ Mental-health injury • Stage of return to work <ul style="list-style-type: none"> ○ Recovery ○ Transition

Jurisdiction	Approaches to workers' engagement and participation	Dimension of the organizing framework
	<ul style="list-style-type: none"> ○ Health and medical service: <ul style="list-style-type: none"> ▪ The public health and medical service provides medical rehabilitation in addition to regular examination and treatment ▪ Rehabilitation aims to restore functioning, considering impairments, activity limitations, and participation restrictions ▪ There is a blurred boundary between medical and vocational rehabilitation due to the national insurance system's responsibility (i.e., Swedish Social Insurance Agency, Försäkringskassan) ○ Social Services: <ul style="list-style-type: none"> ▪ Social services of municipalities are responsible for residents' societal integration, providing support and addressing various problems ▪ While rehabilitation is not explicitly their responsibility, they often aim for rehabilitation toward some form of employment to reduce dependence on social services ○ Employment office (i.e., Swedish Public Employment Service, Arbetsförmedlingen): <ul style="list-style-type: none"> ▪ Employment offices primarily focus on helping healthy people find jobs but have special units for supporting unemployed individuals with disabilities ▪ Activities include testing working capacity, guidance on job seeking, and organizing training opportunities ▪ Employment offices may place individuals in sheltered employment ○ Samhall AB (a government-owned company): <ul style="list-style-type: none"> ▪ Samhall AB aims to provide meaningful jobs for individuals with disabilities who struggled to find employment on the normal labour market ▪ It offers adapted work placements ○ National Insurance Office (i.e., Swedish Social Insurance Agency: Försäkringskassan) <ul style="list-style-type: none"> ▪ The National Insurance Office supplies insured persons with allowances and coordinates rehabilitation efforts ▪ It initiates rehabilitation measures, supervises other vocational rehabilitation actors, and decides on sickness allowances, rehabilitation allowances, or disability pensions based on medical reports ▪ The National Insurance Office may purchase rehabilitation services to facilitate a sick leaver's return to work ● Conditions and limitations: <ul style="list-style-type: none"> ○ Individuals employed in Sweden can access sickness cash benefits for the initial 90 days if they are unable to manage their regular duties ○ Beyond this period, eligibility broadens to encompass the inability to perform any work offered by the employer ○ After 180 days, the criteria is extended to being unable to work in any position on the general job market, with specific exceptions ○ For those who are self-employed, unemployed, or on parental leave, the Swedish Social Insurance Agency evaluates their ability to work based on their typical tasks or, for employees, against the standard employment market 	<ul style="list-style-type: none"> ○ Return to work ● Nature of incentive program <ul style="list-style-type: none"> ○ Financial incentives ○ Non-financial incentives ● Outcomes <ul style="list-style-type: none"> ○ Return-to-work timeline ○ Worker satisfaction ○ Productivity
Norway	None identified	
United Kingdom	<ul style="list-style-type: none"> ● Access to Work is a grant-based government program that supports people with disabilities to remain in work <ul style="list-style-type: none"> ○ Personalized support is provided to those who are employed, self-employed, apprentices, trainees, interns, currently in 'work trials,' self-directed work experience, and those with a job interview 	<ul style="list-style-type: none"> ● Type of worker <ul style="list-style-type: none"> ○ Full-time ○ Part-time

Jurisdiction	Approaches to workers' engagement and participation	Dimension of the organizing framework
	<ul style="list-style-type: none"> ○ Eligibility includes those who are disabled (mental or long-term physical condition), aged 16 years or older, and live in England, Scotland, or Wales ○ Services include access to an advocate or interpreter, a support worker, specialist equipment, funding for travel, and mental health support services ○ The annual cap is £60,700 and Access to Work will pay 100% of approved costs or work with employers to provide appropriate costs (e.g., reasonable adjustments must be covered by employers) ○ The worker or employer may need to pay costs up front and claim them back later ● Access to Work in Northern Ireland provides support by covering the cost of communication support, provision of equipment, adaptations to workplaces, and travel costs 	<ul style="list-style-type: none"> ○ Occasional/casual ● Type of injury <ul style="list-style-type: none"> ○ Physical injury ○ Mental-health injury ● Stage of return to work <ul style="list-style-type: none"> ○ Recovery ○ Transition ○ Return to work ● Nature of incentive program <ul style="list-style-type: none"> ○ Financial incentives ○ Non-financial incentives ● Eligibility for incentive program <ul style="list-style-type: none"> ○ Who assesses eligibility ○ Nature of eligibility

Appendix 5: Detailed jurisdictional scan about incentive programs for return to work after a period of disability in Canadian provinces and territories

Jurisdiction	Approaches to workers' engagement and participation	Dimension of the organizing framework
British Columbia	<ul style="list-style-type: none"> • WorkSafeBC is responsible for the workers' compensation system within the province <ul style="list-style-type: none"> ○ WorkSafeBC insurance safeguards employers and offers benefits to workers facing work-related injuries or illnesses ○ Premium payments upon registration ensure protection against potential legal action from injured workers or those with occupational diseases ○ Injured workers have the right to file a claim, even if their employer is not registered as mandated by law • Who requires coverage <ul style="list-style-type: none"> ○ All employers have a legal obligation to possess WorkSafeBC coverage unless exempted ○ An employer encompasses individuals, firms hiring workers or unregistered subcontractors, and various legal entities such as self-employed proprietors, partnerships, corporations, and societies ○ The necessity for coverage hinges on the business type and the employment of workers • Benefits of coverage <ul style="list-style-type: none"> ○ WorkSafeBC insurance operates as a no-fault system, providing protection to both contributing employers and receiving workers ○ Every worker in BC is automatically covered for work-related injuries, illnesses, or diseases, with benefits and services provided for compensation, recovery support, rehabilitation, and a safe return to work ○ WorkSafeBC insurance safeguards workers from lawsuits by fellow workers injured on the job • Amendments to the <i>Workers Compensation Act</i> <ul style="list-style-type: none"> ○ Amendments to the <i>Workers Compensation Act</i> by the provincial government introduced changes related to return to work ○ Effective 1 January 2024, employers and workers are legally obligated to collaborate with each other and with WorkSafeBC for a prompt and safe return to work after a worker sustains an injury ○ Specific employers will be required to facilitate the return of injured workers to work under defined circumstances ○ Employees are encouraged to call the Claims Call Centre if their return-to-work plan lasts longer than three to four weeks • Vocational rehabilitation <ul style="list-style-type: none"> ○ WorkSafeBC offers vocational rehabilitation services designed to assist injured workers in returning to appropriate and enduring employment ○ These services encompass skills training, support in finding employment, and other assistance measures • Return to Work Consultation and Education Services <ul style="list-style-type: none"> ○ WorkSafeBC provides the Return to Work Consultation and Education Services (RTW CES) Support Line, a complimentary telephone service 	<ul style="list-style-type: none"> • Type of injury <ul style="list-style-type: none"> ○ Physical injury ○ Mental-health injury • Stage of return to work <ul style="list-style-type: none"> ○ Recovery ○ Transition ○ Return to work • Nature of incentive program <ul style="list-style-type: none"> ○ Non-financial incentives • Outcomes <ul style="list-style-type: none"> ○ Return-to-work timeline ○ Worker satisfaction ○ Productivity

Jurisdiction	Approaches to workers' engagement and participation	Dimension of the organizing framework
Alberta	<ul style="list-style-type: none"> ○ The service, staffed by a team of Return to Work Specialists, offers information, education, and resources centred on enhancing return-to-work outcomes in the workplace ● Workers' Compensation Board – Alberta (WCB) is responsible for providing compensation and support to eligible workers across the province of Alberta who experience injuries or illnesses while at the workplace, and helping them to recover and return to work ● Most employers in Alberta are required by law to provide workers' compensation insurance for their workers, with the exception of exempt industries <ul style="list-style-type: none"> ○ A worker is anyone who works full-time, part-time, temporary or casual, contract or sub-contract, and voluntary or unpaid ● Once WCB Alberta receives and approves a worker's claim, a return-to-work plan is developed with the worker and the employer that defines clear goals for return to work and how those goals will be achieved <ul style="list-style-type: none"> ○ WCB Alberta can also facilitate a return-to-work planning meeting between the employer, worker, and their union representative where the worker can share their thoughts and concerns about returning to work while recovering ● Resources, including a return-to-work prep sheet and interpretation and translation services, are provided on the WCB Alberta website ● WCB Alberta has a training-on-the-job (TOJ) program that is designed to help employers bring in a new employee who is no longer able to go back to their regular job after an injury <ul style="list-style-type: none"> ○ As part of the TOJ program, WCB will reimburse the employer a percentage of the salary paid to the new employer while they are being trained ○ The percentage of reimbursement and duration of financial assistance are dependent on the skills and abilities that the new employee brings to the position and the amount of training required ○ TOJ programs typically run up to nine months, and employers can easily upload job postings on the WCB Job Connections online platform as well as search for résumés independently ○ In 2022, WCB Alberta exceeded their target of 200 TOJ placements and helped 273 workers find a new career 	<ul style="list-style-type: none"> ● Type of worker <ul style="list-style-type: none"> ○ Full-time ○ Part-time ○ Occasional/casual ● Stage of return to work <ul style="list-style-type: none"> ○ Recovery ○ Transition ○ Return to work ● Nature of incentive program <ul style="list-style-type: none"> ○ Financial incentives ○ Non-financial incentives ● Eligibility for incentive program <ul style="list-style-type: none"> ○ Who assesses eligibility ○ Nature of eligibility ● Outcomes <ul style="list-style-type: none"> ○ Return-to-work timeline
Saskatchewan	<ul style="list-style-type: none"> ● The Saskatchewan Workers' Compensation Board advises employers to develop a return-to-work program that will define the duties that can be done by a worker with medical restrictions while recovering from an injury or illness and includes a primary assessment and accommodations that will be made for the worker <ul style="list-style-type: none"> ○ Employers must work with the Workers' Compensation Board to develop a return-to-work plan ○ The employer must use the list of restrictions from the worker's healthcare provider to adjust job duties ○ The Workers' Compensation Board facilitates healthcare services and provides earnings loss and other benefits, customer care, special medical appointments, and open and honest review ○ All full-time, part-time, temporary, and seasonal workers are covered by the Workers' Compensation Board except for occupations excluded by their regulations ○ Both psychological and physical injury are included in the <i>Workers' Compensation Act 2013</i> with some restrictions 	<ul style="list-style-type: none"> ● Type of worker <ul style="list-style-type: none"> ○ Full-time ○ Part-time ○ Occasional/casual ● Type of injury <ul style="list-style-type: none"> ○ Physical injury ○ Mental-health injury ● Nature of leave from work <ul style="list-style-type: none"> ○ Short-term ○ Long-term ● Stage of return to work <ul style="list-style-type: none"> ○ Recovery ○ Transition ○ Return to work

Jurisdiction	Approaches to workers' engagement and participation	Dimension of the organizing framework
	<ul style="list-style-type: none"> ○ The Workers' Compensation Board recommends that a return-to-work program includes policies and procedures, job duties that can be completed while an employee recovers, transitional return-to-work processes (e.g., changes to hours of work and/or work activities, gradual increase in hours), return-to-work plans (e.g., review of job duties, new job duties, training, list of changes to workspace, follow-up services) ○ Return-to-work planning should occur immediately with involvement from the employee, employer, healthcare provider, union representative, and the Workers' Compensation Board ● The Saskatchewan Workers' Compensation Board provides return-to-work fact sheets related to roles, definitions, procedures, planning templates, and checklists 	<ul style="list-style-type: none"> ● Nature of incentive program <ul style="list-style-type: none"> ○ Financial incentives ○ Non-financial incentives ● Eligibility for incentive program <ul style="list-style-type: none"> ○ Who assesses eligibility ○ Nature of eligibility
Manitoba	<ul style="list-style-type: none"> ● The Workers Compensation Board (WCB) of Manitoba promotes workplace health and safety, supports the recovery and return to work of employees, and aims to reduce the risk and occurrence of injuries and diseases in the workplace <ul style="list-style-type: none"> ○ WCB currently insures over 34,000 workplaces in Manitoba, accounting for 76% of the provincial workforce ● The return-to-work program facilitated by the WCB of Manitoba supports the reintegration of employees into their workplace <ul style="list-style-type: none"> ○ Employees are recommended to adhere to their prescribed treatment plan and meet with health professionals, discuss the type of work undertaken in the workplace and what, liaise with the WCB adjudicator/case manager and employer, and actively participate in a return-to-work plan ○ The assigned WCB adjudicator/case manager is responsible for monitoring the return-to-work plan, helping to arrange wage loss payments, and authorizing ongoing treatment ○ The return-to-work plan is developed in collaboration with the employee, employer, healthcare provider, WCB adjudicator/case manager, and union, and may feature modified duties, reduced hours of work, a review of the work area, scheduling meetings, arranging financial aid to support reintegrating at work, and ensuring that the employer has met the re-employment obligations <ul style="list-style-type: none"> ▪ Current legislation within the province mandates that employers who have 25+ full-time or part-time equivalents must re-employ injured workers if they were employed for at least 12 months prior to their injury ○ Many return-to-work program resources are available for employers (e.g., self-assessment tools, service teams, instructional videos, and trainings) ● If it is not possible to return to the pre-injury employer, the WCB of Manitoba may support the individual with re-training, re-education, and job search assistance ● On 1 May 2023, the WCB of Manitoba expanded its coverage to include psychological injuries arising from excessive workload in its policy 	<ul style="list-style-type: none"> ● Type of worker <ul style="list-style-type: none"> ○ Full-time ○ Part-time ○ Occasional/casual ● Type of injury <ul style="list-style-type: none"> ○ Physical injury ○ Mental-health injury ● Stage of return to work <ul style="list-style-type: none"> ○ Recovery ○ Return to work ● Nature of incentive program <ul style="list-style-type: none"> ○ Financial incentives ○ Non-financial incentives ● Outcomes <ul style="list-style-type: none"> ○ Return-to-work timeline ○ Injury-related outcomes ○ Worker satisfaction
Ontario	<ul style="list-style-type: none"> ● Workplace Safety and Insurance Board (WSIB) is one of the largest insurance organizations, representing over 5 million individuals and over 300,000 workplaces in Ontario <ul style="list-style-type: none"> ○ The primary aim of WSIB is to provide wage-loss benefits, medical coverage, and return-to-work program support to help facilitate the safe reintegration of employees post-injury ○ WSIB offers a return-to-work program for individuals recovering from an injury or illness, which is founded on the "Better at Work" principle to help guide their case management approach and policies 	<ul style="list-style-type: none"> ● Type of worker <ul style="list-style-type: none"> ○ Full-time ○ Part-time ○ Occasional/casual ● Nature of injury <ul style="list-style-type: none"> ○ Life-threatening ○ Serious

Jurisdiction	Approaches to workers' engagement and participation	Dimension of the organizing framework
	<ul style="list-style-type: none"> ▪ Foundational pillars of this approach include timely access to healthcare, an integrated return to suitable work, and a resumption of modified work duties as a key driver in physical and psychological recovery and rehabilitation ▪ Under the return-to-work program, both employers and workers are to maintain contact with each other throughout the recovery period, develop a return-to-work plan, and give key considerations to early support and intervention and worker benefits ▪ WSIB will facilitate the return-to-work process by ensuring appropriate supports are in place, which include: 1) an adjudicator, who will help assess eligibility and functional abilities; 2) a case manager, who will help to set recovery goals, uphold accountability, and collaborate with all parties to develop an activity plan; 3) a nurse consultant, who will provide clinical guidance and advice to mitigate delays in the recovery; and 4) a return-to-work specialist, who will educate both employers and employees of their rights and obligations, arrange for accommodations, and support the rehabilitation process ▪ Employers have an obligation to re-employ their worker(s) if the following three conditions have been satisfied: 1) the employee sustained a work-related injury or illness rendering them unable to work; 2) the employee has been continuously employed for the last 12 months prior to their injury; and 3) the corporation employs 20+ staff ▪ Non-compliance with return-to-work processes may result in an initial non-co-operation penalty for either the employer or the worker(s) • WSIB offers a drug benefit program that subsidizes the cost of prescription drugs for work-related injuries and illness • WSIB provides a range of resources that are available to view online (e.g., assessment and management tools, return-to-work plan package) • On 8 November 2023, the Government of Ontario announced that 'super indexing' increases will be coming to WSIB benefits to account for inflation rates, and improved cancer care eligibility criteria for firefighters and fire investigators 	<ul style="list-style-type: none"> ▪ Acute ▪ Long-term ○ Minor ▪ Acute ▪ Long-term • Nature of leave from work <ul style="list-style-type: none"> ○ Short-term ○ Long-term • Stage of return to work <ul style="list-style-type: none"> ○ Recovery ○ Transition ○ Return to work • Nature of incentive program <ul style="list-style-type: none"> ○ Financial incentives ○ Non-financial incentives • Eligibility for incentive program <ul style="list-style-type: none"> ○ Who assesses eligibility ○ Nature of eligibility • Outcomes <ul style="list-style-type: none"> ○ Return-to-work timeline ○ Injury-related outcomes
Quebec	<ul style="list-style-type: none"> • In Quebec, the CNESST provides a gradual return-to-work program that aims to promote a worker's reintegration into their workplace after employment injury <ul style="list-style-type: none"> ○ After the CNESST approves the period of absence or the worker's situation warrants a gradual return to work, they provide the employer with financial support for a maximum of eight weeks when a gradual return is put in place for the returning worker • For workers who are not reinstated in their job or equivalent job after the right-to-return-to-work period has expired, or who are unable to do their job because of injury but are capable of doing a suitable job, the CNESST may offer job support services, as well as an income replacement indemnity for up to one year while they are looking for a job • The CNESST provides guidance on temporary assignments that can be offered by employers to promote a worker's rehabilitation and return to the workplace <ul style="list-style-type: none"> ○ The temporary assignment may consist of a reduction in the number of tasks, adjustment of the workload, pace, or work intensity, or another job in the existing company with the consent of the attending health professional 	<ul style="list-style-type: none"> • Type of worker <ul style="list-style-type: none"> ○ Full-time ○ Part-time ○ Occasional/casual • Nature of leave from work <ul style="list-style-type: none"> ○ Short-term ○ Long-term • Stage of return to work <ul style="list-style-type: none"> ○ Return to work • Nature of incentive program <ul style="list-style-type: none"> ○ Financial incentives ○ Non-financial incentives • Eligibility for incentive program <ul style="list-style-type: none"> ○ Who assesses eligibility ○ Nature of eligibility

Jurisdiction	Approaches to workers' engagement and participation	Dimension of the organizing framework
	<ul style="list-style-type: none"> ○ If the temporary assignment is done according to the regular schedule, the same wages and benefits should be provided to the worker had they continued to do their job normally ○ If the temporary assignment is implemented on a reduced-time basis, the employer can select from options for pay and benefits when completing the temporary work assignment form, an option allowing the employer to be reimbursed by CNESST for hours paid but not worked by the employee (if the employee is paid full wage and benefits before their absence from work) 	<ul style="list-style-type: none"> • Outcomes <ul style="list-style-type: none"> ○ Return-to-work timeline ○ Productivity
New Brunswick	<ul style="list-style-type: none"> • WorkSafe New Brunswick's Work Recovery Program offers occupational rehabilitation to address workers' physical, functional, psychosocial, and medical needs to help promote a safe and effective return to work • A Working to Well website is also available to workers to access tips, testimonials, and videos about returning to work after an injury 	<ul style="list-style-type: none"> • Type of injury <ul style="list-style-type: none"> ○ Physical injury ○ Mental-health injury • Stage of return to work <ul style="list-style-type: none"> ○ Return to work • Nature of incentive program <ul style="list-style-type: none"> ○ Non-financial incentives • Outcomes <ul style="list-style-type: none"> ○ Return-to-work timeline ○ Productivity
Nova Scotia	<ul style="list-style-type: none"> • The Workers' Compensation Board of Nova Scotia has a Working to Well program that provides tools and resources for employers to better accommodate employees returning to work, including direct access to healthcare providers and streamlined claims submissions 	<ul style="list-style-type: none"> • Stage of return to work <ul style="list-style-type: none"> ○ Recovery ○ Return to work • Nature of incentive program <ul style="list-style-type: none"> ○ Financial incentives ○ Non-financial incentives
Newfoundland and Labrador	<ul style="list-style-type: none"> • WorkplaceNL has an early and safe return to work (ESRTW) process to help workers continue after an injury <ul style="list-style-type: none"> ○ ESRTW facilitators are available to assist employers with developing and maintaining a successful ESRTW program • Various return-to-work programs exist in the regional health authority of Eastern Health where most of the province's population resides <ul style="list-style-type: none"> ○ Alternate work: An employee works a suitable and available alternative job ○ Ease back: Gradual return to regular position where an employee works an increasing number of hours over a defined period ○ Modified work: Gradual return to regular position where an employee works an increasing number of tasks over a defined period ○ Transitional work: An employee takes on temporary, alternate tasks prior to eventual return to regular position, or attainment of new position 	<ul style="list-style-type: none"> • Stage of return to work <ul style="list-style-type: none"> ○ Transition ○ Return to work • Nature of incentive program <ul style="list-style-type: none"> ○ Non-financial incentives
Northwest Territories	<ul style="list-style-type: none"> • The Workers' Safety and Compensation Commission (WSCC) published a report entitled Return to Work Program Development, which describes steps for return to work that take into account and plan to accommodate the psychological and physical needs of the employee: <ul style="list-style-type: none"> ○ Step 1 – Get medical attention ○ Step 2 – Report the injury/illness 	<ul style="list-style-type: none"> • Type of injury <ul style="list-style-type: none"> ○ Physical injury ○ Mental-health injury • Stage of return to work <ul style="list-style-type: none"> ○ Transition

Jurisdiction	Approaches to workers' engagement and participation	Dimension of the organizing framework
	<ul style="list-style-type: none"> ○ Step 3 – Communicate and collaborate ○ Step 4 – Identify suitable work and create worker's individual return-to-work plan <ul style="list-style-type: none"> ▪ Discuss abilities, realistic goals, and timelines and create plan ○ Step 5 – Implement and monitor worker's return-to-work plan <ul style="list-style-type: none"> ▪ Discuss necessary changes to equipment/workspace ▪ Regular monitoring by employer/healthcare worker ○ Step 6 – Completion ○ Step 7 – Review and evaluate the return-to-work program ● Another WSCC report is Supporting Workers with Psychological Injuries and Illnesses, which includes accommodations that can be made for employees <ul style="list-style-type: none"> ○ Return-to-work program with clear policy/procedure supporting mental health and communication between employer and employee and healthcare support throughout ○ Increased worker engagement in identifying suitable work for themselves ○ Training supervisors with return to work ○ Suggested/potential accommodations include reduced hours, alternative/modified duties, change in work environment, and additional/refreshers training ○ Appendix B provides further potential accommodations 	<ul style="list-style-type: none"> ○ Return to work ● Nature of incentive program <ul style="list-style-type: none"> ○ Non-financial incentives ● Outcomes <ul style="list-style-type: none"> ○ Return-to-work timeline
Yukon	None identified	
Nunavut	None identified	

Appendix 6: Documents excluded at the final stages of reviewing

Document type	Hyperlinked title
Evidence syntheses	Barriers and facilitators associated with return to work following minor to serious road traffic musculoskeletal injuries: A systematic review
	Return to work for mental ill-health: A scoping review exploring the impact and role of return-to-work coordinators
Single study	International employee perspectives on disability management
	Physical disability and employment retention: Retrospective study about 352 disabled workers receiving administrative recognition in 2013
	Understanding and building upon effort to return to work for people with long-term disability and job loss.
	Motivational orientation of people participating in vocational rehabilitation
	Quick scan assesses risk factors of long-term sickness absence: A cross-sectional (factorial) construct validation study

References

1. Wong J, Kallish N, Crown D, et al. Job Accommodations, Return to work and job retention of people with physical disabilities: A Systematic Review. *Journal of Occupational Rehabilitation* 2021; 31(3): 474-490.
2. Thisted CN, Nielsen CV, Bjerrum M. Work Participation among employees with common mental disorders: A meta-synthesis. *J Occup Rehabil* 2018; 28(3): 452-464.
3. Flodgren GM, Berg RC. Motivational interviewing as a method to facilitate return to work: A systematic review. NIPH Systematic Reviews. Oslo, Norway: Knowledge Centre for the Health Services at The Norwegian Institute of Public Health (NIPH); 2017.
4. McRae P, Kobel C, Lukersmith S, Simpson G. What Does It Take to Get Somebody Back to Work after Severe Acquired Brain Injury? Service Actions within the Vocational Intervention Program (VIP 2.0). *Int J Environ Res Public Health* 2022; 19(15): 9548.
5. Kostol AR, Mogstad M. How financial incentives induce disability insurance recipients to return to work. *Am Econ Rev* 2014; 104(2): 624-655.
6. Mittag O, Kotkas T, Reese C, et al. Intervention policies and social security in case of reduced working capacity in the Netherlands, Finland and Germany: A comparative analysis. *Int J Public Health* 2018; 63(9): 1081-1088.
7. Rymenans I, Vanovenberghe C, Du Bois M, Van den Broeck A, Lauwerier E. Process evaluation of a motivational interviewing intervention in a social security setting: A qualitative study among work-disabled patients. *J Occup Rehabil* 2024; 34(1): 141-156.
8. Ellingsen-Dalskau LH, Berget B, Pedersen I, Tellnes G, Ihlebæk C. Understanding how prevocational training on care farms can lead to functioning, motivation and well-being. *Disabil Rehabil* 2016; 38(25): 2504-2513.
9. Holmlund L, Guidetti S, Eriksson G, Asaba E. Return-to-work: Exploring professionals' experiences of support for persons with spinal cord injury. *Scandinavian Journal of Occupational Therapy* 2021; 28(7): 571-581.
10. Echarti N, Schüring E, O'Donoghue C. Effects of vocational re-training on employment outcomes among persons with disabilities in Germany: A quasi-experiment. *Journal of Occupational Rehabilitation* 2020; 30(2): 221-234.
11. Gouin M-M, Coutu M-F, Durand M-J. Return-to-work success despite conflicts: An exploration of decision-making during a work rehabilitation program. *Disability and Rehabilitation: An International, Multidisciplinary Journal* 2019; 41(5): 523-533.
12. Kurnianto AA, Khatatbeh H, Prémusz V, Nemeskéri Z, Agoston I. Managing disabled workers due to occupational accidents in Indonesia: a case study on return to work program. *BMC Public Health* 2023; 23(1): 943.
13. Holleder A. Prevalence and utilization of company integration management in Germany: Results of the 2018 BiBB/BAuA survey of employed persons. *Journal of Occupational Health* 2021; 63(1): e12276.
14. Jetha A, Pransky G, Fish J, Hettinger LJ. Return-to-work within a complex and dynamic organizational work disability system. *J Occup Rehabil* 2016; 26(3): 276-285.

Grewal E, Bain T, Waddell K, Bhuiya A, Dass R, Phelps A, Alam S, DeMaio P, Ali A, Chen K, Wilson MG. Rapid evidence profile #60: Examining the features and impacts of incentive programs for return to work after a period of disability. Hamilton: McMaster Health Forum, 20 December 2023.

This rapid evidence profile was funded by WorkSafeBC. The McMaster Health Forum receives both financial and in-kind support from McMaster University. The views expressed in the rapid evidence profile are the views of the authors and should not be taken to represent the views of WorkSafeBC or McMaster University.