

When a patient is off work due to mental health concerns...¹

A resource compiled by the Hamilton Family Health Team

	First appointment	Second appointment +
Clinician Role	<ul style="list-style-type: none"> <input type="checkbox"/> Assessment <input type="checkbox"/> Provide initial treatment recommendation(s). Consider: <ul style="list-style-type: none"> • Time off work (1 day-2 weeks) • Medication • Referrals • HFHT Patient RTW Resource Package <input type="checkbox"/> Confirm any forms required and where/how to send <input type="checkbox"/> Review any limits of consent <input type="checkbox"/> Schedule follow-up appointment 	<ul style="list-style-type: none"> <input type="checkbox"/> Assess or re-assess: <ul style="list-style-type: none"> • Symptoms, function, diagnosis, safety • Whether this is a workplace injury or not <input type="checkbox"/> Collaboratively identify with patient: <ul style="list-style-type: none"> • Need for time off work (consider pros/cons on next page) • Duration of time off (usually max. 3 weeks -1 month at a time) • Treatment plan during time off including: <ul style="list-style-type: none"> -Medication -Individual or group counselling -Specialist appointments or referrals -Self-management tools • Forms required and where/how to send • Any limits of consent <input type="checkbox"/> Schedule follow-up appointment(s)
Patient Role	<ul style="list-style-type: none"> <input type="checkbox"/> Notify workplace of absence, as necessary <input type="checkbox"/> Explore resources and benefits available through work (EAP) <input type="checkbox"/> Review workplace forms required for time off <input type="checkbox"/> Review HFHT RTW Resource Package, if appropriate 	<ul style="list-style-type: none"> <input type="checkbox"/> Follow treatment plan <input type="checkbox"/> Attend healthcare appointments <input type="checkbox"/> Maintain contact with workplace support, as necessary <input type="checkbox"/> Submit forms with provider; notify them of changes to function/symptoms
Evaluation Tools	<p>Is time off work justified? Consider the impact of the health issue on 4 key areas of function¹:</p> <ul style="list-style-type: none"> • Cognition • Activities of Daily Living (ADLs) • Complex work-like situations • Social <p>*Consider using 1-2 tools from the column on the right (i.e., PHQ-9 etc.)</p>	<p>Diagnosis specific scales</p> <ul style="list-style-type: none"> • PHQ-9 • GAD-7 <p>*See <i>Tips for filling out forms resource</i> for more</p> <p>Functional scales</p> <ul style="list-style-type: none"> • WHODAS 2.0, 12- or 36-item version • RTW-Self-Efficacy Scale • Sheehan Disability Scale <p>Other</p> <ul style="list-style-type: none"> • SMART Goals, Goal Attainment Scoring

¹ Adapted from "Approche STAT-C en sante mentale" [linked here](#)

At each meeting, consider the benefits and risks of extending time off work. For example,^{2,3,4} :

Potential Benefits of Time Off	Potential Risks of Time Off
<ul style="list-style-type: none"> • Pause/ remove work stressors • Reduce risk of workplace injuries • Time for appointments, rehab, therapy or medication adjustments • Pause or remove presenteeism (reduced effectiveness at work due to illness or injury) 	<ul style="list-style-type: none"> • Risks of inactivity, changes to routine, isolation; May aggravate symptoms further • Reduction of activities that instill sense of meaning, confidence or accomplishment • Financial stressors (cost of forms, less income or unemployment) • Anxiety about returning increases over time

Is time off work justified?

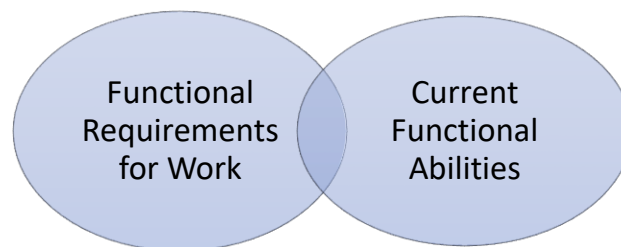
Consider the impact of the health issue on **4 key areas of function**.² You may use the acronym CAWS to remember them. They include:

1. **C**ognition (concentration, perseverance, rhythm)
2. **A**ctivities of Daily Living
3. Ability to complete complex situations that resemble **W**ork
4. **S**ocial functioning

How do I determine whether they are ready to return to work?

Overall, consider what the “fit” is between the functional requirements for their role at work, and their current functional abilities. Then consider whether certain supports may increase the “fit”. Consider asking the patient or their workplace (with consent) for a job description if appropriate.

Reminder: a patient does not have to be 100% “recovered” prior to returning.



The following factors may be considered:

- What is the impact of the health issue on function (ADL, social, cognition, work-like)?
- Are there any immediate safety concerns to consider (for them, the workplace etc.)?
- What work-related tasks would be impossible for them to complete? Difficult for them to?
- Would accommodations or a gradual return “increase the fit”?
- Are they able to self-regulate? Adhere to treatment?

² Santé mentale au travail et invalidité professionnelle: lignes directrices à l’intention des médecins.

³ Bilsker, d. ET AL. *Can J psychiatry*, 2006; 51; 76-83.

⁴ Approche STAT-C en sante mentale” [linked here](#)