Return to Work for Cancer Survivors

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Acknowledgment: Dr. Christine Maheu, Associate Professor, School of Nursing McGill University
Learning Objectives

- Cancer and Work Research
- Cancer and Work Website
- Primary Care Provider Course: Supporting Cancer Survivors with Return to Work
- iCanWork (Steps to support return to work)
CPAC projects that, by 2031, there will be 2.2 million Canadians living with cancer.

~ 40% are between 20 and 65 *within age range of working population (de Boer et al 2015; Parry et al 2011)

Are 1.4 more likely to be unemployed compared to healthy controls (de Boer, 2009; Steiner 2008)

While 63% of working age individuals will RTW within 1st year post-diagnosis (Mehnert, 2011)

Between 26% to 53% of cancer survivors will lose their job or quit working during or after treatment (Mehnert, 2011)

57% reduced their hours by 4/week (Steiner et al 2008)
Literature Review

• Cancer can cause functional impairment which can lead to decrease work ability

• Employed cancer survivors report a reduction in physical work ability (31%) and reduction in mental work ability (23%)

• Those experiencing cancer distress are more at risk of work stress

Taskila 2007; Taskila & Lindbohm, 2007; Guidi et al., 2012; Torp et al., 2012
Vocational Rehabilitation Model for Cancer Survivors
(Parkinson et Maheu, 2019)

Factors impacting return to work for cancer survivors

Other reviews:
- Bijker et al., 2018;
- Feuerstein et al., 2010
- Kiasuwa Mbengi et al., 2016;
- Mehnert, 2011;
- Nitkin, Parkinson, & Schultz, 2011;
- Spelten et al., 2002;
- Verbeek & Spelten, 2007
Vocational Rehabilitation Model for Cancer Survivors (Parkinson et Maheu, 2019)

- Disease and treatment specific
- Prognosis of cancer and treatment
- Pre-existing condition
- Function and disability
Vocational Rehabilitation Model for Cancer Survivors

(Parkinson et Maheu, 2019)

- Meaning of work/change in priorities
- Attitudes about work “is work good or bad”
- Self-efficacy/expectations for recover
- Socio-demographic factors such as age, race, gender, and income

Amir et al., 2007; Bottcher et al., 2013; de boer et al., 2008; CPAC 2012; Dorland et al., 2016; Hankanen et al., 2008; Kane et al., 2020; Kennedy 2007; Maunsell et al., 2004; MacLennon et al., 2017; Lilliehorn et al., 2013; Main et al., 2005.; Nachreiner et al., 2007; Tamminga et al., 2019; Stewart et al., 2001; Rasmussen et al., 2008
Vocational Rehabilitation Model for Cancer Survivors
(Parkinson et Maheu, 2019)

- Medical/rehabilitation
- Family/culture
- Financial support/Economic situation
- Legal/Advocacy

Amir et al., 2008; Armaou et al., 2018; Blinder et al., 2017; de Boer et al., 2015; Chiu et al., 2014; Dorland et al., 2016; Drolet et al., 2001; Islam et al., 2014; Kennedy 2007; MacLennan et al., 2017; Mckenna et al., 2007; Sun et al., 2016
Heathcare Providers: Facilitators to RTW of cancer survivors

• Discussing the survivors return to work over time (Frazer 2009).

• Assistance with defining work goals, determining work readiness, determining how symptoms may impact work performance, suggesting workplace supports, and accommodations (Kita et al 2014)

• Provide for a treatment summaries increases discussion on RTW (de Moor et al 2018)

• Good relationships and trust between professionals from different settings (Bilodeau et al 2018)

• Patient preferred oncology occupational physicians than worksite (Zaman et al 2015)
Healthcare: barriers to addressing RTW of cancer survivors

- Lack of medical advice on how to prepare for returning to work and (Amir., 2008)
- Lack of advice on the appropriate time to get back to work (Amir et al., 2008)
- Waiting to discuss RTW until treatment completed (Peterson, et al., 2017)
- GP: Feel they do not know enough about the CS job role to provide advice on RTW (Bains et al. 2011).
- HCP do not feel competent about advising on work-related question (Tiedtke et al. 2012)
- Healthcare professionals require support in their work-related support role and need additional training for this role (Zaman et al. 2019)
- No consensus on whose role it is to initiate and communicate with CS on RTW (Bains et al. 2011)
- Lack of clarity of each HCP role for the support of RTW (MacLennan et al. 2017)
- OT are considered best to provide this support but too costly (Whitehorn 2019)
- GP considers specialist cancer nurses to be best to discuss RTW because of their frequent patient contact while nurses thinks should be reverse (Whitehorn 2019)
- Addressing RTW is viewed as a lack of priority compared to treating cancer for health care providers (Peterson et al. 2017; MacLennan et al. 2017)
Vocational Rehabilitation Model for Cancer Survivors  
(Parkinson et Maheu, 2016)

- Job demands
- Work hours/duties
- Accommodation
- Communication and relationships

Alleume et al 2020; Böttcher et al., 2013; Blinder et al., 2017; Dorland et al., 2018; Dorland et al 2016; Drolet et al 2005; Kennedy et al., 2007; Handschel et al 2013; Johnsson et al 2009; Lindbolm et al 2011; Mbengi et al., 2016; Mehnert et al., 2016; Nachreimer et al., 2007; Nitkin et al., 2011; Spelton et al., 2002; Stergiou-Kita et al., 2016; Torpe et al 2012; Tamminga et al 2019;
A patient reports they are afraid to return to work because they felt their work stress caused their cancer.

**Question:** According to the Vocational Rehabilitation Model for Cancer Patients, what factors does this fall under?

1. Biopsychological, Person Centred, Systems
2. Biopsychological, Worksite, Systems
3. Biopsychological, Person Centred and Work site
Cancer Interventions in RTW

1. Guidance from physicians / Hospital-based program
   (Tamminga et al., 2013; Tamminga et al. 2019)

2. Education information
   (Bains et al., 2011; Nieuwenhuijzen et al., 2005; Brown et al., 2012, Maheu et al., 2016)

3. Providing counselling, rehabilitation support
   (Chan et al., 2008; Chui et al., 2014; Thijs, 2011; Sheppard et al. 2019; Mewes et al 2015; Fauser et al 2019)

4. Case management and Navigation
   (Hubbard et al., 2013; Aubel 2019)

5. Cochrane Reviews:
   (de Boer et al., 2011, 2015)

www.cancerandwork.ca
- **500** pages of content
- **9** videos
- **8** online tools
- **27** expert writers
- Designed for health care providers, cancer survivors and employers
- First Canadian website resource that links to resources within Canada and the globe
- Available in English and French
- **2018-2020**: Awarded Leading Practice Award by Health Standards Organization

www.cancerandwork.ca
<table>
<thead>
<tr>
<th>Understand Current Abilities</th>
<th>Strategies and Work Accommodations</th>
<th>Readiness to RTW</th>
<th>Reducing Stress at Work</th>
<th>Employment and Vocational Rehabilitation Programs</th>
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<tr>
<td>Survivors</td>
<td>Healthcare Providers</td>
<td>Employers</td>
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<tr>
<td>Returning to work / staying at work</td>
<td>Cancer’s impact on work and strategies</td>
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<td>Changing jobs and looking for other work</td>
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Areas assessed:

1. Physical Strength
2. Physical Demands
3. Temperaments
4. Psychological and Cognitive Demands
5. Environmental Conditions

Example Part 2 of 3: Understanding the job

<table>
<thead>
<tr>
<th>Essential duties:</th>
<th>Description of duty</th>
<th>% of day</th>
<th>Temperaments</th>
<th>Physical</th>
<th>Cognitive psychological</th>
<th>Areas of potential challenge</th>
</tr>
</thead>
<tbody>
<tr>
<td>Taking food orders</td>
<td>30%</td>
<td>flexibility dealing with people working under stress</td>
<td>Light work (standing)</td>
<td>Fingering (writing with a pen)</td>
<td>Vision</td>
<td>Hearing</td>
</tr>
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<td></td>
<td></td>
<td></td>
<td>Time pressures</td>
<td>Verbal fluency</td>
<td>Distracting stimuli (other people coming into restaurant or making demands)</td>
<td>Exposure to confrontation- al situations</td>
</tr>
<tr>
<td>Serving customers</td>
<td>30%</td>
<td>Same as above</td>
<td>Light: Lifting up to 20 lbs</td>
<td>Frequent: Walking, standing, handling and feeling occasional reaching</td>
<td>Same as above</td>
<td>Same as above</td>
</tr>
<tr>
<td>Clearing tables</td>
<td>30%</td>
<td>Working under stress</td>
<td>Same as above</td>
<td>Same as above</td>
<td>Same as above</td>
<td>Fatigue, concern: cannot stand, walk for more than an hour</td>
</tr>
</tbody>
</table>
Step 1: Say **Yes** or **No** to 21 potential cognitive challenges at work.

Step 2: Rate level of **Concern** for each question answered yes

1 = Very low
2 = Low
3 = Moderate
4 = High
5 = Very high

Example of a cognitive challenge question

For each of the following statements...

Do you anticipate that this will be a problem for you?

1. Remembering what I intended to write

www.cancerandwork.ca
Physician’s guide to navigating insurance forms and the insurance process

Faith Hayman video
Available at: www.cancerandwork.ca search: Faith Hayman

Or from the e-course, google: Supporting Cancer Survivors with Return to Work:
Law, policy, and practice information

Legal resources on human rights

Human rights laws are different in each province and territory, and for workplaces under federal law. To find out more about the law that covers your workplace, visit the Canadian Human Rights Commission.

Here is a list of non-profit organizations that provide general information on human rights or legal representation to individuals.

**Non-profit organizations providing general information on human rights or legal representation to individuals**

Organizations in each province or territory provide general information on human rights but not legal advice specific to individual cases. In some provinces, there are organizations that provide free legal advice specific to individuals and may represent clients for free. If you belong to a union, contact your local steward before you consider making a claim under human rights legislation.

**Canada**

For general information on human rights in federally regulated sectors only (e.g., employees of chartered banks, television and radio stations, telephone companies, federal government departments and agencies): Canadian Human Rights Commission

**Quebec**

For general information on human rights: Commission des droits de la personne et de la jeunesse Quebec (Quebec Human Rights and Children’s Rights Commission), Service on Reasonable Accommodation offers advice for employers.

Quebec community legal information centres: Centres de justice de proximité, Éducaloi

Legal advice on individual cases: Pro Bono Québec provides free or low-cost legal advice to individuals whose cases are of public interest (for example, people with disabilities)

**New Brunswick**

For general information on human rights: New Brunswick Human Rights Commissioner

**Legal Education and Information Service of New Brunswick**

**Nova Scotia**

For general information on human rights: Nova Scotia Human Rights Commissioner

**Information Society of Nova Scotia**

For legal advice on individual cases as well as general information on human rights: reachAbili referrals to lawyers who provide one hour of free advice. They also give education sessions on topics relevant to people with disabilities, including employment and accommodations. Dalhousie community legal clinic
Accommodation ideas specific to common cancer symptoms and treatment side effects

Author: Kyla Johnson, Occupational Therapist, Segal Cancer Centre, Jewish General Hospital

Fatigue:
- Graduated RTW, modify work schedule, break demanding tasks in smaller steps, switch tasks before becoming fatigue, speech-recognition software, stand-lean chair.

Sleep problems:
- Set up resting room, flexible hours

Pain:
- Flexible hours to accommodate pain levels, schedule extra breaks, allow working from home, modify tasks and reduce physically demanding tasks

Nerve damage:
- Seek alternative tasks to reduce risk of injury

Lymphedema:
- Seek mobility aid options, reduce heavy lifting tasks, stretch 2 mins every hour to encourage lymphatic flow

Hot flashes:
- Ensure comfortable temperature using fans, provide access to refrigerator to store cold packs
iCanWork: 11 Steps to support cancer survivors with return to work

Authors: Ms. Maureen Parkinson, Vocational Rehabilitation Counsellor, M.Ed. C.C.R.C, BC Cancer, Dr. Christine Maheu, RN, PhD
iCanWork: Nurse version

Adult Cancer Survivorship: A self-learning resource for nurses
2020

Canadian Association for Nurses in Oncology:
https://www.cano-acio.ca/page/survivorship_manual

Coming soon: video version
www.bloodcancercontinuingeducation.ca
iCanWork: Primary care provider course

eCourse: Supporting Cancer Survivors with Return to Work

https://www.cancerandwork.ca/events/
Acknowledgements: Supporting Cancer Survivors with Return to Work e-course for Primary Care Providers

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iCanWork steps include:

**Assessment**
1. Understand factors that can impact work
2. Assess function*
3. Understand job demands*

**Addressing Challenges**
4. Identify, treat, and refer to support*
5. Encourage survivors to take control

**Transitioning to the Workplace**
6. Identify and foster workplace supports
7. Contribute to the development of a return to work plan
8. Prepare survivors for imminent return to work
9. Manage work expectations
10. Monitor the work situation

* indicates steps that the recommended best practices support.
Communication

- integrated into each step of the iCanWork framework

- involves engaging with cancer survivors, health care providers, insurance and employers
Step 1: Understand Factors that Impact Work

Factors impacting return to work for cancer survivors:
- Person related
- Systems
- Bio-Psychological
- Worksite

Use the vocational rehabilitation model for cancer survivors to as guidance to assess the factor that can impact work

(Parkinson & Maheu, 2016)
Step 2: Assess Function

Assess physical, psychological, cognitive abilities that might impact work.

Inquire, use self report forms, medical assessments obtain professional assessments.
Step 3: Understand job demands

- Ask the survivor about the demands of her job in relation to her perceived abilities
- Ask for job analysis or job description from her employer (if available) to determine the employer’s expectations
- Have the survivor complete job analysis (see www.cancerandwork.ca tools section) to compare perceived abilities versus job demands.
Step 4: Identify, treat or refer to support

- Provide medical treatment
- Suggest/refer to a rehabilitation to improve function and manage symptoms.
- Discuss and aid in referral to resources (if indicated) such as counseling in-house, within the healthcare system, in the community or offered privately.
Common side effects

- Supporting Cancer Survivors with Return to Work
Step 5 Encourage the survivor to take control

- Encourage the survivor to explore and self-refer to services (rehabilitation, psychological, etc.).
- Recommend online (e.g. cancer and work online tools), written materials or attending group programs.
- Encourage self-education on long-term disability.
- Encourage self advocacy with health care or insurance provider to obtain services to support her return to work.
Step 6: Identify and foster workplace support

- Provide letter, fill out forms or communicate with the workplace in a timely manner
- If possible give as much advanced notice for return to work start date
- Encourage the survivor to learn about the types of support such as job accommodations that might be available at her workplace.
- Encourage the survivor to foster support from her colleagues by staying in contact with them to maintain positive relationships
- Refer survivors to counselling if they are concerned about speaking to their employer
Step 7: Assist in developing a RTW plan

- Provide guidance on graduated return to work plan
- Provide start and end dates for graduated return to work plan
- Indicate re-assessment dates
- Indicate medical restrictions and limitations
- Suggest job accommodation ideas
- Indicate the return to work plan is trial
Step 8: Prepare the survivor for imminent return to work

- Discuss symptom management (fatigue, sleep, pain, nutrition, etc.)
- Encourage cancer survivors to do work simulation
- Try out accommodation ideas
Step 9 Manage Work Expectations

- Discuss with the cancer survivor what recovery will look like over time
- State restrictions and limitations in the return to work plan
- Encourage cancer survivors to refer to medical guidance at work
- If survivors are having fears or difficulties with boundaries refer to counselling
Step 10: Monitor the work situation

- Schedule check in meeting to discuss progress with return to work
- Discuss symptom management and how to improve work function
- If needed, refer for rehabilitation support
- Update medical notes for employer and insurance providers if needed
- Ideally encourage cancer survivors to arrange medical appointments at non work hours
Looking for a primary care provider who is supporting a cancer survivor with return to work

• Willing to implement the iCanWork 10-step program to support cancer survivors with return to work.

• Complete Supporting Cancer Survivors with Return to Work online (http://surl.li/bmucp)

• Must be working with a cancer survivor who is eventually planning (does not need to be ready to return to work at this moment) to return to work at the former workplace and who is within two years post-surgery, chemo, or radiation therapy.

• Implementation includes meeting with a cancer survivor at least once to three sessions and completing an evaluation questionnaire

• Able to commit before the end of April and start before end of April.

• A stipend of $300 will be provided to primary care providers and $100 to the cancer survivors.

• Please consider contributing to this project!

• For those interested, contact: christine.maheu@mcgill.ca
BC Cancer Vocational Rehabilitation Support

Counselling, education, consultation, resource referral

- Return to work
- Job search
- Insurance concerns
  - (Long term disability and Canada Pension Plan Disability)
- Human rights legislation
- Rehabilitation supports
Returning to former workplace
virtual seminars (by zoom) for those with a history of cancer (once a week for 4 weeks for 2 hours)

Learn about:

- How do I know I am ready to return to work?
- Understanding the return to work process
- Preparing for your workplace for your transition
- Enhancing workplace wellbeing

To register: Call Patient and Family Counselling Services at your local cancer center

Job Search Seminar
for those with a history of cancer
2 hours (offered online via zoom)

To register: Call your local Patient and Family Counselling Services, at BC Cancer

- How to address gaps in a resume because of cancer
- Obligations for disclosure about health history
- Human Rights protection
Refer patients who are in treatment or up to 18 months post treatment

**Outside Vancouver**
- 1-800-663-3333 ext 672124 or fax referral to: 604-877-6249

**Vancouver**
- 604-877-6000 ext 672124 or fax referral to 604-877-6249

Email: mparkins@bccancer.bc.ca
Thank you

Maureen Parkinson,
MEd, CCRC, Provincial Vocational and Rehabilitation Counsellor, BC Cancer

Contact:
604-877-6000
or
1-800-633-3333

- Tuesday, Wednesday, Thursday extension 672189