



# Stay at Work/Return to Work Policy Dissemination Online Dialogue

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June 26 – July 14, 2017  
Final Report



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## **Overview**

Promoting timely and effective stay-at-work and return-to-work services and supports for workers with injuries or illness that disengage them temporarily from the workforce is one of many issues that the U.S. Department of Labor's Office of Disability Employment Policy (ODEP) addresses through its Stay-at-Work/Return-to-Work (SAW/RTW) Policy Collaborative. In addition to facilitating a Community of Practice (CoP) and using the ePolicyWorks online dialogue tool to engage the CoP and other interested parties, the SAW/RTW Policy Collaborative has established three Policy Working Groups (PWGs): 1) Replicating/Adapting Washington's Centers of Occupational Health and Education (COHE) Model, 2) Musculoskeletal Injuries and Pain Management, and 3) Transition Back to Work – to develop resources and materials to assist states and other key stakeholders in improving the workforce attachment of workers who are dealing with injury or illness. Among other tasks, the PWGs are charged with developing a policy action paper and other policy products, such as issue briefs, model policy language, infographics, webcasts, and conference presentations, and disseminating these policy products to policymakers and other stakeholders in developing and implementing SAW/RTW policy.

The goal of the [SAW/RTW Policy Dissemination Online Dialogue, which ran from June 26 to July 14, 2017](#), was to gather ideas for how the PWGs can reach the appropriate audiences for their policy products, including what dissemination strategies they should use and how to package the information in a way that is useful, appealing, and above all, motivating. In order to gather the most effective dissemination strategies, the participants were asked to focus on the question:

- Thinking about SAW/RTW policies related to 1) Washington's COHE model, 2) Musculoskeletal injuries and pain management, and 3) Transition back to work, who are the key audiences and what policy products can best reach them? How can these products be disseminated – e.g., social media, website posts, email, in combination with technical assistance?

Participants were also asked to keep the following crucial questions in mind when submitting ideas and when commenting and voting on ideas submitted by others:

- Who are the key policy audiences for products in this area?
- What types of products would be best for reaching the target audiences?
- How should those products be disseminated? Through social media? Posted to a website? Sent directly electronically?
- Should they be provided along with technical assistance to help recipients know how to use them?

Throughout the dialogue, participants were reminded to focus on ideas and comments that dealt specifically with the target audiences and dissemination strategies that are the focus of the three PWGs.

At the dialogue's conclusion, **252 registered participants** had contributed **21 ideas, 123 comments** and **143 votes**. The SAW/RTW Policy Collaborative will analyze the information collected during the dialogue and developing a strategic outreach plan for dissemination of policy products developed through this ODEP initiative.

## **Outreach Efforts**

The key to any successful dialogue is ensuring that the appropriate audiences visit the dialogue and participate by submitting ideas or commenting and voting on ideas submitted by others. For each dialogue, ePolicyWorks develops a strategic outreach plan that includes emails, social media content and media placements. Both ePolicyWorks and the SAW/RTW Policy Collaborative contributed to dialogue outreach efforts for this dialogue by disseminating tailored emails and posting to social media. ePolicyWorks reached out to advocacy organizations, state representatives, employer groups and other SAW/RTW subject matters experts over the three-week period of the dialogue, including an initial invitation to join the dialogue, a reminder email, an email announcing the extension of the dialogue and a final email on the last day of the dialogue. ePolicyWorks developed the contact lists and ensured that the appropriate audiences were well-informed about the dialogue and motivated to participate.

### **Total Dialogue Outreach Emails**

- Email Blasts: 7
- Emails Delivered: 18,370
- Emails Opened: 20.5 percent
- Total number of clicks on links in emails (excluding multiple clicks of the same link): 569

### **Total Tweets**

- General Tweets promoting the dialogue: 12
  - Retweets of promotional tweets: 5
  - Likes of promotional tweets: 3
- Direct Tweets to targeted individuals and organizations: 61
- Total Impressions of promotional and direct tweets: 4,004

## **Participation and Registration**

The [SAW/RTW Policy Dissemination Online Dialogue](#) was an open event with no restrictions for participation and available for any interest individual to view. During the event's three-week run, 681 individuals visited the dialogue 1,098 times and viewed 4,097 pages. Detailed participation metrics are provided below.

### **Participation Metrics (6/26/17 to 7/14/17)**

- Total visits: 1,098
- Unique visitors: 681
- Total page views: 4,097
- Average time on Page: 1:39
- Average pages per visit: 3.73
- Average visit duration: 4:29
- Returning visitors: 55.83 percent
- Bounce rate (percentage of participants who leave after viewing the first page of the dialogue): 41.71 percent

### **Registration Information**

In order to participate in the online dialogue, which is defined as submitting an idea, posting a comment or voting, individuals were required to complete the dialogue registration. Those who had registered for any of the previous SAW/RTW Policy Collaborative's dialogues did not need to re-register. At the time of the dialogue's launch on June 26, there were 186 returning SAW/RTW Policy Collaborative dialogue registrants. During the dialogue, an additional 66 new individuals registered.

Registration for all participants required individuals to provide the following mandatory information:

1. Job Title
2. Name of Organization or Agency
3. Type of Organization
4. State

Registrants provided 130 different job titles. This range allowed the SAW/RTW Policy Collaborative to capture a variety perspectives and ideas regarding dissemination of SAW/RTW policies.

Below is the list of the job titles that were provided:

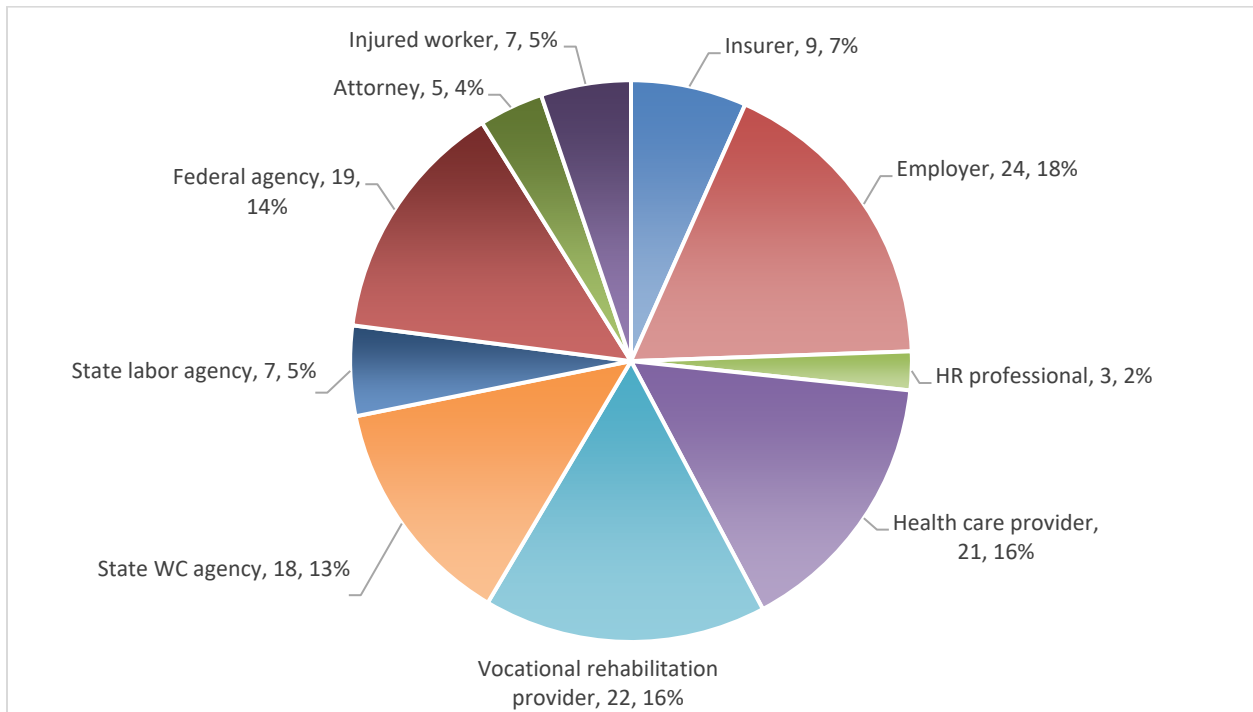
Ability Coordinator
Absence Manager
Accessibility Analyst
Accessible Technology & Alternative Media Coordinator
Accounting Specialist
Administrative Assistant
Administrator
Advocate
AIDS Program Representative
Analyst
Artist, gallery manager
Assistant Administrator Vocational Recovery Services
Assistant Director Medical Accommodations
Associate Commissioner of Access and Accommodations
Associate Professor
Asst. Vice President, Education & Youth Transition
Asst. Vice President, Workforce Solutions
College Student
Attorney
Benefits Manager
Business Development & Marketing Executive
Caregiver
Caseworker Specialist
CEO
Orthopedic Surgeon
Chief Medical Officer
Chief of Operations
Clerk
Clinical Psychologist and Disability Manager
Communications Specialist
Community Employment Coordinator
Community Outreach Coordinator
Consultant
COR-QA-Mechanical/Civil Engineering Tech

Counselor/Job Developer
County Outreach Coordinator
Department Manager/GM trainee
Director
Director Absence Management/Attorney
Director Occupational Health and Workers' Compensation Services
Director of Civil Rights
Director of COHE
Director of Employment Programs
Director of Employment Services
Director of Government Affairs
Director of Policy for Developmental Disabilities
Director of Policy Strategy, Analysis, and Development
Director of Strategic Development & Partnerships
Director, Clinical & Vocational Operations
Director, Disability and Employment Research
Director, Vocational Services
Disability Management Consultant
Disability Product Manager
Disabled ASE/BMW Master Technician
EEO Specialist/Policy Analyst
Employment Administrator
Employment Coordinator
Employment Initiatives Director
Employment Specialist
Engineering Equipment Operator
Equal Employment Opportunity Manager
Events Manager
Executive Director, Product Policy
Former Project/ Partnership Program Leader
Government Compliance Diversity Manager
Health Scientist
Healthcare Administrator

HR Compliance Specialist
HR Regulatory Coordinator
Human Resources Analyst RTW
Human Resources Director
Human Services Program Specialist
Independent Living Coordinator
Integrated Employment Specialist
Accommodations Program Manager
Manager Occupational Medical Services
Manager Social Work, Supported Employment Specialist
Manager, Consumer Affairs
Manager, Medical Policy
Manager, Special Projects
Managing Director
Medical Director
Medical Office Account Manager/Insurance Specialist
Medical Program Specialist
National Director
National IDM Physician Advisor
Occupational therapist
Operations Management Consultant
Paralegal
Peer Educator
Peer Worker
Personal Care Provider
Physical therapist
Policy Advisor
Policy Fellow
Policy Specialist
President
President Emeritus
Physical Therapist
Principal Research Associate

Professor
Program Director
Program Manager, Talent Acquisition
Program Specialist
Programs and Partnership Director
Project Director
Project Manager
Provider Relations Manager
Recovery Services Coordinator
Registered nurse
Research Associate
Research Director
Senior Director of Research and Evaluation
Senior Policy Advisor
Senior Research Analyst
Senior Research Associate
Senior Researcher
Social Service Coordinator
Social Worker
Special Assistant
Special Education Director
Sr Absence Consultant
Support Employment Specialist
Technical Director - Worker Health & Absence Management
Veteran Community Employment Coordinator
Vocational Coach
Vocational Program Manager
Vocational Rehabilitation Counselor
Workers' Compensation Specialist
Workers' Compensation Supervisor
Writer/Editor

Registrants selected the best match for their profession from a list of types of organizations. Of the 252 registrants, 54 percent provided this information, showing a variety of organizations for future outreach by the SAW/RTW Policy Collaborative. In particular, the SAW/RTW Policy Collaborative was pleased to note that more than half of the participants represented the organizations they hope to target with SAW/RTW policy information. Below is a breakdown of registrant responses by organization type:



### Number of Visitors to the Dialogue by State

During the three-week [SAW/RTW Policy Dissemination Online Dialogue](#), registrants from 10 states submitted ideas or commented and voted on ideas submitted by others. Those states included California, Oklahoma, Virginia, Florida, New York, New Jersey, District of Columbia and Illinois. In addition, individuals from every state visited the dialogue.

The following table displays the number of visitors from each state. The visitors are broken down by those who had visited a past SAW/RTW Policy Collaborative dialogue and those who were new to the SAW/RTW Policy Collaborative’s dialogue efforts.



State	Past Visitors	New Visitors
DC	81	57
Maryland	81	45
California	69	52
New York	18	44
Hawaii	37	5
Massachusetts	23	19
Pennsylvania	7	35
Florida	23	10
Illinois	10	21
Washington	12	15
Ohio	12	13
Connecticut	11	12
Missouri	4	19
Texas	6	17
New Jersey	5	17
Colorado	9	12
Virginia	3	18
Georgia	10	9
Michigan	7	11
North Carolina	2	13
Utah	6	9
Arkansas	4	10
Indiana	2	10
Minnesota	2	10

State	Past Visitors	New Visitors
Tennessee	3	9
Arizona	1	9
Iowa	1	9
Louisiana	6	4
West Virginia	3	7
Alabama	3	6
Oklahoma	6	3
Oregon	2	6
Wisconsin	1	7
Rhode Island	1	5
Maine	1	4
Nebraska	2	3
New Hampshire	2	3
Alaska	0	4
Delaware	0	4
Kansas	1	3
Montana	2	2
Idaho	0	3
New Mexico	0	3
South Carolina	0	3
Unknown	0	2
Nevada	0	2
Mississippi	0	1
South Dakota	0	1
Vermont	0	1

## **Outcomes of the Conversation**

The [SAW/RTW Policy Dissemination Online Dialogue](#) resulted in 21 ideas, 123 comments and 143 votes. The most popular ideas focused on working with medical providers, human resources (HR) professionals, transportation/mobility managers, insurers and all treating professionals to ensure that they are aware of SAW/RTW policies and can offer needed services. This dissemination strategy would require that the SAW/RTW Policy Collaborative coordinate with all aspects of care and support so that they can identify and assist those that are at high risk of leaving the workforce due to an injury or illness.

Other ideas in the dialogue stressed the general need to educate HR and benefits managers about disability employment issues. One idea discussed disseminating information through a website, though others stressed the need to diversify the format of information to include social media and traditional media. Participants also focused on the need to share information with HR professionals to ensure that they are aware of SAW/RTW resources such as American Job Centers, the Job Accommodation Network and vocational rehabilitation services.

Throughout the dialogue, participants' ideas stressed the need for early intervention and making sure any dissemination of policy reaches those who interact with individuals who are experiencing injury or illness early in the process. One idea suggested disseminating SAW/RTW policy directly to local government organizations, chambers of commerce and workforce boards. Many participants thanked the SAW/RTW Policy Collaborative for hosting this important conversation and engaging with the participants.

As part of next steps, the SAW/RTW Policy Collaborative team will review all the ideas and comments posted during the dialogue and use the information to develop a strategic outreach plan for dissemination of policy products developed through this ODEP initiative.

## **Popular Ideas from the Dialogue**

Below is a list of the five most popular ideas determined by the number of up-votes.

### **Educate medical providers (10 Votes, 4 Comments)**

Educate medical providers about effective occupational health practices and comprehensive pain management strategies. Reach medical providers through professional organizations such as the American College of Occupational and Environmental Medicine (ACOEM) and the International Consortium for Health Outcomes Measurement (ICHOM), as well as through other professional networking channels. Different mechanisms could be used for different topics, such as conference presentations on identifying injured workers who are at risk for chronic

pain, or webinars such as the one presented for the National Institute for Occupational Safety and Health (NIOSH) Center for Workers' Compensation Studies (CWCS) by Dr. Marianne Cloeren on ACOEM's Documentation and Coding Initiative proposing changes to improve workers' compensation patient encounters and care.

### **[Convince HR professionals of the value of RTW policies/programs](#) (9 Votes, 12 Comments)**

Reinforce the idea with HR professionals that supporting the return to work of workers who had disengaged from their job due to injury or disability can contribute to a business maintaining a strong and productive workforce. Encourage them to embrace RTW as a standard business practice through blogposts, conference presentations, etc. sponsored by the Society for Human Resource Management (SHRM) and similar professional organizations. Convince HR professionals of the value of RTW policies and programs by providing examples of successful programs that make the business case for RTW.

### **[Coordinate with Transportation and Mobility Providers](#) (9 Votes, 17 Comments)**

The Coordinating Council on Access and Mobility (CCAM) required under transit legislation (FAST Act) supports coordination across Federal agencies so that people with disabilities have transportation and mobility supports to access education, jobs, healthcare, and the community. In every SAW/RTW policy - and related programs, there should be a description regarding how transportation providers and community mobility management professionals will be part of the policy - and especially part of the implementation of the policy! Transportation is often an afterthought - and it is important to have transportation providers at the table as policies are developed, and continuously involved as programs are implemented!

### **[Expand Education beyond Physicians to All Treating Professionals](#) (9 Votes, 2 Comments)**

Most suggestions focus on the medical part of SAW/RTW only. In reality, the biopsychosocial model is being used in most treatment guidelines. What this means is that ALL treating professionals, not just physicians must evaluate from a physical, psychological, and psychosocial perspective. Psychosocial issues are not conditions and are not supported under ADAAA because they are subjective and under voluntary control. However, empirical research has discerned that psychosocial issues are primary reasons why people do not SAW or RTW. Additional professionals to educate include Clinical Psychologists (e.g. American Psychological Association), physical therapists, occupational therapists, medical social workers, nurse practitioners, and physician assistants. The reality is that physicians are not the only

professionals involved in the SAW/RTW processes. So, if other professionals are excluded from this process, then, the SAW/RTW process ignores those professionals who are intricately involved in the very process and policies that collaboratives, such as this are trying to change.

**[Engage private insurers in adopting effective SAW/RTW strategies](#) (8 Votes, 12 Comments)**

Involve private insurers in supporting transition back to work by working with insurers such as Liberty Mutual and Traveler's Insurance and with national trade associations and advocacy organizations such as America's Health Insurance Plans (AHIP) to engage their members in discussions of policies that advance best practices in SAW/RTW.