An exploration of factors that impact the return to paid work of individuals following brain injury

Key findings
The project confirmed that it is incredibly difficult, post brain injury (BI), to return to paid work due to resulting psychosocial and cognitive difficulties.

Perspectives of brain injured participants:
The six themes which describe return to paid work following a brain injury are:
- Feelings of success.
- Coping with ongoing difficulties.
- Expectation and timing of return to work.
- Workplace colleague reactions.
- Things that help and change.
- Return to work options.

Perspectives of employer participants:
The six themes which describe return to paid work following a brain injury from employers’ experiences are:
- Coping with loss and adjustment.
- Employer support.
- Employers learnt insight.
- The rehabilitation process.
- Ongoing employee difficulties.
- Employer challenges.

Fast return to paid work is likely to fail and a slow phased return to work is more successful and satisfying. It is important for occupational therapists to understand that return to paid work supports occupational identity but also that they need to inform BI service users and their employers of the more likely success of a slow phased return to work despite BI service users drive to return quickly.

Occupational therapists need to ensure that they not only facilitate return to work but also put in place support strategies to enable BI service users to sustain work.

Project aims
The project aimed to explore and understand the factors which impact on the return to paid work of individuals following a brain injury.

The project objectives were specifically:
- To collect and analyse data of the return to paid work experiences of brain-injured individuals to establish potential barriers and success factors (phase one).
- To collect and analyse data from employers who have experienced brain-injured employees return to paid work to establish potential barriers and success factors (phase two).
- To evaluate the findings to inform practice.

Background
It is acknowledged that work can support health; provide an income and a structure to an individual’s day (Johnsson and Andersson 1999).

Working is good for health and allows individuals to be less dependent (Barnes and Holmes 2007). In addition work can define aspects of status and occupational identity (Yerxa 1998).

Return to paid work is limited to one third of the brain injury (BI) population (Barnes and Holmes 2007). Few brain-injured people return to work at the same level, for the same pay or for the same hours (Gamble and Moore 2003, Winkler et al 2005). For most, returning to paid work following a brain injury can be impossible.

A qualitative, descriptive phenomenological approach was used to explore the return to paid work lived experiences of brain-injured individuals and employers of brain-injured people.
Methodology
Participants were recruited via Headway UK premises, English private brain injury services and Job Centre Plus offices. Following consent data was collected from unstructured interviews. Phase one brain-injured participants (10 male, 6 female) represented a wide range of paid jobs including: global banker, weed sprayer, apprentice engineer, railway clerk, travel agent, train driver and classroom assistant. Phase two employer participants (4 men and 7 women) were employed by organisations from a wide range including; Public sector, International Banks, Schools, Global IT, Small Business, Charities, Self Employed. Brain-injured employee's time away from work ranged from 3 months to 10 years, and 2 employees had vocational rehabilitation, 9 had none.

Recommendations
From phase one findings:
• BI individual’s drive to return to work is linked to their sense of occupational identity therefore occupational therapists are key to engage these service users to plan return to paid work.
• Fast return to paid work is likely to end in failure therefore occupational therapists need to ensure that BI service users have a slow phased return to work.
• A review of current vocational rehabilitation (VR) programmes is required as no BI participant benefitted from VR and all participants returned to work through different routes and mostly on their own.
• Fatigue management is crucial when return to paid work is planned.
• A work risk assessment and/or guidelines for BI service users is needed and guidelines for evaluating work readiness.
• Due to an inflexible benefits system BI service users need help to understand how best to come off benefits in order to be able to return to paid work.

From phase two findings:
• BI employees are currently returning to work too early due to financial fears, lost confidence and an inability to make decisions.
• Early employer support to ensure phased return to paid work is essential to decrease pressure on BI employees.
• Work colleagues behave more positively towards BI employees returning to work when they are kept informed of plans to return to work.
• Return to work goals are best agreed mutually with BI employees and their line managers and work ‘mock up scenarios’ where possible at home prior to return are effective.
• Fatigue, ability to drive and commuting all impact BI employees’ progress and require additional support.
• Employers require more information about BI to support BI employees and currently the Fit note system is not supporting employers.

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