



From Work Ability Promotion to Work Disability Prevention

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Who am I?

- MD 1983 Oulu University
- Specialist in Occup Health Services (1992) ja Occup Medicine (1995)
- PhD 2010 ('MSD, disability and work')
- Occup. Physician in e.g., construction material industry, oil refinery and paper industry 1989-2006
- Responsible for developing occup health services in a private company (Mehiläinen), research and service director at the Finnish Institute of Occup Health 2006-2015
- Medical advisor at Elo from April 2016





Elo in a nutshell

-  **Mutual, customer-owned company**
-  **Provides statutory employment pension for employees of the client companies as well as for self-employed persons**
-  **Manages the pension security of about 700,000 people**
-  **Was established on 1 January 2014 through the merger of LocalTapiola Pension and Pension Fennia**
-  **Staff of about 500 employees**



Key figures



407,600 TyEL insured employees



84,600 YEL insured entrepreneurs



219,700 pension recipients



Premium income of 3,321 million euro/year



Pensions in payment* 3,311 million euro/year



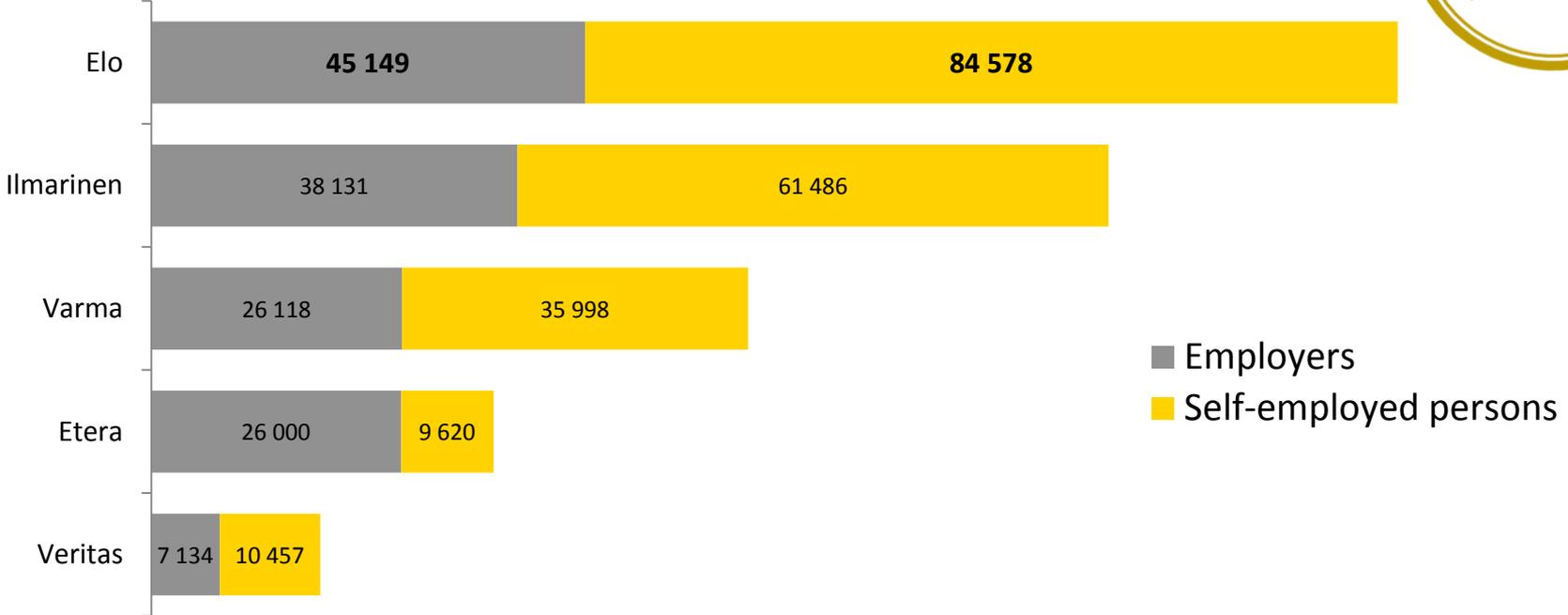
Investment assets total 21.5 billion euro

* Pensions and other claims

Elo is Finland's most popular pension company

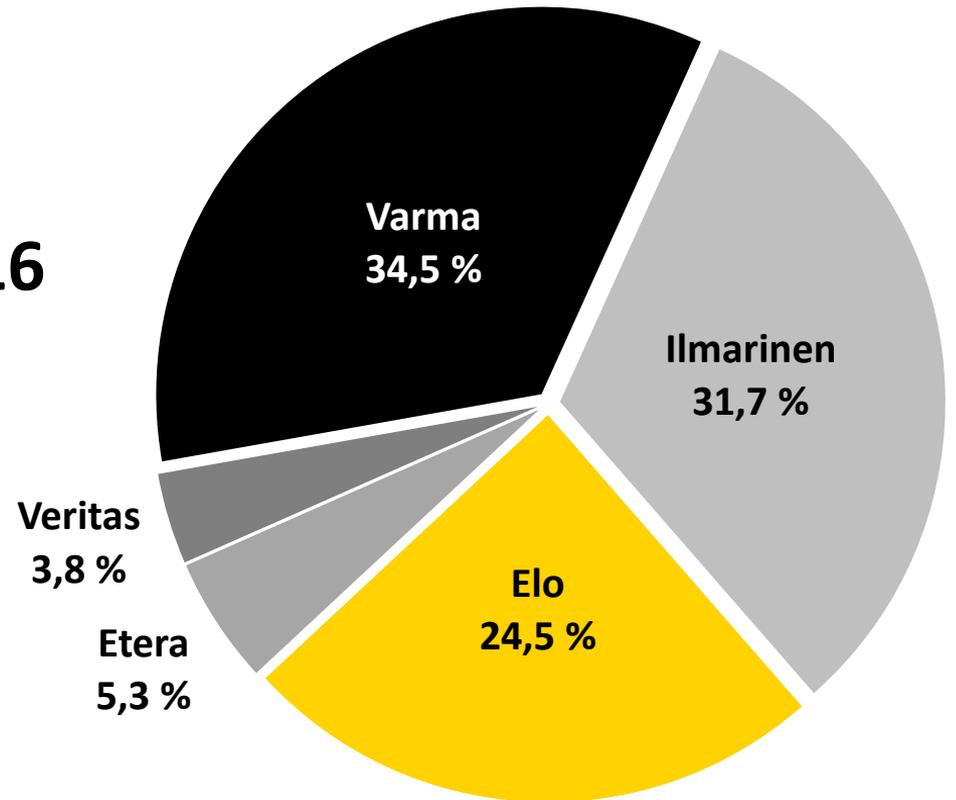


Amount of insurances 2016





Overall market share in 2016





This is what I am going to talk about

- Occupational Health Services (OHS) in Finland
- Work ability (WA) concept and its promotion
- Development of medical and vocational rehabilitation
- Latest advances in work disability prevention (WDP) in the legislation and the workplaces



Disability benefits in general

- General sickness insurance applies to all Finns
 - Including access to public primary and secondary health services, as well as occupational health services for employed citizens
- Sickness allowance for all (incl. unemployed) aged 16-67 years
 - Regular salary for c. 3 months, depending on the length of employment, after that sickness allowance from the Social Insurance Institution (SII) during up to 300 compensated days (excl. Sundays and public holidays)
 - SII benefit to the employer during the period regular salary is paid starting 1+9 days after the beginning of work disability
- Amount of sickness benefit depends on salary
 - Minimum 24 €/day, usually 25-70% of the regular income (taxable, no ceiling)
 - If no previous salary, waiting period is 55 days (severe cases 1+9 days) before the minimum benefit
- Partial sickness benefit (50% of the regular) possible after the waiting period (1+9 days)
 - Requires a temporary contract between the employer and the employee
- In case work disability continues after 300 compensated days
 - Permanent disability pension or temporary rehabilitation support
 - Different disability pension schemes for private and public sectors operated by both private and public institutions (Pilar I + II)

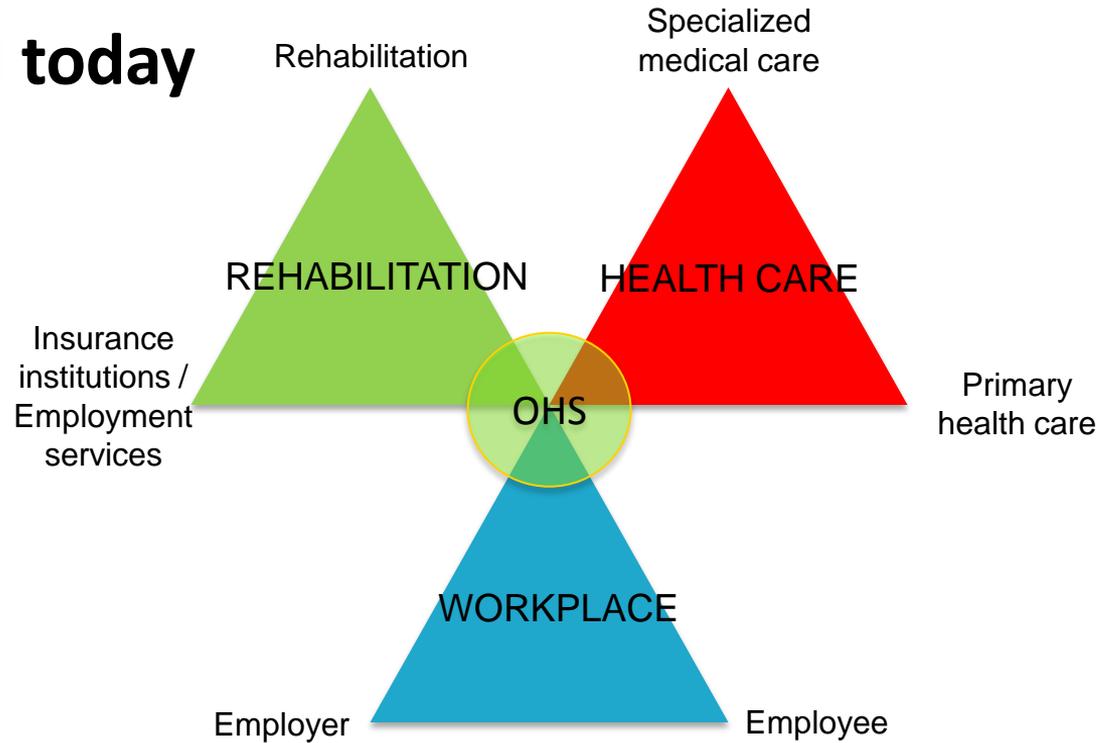


Act on OHS (1978/ revised 2001)

- Every employer has to arrange OHS to every employee
- The employer, employee and OHS in collaboration promote
 - Prevention of work-related diseases and accidents
 - Healthiness and safety of work and work environment
 - **Health as well as work and functional ability of the employees at the different stages of their working careers**
 - Functioning of the workplace community
- In addition to statutory preventive services also primary health care (medical services) can be provided
- C. 500 units providing OHS all over Finland



OHS in Finland today





Rehabilitation included in several laws

- Medical rehabilitation by general health insurance (organized by SII and public health care system)
 - Aiming at improving functional capacity (physiotherapy, psychotherapy, spa-like institutions)
- Vocational rehabilitation (organized by work pension companies and SII)
 - Defined either by contents (specific interventions improving returning to or staying at work) or targets (any interventions aiming at improved integration in work life)
- Social rehabilitation
 - Aiming at preventing marginalization and better integration in the society among young people or ex-convicts
- Educational rehabilitation
 - Aims at supporting social and cultural development as well as learning basic skills as a citizen



Vocational rehabilitation

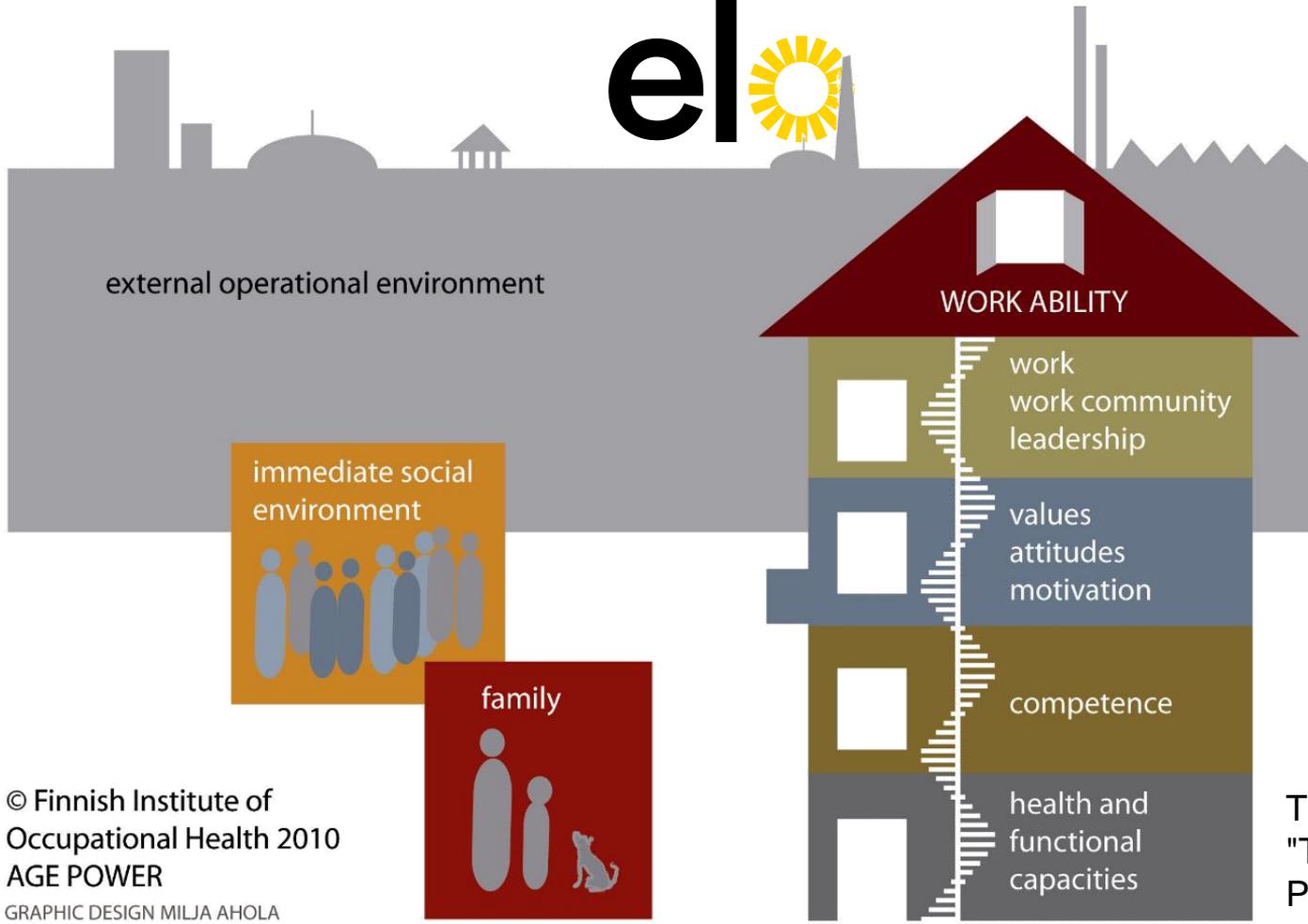
- Financed by work pension companies and SII, provided by several private companies
- Aiming at supporting an employee with disability to maintain ability of retaining employment
 - Based on medical condition and despite adequate treatment, a risk of (partial) disability pension exists during the next five years (in present job)
- Most common methods are work hardening, work trial (usually 3 months) and retraining (1-3 years)
 - Compensation to the employee as in disability pension plus 33 % in addition to all costs related to retraining
 - Work hardening/trial to the previous or new job without any costs to the employer



Concept of Work Ability

- Basis for assessment of eligibility to disability benefits
 - Objective imbalance between functional ability in relation to demands at work
- Agreement between employer and employee organizations that work ability should be promoted at the workplaces (year 1990)
 - Activities to maintain work ability ("tyky" in Finnish)
- Theory behind work ability included
 - Individual and his/her characteristics, work environment, work and work community ("triangle")
 - Professional competence was included later in the model ("pyramid")
- Law obligates OHS to play a part in "tyky" activities

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external operational environment

immediate social environment

family

WORK ABILITY

work
work community
leadership

values
attitudes
motivation

competence

health and
functional
capacities

The model of
"TYKY house" by
Prof. Juhani Ilmarinen

© Finnish Institute of
Occupational Health 2010
AGE POWER
GRAPHIC DESIGN MILJA AHOLA

Work Ability Index (WAI) Questionnaire



1. Current work ability compared with the life time best
2. Work ability in relation to the demands at work
3. Number of current diseases diagnosed by physician
4. Estimated work impairment due to diseases
5. Sick leaves during the past 12 months
6. Own prognosis of work ability two years from now
7. Mental resources

Table 5. Work Ability Index (WAI) and the single-item Work Ability Score (WAS) at baseline in relation to disability pension (DP) awards during 1981-2009 among men. Cox regression analysis stratified by job content (physical, mental or mixed). Hazard ratios (HR) and their 95 % confidence intervals (CI).

	Physical jobs				Mental jobs				Mixed jobs			
	Model 1		Model 2		Model 1		Model 2		Model 1		Model 2	
	HR	95% CI	HR	95% CI	HR	95% CI	HR	95% CI	HR	95% CI	HR	95% CI
WAI at baseline												
Good/excellent	1.00 ^a	..	1.00 ^b	..	1.00 ^a	..	1.00 ^b	..	1.00 ^a	..	1.00 ^b	..
Moderate	1.63 ^a	1.34-1.98	1.86 ^b	1.44-2.41	2.81 ^a	2.16-3.67	4.07 ^b	2.80-5.93	1.62 ^a	1.17-2.25	2.66 ^b	1.70-4.18
Poor	4.02 ^a	3.23-5.01	4.48 ^b	3.02-6.63	5.66 ^a	4.05-7.91	6.55 ^b	3.90-11.01	3.82 ^a	2.69-5.42	5.29 ^b	2.83-9.86
Change in WAI												
No change/improved	.	..	1.00 ^b	..	.	..	1.00 ^b	..	.	..	1.00 ^b	..
Slightly deteriorated	.	..	1.66 ^b	1.25-2.20	.	..	1.79 ^b	1.22-2.63	.	..	1.54 ^b	0.97-2.46
Strongly deteriorated	.	..	4.33 ^b	2.98-6.30	.	..	4.00 ^b	2.54-6.31	.	..	3.11 ^b	1.63-5.95
WAS at baseline												
Good/excellent	1.00 ^c	..	1.00 ^d	..	1.00 ^c	..	1.00 ^d	..	1.00 ^c	..	1.00 ^d	..
Moderate	1.60 ^c	1.35-1.91	1.70 ^d	1.37-2.11	2.17 ^c	1.71-2.75	2.22 ^d	1.67-2.96	1.51 ^c	1.13-2.02	1.84 ^d	1.25-2.71
Poor	2.95 ^c	2.41-3.60	2.51 ^d	1.85-3.41	4.11 ^c	2.90-5.83	4.73 ^d	2.84-7.89	2.83 ^c	2.11-3.81	3.05 ^d	1.92-4.86
Change in WAS												
No change/improved	.	..	1.00 ^d	..	.	..	1.00 ^d	..	.	..	1.00 ^d	..
Slightly deteriorated	.	..	1.34 ^d	1.07-1.67	.	..	1.54 ^d	1.16-2.04	.	..	1.42 ^d	0.95-2.14
Strongly deteriorated	.	..	2.54 ^d	1.85-3.48	.	..	3.58 ^d	2.21-5.82	.	..	2.10 ^d	1.31-3.36

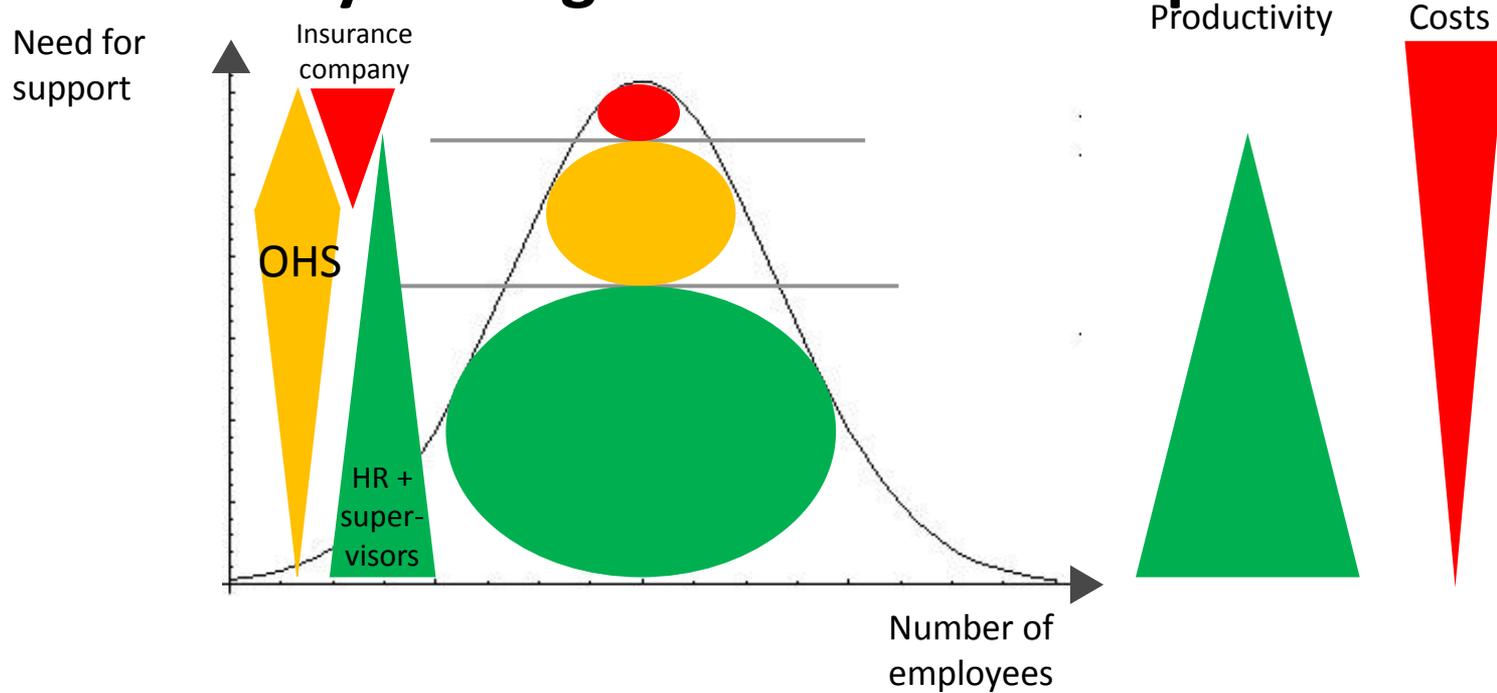
^a Baseline WAI and age included as covariates; number of DP awards=583 for physical, 303 for mental, and 212 for mixed-demand jobs.

^b Baseline WAI, age, and change in WAI included as covariates; number of DP awards=310 for physical, 203 for mental, and 103 for mixed-demand jobs.

^c Baseline WAS and age included as covariates; number of DP awards=704 for physical, 331 for mental, and 268 for mixed-demand jobs.

^d Baseline WAS, age, and change in WAS included as covariates; number of DP awards=409 for physical, 235 for mental, and 147 for mixed-demand jobs.

Work Ability Management at the workplace





RTW model in a nutshell

- Targets

- Reducing sickness absenteeism (improving work environment and work organization)

- Core steps in the model:

- Early intervention by supervisor in case of incipient problems at work
- When sick, immediate contact with the supervisor
- Sickness certificate (length of absenteeism with the diagnosis)
- Contacts during sick leave
- RTW discussion after sick leaves longer than 2 weeks or repeated sick leaves
- Surveillance by OHS
 - Contacting absentees during longer sick leaves on regular basis
 - Ensuring adequate treatment and rehabilitation to support RTW



Recent legislation related to RTW

- Right to vocational rehabilitation (by work pension companies 2006/2008)
 - In case permanent disability is likely to occur within 5 years
 - Risk can be reduced by retraining or/and new job/employment
- Part-time sick leave (2007/2010/2014)
 - First only after being absent from work for 3 months, now after two weeks on sick leave
 - Work time has to be reduced 40-60 % for 12-120 work days
- Reimbursement of costs related to OHS (2012)
 - 60 instead of 50 % with a model for early support at the workplace; surveillance of sickness absenteeism in collaboration with OHS
- Assessment of the remaining work ability in OHS (2012)
 - Prerequisite for disability benefit after 90 compensated days
 - Employer, employee and OHS together assess the possibilities to RTW



In conclusion,

- Present policies of WDP derive from three different developments:
 - Medical rehabilitation by SII => vocational rehabilitation incl. work and workplaces
 - Occupational Health Services => role as experts in Work Disability Prevention
 - Work Ability –concept => Work Ability management at the workplace
- In addition to OHS and SII, work pension institutions play a crucial role in WDP
 - Computerized systems for surveillance of employees with disabilities and related costs to the employer
- Finnish legislation has created new solutions to prolonged work disability
 - Biomedical approach still strong, especially in health care outside OHS
 - Stronger incentives needed to employers for modifying work of employees with disabilities
 - How to find jobs to employees with disability?



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