

Employers' Perspectives on Intermittent Work Capacity – What Can Qualitative Research Tell Us?

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Executive Summary

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This research was designed to gather employer perspectives on intermittent work capacity (IWC) related to people with disabilities or health concerns who are attached or unattached to the workforce. The study used qualitative methods to identify the support services and employer practices that enable persons with IWC to enter and remain in the workforce, as well as factors that challenge success. The study was conducted in three phases that involved a review of the literature, individual interviews, and focus groups.

The study began with a review of the literature in an effort to better define IWC and to understand key issues faced by both workers and employers. The literature review began with a keyword search of the research and grey literature for information on a range of topics relevant to the research questions. An initial search on the terms “intermittent work capacity” and “episodic disability” resulted in very few relevant sources. The lack of research directly addressing intermittent capacity does not mean that little is known about this issue. A great deal is likely known, but has not been integrated under this label, across disability groups, or considered in the light of capacity to perform to externally-imposed standards as in a standard work situation. With an expansion of the search, a number of relevant sources were identified. The report summarizes the primary papers in the area and provides some observations on the challenges associated with intermittent work capacity in employment.

The research proceeded to individual interviews with employers in a range of employment sectors and workplace types across Canada. Twenty-four (24) individual interviews were conducted by phone between November 19, 2010 and February 10, 2011. Interviews were recorded and later transcribed. The interview protocol addressed workplace practices and policies that may impact employers' ability to hire, support and retain workers with intermittent capacity, their attitudes and their past experiences.

The final stage of this project involved field testing of our initial theories and impressions with two focus groups of employers, one consisting of small business owners, the other representatives of large organizations. Questions allowed for clarification of key themes that had been identified through the interviews, including challenges in dealing with the central issues of productivity and unpredictability, workplace structures and conditions that support retention of workers with IWC, and employer struggles with the duty to accommodate and other legal requirements.

The report concludes with a summary of key messages, recommendations for future research, and suggestions for policy and practice interventions.

Key Messages and Recommendations

Intermittent work capacity is expressed as disturbances in attendance and productivity that impact the work organization both with respect to meeting its business objectives and maintaining good social relations. The unpredictability of IWC is particularly problematic and takes on several forms, including: rapid and unexpected disruptions in work performance; difficulty predicting the course of incapacity;

unpredictability with regards to frequency of disruptions; unpredictability with respect to potential for decline in work function over time; and unpredictable terminations by employees in response to ongoing difficulties.

A number of factors motivate employer efforts to retain workers with intermittent capacity, including the contributions these workers offer to the organization, government regulations around the duty to accommodate, legal precedents, and perhaps most importantly, human compassion. Other factors facilitate support of workers with IWC, including the organization's capacity to replace the worker, the financial resources of the organization to shoulder costs associated with the IWC, expertise and willingness within an organization to recognize and appropriately accommodate needs, and an open flow of communication between key players. Overall, there is a complex interaction between workplace factors, worker characteristics and policy issues, and these are superimposed on the knowledge, attitudes and skills of the individuals involved.

A number of concerning trends are evident based on this research, some of which are difficult to change, but important to consider when seeking long term solutions. One is the aging workforce, and the inevitable increase in reduced capacity that will result as workers with chronic conditions find their capacity becoming less reliable over time, and other healthy adults, particularly in jobs with high physical demand, being increasingly challenged to maintain required capacities. Another is the trend towards downsizing that reduces workforce depth. A reduced workforce increases risk of employee burnout, challenges the ability of ailing employees to take preventive health measures, and makes it more difficult to cover for absent employees. A final trend is that of cost cutting, such that employers are moving more and more of their staff towards part-time positions without employment benefits, thus providing few options if workers need time off to proactively manage health issues.

The evidence of this research suggests:

1. Continued work is needed to fully understand the differing experiences in the workplace of IWC as it pertains to different health conditions, and the variable financial impact, choices made, and social-behavioural impact of IWC on worker and workplace.
2. Exploration of the social dynamics of the workplace and their impact on IWC outcomes is needed. The concepts of reciprocal trust and caring, clearly pivotal to the successful accommodation of IWC, are still poorly understood.
3. Research is needed into the mechanisms of effective communication of information related to health needs and disability accommodation. Key concepts requiring better understanding are physician engagement in the process, worker disclosure, stigma, and how the dynamics of these complex health information exchange issues interact with human rights and privacy legislation.
4. The complex disability benefits system in place across Canada, and the inherent disincentives to employment, is currently being explored by various groups. It will be important to continue this work and consider policy in the context of IWC.
5. Supervisor training is required to identify what content and delivery systems are most effective in terms of compliance with training participation changing supervisory knowledge and attitudes, and impact on retention rates and other key outcomes relative to IWC.
6. Other resources, such as a toolkit for disability management, and access to a network of human resource experts for small business owners dealing with IWC should be developed and pilot tested.