



DGUV

Deutsche Gesetzliche Unfallversicherung
Spitzenverband

Return to work strategies and interventions

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Structure

1. Relevance of rehabilitation and return-to-work
2. Statutory Accident Insurance in Germany
3. International quality standards on return-to-work (RTW)
4. Disability Managers in Germany

Global Facts

Around one billion people in working age are disabled worldwide.

80% of disabilities are not inborn, but developed during life time.

Most of them become unemployed and dependent on long-term benefits.

Thesis

1. Social Security Schemes respect the paradigm-shift from only compensating claims and paying pensions to create structures and processes in pro-active rehabilitation programs.
2. Return-to-work (RTW) strategies attract traditional vocational rehabilitation programs to the state, the enterprises, insurers and service providers by measures close to the worksite.

Finding the way back to the working life suffering from injuries or diseases



Return on Investment

- The state increases the prosperity of the society that corresponds to its workforce and its working longer and harder (demographic factor).
- Employers need their skilled workers fit for work on a long-term base and want to strengthen their work capacities.
- Health providers are paid for supporting their clients on their way back to work. This is the main reason of financing health care systems!

Return to Work – a human right



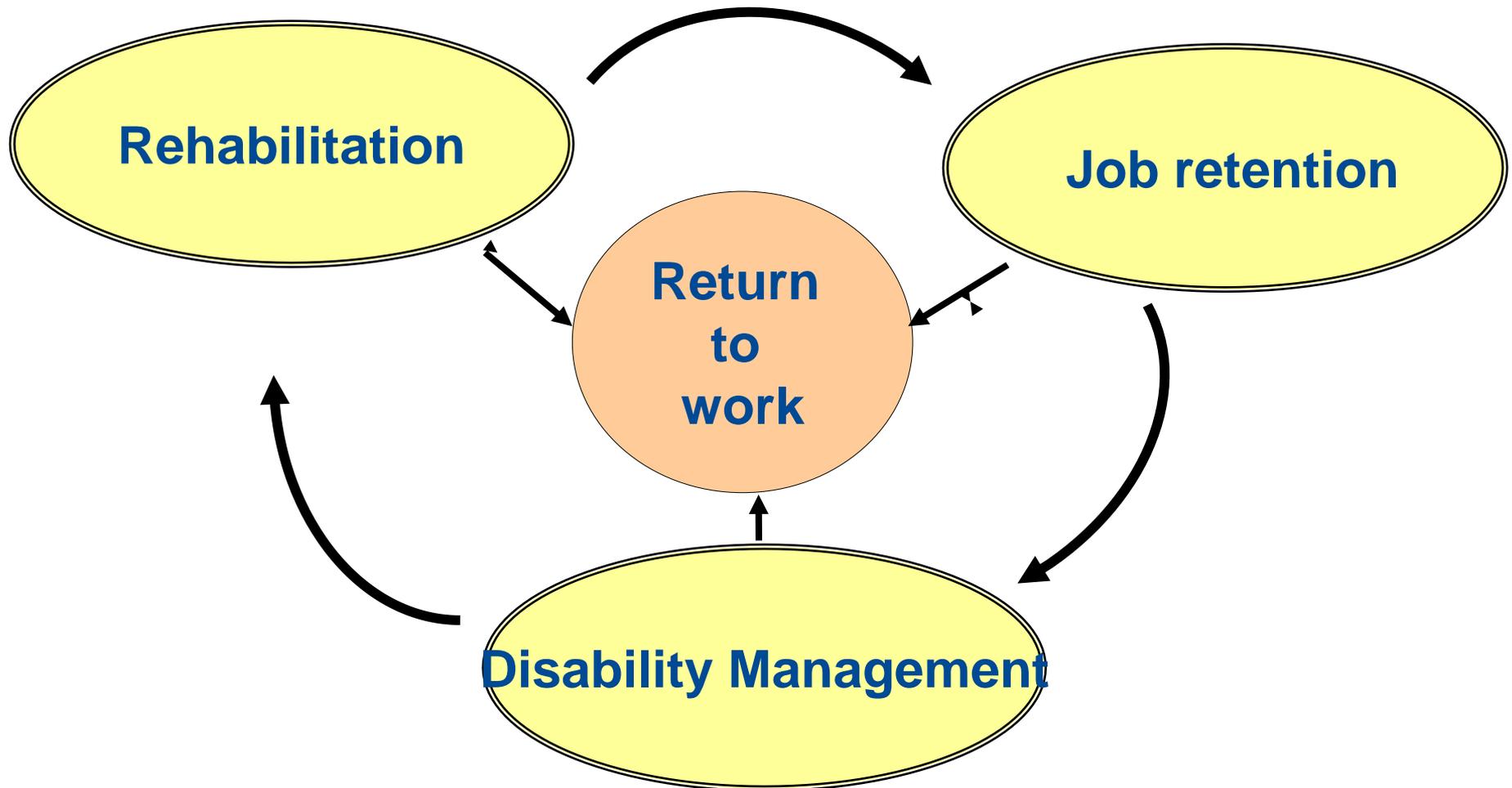
Convention of the Rights of Persons with Disability (CRPD), 2008

Art. 27 UN-CRPD „Work and Employment“

„ (1) States parties shall safeguard and promote the realization of the right to work, including for those who acquire a disability during the course of employment, by taking appropriate steps, including through legislation, to, inter alia:

(k) Promote vocational and professional rehabilitation, job retention and return to work programmes for persons with disabilities.

Terms



Key questions of societies

- How employees with disabilities can receive comprehensive medical, vocational and social services like out of one hand?
- How employers can be motivated and supported in their activities of retaining employees with chronic diseases at work?
- How health care service providers can act close to the working life with the impact on the employability of workers?
- How insurers, which pay for compensation in social security, can support these key challenges in societies?

German Social Statutory Insurance

- Accident Insurance
- Health Insurance
- Long-Term Care Insurance
- Pension Insurance
- Unemployment Insurance

www.deutsche-sozialversicherung.de

(english version)

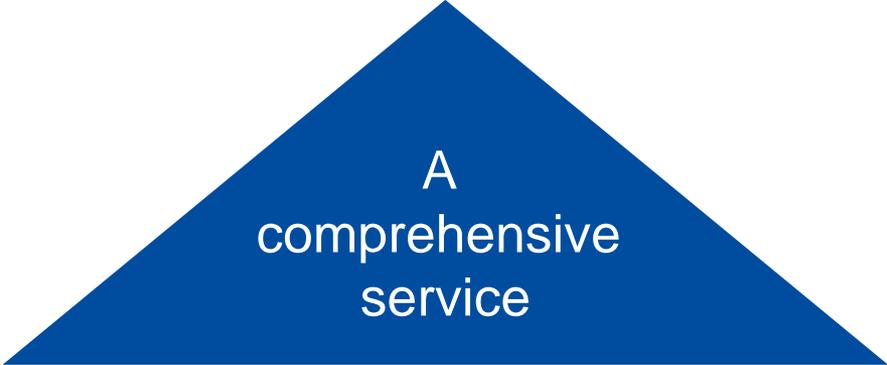
Social accident insurance in Germany

- Responsible for work accident and occupational diseases including commutable accident.
- Close contact to about 3,3 million enterprises in Germany as their compulsory members including children in Kindergarten and schools.
- Financed only by contributions of the employers, but liability of both social partners (not state-run) as non-profit institutions.
- Social Code (No. 7) divides in independent social insurance carriers in industrial branches and civil services of regions represented by an umbrella organisation in Berlin (DGUV)

Statutory Accident Insurance in Germany

Prevention

(Occupational Health and Safety, Health Promotion)



A
comprehensive
service

Rehabilitation

(medical treatment, vocational and
social rehabilitation)

Compensation

(financial benefits, pensions)

Medical Services (acute treatment and medical rehabilitation)

- **3000 authorized surgeons**
- 300 in-patient authorized clinics
- 150 out-patient facilities
- 9 own accident clinics
- 2 own clinics for occupational diseases



Keep in mind!

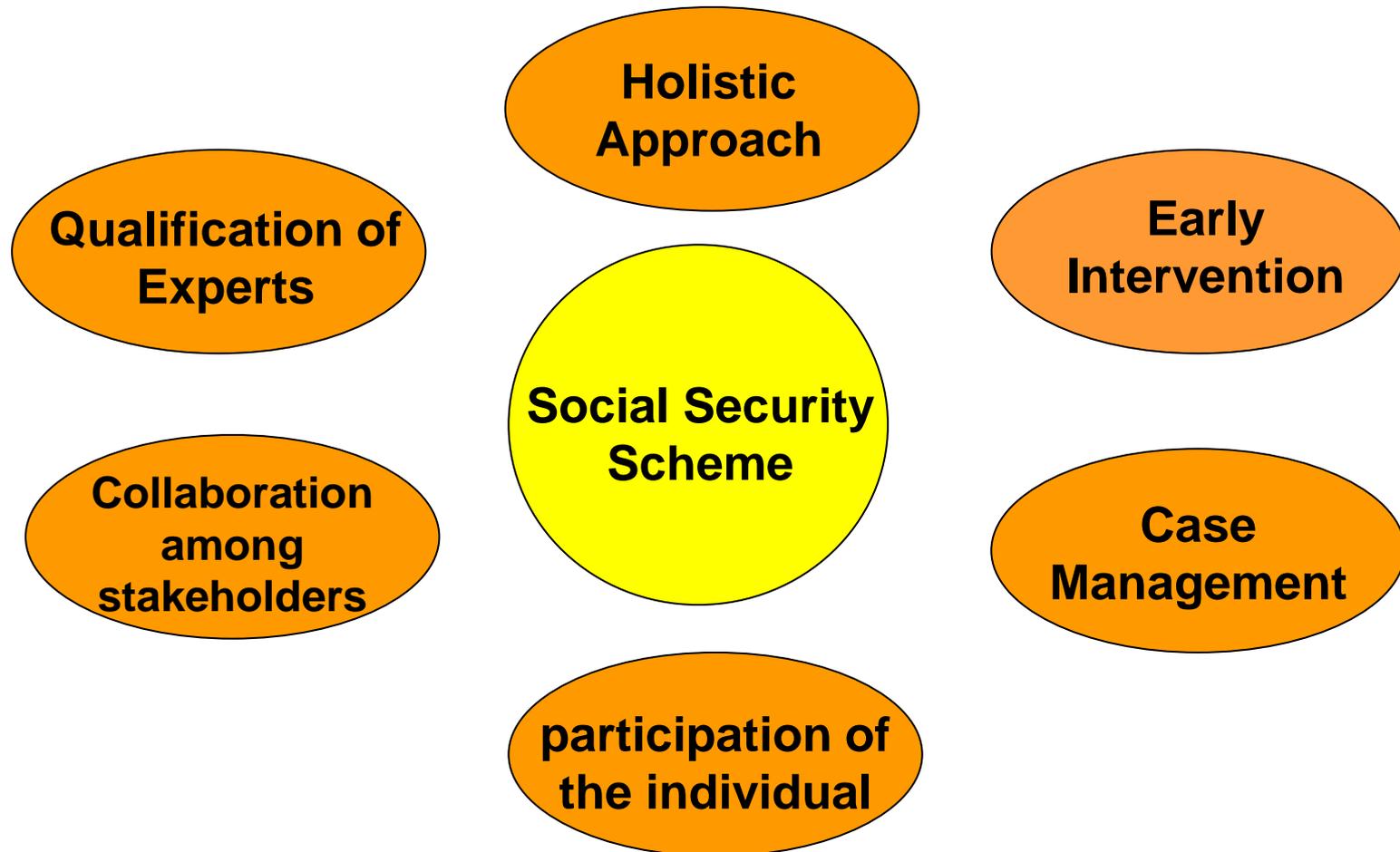
Merely six weeks of sick-leave reduce return-to-work success down to 50%.

International Cooperation: Guidelines on RTW

- International Social Security Association (ISSA), Geneva
- Rehabilitation International (RI), New York
- International Disability Management Standard Council (IDMSC)

(Decision: Doha/Qatar, November 2013)

Success factors in RTW



Key elements of success

Holistic Approach

- Employer's liability makes RTW easier
- Combination of medical and vocational services
- Bio-psycho-social model (ICF) of the WHO as a tool
- Prevention and Rehabilitation

Preventing early retirement – German approach

New legal obligation since 2004 – Disability Management (DM)

- Employers have to offer DM procedure if
- employee is ill more than six weeks per year and
- frequently or in time intervals of absence from work

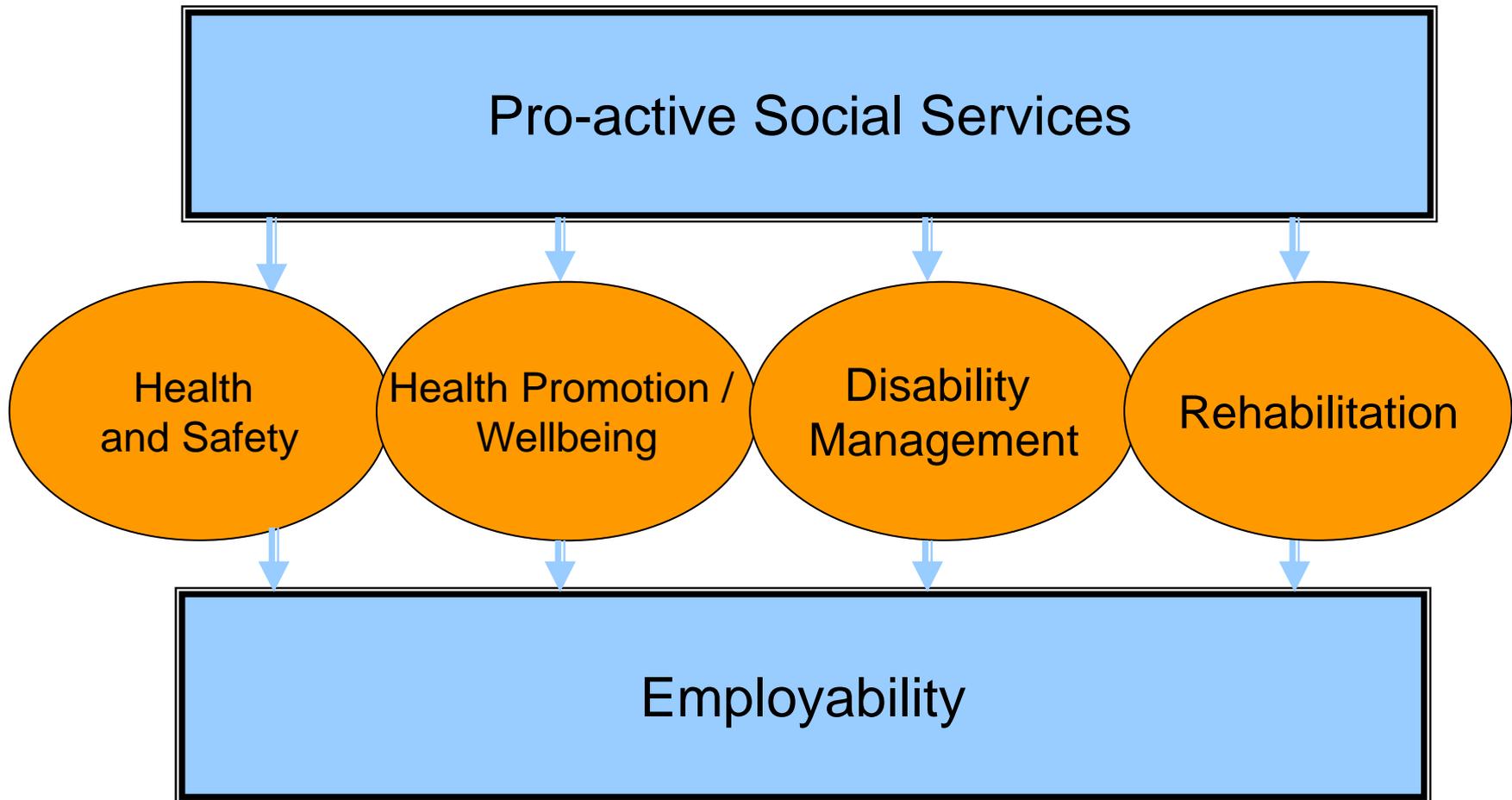
Federal Labor Court decision 2007:

- if employers do not provide evidence that they have offered a disability management program they may not dismiss the employee because of illness

Medical Rehabilitation close to the working-place increases the productivity of a person



Prevention and Return-to-Work



Key elements of success

Early intervention

- Waiting for applications of claims leave social insurers in a passive role.
- Early information initiated and assisted by enterprises or physicians.
- Cooperation with stakeholders in enterprises (company-physicians).

Art. 26, 1 a UN-CRPD „Habilitation and Rehabilitation“

“Services and programs begin at the earliest stage, and are based on the multidisciplinary assessment of individual needs and strengths...”

Key elements of success

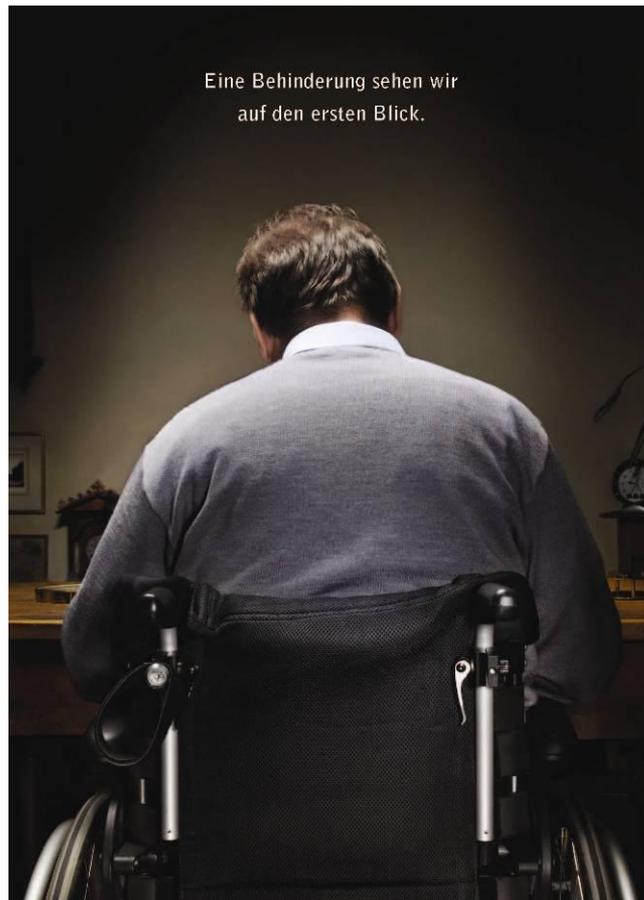
Case Management

- Starting with indicators based on ICF (WHO).
- Realizing and assessment of abilities instead of deficits.
- 10% of cases need rehabilitation management. These severe cases cause insurers 90% of their costs.

Identify cases that need additional management



Different perspectives – a barrier for occupational participation



Key elements of success

Participation of the Individual

- UN-Convention on the Rights of People with Disabilities (CRPD) in 2008 (Art. 26).
- Codification in social and labor law by compulsory duties and incentives for RTW.
- Action Plans for implementing participation, inclusion, diversity and individualism.

Action Plan of the German Social Accident Insurance

for implementation of the UN Convention
on the Rights of Persons with Disabilities 2012 – 2014



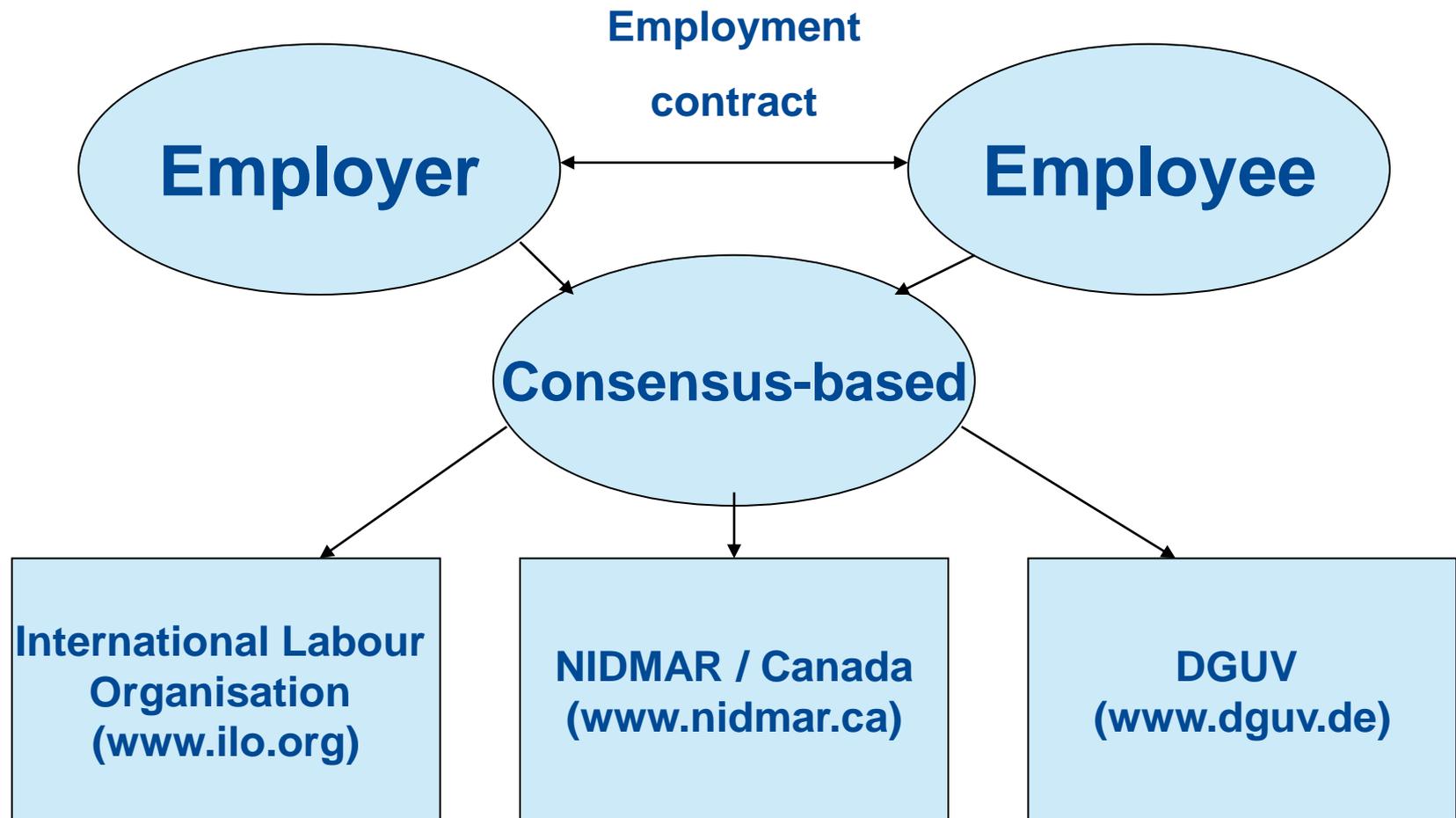
Key elements of success

Collaboration among stakeholders

- Social security institutions must coordinate RTW mutually.
- Creating an umbrella association of prevention and rehabilitation on a federal level.
- Needs of smaller enterprises give the floor for “Regional Centers of Competence” with one-stop-shop service.

Qualification of experts in RTW

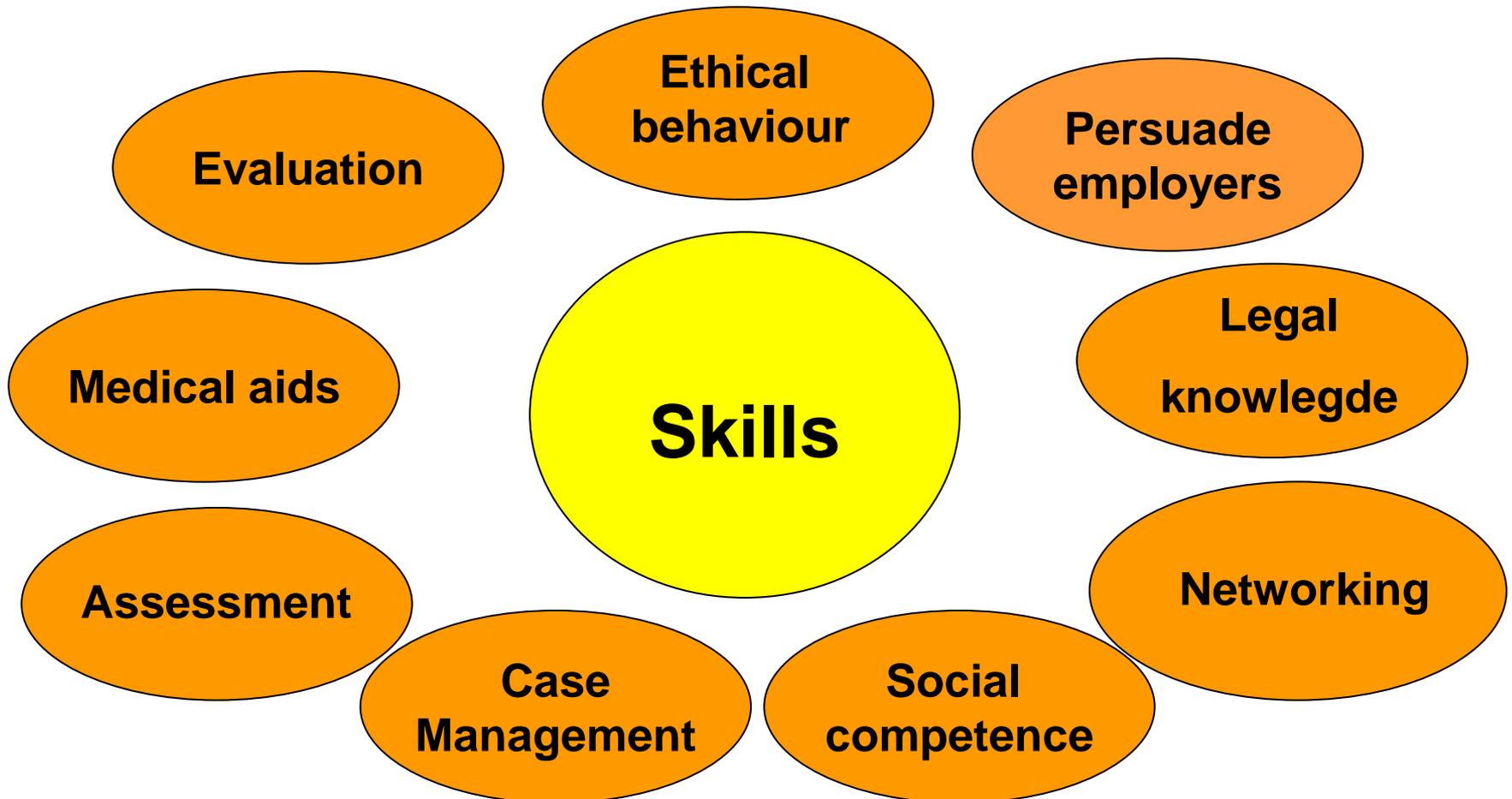
Disability Managers



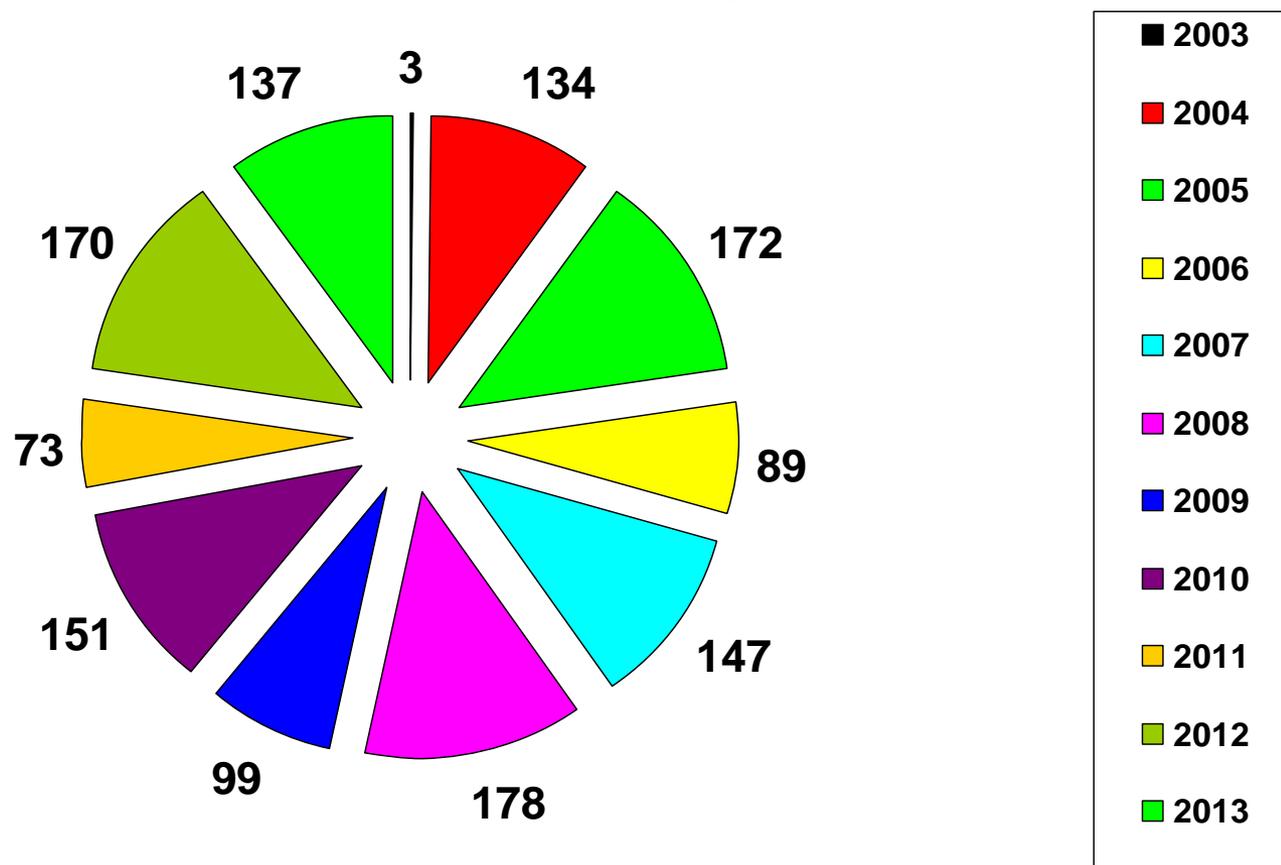
Qualification of Experts in RTW

- certification of **training program and examination** for „Disability Management Professionals“ and „Return to Work Coordinators“
- rights to perform **audits** of and **certify** disability management in companies

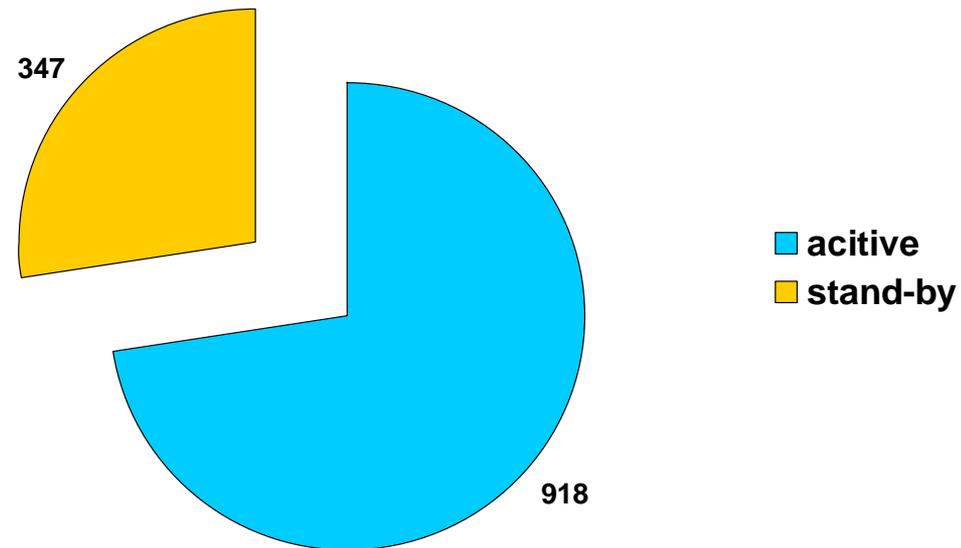
Nine key elements of skills



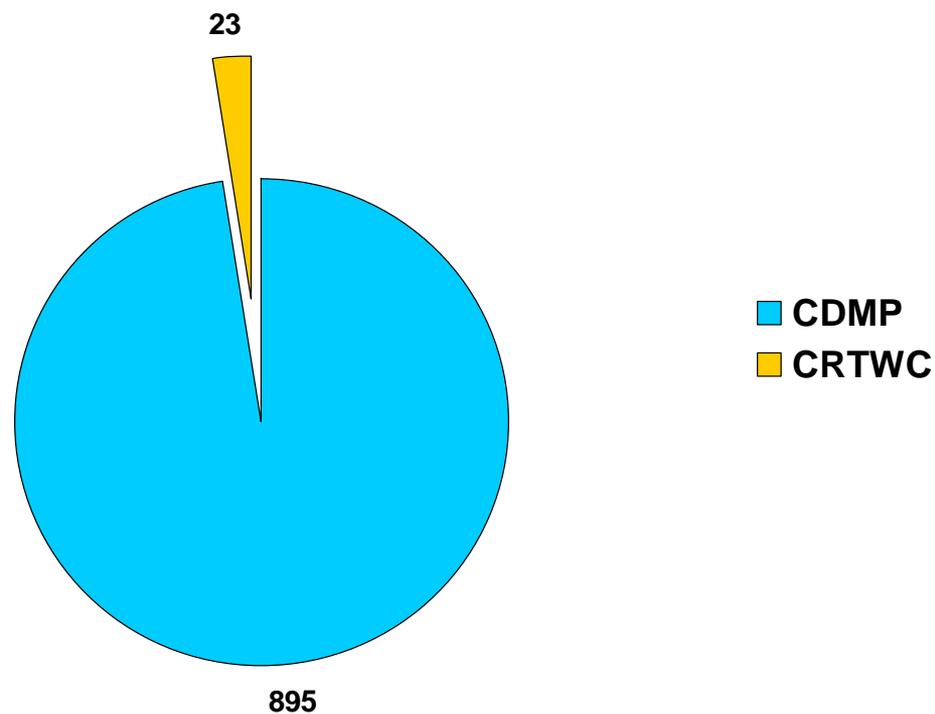
1353 CDMP / CRTWC Exams in Germany (German language)



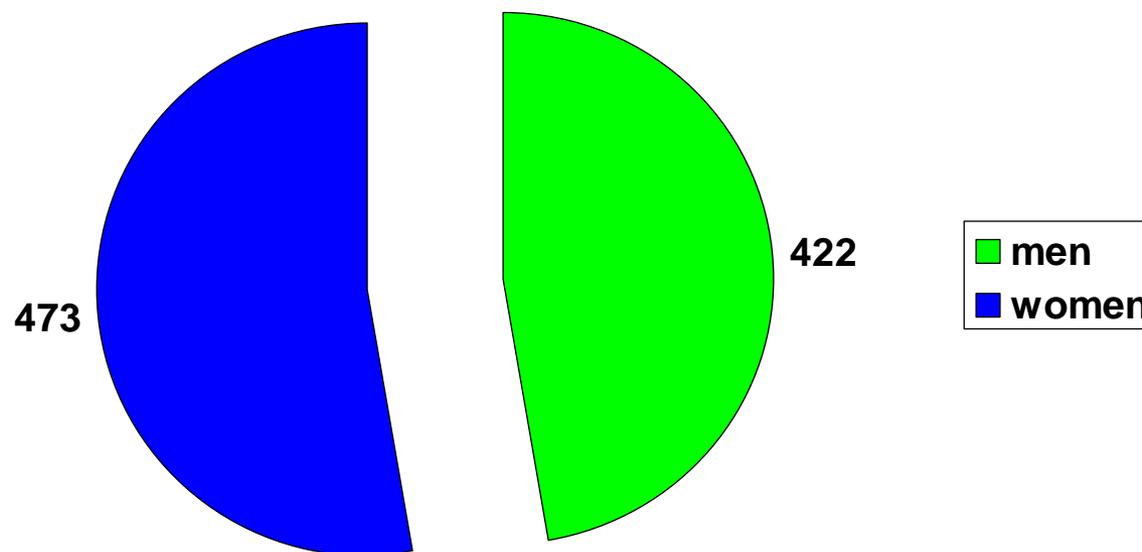
1265 CDMP / CRTWC in Germany



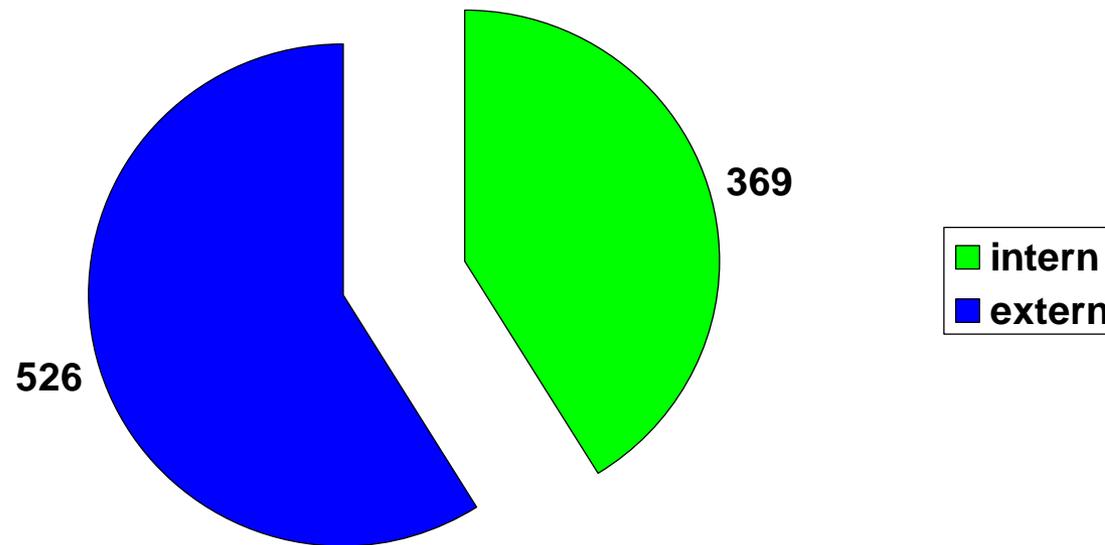
918 active CDMP / CRTWC



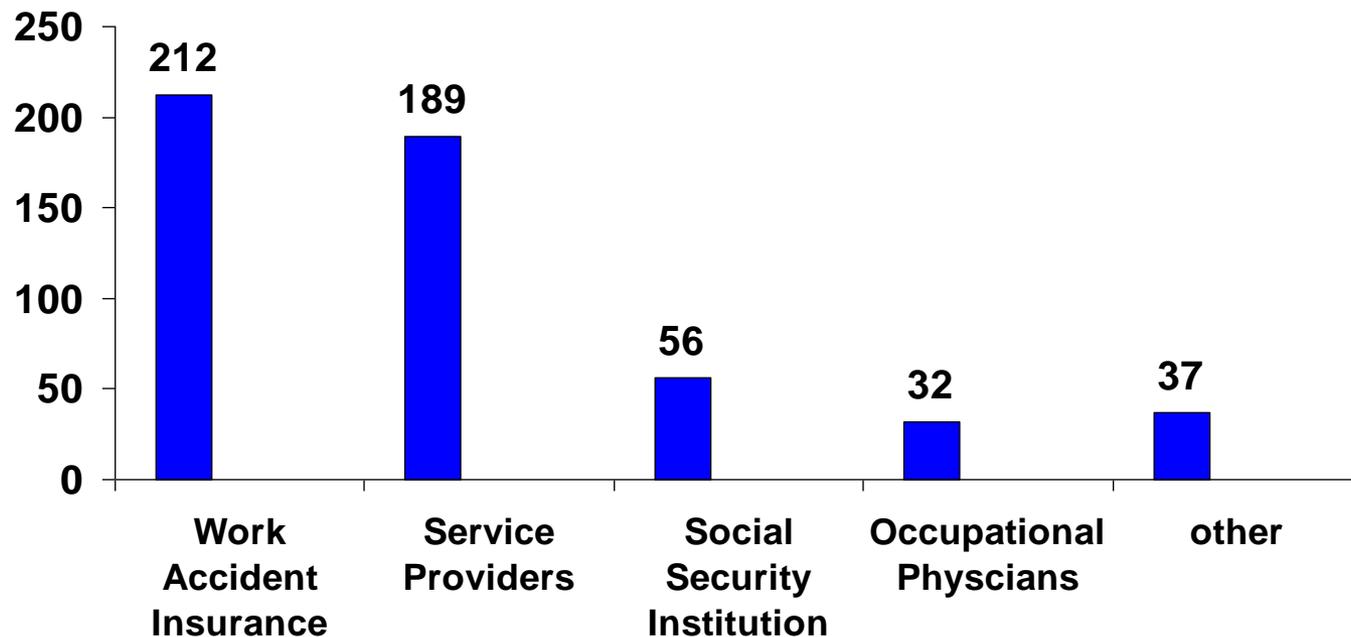
895 active CDMP Gender Statistics



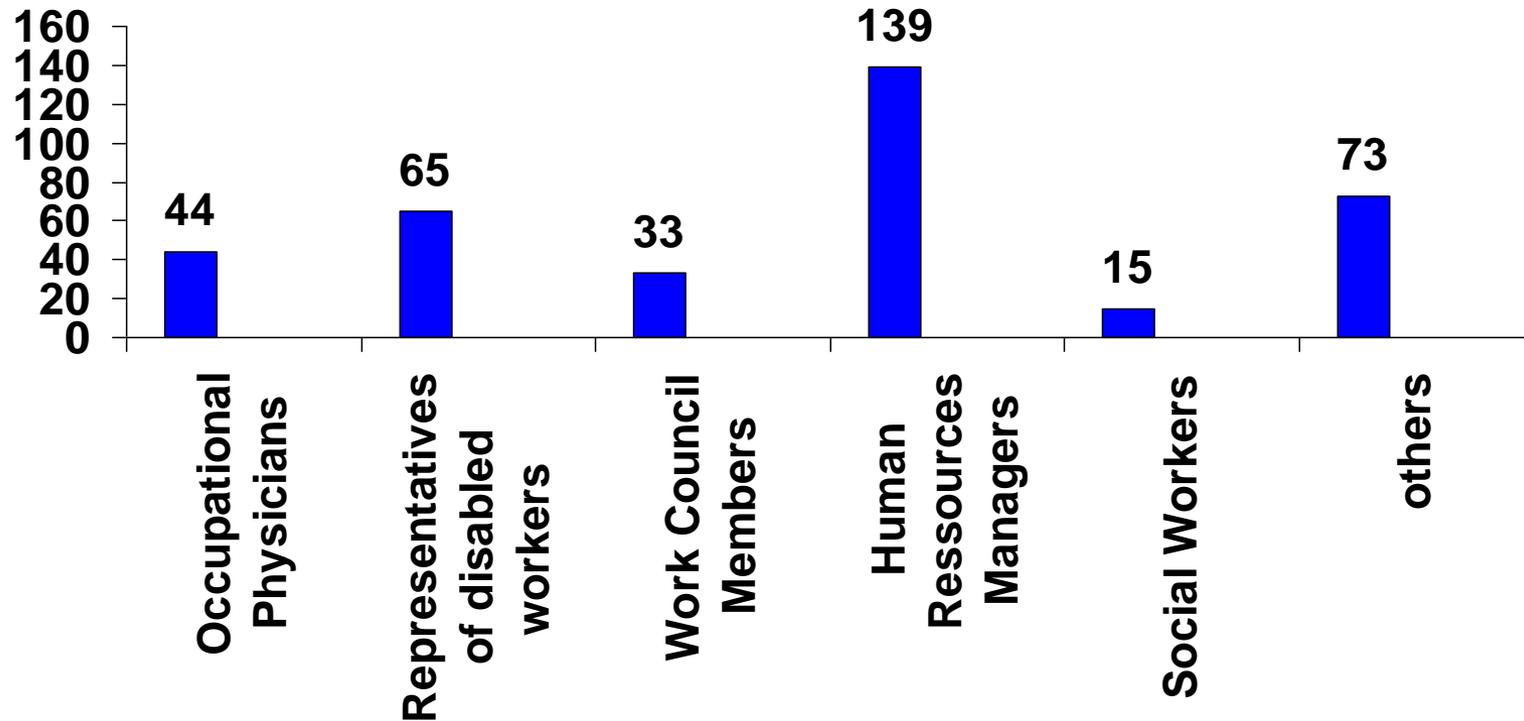
active CDMP working in and for enterprises



526 CDMP Working for enterprises (SME)



369 CDMP working in enterprises



Useful links

- www.disability-manager.de
- www.ifdm2014.com.au
- www.dguv.de
- www.issa.int
- www.idmsc.org
- www.riglobal.org
- www.ecri2014.eu



Thank you for your attention!

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