

Cancer and the Workplace

WHAT EMPLOYERS NEED TO KNOW

By Chris Bonnett and Allan Smofsky

Being told that you or someone close to you has cancer is devastating. But two facts may surprise you: first, cancer is now considered a chronic disease because there are more than 810,000 10-year survivors in Canada; second, this matters to employers because 43 per cent of all cancer diagnoses occur in working-age Canadians, including 70 per cent of all breast cancer diagnoses. If your company has not yet faced this issue, it is unlikely to be so lucky forever. There is now nearly a 50 per cent lifetime probability of any one of us getting cancer.

What won't surprise you is that cancer creates significant workplace costs in drugs, absence, disability and presenteeism and caregiving. It disrupts lives, plans and work schedules. Just like mental illnesses, cancer can lead to negative and unfair behaviours among leaders, managers and co-workers. Most employers know they have a general legal obligation to accommodate an employee receiving treatment or who wants to return to work (RTW), but often struggle with how to do this in a way that makes sense for the business, the employee and co-workers.

The goal of a new discussion paper, [Improving Cancer Management in the Workplace](#), is to review and translate recent, high-quality research into practical guidance that helps human resources professionals better manage cancer – and health. In essence, workplaces need a more strategic, comprehensive and integrated approach to health that includes cancer.

The discussion paper examines workplace best practices, provides an employee's perspective on return to (or staying at) work, and establishes principles and practices for progressive employers and other workplace stakeholders. Though cancer is still too often fatal, HR policies and programs need to reflect that cancer is – increasingly – not the end of a career.

Below are insights from the authors' review of more than three dozen academic papers and reports as well as six stakeholder interviews.

BEST PRACTICE INSIGHTS

Cancer and work has attracted a growing body of research in recent years, largely as a result of improved survival among working age patients. Management responsibilities, whether for HR managers or line management, start with planning the difficult transitions both away from work at diagnosis, and upon RTW during and following treatment.





IN REVIEWING OR FORMULATING HR POLICY, PROGRAMS AND PRACTICES, EMPLOYERS SHOULD CONSIDER THE FINANCIAL, OPERATIONAL AND CULTURAL IMPACTS OF CANCER AND OTHER RELEVANT CHRONIC DISEASES.

feature

Impressively, many high-quality sources are Canadian, and a number of academic reports spoke directly to workplace stakeholders.

Ensuring sound cancer and chronic disease management practices starts with progressive policy. This should cover:

- Continued access to adequate health and disability benefits while on leave, as well as employee assistance plans (EAP), access to quality health information and second medical opinion services
- Assistance to navigate the health system, understand treatment decision, and submit benefit forms and applications at a time of great personal distress
- Professional input into work ability assessment (both physical and cognitive dimensions) and accommodation during or following treatment, which may include graduated RTW, post-RTW support and more frequent rest
- Training for managers and co-workers to avoid confusion, frustration, resentment or stigma
- Awareness of legislation that protects the disabled worker and requires reasonable accommodation

Employers have an opportunity to affirm, include or better integrate their approach to cancer within a healthy workplace strategy. Many chronic conditions, including cancer, share common lifestyle-related risk factors and can be improved when employers deliberately create a culture of health through leadership, management and labour relations levers and provide targeted support to employees (both as patients and as caregivers) in accordance with best practices.

RECOMMENDED PRINCIPLES AND PRACTICES

HR professionals can help establish principles that ensure effectiveness, fairness and consistency in key domains, as well as lead the implementation of better practices across their organizations. There are five main areas for employers to consider.

1. Health benefits

Health benefits play an important role in helping employees who are affected by cancer manage what is often an expensive and lengthy journey. Benefits also help employers enhance work productivity and reduce time off work. Cancer drug coverage varies by province and newer, innovative medications are expensive, so coverage should be evidence-based, using accepted standards of clinical and economic value. Beyond the immediacy of cancer, patients often experience the simultaneous presence of two or more chronic diseases or conditions (comorbidities), and adjunct therapies also add cost and complexity. Out-of-pocket expenditures for all necessary therapies and supports should be reasonable enough that the cost does not deter access to them.

It is not enough, however, to simply provide coverage. Employees often do not understand the benefits they have and make assumptions about the extent of provincial and employer coverage. Timely, plain-language communication is essential, both in writing and with personal support if needed to create “no surprises” navigation.

Cancer patient assistance and support programs offered through insurers and pharmaceutical companies can provide access to program staff with oncology-specific knowledge. However, programs from different sources often create confusion and duplicate efforts. These programs should be aligned with each other and with

CANCER AFFECTS WORKPLACES

- Cancer can change how people set priorities, but most survivors see work as therapeutic. They want to stay connected to people and events at work.
- About 60 per cent of cancer survivors continue to work during treatment, or return to work afterward.
- About 20 to 30 per cent of survivors report continuing issues with fatigue, memory and physical strength.
- Surveys indicate many cancer survivors have other chronic conditions, including depression, heart disease and diabetes. A comprehensive health strategy makes it easier to manage all these diseases more effectively.





CREATE REASONABLE EXPECTATIONS

Studies indicate that factors such as higher age, lower education, lower incomes, more complex treatment, chemotherapy and physically demanding occupations are more likely to frustrate return to work.

other health benefits to ensure timely and appropriate case management resources, and proactively support treatment adherence and healing.

Health benefit plans are intended to promote better health, so proven cancer prevention and management techniques such as screening or targeted education should be an integral part of their design. To improve cost-effectiveness and yield the greatest benefit, employers could consider making these resources available on the basis of health risk and medical need.

2. Disability

While an increasing number of employees may be able to work through their cancer treatment, many will need to go on one or more leaves of varying duration, depending upon a multitude of factors such as type of cancer and treatment plan, the employee's job and overall health. Studies indicate that about 60 per cent of cancer survivors can return to work: adequate, well-managed sick leave and disability benefits will help. Cancer-specific protocols, based on clinically validated information and guidelines, should be an essential part of overall disability case management. This may include partial disability benefits. Ensure that disability case managers are trained to actively manage cancer cases; otherwise, external expertise should be engaged, especially for more complex cases.

Given the often-significant emotional burden of cancer, short-term and long-term disability protocols should include psychological and social supports. Operational coordination with an EAP provider can help triage the need for additional psychological

services. A critical element of psychosocial support is the role of managers and co-workers. Providing training and support will help the team better manage the employee's absence and accommodation.

Employer discussions with cancer patients, and often their health providers, should occur as early as possible to build trust and establish the needs of both parties. A validated test of work ability that includes physical demands and cognitive functions will help assess the employee's expectation of recovery and perception of work ability and self-efficacy, and ensure everyone has reasonable expectations. By law and good practice, employers should establish a written accommodation plan. It should be flexible enough to allow the employee to work when able, taking into account the many factors that influence success.

3. Caregivers

The burden of disease on caregivers has been well documented recently. Caregivers often miss as much work time as do cancer patients, and sometimes more. Moreover, there is a significant presenteeism burden on caregivers, who often bear the main burden of finding information, and generally advocating with health system stakeholders on behalf of the patient. The role of caregivers and the attendant burden and impact on their work and quality of life is still not well recognized by society. Perhaps as a result, beyond legislated leaves, employers often lack defined policies in this area.

Employers should ensure that caregivers are made aware of support resources, such as EAP, and consider caregivers' needs

through policy and flexible work scheduling. Large regional and national consulting firms often provide annual updates on legislated leaves offered by the federal and provincial governments, including CPP and EI programs.

4. Policy

In reviewing or formulating HR policy, programs and practices, employers should consider the financial, operational and cultural impacts of cancer and other relevant chronic diseases. Many cancers have lifestyle risk factors so prevention should be highlighted in the organization's health policy. Occupational hazards in the work environment should be appropriately minimized or eliminated, at least in compliance with all laws and regulations. Ensure that personal protective equipment is functional and readily available and that employees are properly trained.

Many of these approaches necessarily involve working more comprehensively with vendors and partners. Establishing clear objectives and roles for vendors, the employer and any union involved will help to minimize disruption and optimize outcomes.

RECOMMENDED PRINCIPLES AND PRACTICES

Here are five areas with the greatest opportunity:

Health benefits: Ensure they're adequate, clearly communicated, supported and linked to other services.

Disability: Expect most cancer patients can return to work, so protocols need to accommodate the physical and emotional needs of survivors.

Caregivers: This is a very important and stressful role; consider this in organizational health policy and ensure caregivers know about company and government supports.

Policy: Cancer should be included in illness and injury prevention efforts that include OH&S and clear, coordinated goals for service vendors.

Measurement: Integration with chronic disease management strategy makes it easier to track efforts, costs and impacts on HR and organizational metrics.

Employers should consider developing a policy on service provider performance criteria.

5. Measurement

In order to be able to assess the success of cancer supports within an employer's chronic disease strategy, a measurement framework should be developed. Baseline data could include collecting, linking and tracking the direct and indirect costs and organizational burden of cancer and other chronic diseases, and assessing the broader impact of these conditions on key human resource and company performance metrics.

While not something that Canadian employers and governments typically consider, improving cancer management in the workplace will also provide broader societal and community-level benefits. Employers through their insurers, advisors and other vendors may consider estimating the impact of workplace cancer management initiatives on the use of hospital, medical, community care and other public health system services.

CONCLUSION

Recent research indicates the human and financial costs of cancer and, in fact, all chronic diseases can be better linked in the workplace, given generally similar lifestyle behaviours, culture and management practices. By reviewing and perhaps updating health and disability benefit plans, health-related policies including caregiving and measurement tools, HR professionals can ensure more effective policy, programs and practices.

The report's "call to action" has three goals:

1. Workplace stakeholders will adopt a more comprehensive and strategic approach to health that recognizes cancer prevention and management, including access to drug and disability programs;
2. National workplace standards for cancer care will be developed and broadly adopted by employers and health system stakeholders; and
3. A pilot program will be developed to demonstrate the value of integrating workplace policies and programs with health system resources.

In the near term, an immediate opportunity is to organize and improve workplace resources to better serve survivors and caregivers.

As the incidence of several cancer types continues to climb, the cost and disruption to workplaces will only increase. Considerable research now guides a much more rigorous and effective approach, which in turn ensures better processes and outcomes for patients and employers. ■

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