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**A Prospective Cohort Study of Return-to-Work Coordinators’ Effectiveness**

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**Objectives/aims**

Occupational injuries are estimated to have cost the Australian economy A$61.8 billion, or 4.1% of GDP, in 2013/14. Nearly three-quarters of the cost is borne by injured worker themselves. In addition to the expense, long work absences worsen physical, mental, and social health outcomes. Workplace-based interventions may be the best avenue to improve outcomes and reduce disability durations. We look at stressfulness of interactions with workplace-based Return-to-Work (RTW) Coordinators and RTW plans, which in the Victorian system is within their remit.

**Methods**

We examined the impact of low-stress interactions with a RTW Coordinator and RTW plans on sustained (≥ one month) RTW outcomes using longitudinal survey data from *n* = 632 injured Victorian workers with either a mental health or upper-body musculoskeletal occupational injury. Each participant was interviewed at baseline (~4 months post-injury) and follow-up (~10 months post-injury). Responses were analysed using multivariable logistic regression analyses, adjusted for demographics and confounders that affected the statistical association between either intervention and RTW outcome by ≥ 10%.

**Main findings**

Half the sample did not have a RTW plan by baseline and 40% had no interaction with a Coordinator. One-sixth of those who did have a Coordinator interaction had high-stress interactions. In fully-adjusted models, only RTW plans were predictive of RTW at baseline, while low-stress interactions were predictive only at follow-up. The results suggest that differences in injured worker trajectory may determine which interventions are effective. Shorter-duration claims may benefit from prescriptive interventions, while longer-duration claims may need more consideration of psychosocial factors.