The Role of Disability Management Practices in the Long-Term Employment Retention of Individuals with Disabilities

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Abstract

The goal of this research study was to examine the strategies and supports that are most effective for assisting persons with disabilities to maintain employment and advance their careers. To that end, the present study was designed to better understand the current status of demand-side activities used by progressive employers to promote the general retention of their workforce, and how these practices and strategies can be optimized to include people with disabilities. This paper presents the preliminary, descriptive findings from a survey designed to assess these practices that was conducted with employer members of the Disability Management Employer Coalition (DMEC) by the Rehabilitation Research and Training Center of Virginia Commonwealth University in collaboration with DMEC.

The paper presents employer ratings of important practices currently used by employer organizations to promote the general retention of their workforce, as well as those used specifically to prevent health risk and injury, manage health conditions, restore function and accommodate limitations to sustain productive employment for absence and disability management efforts. Results are also presented regarding employer ratings about the perceived status of program efforts and their effectiveness and the factors motivating absence and disability management efforts. Results are also presented for the current practices reported by these employers regarding diversity, the inclusion of disability in their diversity efforts, and their levels of hiring and views regarding the value of hiring new employees who have disabilities.

I. Introduction

The overall level of employment among people with disabilities has remained relatively unchanged, despite many successful interventions and systems of services to assist people with disabilities to be hired into jobs. This stagnant level of workforce participation is likely due in part to the high rate of employment exits and separations by workers with disabilities. Until the ratio between job placements and job exits is more favorable, the net gain in employment for people with disabilities will be smaller than desired. Much greater understanding is needed about these exits, as well as the factors that contribute to their occurrence and approaches that can prevent or resolve them.

Retention is a major issue currently concerning employers. The aging of baby boomers is leading to skill shortages already, with a potential shortage in the labor market generally not far off. Controlling health care and benefit costs is another immediate concern of employers. We maintain that there is an unrecognized opportunity here for meeting employer needs for retention of skilled workers and controlling health care and benefit costs through successfully managing the health and disability conditions that employees develop over the course of employment, and retaining them at work through effective accommodation and support. It is known that successful employer efforts to sustain health and productivity can reduce the progression of private sector employees to public sector disability benefits (McMahon et al., 2004). Similar results have been demonstrated in

workers' compensation programs (e.g., Upjohn Institute/MSU studies) and with integrated disability benefits (e.g., NBGH, IBI).

The present study is therefore timely in its attempt to document and explore how employment policies can better incorporate practices that are effective in managing health conditions and disabling conditions for job retention. It can be presumed that developing best practices would assist employers to retain skilled workers and control health care and benefit costs by sustaining the employment of workers who develop disabling conditions through the provision of effective support and accommodation in the workplace. Increasing the proportion of employers who are able to support the duration of employment for workers who have or develop disabling conditions through best practices could reduce or delay the number of workers who leave employment and enter the Social Security Disability benefit system.

II. Research Questions

The purpose of the present study is to better understand the current status of demand-side activities related to retention, to explore the dynamics that influence their presence and their functioning, and consider how these can be optimized to include people with disabilities for long term employment. Specifically, the study explores the following research questions:

- What are the current best practices used by progressive companies to promote retention of their workforce?
- What are the current best practices used by progressive companies to promote absence and disability management of their workforce?
- How do these efforts relate to and affect the retention of employees in general and the stay at work/return to work of people who develop health conditions or disabilities?
- How do these efforts relate to the presence and success of people with disabilities in the workplace, including the likelihood that they will be recruited and hired, and their chances of remaining employed?

III. Design and Research Methodology

The approach to this project was reconceptualized, to incorporate the knowledge gained about retention from research activities involving the study of the relationship between specific disability management practices and the successful job retention of persons with significant disabilities. These findings are presented in this monograph: Organizational Factors that Facilitate Successful Job Retention of Employeeswith Health Impairments and Disabilities.   Constructs to use as the basis for developing the survey items could be developed from the literature review

and from the employer case study findings that already were known to be associated with successful retention and effective disability management. We also determined that using a sample of employers known to be knowledgeable about and involved in disability management would provide a better basis for assessing the importance of practices and reporting experience.

Thus, the focus changed to identifying the practices reported to be most important for successful workforce retention and for successful absence and disability management and to explore how practice ratings are associated with reported outcomes and how disability management practices may relate to retention outcomes. Finally, because this sample of employers was known to be more familiar with the topic of disability and their association endorsed the study, we believed we could also explore their views about and experiences in hiring people with existing disabilities. This would let us also explore whether there is a relationship between an organization's opinions about and engagement in effective retention and disability management and their reported opinions and engagement in employing people with disabilities.

The employer members of the Disability Management Employer Coalition (DMEC) were selected as the survey sample because of their proficiency and interest in the areas of recruitment and retention, employee health and productivity, and integrated disability management and the relative heterogeneity of its membership. This association consists of 1,500 members in 39 states, 66% of whom are employer members representing 400 different organizations. These employers encompass a wide array of industries, sizes, and geographic locations.

A focus group meeting was held with the Employer Advisory Board of the DMEC in May, 2007 to examine current practices related to retention and disability management. Focus group participants identified a number of current challenges in HR management, such as the constant pressure to "do more with less." The group also identified a broad range of strategies and considerations for the successful retention of employees, emphasizing tools and opportunities for career development and effective leadership and guidance. Participants described some of the challenges and opportunities frequently faced by DM staff, and the importance of shifting from a reactive (return to work only) to proactive (prevention and early intervention) role to improve DM programs and outcomes. A variety of suggested practices for delivering and evaluating DM services were identified, including clearly described policies and procedures, and standardized indicators of program performance. [See complete report in Appendix A.]

A survey was developed to determine the relative importance of factors hypothesized to contribute to the retention of general employees in employment. The content of the survey was developed from a complete review of the focus group results, the comprehensive literature review, and the findings to date from

the case studies for Project 3: The relationship between specific disability management practices and successful job retention of persons with significant disabilities. Constructs identified from the comprehensive literature search on retention (Organizational Factors that Facilitate Successful Job Retention of Employees with Health Impairments and Disabilities) were reviewed by the authors and developed into items for the survey. The same process was used to develop items from the constructs identified in the literature review that contribute to absence and disability management (i.e., safety and prevention, wellness, and early intervention, disease and disability management, accommodation and return to work). A third section was developed to explore the linkage between retention and disability management practices and the organization's activities and attitudes toward diversity and employees with disabilities. The final section of items was constructed to collect the basic demographic information needed to describe the respondents (job title, number of years in DM related work) and their organization (industry, number of employees and locations). Constructs were also identified from the case study reports and from the focus group report, and were used to refine and substantiate the constructs developed from the literature.

The instrument was reviewed and edited by two experienced researchers who have conducted research on disability management and employment practices with employers. The revised draft was provided to the employer members of the RRTC Business Roundtable for business members to provide feedback. The subsequent revision was reviewed by the executives of the employer organization for item relevance, clarity and length. This proposed version was uploaded to the VCU-RRTC web site and a pilot test was conducted with the DM/HR representative of each of the four organizations participating as case study employers for Project 3 and the administrator of the employer organization. Each respondent completed the instrument for their organization and replied with suggestions for revisions to improve the clarity, relevance and length of the survey. Again, the survey was edited and reduced and the revised final version uploaded for survey administration. The survey was estimated to take 15 minutes to complete when reduced.

The final instrument consisted of the following: Section I: Retention Practices (20 items; 18 items rating practices; 2 items rating impacts achieved); Section II: Absence and Disability Management Practices (ADM) (26 items; 23 items rating practices; 3 items rating motivations and impacts); Section III: Exploring Potential Connections Between Absence and Disability Management Efforts and General Recruitment/Retention Efforts (13 items; 6 items rating the contribution and recognition of the A&DM function for retention; 6 items rating practices and views about hiring people with known disabilities and the potential impact of A&DM on hiring); and Section IV: Demographic Information (6 items; 2 about the respondent; 4 about the organization). This product is presented in Appendix B of this paper.

III. Survey Administration

A summary of the focus group findings was sent out in the newsletter and made available at the DMEC annual conference, announcing the upcoming electronic survey and encouraging participation by the CEO. Two weeks prior to the survey's administration a notice was included in the email bulletin sent to the membership from the COO. A letter was sent to the employer members from the CEO and the Project Director, explaining the survey, inviting participation, and addressing informed consent requirements (see Appendix C). Three days later, an email was sent to the employer members from the Project Director with the study link (see Appendix D). One week later, a reminder was sent to all participants encouraging their reply if they had not yet participated. This process was repeated three more times, until the number of respondents neared 100.

The employer email list consisted of approximately 732 individuals, representing approximately 400 employers. Because this was a study of practitioners' perceptions of practice importance, each individual name was considered to be a unique respondent, regardless of employer. However, some large employers gathered staff together to develop their ratings and designated one staff person to reply. Eighty were returned with undeliverable email addresses. The association administrator confirmed that this is the expected rate of successful emails to this group, due to rapidly occurring changes in positions, locations and employers in the private sector. A total of 650 are assumed to have received the survey. The final number of 95 represents 15 % of the reachable sample.

IV. Results

The descriptive findings are presented in this report. Because most of these are self-explanatory and do not explore analytical questions to interpret; only the highlights will be mentioned in this report.

As expected, the respondents represent a wide distribution of industries (and job types), with the largest proportions coming from healthcare and manufacturing. A complete breakdown of participating industries are presented in Figure 1 on the following page The organizations varied in the number of people they employ, although the majority (53%) is large employers (10,000 or more). Only 5% of the sample employs less than 500 people, so the results should not be assumed to represent the experience of small employers (see Figure 2 on the following page for a breakdown of organizations by size). The respondents ranged widely in their years of experience in absence and disability manangement. Nearly 20% have less than 3 years experience,

while nearly 25% have from 17 to 33 years in this work. Figure 3 on the following page provides a complete breakdown of DMEC respondents' years of experience with absenteeism and disability management programs. It will be interesting to see if ratings of practice importance, program performance, and orientation toward hiring people with disabilities are different for people with more and less experience in this work and in different types of employer organizations (industry type and size).

Figure 1: Industries Represented by DMEC Survey Respondents

Industry

- Healthcare
- Education
- Finance, insurance, and real estate
- Manufacturing
- Transportation, communications, electric, etc.
- Retail trade
- Public administration
- Other
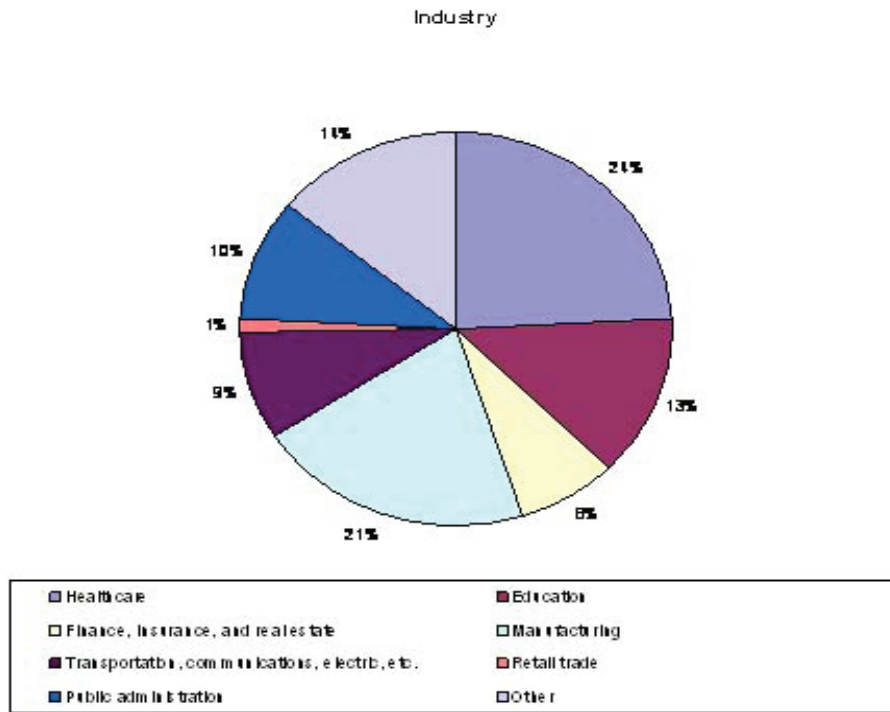
Figure 2: Employment Level of DMEC Survey Respondents
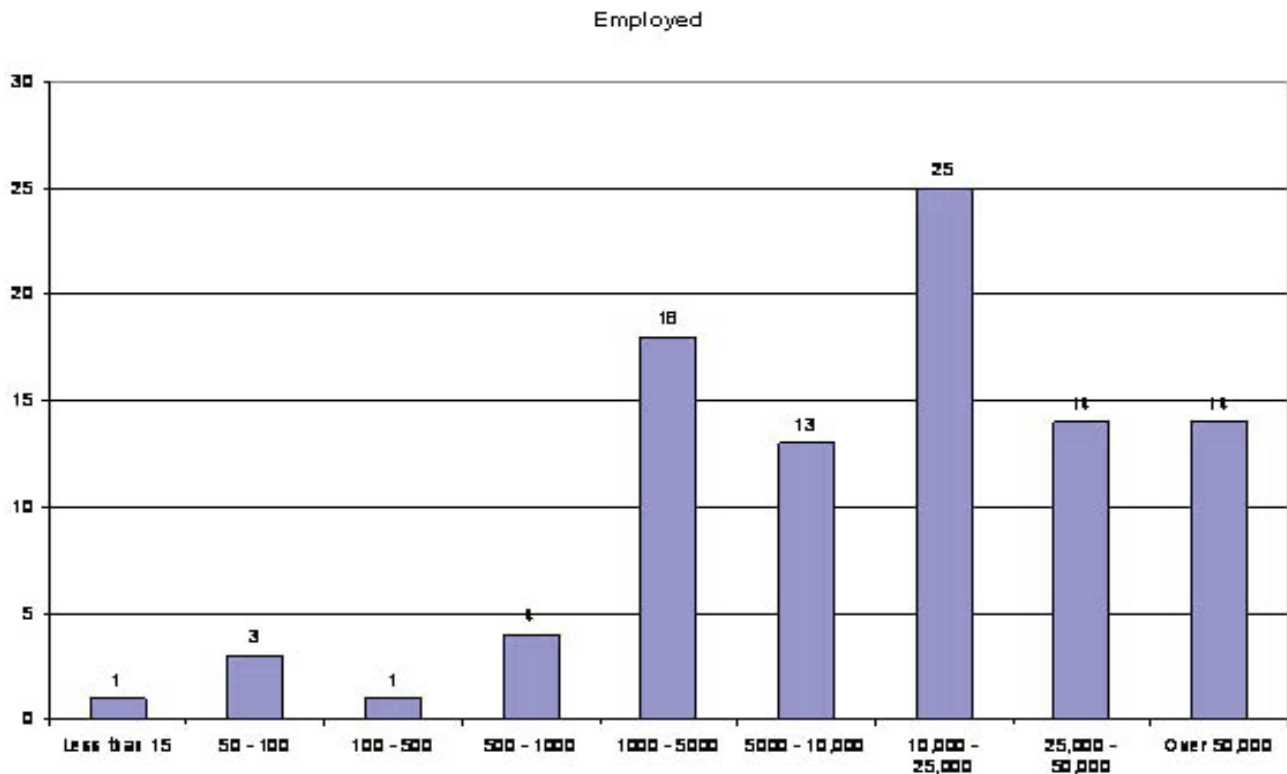
Employed

4
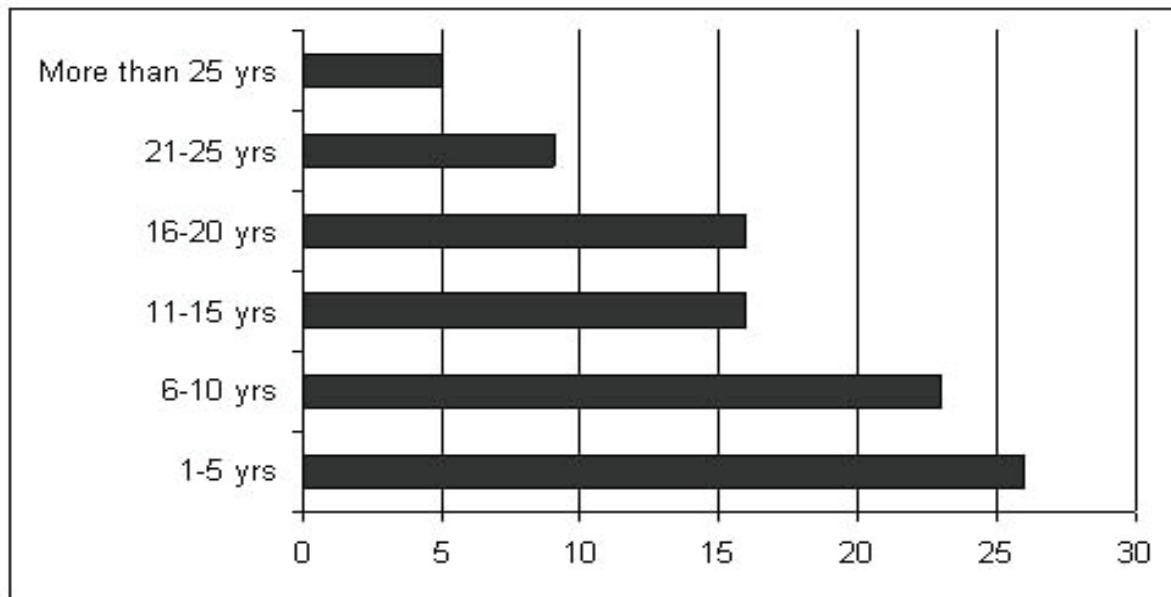
The remainder of the results are displayed in Appendix E. As expected, all of the retention practices were rated to be considerably or very important, as consistently documented in the literature review. The 5 items rated as most important for retention depict a positive corporate culture characterized by trust, equity, openness and involvement, as found in previous research. Variations in ratings will be analyzed with reported program performance to explore their potential relationship. It does seem safe to say that the respondents have validated the items in the retention practices scale as capturing important dimensions of employer efforts to retain their workforce. Interestingly, flexibility in work arrangements and productivity demands, suggested in our case study reports and in the disability management literature as being key to continued employment when health conditions arise, were rated lowest among the factors rated as affecting general retention, with benefits and wage levels being rated highest.

Most respondents rated the effectiveness of their organizations' retention efforts to be at least moderately effective (nearly 90%) with the majority claiming to be very or highly effective (56%). Those at the extremes (roughly 10%) can be used to see if there are important differences between these groups in the practices rated most important.

Most of the absence and disability management practices were rated as important, with 7 items rated clearly as very important. These top seven capture the central tenets of disability prevention and management that have been reported in the literature, including a clear and consistently applied RTW process, supervisor buy-in with RTW, an employee-oriented organizational culture, targeting upstream with safety and risk prevention, an integrated approach (nonoccupational and occupational causes, FMLA, etc.) to benefit and claim/case management, directly assisting supervisors at the job site to make accommodations, and

providing very early intervention for all types of health and injury incidents.

There was less agreement about the relative importance of some other aspects, such as the having a designated coordinator, professional training, mental health, EAP and wellness interventions, access to open positions, and integration with overall health and productivity. Yet many of these practices are mentioned by practice leaders and in the professional literature as cutting edge aspects for realizing the full potential of absence and disability management efforts in health, productivity and retention. Again, it will be important to see if there are differences in the ratings of these practices by respondents with high program performance ratings as compared to their peers who report their efforts to be less well developed.

Interestingly, respondents report retention of employees to be the most important factor motivating their absence and disability management efforts. This is a important finding, as it would suggest that employers may become motivated to adopt accommodating practices if they can be demonstrated to facilitate general employee retention; yet their mean rating of the overall contribution of their absence and disability management efforts to employee retention tend to be moderate. Do respondents who rate this contribution higher, also rate their programs to be more effective and endorse practices items differently; or is this a good estimate of the extent to which absence and disability management can contribute to overall retention, relative to other factors that are known to impact retention. The distribution is similar regarding the ratings of effectiveness of absence and disability management efforts in delaying or preventing exits due to health conditions and other impairments.

As expected, respondents rate their organizations as being farthest along in the development of their return to work efforts,

followed by their efforts in preventing health and injury risks, and last in their efforts to improve and manage health conditions. These developments mirror the evolution of absence and disability management. Respondents are mixed in their opinions about the potential for external incentives to be effective for employer efforts to prevent job exits from health conditions or disability. There is a generally positive range of expectations regarding the potential for absence and disability management practices to be helpful in the organization's efforts to hire and accommodate new employees who have disabilities.

In general, respondents reported quite favorable expectations and experiences in hiring employees with known disabilities; although there are mixed expectations about the benefit cost risk their hiring entails. It will be valuable to understand how practices and experiences in retention and in absence and disability management and organizational flexibility in placement of employees may be related to these more and less favorable ratings regarding employment of people with disabilities.

V. Discussion and Conclusions

These practices appear to have important implications for improving the long term retention of people with disabilities; either by preventing or delaying their exit from employment through policies and practices that support and accommodate, or by encouraging their entry into employment due to the favorable and open practices they use in recruiting and retaining a diverse work force.

Questions to be addressed in the next phase of analysis will include the following:

1. Are practice ratings related to reported performance?
2. Do organizations that report high performance view different practices to be most (and least) important?
3. Is performance in ADM related to retention?
4. What factors distinguish organizations that have successfully achieved prevention, health management, and RTW efforts?
5. Do organizations that report more activity and higher expectations regarding hiring people with disabilities differ from other employers in their practices or performance in ADM and retention?
6. Are years of experience in absence and disability management associated with practice ratings and expectations regarding employees with disabilities?
7. Analyze the relationships among absence and disability management practices and general employee retention, diversity, and hiring practices.
8. Identify the factors associated with reported program effectiveness and implications for program development.
9. Identify potential public policy implications of effective employer practices for hiring and retaining people with disabilities in employment.
10. Consider the potential for public policy to encourage employer best practices.

Future discussion will explore the implications of the analytical findings for program development and for public policy. Particular focus will be given to the questions of how absence and disability management efforts support workforce retention in general, and how retention efforts for the general workforce can be optimized to include employees who have or are at risk for developing health conditions, injuries and disabilities. Finally, the use of public policy and incentives for preventing or delaying exits from employment will be considered.

References

Habeck, R., Yasuda, S., Rachel, C., and Kregel, J. (2008). Organizational Factors that Facilitate Successful Job Retention of Employees with Health Impairments and Disabilities. In P. Wehman, J. Kregel & V. Brooke, Virginia Commonwealth University Rehabilitation Research and Training Center on Workplace Supports and Job Retention : Research Outcomes Improving the Employment of People with Disabilities, Richmond, VA: The Virginia Commonwealth University Rehabilitation Research and Training on Workplace Supports and Job Retention.

Habeck, R. and Kregel, J. (2007) DMEC and VCU partner on employee retention study: Preliminary results are released. (Research Brief): Richmond, VA: The Virginia Commonwealth University Rehabilitation Research and Training on Workplace Supports and Job Retention. Summer, 2007.

McMahon, B.T., Danczyk-Hawley,C.E., Reid, C., Flynn, D., Habeck, R., Kregel, J., and Owens, P. (2000). The progression of disability benefits. Journal of Vocational Rehabilitation 15: 1-16.

DMEC and VCU Partner on Employee Rentetion Study: Preliminary Results are Released

Appendix A

DMEC and VCU Partner on Employee Retention Study:

Preliminary Results are Released

July, 2007

Virginia Commonwealth University Rehabilitation Research & Training Center on Workplace Supports & Job Retention

DMEC is collaborating with the Rehabilitation Research and Training Center at Virginia Commonwealth University (VCU) on a study that will identify the activities currently used by progressive employers to promote the retention and productivity of their workforce, and to explore the ways in which these activities can be optimized to include employees who have or are at risk for developing health conditions, injuries and disabilities. VCU is funded by the The National Institute on Disability and Rehabilitation Research (NIDRR) of the U.S. Department of Education to examine the strategies and supports that are most effective for assisting people who have disabilities to maintain employment and advance their careers.

This fall DMEC will partner with VCU to conduct a survey of its members to identify retention practices and explore their relationship with DM efforts. To develop the most relevant survey possible, the VCU study team conducted a focus group with DMEC board members in May 2007 that examined current practices related to retention and disability management. The major findings from this conversation are summarized below.

Current Challenges in Human Resource Management

The focus group members identified a number of current challenges in HR management. A central issue is the constant pressure to "do more with less." Many organizations increasingly need workers to have broader skills and to broad array of job functions due to reductions in workforce size from downsizing or work restructuring efforts. Yet, it is very difficult to attract, train, and retain enough qualified new workers who have the necessary level of skill and productivity required to be competitive. Increased productivity demands compete with the HR strategies needed to attract and retain workers, especially supporting the work-life balance that meets the high expectations of the new generation. The large proportion of skilled, experienced and productive workers who are reaching retirement further compounds this issue.

Providing the benefits and supports needed to attract and retain valuable workers while balancing health care costs and reducing risks for an aging workforce is viewed as a major challenge. Also, the current business climate negatively affects health, by increasing the prevalence of stress-related health problems (e.g., depression, GI symptoms). In turn, the vital need for health insurance keeps many people working longer to older ages, even when they experience declining health and functional capacity. This results in a greater need for supports to accommodate older workers.

Strategies for Workforce Retention

Focus group participants identified a broad range of strategies and considerations for the successful retention of employees. Pay that is market equitable and competitive for the job type is viewed as important for attracting and retaining employees at all levels, but the group members emphasized that money alone is not sufficient to retain valued workers.

Providing tools and opportunities for career development and advancement is valuable to employees at all stages. To improve retention, employees' needs should be assessed, and training offered both for those who want to develop themselves and for those who wish to advance within the organization. Successful programs have linked tuition assistance to a specified duration of employment upon completion of coursework. Vesting earlier for retirement is used as a strategy to attract younger skilled workers who plan to stay for a shorter duration and advance their careers through mobility.

Effective leadership and guidance can contribute to retention efforts. Group members identified strategies such as a formal mentoring program for new hires; a leadership rounding process to improve the quality of supervision, and a progressive performance management approach that rewards good performance and addresses poor performance as key elements of overall effects to increase employee satisfaction. Employee surveys are viewed as a valuable tool for revealing new ways to "re-recruit" employees by addressing their particular needs, such as increased flexibility in work arrangements (e.g., schedule, hours, telecommuting, job sharing, allowing time for community service, etc.).

Strengthening successful retention practices can avoid or reduce many unmeasured costs of replacement. Obvious costs incurred by turnover include direct expenses for recruitment efforts, relocation costs, training costs, and increased salaries to compete for new talent. Indirect costs result from lower productivity during the time it takes new employees to become trained and assimilated to the workplace culture, to rebuild team strength and synergy, and to regain efficiency lost from the departure of experienced employees.

Current Challenges and Opportunities in Disability Management

Focus group participants also described some of the challenges and opportunities frequently faced by DM staff. Many companies do not yet see DM functions as part of their retention efforts or consider the contribution of DM activities in evaluating retention outcomes. Hiring staff typically do not recognize the value of assisting DM staff to accomplish repositioning or job transitions (temporary and permanent placements into suitable vacant positions in the firm) when workers are unable to be accommodated in their own jobs or departments.

The number of employees who need modified or restricted duties is large and increasing with an aging workforce. There is significant need for innovation in creating modified work options for employees with restrictions, especially in workplaces where many jobs involve essential functions that are physically demanding. Although many organizations have developed DM organizational structures, processes and policies, there is often a gap in their capacity to deliver these services on the front lines. Supervisors want and need more direct assistance in carrying out the DM process and in working out accommodations for RTW.

DM is not yet generally recognized as part of a comprehensive absence prevention program. Within the organization, DM needs to be linked with health, safety and other prevention efforts, in order to fully monitor and analyze incidence, trends, and outcomes and develop proactive solutions. Shifting from a reactive (RTW only) to a proactive (prevention and early intervention) role will improve DM programs and outcomes. Focus group participants felt that few companies are dealing with occupational and nonoccupational absence claims together in an integrated manner that better manages time away from work to improve health care utilization and leads to more timely return to work from all causes.

Strategies for Delivering and Evaluating Disability Management Services

Group members described a variety of strategies and solutions that could improve the quality of DM programs. Positive and effective contact with each employee who is absent from work by an experienced person representing the company is still the foundational element for successful RTW. Early contacts should include written communication that provides detailed information about the DM process and options available, establishes a framework of care, and communicates about resources available to help the employee.

The most effective DM programs fit the culture of the organization. They establish an infrastructure for DM within the company that clearly describes the policies, processes, roles, phases and procedures used in DM/RTW, including an interactive process to develop accommodations and a review committee to address complexities. They communicate with labor organizations in the DM effort and involve the EAP in the DM process and program.

Companies with effective programs hire people in DM roles who have the necessary attitudes, skills, and professional certification (e.g., CPDM). They use case managers who can "think outside the box" to develop creative solutions that are effective with all types of employees. Supervisors should also be trained to effectively participate in the accommodation and RTW processes, with DM specialists directly assisting them in designing accommodations.

Focus group participants identified a number of desirable outcomes that result from successful DM programs, including reduced payroll costs for time off for illness, for injury, and for disability measured as a percent of payroll; lower total operating costs for the organization; and reduced total claims man

agement expenses. Preventive outcomes include maintaining productivity, lowering organizational risks, and fewer legal claims. Qualitative outcomes include the organizational understanding and valuing the potential contribution of employees with work limitations, successful transitions into new positions when RTW to the previous job is not possible, and perceptions of the DM role as a valuable resource to employees and managers.

Indicators of program performance need to be standardized (e.g., costs as a percent of total payroll; incidence rates as a percent of total FTEs) and include frequencies of claims, benefits use and costs; days off work and restricted days; RTW rate; litigated claims or grievances; and savings from prevention of losses and wellness investments.

Hiring New Employees with Disabilities

In many organizations, recruitment focuses solely on qualifications and does not consider disability. Focus group members believe organizations routinely hire people with disabilities if they are qualified for the job. When accommodations are minor, they are typically provided if the business is able, and few accommodation needs rise to the level of consideration under ADA.

Disability is not typically recognized as a specific group in diversity efforts. In the current economic climate and labor market, employers are trying to retain and develop their existing employees and keep them healthy and productive, and devote little time to recruiting employees from special groups. DM is helping internal retention through new placement of individuals who are unable to RTW to their own jobs due to health or disability limitations. Data points need to be identified that demonstrate the value to the organization of retentions that are accomplished by DM.

DM professionals do not view hiring people with disabilities as a benefit cost risk. They do believe that helping employers build their infrastructure to successfully manage their own employees who develop health issues or become disabled may make employers less fearful and more willing to hire people with known disability. Although focus group participants see DM bearing significantly on retention, currently they see no impact on hiring.

Final Phase: DMEC Survey

Disability management appears to have great relevance to preventing the exit of employees due to health conditions, aging, and other factors associated with disability. The coming survey will seek your input in documenting these practices and demonstrating the relationship between disability management and the retention efforts of employers. The potential application of these strategies to diversify efforts in recruiting and hiring qualified people with disabilities will also be explored.

We need your help in order to make this survey successful. Please watch your email box for an invitation to participate in this survey in the fall of 2007. Your time to complete the survey will insure that we obtain a large and diverse sample of employers. Final study results will be released to DMEC members when completed.

For more information contact:

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FINAL SURVEY INSTRUMENT

DMEC and VCU -- Workforce Retention, Absence and Disability Management Study

Appendix B

DMEC-VCU
WORKFORCE RETENTION, ABSENCE AND
DISABILITY MANAGEMENT STUDY

Thank you for participating in this research. The purpose of the study is to document (1) the activities currently used by employer organizations to promote the general retention of their workforce, (2) the activities used specifically for Absence and Disability Management (A&DM) efforts, and (3) how Absence and Disability Management efforts support workforce retention in general. In this study, Absence and Disability Management efforts refer to activities to prevent health risk and injury, manage health conditions, restore function and accommodate limitations to sustain productive employment.

The survey takes approximately 20 minutes to complete. The survey is organized into the three topic areas. The first section asks you to share your opinions on the contribution of various retention practices. The second section asks you to focus specifically on the contribution of various Absence and Disability Management practices. The third section explores the ways in which the previous two topics may be potentially related.

Please select the responses that reflect the importance of these activities in your experience. Keep in mind that there are no incorrect answers, and none of your responses will be associated in any way with your name or that of your organization.

TOPIC I - Retention Practices

In this section, we would like your opinions about the importance of practices your organization may be using to promote overall employee retention, and the factors that motivate these practices.

Importance of Specific Retention Practices

Please use the five-point scale to rate how important you think each of the following practices is in contributing to successful retention, based on your experience. If the statement does not apply to your experience, select N/A.

Not important at all   Very important

    1   2   3   4   5

1.	Compensation is set fairly, in accordance with responsibility, performance and market competitiveness	1	2	3	4	5	N/A
2.	The organization has a compelling mission and clear vision	1	2	3	4	5	N/A
3.	Employees are engaged with the organization and their jobs	1	2	3	4	5	N/A
4.	Managers are seen as credible, employees are respected, and fair and equitable treatment is expected	1	2	3	4	5	N/A
5.	Managers recognize the impact of employee job satisfaction on quality of performance, productivity, and health	1	2	3	4	5	N/A
6.	Leaders are open and communicate honestly and effectively	1	2	3	4	5	N/A
7.	Employees are made aware of how their job and performance fit into the organization's mission	1	2	3	4	5	N/A
8.	Employees are listened to, their ideas are sought out, and they are involved in decisions that affect how they get their work done	1	2	3	4	5	N/A
9.	Employee surveys are conducted regularly (e.g., annually) and the results are used to target change	1	2	3	4	5	N/A

10. Employees are made aware of all the benefits and services provided and available	1	2	3	4	5	N/A
11. Employee benefit packages offer choice, flexibility, and customization	1	2	3	4	5	N/A
12. Mentoring and support is available for new employees	1	2	3	4	5	N/A
13. Leadership and supervisor development is available	1	2	3	4	5	N/A
14. Tools and opportunities are provided for career advancement and personal development	1	2	3	4	5	N/A
15. Managers use a flexible and supportive approach to work arrangements (e.g., working from home)	1	2	3	4	5	N/A
16. Longevity is rewarded	1	2	3	4	5	N/A
17. Physical work environment is safe and attractive	1	2	3	4	5	N/A
18. Other:	1	2	3	4	5	N/A

Implementation of Retention Practices

19. Please rank the following factors from 1 (least significant) to 5 (most significant) based on how much you think each factor affects employee retention in your organization:

Not a factor   Very significant factor

1   2   3   4   5

(a)	Wage levels	1	2	3	4	5
(b)	Benefits	1	2	3	4	5
(c)	Company culture	1	2	3	4	5
(d)	Productivity demands	1	2	3	4	5
(e)	Flexibility in work arrangements	1	2	3	4	5

20. How effective would you say your organization's efforts are at this point in retaining valued employees?

Very ineffective   Very effective

1   2   3   4   5

TOPIC II - Absence and Disability Management Practices

In this section, we are interested in your opinions about the importance of specific Absence and Disability Management practices your organization may be using to sustain the health and continued employment of workers who experience potentially job-threatening health conditions, and the factors that motivate these practices.

Importance of Specific Absence and Disability Management (A&DM) Practices

Please use the five-point scale to rate how important you think each of the following Absence and Disability Management practices is in contributing to successful retention in your organization. If the practice does not apply to your organization, select N/A.

	Not important at all				Very important	
	1	2	3	4	5	
1. Achieving ownership (buy-in) with supervisors about the value of RTW (Return to Work)	1	2	3	4	5	N/A
2. Using an integrated approach to benefits administration and claims/case management	1	2	3	4	5	N/A
3. Targeting wellness interventions to various worker group needs, including aging workers	1	2	3	4	5	N/A
4. Coordinating with safety and risk prevention to target improvements upstream	1	2	3	4	5	N/A
5. Incentives for health and safety behaviors (e.g., rewards or premium reduction)	1	2	3	4	5	N/A
6. Disincentives for health risk behaviors (e.g., increased health premium)	1	2	3	4	5	N/A
7. Training supervisors on the A&DM/RTW process, how to make accommodations and carry out their role	1	2	3	4	5	N/A
8. Having a A&DM/RTW coordinator on site	1	2	3	4	5	N/A
9. Having A&DM staff with professional training in A&DM and related fields (e.g., CDMP, occupational health nurse)	1	2	3	4	5	N/A
10. Having sufficient work tasks or jobs identified and available for transitional and modified duty placements when needed	1	2	3	4	5	N/A
11. Providing workplace flexibility to develop creative and effective accommodations	1	2	3	4	5	N/A
12. Providing prioritized hiring of qualified employees into open positions when they are unable to return to their own job/department due to limitations	1	2	3	4	5	N/A
13. Providing direct assistance to supervisors at the job site, when needed, to work out accommodations and supports for employees returning to work or attempting to stay at work with a physical or mental health impairment	1	2	3	4	5	N/A
14. Having active involvement of an EAP in addressing needs and working out solutions for SAW/RTW (Stay at Work/Return to Work)	1	2	3	4	5	N/A
15. Having the capacity to address and accommodate mental health issues	1	2	3	4	5	N/A
16. Providing very early intervention for nonoccupational and occupational cases	1	2	3	4	5	N/A
17. Quantifying and managing all absences	1	2	3	4	5	N/A
18. Using a data system for case identification and monitoring	1	2	3	4	5	N/A
19. Connecting A&DM/RTW with overall health, productivity and absence management (structural linkage and reporting relationships)	1	2	3	4	5	N/A
20. Having consistently applied guidelines and procedures for the return to work process	1	2	3	4	5	N/A
21. Having cooperation and assistance from HR staffing personnel in placing workers who cannot go back to own job in open positions	1	2	3	4	5	N/A
22. Having a company culture that is employee-oriented	1	2	3	4	5	N/A
23. Other:	1	2	3	4	5	N/A

Implementation of Absence and Disability Management Practices

24. Please rank the following factors from 1 (most important) to 5 (least important) based on how important you think they are in motivating your organization's Absence and Disability   Management efforts.

    ___ Controlling cost of employee benefits
    ___ Preventing absence
    ___ Maintaining health and productivity
    ___ Retaining employees in the organization
    ___ Legal compliance

25. How far along do you think your organization is in each of the following components of a   comprehensive approach to Absence and Disability Management?

Beginning Stages   Successfully Achieved

1   2   3   4   5

		1	2	3	4	5
(a)	Preventing health/injury risks and disability from occurring	1	2	3	4	5
(b)	Improving health and managing health conditions	1	2	3	4	5
(c)	Resolving disability and bringing back to work	1	2	3	4	5

26. Please provide any comments regarding your organization's Absence and Disability Management efforts here:

_____

_____

_____

TOPIC III - Exploring Potential Connections between Absence & Disability Management Efforts and General Recruitment/Retention Efforts

In this section, we are interested in your opinions about the potential relationship between your organization's efforts in Absence and Disability Management and general recruitment and retention.

1. How effective do you think your organization's overall Absence and Disability Management effort is in delaying or preventing exits of employees from employment due to health conditions and other impairments (related to aging, injury, mental health, etc.)?

    ___ Not at all
    ___ Slightly
    ___ Moderately
    ___ Very
    ___ Don't know

2. Overall, how much do you think your organization's Absence and Disability Management efforts contribute to overall employee retention?

    ___ Not at all
    ___ Slightly
    ___ Moderately
    ___ Greatly
    ___ Don't know

3. To what extent do you think organizational leaders and HR recognize this contribution?

    ___ Not at all
    ___ Slightly
    ___ Moderately
    ___ Greatly
    ___ Don't know

4. To what extent do you think the general appeal of your organization, as an employer, impacts the incidence and outcomes of disability claims?

    ___ Not at all
    ___ Slightly
    ___ Moderately
    ___ Very much
    ___ Don't know

5. To what extent is the organization able to place employees who cannot be accommodated in their own jobs into another position within the organization?

    ___ Rarely
    ___ Sometimes
    ___ Usually
    ___ Don't know

6. To what extent do you think it would be effective for employers to be incentivized externally (e.g., tax credit) for successfully preventing job exits due to health conditions or disability?

    ___ Not at all
    ___ Slightly
    ___ Moderately
    ___ Very much
    ___ Don't know

7. To what extent is your organization involved in diversity efforts?

    ___ Not at all
    ___ Slightly
    ___ Moderately
    ___ Very much
    ___ Don't know

8. To what extent do your organization's diversity efforts include people with disabilities?

    ___ Not at all
    ___ Slightly
    ___ Moderately
    ___ Very much
    ___ Don't know

9. To what extent do you see people with disabilities as a viable source of labor for your organization?

        ___ Not at all
        ___ Slightly
        ___ Moderately
        ___ Very much
        ___ Don't know

10. To what extent does your organization hire people with known disabilities?

        ___ Never
        ___ Rarely
        ___ Sometimes
        ___ Frequently
        ___ Don't know

11. To what extent do you see hiring people with known disabilities as a benefit cost risk?

        ___ Not at all
        ___ Slightly
        ___ Moderately
        ___ Very much
        ___ Don't know

12. To what extent do you think Absence and Disability Management practices could be helpful in hiring and accommodating new employees who have disabilities?

        ___ Not at all
        ___ Slightly
        ___ Moderately
        ___ Very much
        ___ Don't know

13. If you have additional comments regarding your organization's Absence and Disability Management efforts and how they may relate to recruitment and retention efforts, please describe here:

_____

_____

_____

IV. Demographic Information

For demographic purposes, we would like to know a little more about you and your organization. Please remember that all responses will remain confidential and identifying information will be protected.

A. Respondent Information

   1. What is your job title? _____

2. How many years have you been involved in absence and disability management work?   _____ years

B. Organizational Information

1. Which best describes your organization's industry?

    ___ Healthcare
    ___ Education
    ___ Other Services
    ___ Finance, Insurance, And Real Estate
    ___ Manufacturing
    ___ Transportation, Communications, Electric, Gas, and Sanitary Services
    ___ Retail Trade
    ___ Wholesale Trade
    ___ Public Administration
    ___ Agriculture, Forestry, And Fishing
    ___ Construction
    ___ Mining
    ___ Other _____

2. How many people are employed by your organization?

    ___ Less than 15
    ___ 15 – 50
    ___ 50 – 100
    ___ 100 – 500
    ___ 500 – 1000
    ___ 1000 – 5000
    ___ 5000 – 10,000
    ___ 10,000 – 25,000
    ___ 25,000 – 50,000
    ___ Over 50,000

3. In how many locations does your organization operate?

    ___ 1
    ___ 2 - 10
    ___ 10 - 50
    ___ 50 - 100
    ___ Over 100

4. Where are your organization's operations located?

    ___ Locally
    ___ Within a single state
    ___ Regionally
    ___ Nationally
    ___ Internationally

**Thank you very much for being a part of our study. We greatly appreciate your time
and participation in this survey, and look forward to sharing the results with you very soon.**

Letter to Participants

Appendix C

January 9, 2008

Dear Members,

As announced in our newsletter, DMEC is collaborating with the Rehabilitation Research and Training Center at Virginia Commonwealth University (VCU) in a member survey. The study is funded by the National Institute on Disability and Rehabilitation Research (NIDRR) of the U.S. Department of Education.

This joint project is entitled **The Workforce Retention, Absence and Disability Management Study**. The survey will identify employee retention and absence and disability management practices currently used by progressive employers. The study will explore how absence and disability management practices can impact retention, and how retention efforts for the general workforce can be optimized to include employees who have or are at risk for developing health conditions, injuries and disabilities.

You are invited to take part in this important project, and your help is needed to make the study successful. Please watch your email over the next few days for the survey announcement. The email message will include the link to the survey and provide contact information for any questions or concerns you may have.

The study findings can benefit all of us, in documenting how our efforts can add value and contribute to organizational goals of retaining skilled employees, supporting the health and productivity of all workers, and controlling benefit costs. Our Board participated in a focus group with the researchers last spring to help them develop the best possible survey that reflects current issues and needs for enhancing our absence and disability management efforts.

We expect participants to benefit personally from "self-auditing" their programs as they reply to these questions developed from best practices. All participants will receive a briefing paper soon after survey administration, listing the top rated practices that can be used as benchmarks for their own program development efforts. The findings will also be reported later in our newsletter and discussed at the DMEC conference in July.

Please be assured that no identifying information will be collected about your name or your company's name. Your participation is totally voluntary. There is no risk anticipated with participation. The data security methods being used have been approved for protecting the confidentiality of participants' responses. VCU will not share identifying information that can be linked to responses. Only the results of the survey as a whole will be shared.

We hope you will be a part of this tremendous opportunity and we thank you very much!

Cordially,

Marcia Carruthers
President and CEO
Disability Management Employer Coalition

Rochelle V. Habeck, Ph.D.
Project Director
VCU/RRTC

E-mail to Participants

Dear DMEC Colleague,

At this time we invite you to participate in the DMEC-VCU Workforce Retention, Absence and Disability Management Study, which was fully described in our previous correspondence. You may now click the following link to access the survey:

http://www.worksupport.com/dmec/index.cfm

The survey must be completed in one sitting. It should take you 20 minutes or less. Please complete the survey by Wednesday, January 23rd.

Your participation is totally voluntary, and no identifying information will be collected about your name or your company's name. If you have questions or concerns about any aspect of this survey, or about the study as a whole, please feel free to contact me by email at Habeck@chartermi.net or by phone at 269-373-1239.

Thank you very much for your participation! We hope you find the survey to be useful to your work. Preliminary results will be shared with you soon after the survey is closed.

Rochelle Habeck, PhD
Project Director and Research Consultant
Rehabilitation Research and Training Center
Virginia Commonwealth University

Research Results -- Tables and Figures

Appendix E

Table 1: Rank Order of Sum Ratings of Importance of General Retention Practices

General Retention Practice	Sum
Question 2 The organization has a compelling mission and clear vision	408
Question 1 Compensation is set fairly, in accordance with responsibility, performance and market competitiveness	404
Question 3 Employees are engaged with the organization and their jobs	401
Question 4 Managers are seen as credible, employees are respected, and fair and equitable treatment is expected	400
Question 10 Employees are made aware of all the benefits and services provided and available	399
Question 6 Leaders are open and communicate honestly and effectively	391
Question 5 Managers recognize the impact of employee job satisfaction on quality of performance, productivity, and health	389
Question 17 Physical work environment is safe and attractive	388
Question 13 Leadership and supervisor development is available	383
Question 7 Employees are made aware of how their job and performance fit into the organizations mission	377
Question 8 Employees are listened to, their ideas are sought out, and they are involved in decisions etc	375
Question 14 Tools and opportunities are provided for career advancement and personal development	369
Question 11 Employee benefit packages offer choice, flexibility, and customization	366
Question 12 Mentoring and support is available for new employees	349
Question 16 Longevity is rewarded	346
Question 9 Employee surveys are conducted regularly (e.g., annually) and the results are used to target change	338
Question 15 Managers use a flexible and supportive approach to work arrangements (e.g., working from home)	335

Table 2: Rank Order of Sum Ratings of Significance of Factors Affecting Retention

Factors Affecting Retention	SUM
Question 19b Benefits	396
Question 19a Wage levels	395
Question 19c Company culture	343
Question 19e Flexibility in work arrangements	331
Question 19d Productivity demands	322

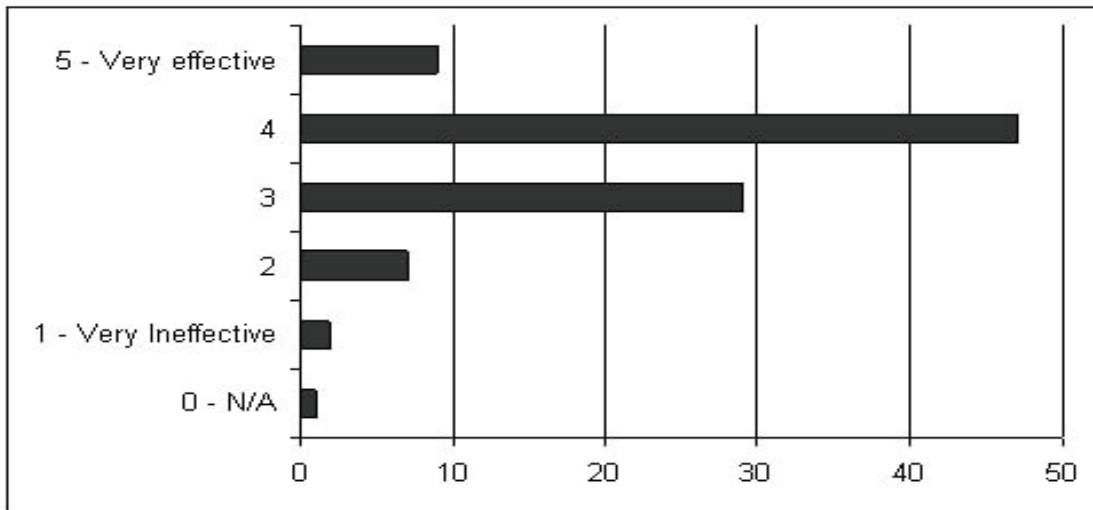**Figure 4:** Distribution of Effectiveness Ratings of Retention Efforts

Table 3: Rank Order of Sum Ratings of Importance of Absence and Disability Management Practices to Overall Retention

Factors Affecting Retention	SUM
Question 20 Having consistently applied guidelines and procedures for the return to work process	400
Question 1 Achieving ownership (buy-in) with supervisors about the value of RTW (RTW)	395
Question 22 Having a company culture that is employee-oriented	395
Question 4 Coordinating with safety and risk prevention to target improvements upstream	389
Question 2 Using an integrated approach to benefits administration and claims/case management	386
Question 13 Providing direct assistance to supervisors at the job site, when needed, to work out accommodations etc	385
Question 16 Providing very early intervention for nonoccupational and occupational cases	381
Question 11 Providing workplace flexibility to develop creative and effective accommodations	362
Question 7 Training supervisors on the A&DM/RTW process, how to make accommodations and carry out their role	361
Question 21 Having cooperation and assistance from HR staffing personnel in placing workers etc	361
Question 17 Quantifying and managing all absences	358
Question 10 Having sufficient work tasks or jobs identified and available for transitional and etc	355
Question 3 Targeting wellness interventions to various worker group needs, including aging workers	351
Question 14 Having active involvement of an EAP in addressing needs and working out solutions for SAW/RTW etc	351
Question 15 Having the capacity to address and accommodate mental health issues	341
Question 18 Using a data system for case identification and monitoring	337
Question 12 Providing prioritized hiring of qualified employees into open positions when they are unable etc	330
Question 19 Connecting A&DM/RTW with overall health, productivity and absence management	327
Question 9 Having A&DM staff with professional training in A&DM and related fields	322
Question 8 Having a A&DM/RTW coordinator on site	314
Question 5 Incentives for health and safety behaviors	307
Question 6 Disincentives for health risk behaviors	241

Table 4:   Rank Order of Sum Ratings of Importance of Factors Motivating Absence and Disability
Management Efforts

Factors Motivating A&DM Practices	SUM
Question 24d Retaining employees in the organization	320
Question 24e Legal compliance	294
Question 24a Controlling cost of employee benefits	281
Question 24b Preventing absence	275
Question 24c Maintaining health and productivity	255

Table 5:   Distribution of Sum Ratings of Progress Toward 3 Components of a Comprehensive Approach
to Absence and Disability Management

Components of A&DM	SUM
Question 25c Resolving disability and bringing back to work	348
Question 25a Preventing health/injury risks and disability from occurring	309
Question 25b Improving health and managing health conditions	294

Figure 5:   Distribution of Effectiveness Ratings of Absence and Disability Management Efforts in De-
laying or Preventing Exits Due to Health Conditions and Other Impairments (related to aging,
injury, mental health, etc.)
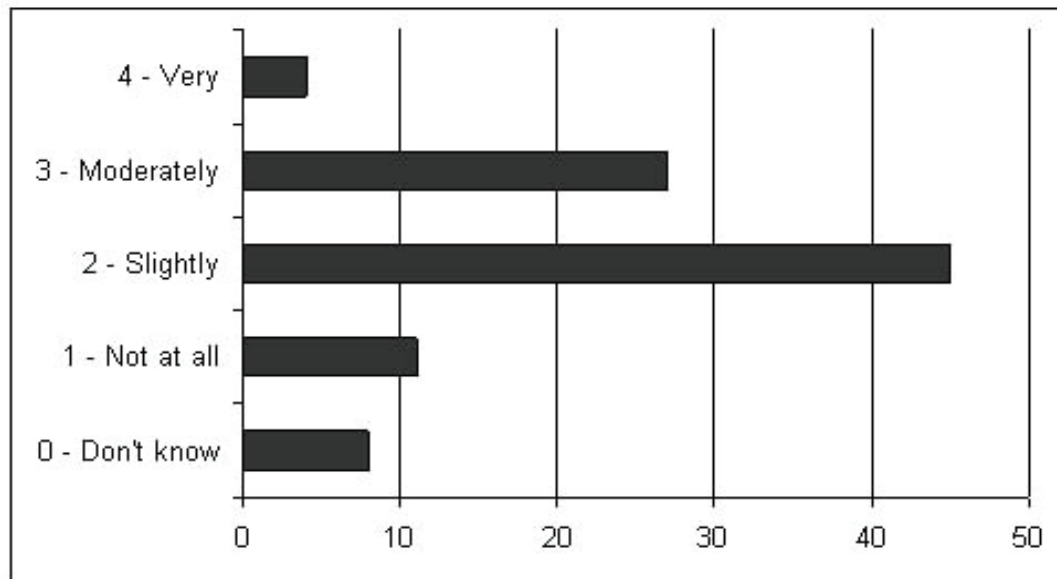
Figure 6: Distribution of Ratings of Absence and Disability Management Contribution to Overall Employee Retention
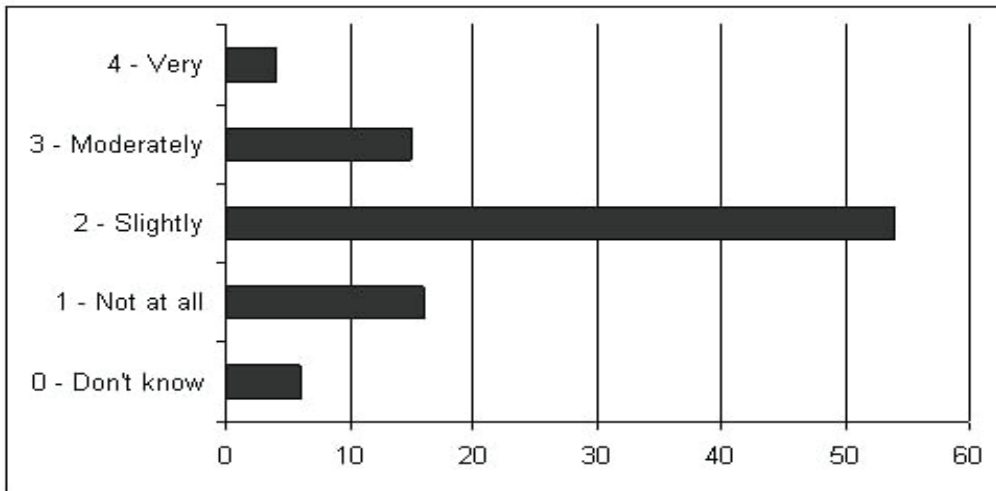
Figure 7: Distribution of Ratings of Leadership's Recognition of Absence and Disability Management's Contribution to Retention
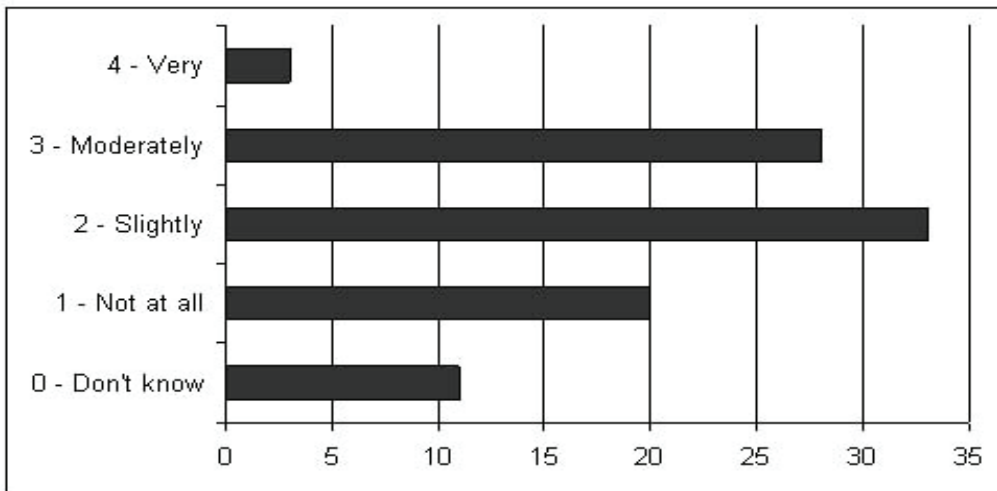

Figure 8: Distribution of Ratings of Organizations' Ability to Place Employees Who Cannot be Accommodated in Own Jobs into Another Position
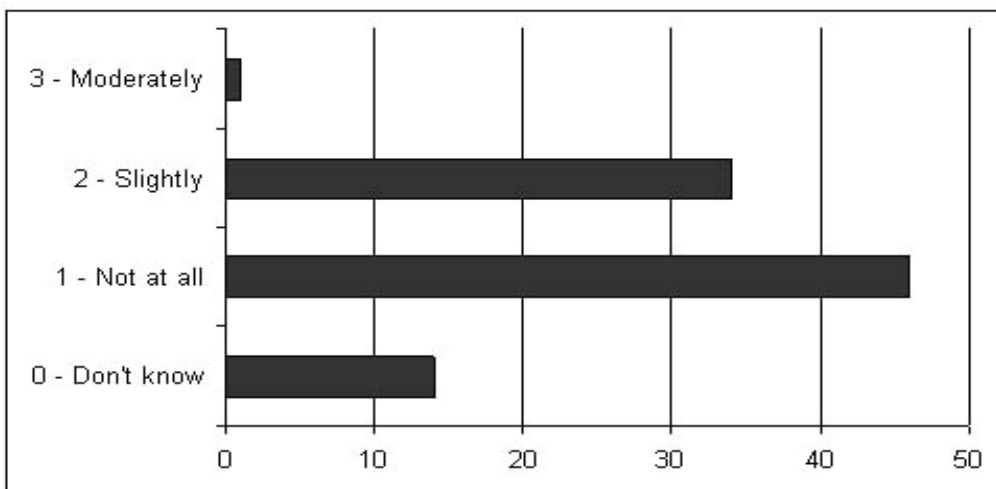
Figure 9: Distribution of Opinions Regarding Effectiveness of External Incentives for Preventing Job exits Due to Health Conditions or Disability
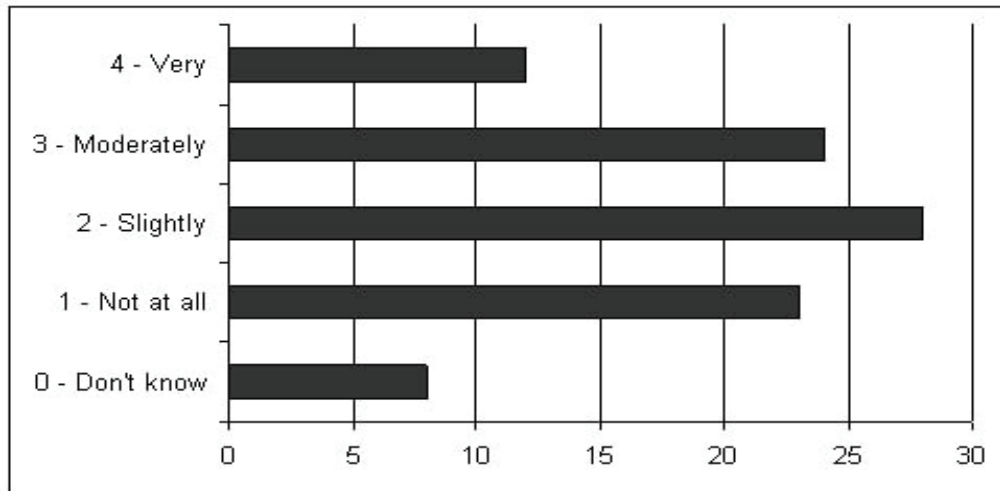
Figure 10: Distribution of Ratings of Involvement in Diversity Efforts
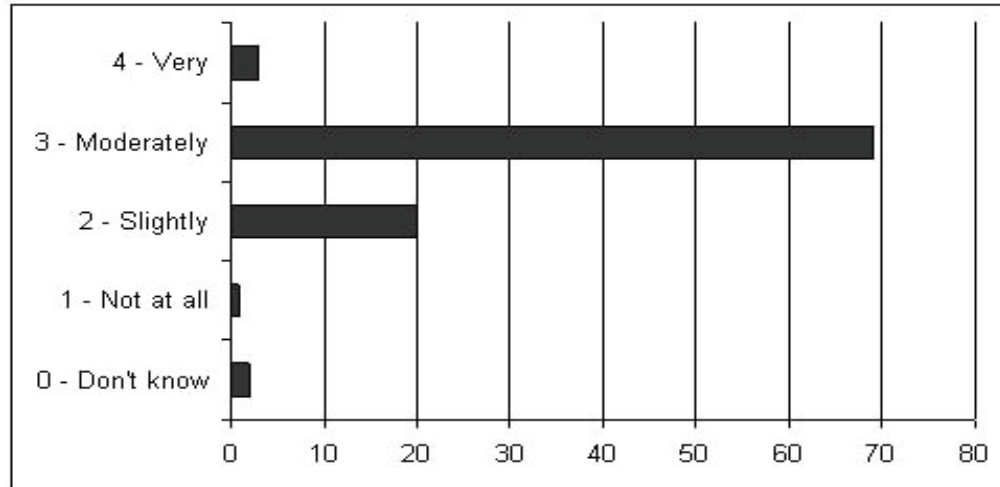
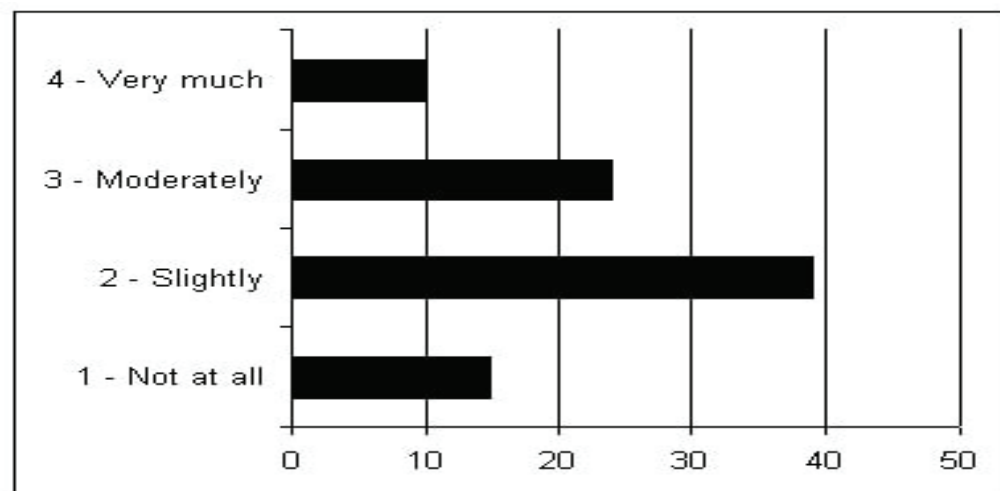**Figure 11:** Distribution of Ratings of Inclusion of Disability in Diversity Efforts

Figure 12: Distribution of Ratings of People with Disability as Viable Source of Labor
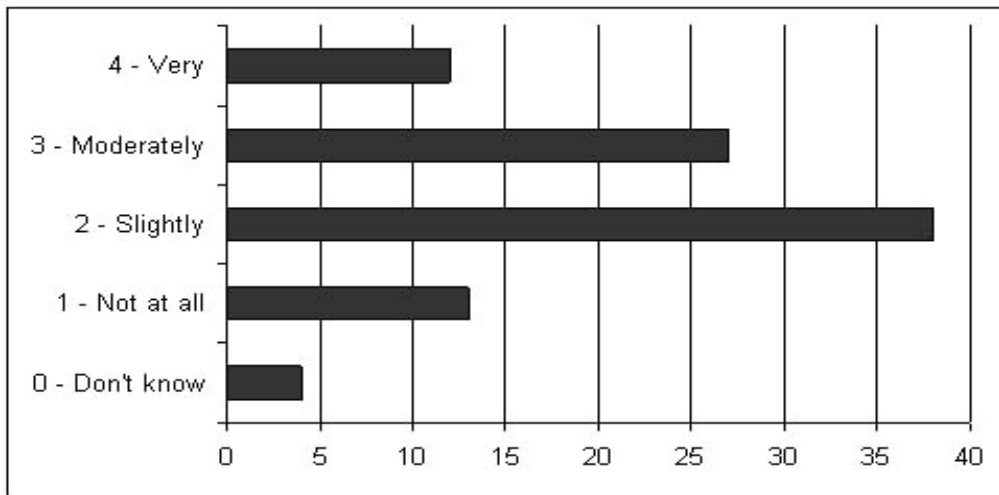

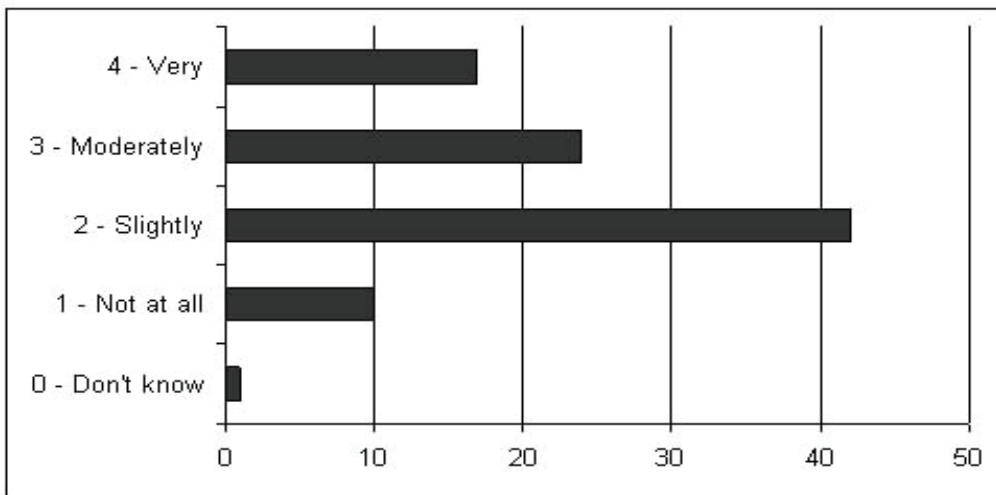**Figure 13:** Distribution of Extent of Hiring of People with Known Disabilities

Figure 14: Distribution of Ratings of Hiring People with Known Disabilities as a Benefit Cost Risk
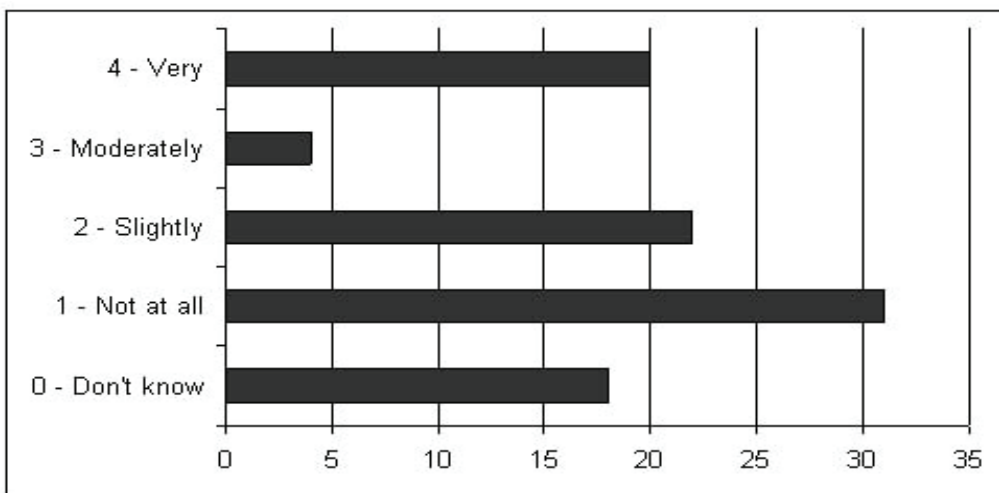
Figure 15: Distribution of Ratings of Extent that Absence and Disability Management Practices could be Helpful in Hiring and Accommodating New Employees who have Disabilities