







Working Health Services Scotland (National Fit for Work Service)

- DWP funded (DCB report)
- 11 pilots
- 2 in Scotland
- Rapid return to work service (absentees or those at risk of absenteeism)
- Commence march 2010 completes march 2011







Operational Summary

- Programme supports both in work illness and sickness absence
- Model engages a Biopsychosocial approach in that it deals with all "life circumstance" and not just disease/medical model
- Provision of free rehabilitation services (Case Management, Physio, Counselling etc..)
- Referrals from Self, GPs & healthcare professionals
- Single referral gateway SCHWL
- Telephone Case Management Model (Bio-psychosocial)





Operational Summary

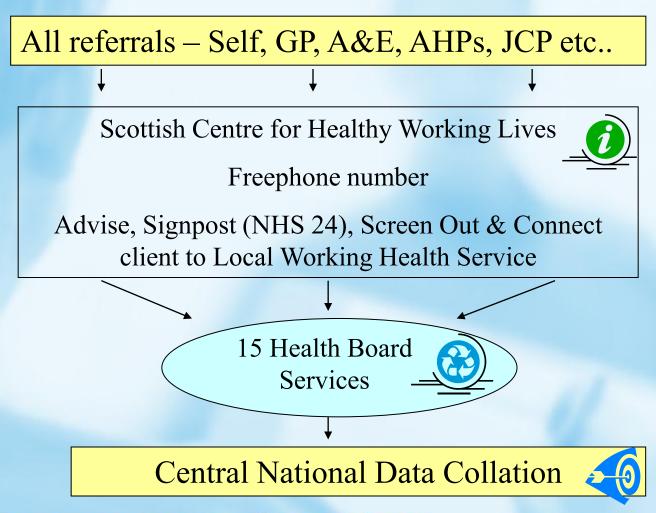
- Available across all of Scotland via single freephone number
- National Data including pre & post measures (COPM, GHQ12, EQ5D)
- Focused on Return to Work
- Engages existing services, Public & 3rd Sector (Case Manager co-ordinates relevant services)
- Target to support over 3,500 employees per annum







National Overview











Case Management

- An accountable process where clients are managed through complex problems to maximum recovery.
- Key Principles
 - De-medicalise problems
 - Accept wider determinants of health
 - Re-Build Resilience
- Key Factors
 - People management skills
 - Non dependant relationships
 - Knowledge of local existing services
 - Fast tracking therapies







Case Study

Client: Female, 48 years History: Mental Health/Depression & Anxiety

Primary Presenting Problems: Pain in right ankle & leg, self employed....unable to deliver business

Assessment Identified:

- Husband expressing suicidal thoughts/alcohol dependency
- Client highly anxious & depressed
- Dyslexia (client, husband and 2 children)
- Self Employed with business finance difficulties.

Action Plan:

- Referred for Physiotherapy therapy to address physical pain.
 (Client already engaged in a psychotherapy group)
- •Assessment arranged for husband and subsequent engagement into clinical psychology.
- •Discussed business advisory support available for client when ready to address.
- Regular telephone support to from Case Manager to assist/support/motivate.
 (16 calls)

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Further Action

- Need for 1-2-1 counselling (relationship) rather than group support
- Introduction to Al-Anon
- •Engagement with named advisor at Small Business Gateway to source business grants and support.

Supporting Evidence of Success:

HADS (Hospital Anxiety and Depression Scale) utilised

- Anxiety reduced from 15 down to 7
- Depression reduced from 16 down to 6
- Pain and Anxiety/Depression initially reported as extreme reduced to mild
- Client's perception was that her health had improved by 40%
- Obtained business grant, Lottery support for website development, returned to active work in 5 weeks.

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Making a Referral

Working Health Services Scotland Criteria

- Client must be working within an SME (<250 employees).
- Employer organisation has no Occ Health or EAP support.
- Client is Absent or at risk of Absence.
- Referral By:
 - Self
 - GP & Health Professionals
 - Health Partners (Social Work, Housing etc..)
- All referrals via freephone SCHWLS existing Adviceline

0800 0192211







Core Belief within NHS Practitioners?

Employment is arguably the most important public health issue in the UK, and the largest determinant of ill health within the workless population.

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