

Exploring Canadian Career Firefighters' Understanding of the Return-to-Work Process after Musculoskeletal Injuries

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KEY FINDINGS

- Firefighters identified that medical resources and treatments facilitated the recovery of an injury, and that the availability of suitable modified work helped firefighters return to work; both were facilitators of return-to-work.
- Barriers to return-to-work included the lack of medical resources, treatments and return-to-work plans specific to firefighting, modified work that is not suitable or meaningful, pressures from the employer and co-workers to return-to-work before being fully recovered, and the heavy physical demands of firefighting.

Background

- First responders have very high physical and work in dangerous environments.¹
- Firefighters have increased risk of musculoskeletal injuries¹ which can be very costly. For example, a Canadian study in 2012 identified that 244 firefighter injury claims costed \$555,955.²
- There is a lack qualitative research exploring firefighters' opinions of return-to-work processes

Objective

- To explore what Canadian career firefighters know and understand about RTW policies and procedures implemented in their fire departments, to identify suggestions for improvement to the RTW process for firefighters, and to understand what firefighters believe to be facilitators and barriers to RTW.

Methods

- Qualitative description methods³ and purposeful sampling was used for this study.
- Inclusion criteria: Canadian career firefighters
- Exclusion criteria: Volunteer firefighters, firefighters outside of Canada
- Data was collected through semi-structured interviews by two experienced interviewers.
- Inductive coding and thematic analysis were performed by two researchers independently. The researchers met to discuss codes, categories and themes.⁴

Results

- 38 firefighters (33 men, 5 women) across Canada were interviewed.
- Five themes were identified:
 - There is a variation in the return-to-work process knowledge among firefighters.
 - Accessible medical resources and treatments for the recovery of an injury.
 - Modified work must be meaningful and suitable.
 - Pressures to return-to-work too soon can lead to negative consequences.
 - Heavy physical demands of firefighting can make it more difficult to return-to-work.

1. Variation in the return-to-work process knowledge

- 31 of 38 participants had some awareness of the return-to-work process in their department
- All 31 firefighters mentioned that modified work could be available, but there was less aware of medical documentation, stakeholder and interventions used

2. Accessible medical resources and treatments for recovery

- Treatments are a facilitator to return-to-work because they help firefighters recover.
- Lack of access or availability of medical resources, especially assessments and treatments specific to firefighting duties, was a barrier to return to work

"In [rural communities], it's lack of medical resources. Many of my staff did not have a family doctor... Also, the physiotherapy and occupational therapy assets in [our town] are limited. So, access to those is a bit of an impediment. Lack of a comprehensive wellness plan within the corporation for firefighters is also a bit of an impediment."

3. Modified work must be meaningful and suitable

- Modified work was seen as a facilitator to getting firefighters back to work safely.

"That's where modified work becomes very important for our members and ourselves for making sure that we return to work when we're ready to work and not injure ourselves further by coming back too early"
- Modified work that was not meaningful was seen as a barrier as firefighters' dissatisfaction with their duties led them to return-to-work too soon, which could result in reinjury

"They just force you into whatever is available... and they didn't even really - he sat at a desk. They put him prevention, but he didn't actually do anything."

4. Pressures to return-to-work too soon can lead to negative consequences

- External pressures came from the WSIB to meet expected timelines, their employers to reduce costs, management and coworkers due to stigmas. Returning to work too soon can lead to reinjury or injuries to others.

"There's probably a bit of a stigma around being off work because of an injury. There's kind of the older mentality of just suck it up, you should be able to work through it... it's just your shoulder, like you should be fine"

5. Heavy physical demands of firefighting can make it more difficult to return to

- Firefighters need to be fully recovered but also physically fit to perform all firefighting tasks, which can delay return-to-work.

"Little injuries have more of an effect on us than any other worker I believe, because like a twisted ankle, most people could go in to work and do their job 100%, whereas a twisted ankle prevents me from doing my job even close to 100%."

Conclusion and Discussion

Summary of facilitators and barriers

- Facilitators:** access and coverage of costs for assessments and treatments that are specific to firefighters, and modified work that is suitable, meaningful and flexible.
- Barriers:** lack of access to medical resources and benefits to cover costs of treatments, lack of firefighter specific assessments, treatments and return-to-work plans, modified work that is not meaningful and external pressures that make firefighters return-to-work too soon, and the heavy physical demands of firefighting which can prolong the recovery process.

Recommendations based on the themes

- Clearly outlined return-to-work processes and procedures are needed to increase awareness. Firefighters should know where to access this information if they become injured. Supervisors should also be aware of their roles in the return-to-work process.
- Assessments and treatments should be targeted to firefighting duties. Employers should provide health care professionals with resources such as physical demands analyses and job descriptions to increase their awareness of the firefighting duties. Adequate benefits plans are needed so firefighters can access the care they need.
- More options for modified work that are suitable and meaningful are needed. Firefighters should be involved in the return-to-work planning and should be given a choice from different modified work options. Return-to-work plans should be specific to the injured firefighter and should consider the physical demands of firefighting.
- Firefighters must be fully recovered from their injury before returning to their firefighting duties, but also need to be physically fit and strong to perform all required tasks. Firefighters could be asked for perform an assessment of fitness to determine if firefighters can adequately perform firefighting duties.
- The injured firefighter's health should be the first priority. Employers should be more supportive rather than being concerned with injury costs. Supervisors and co-workers should avoid pressuring injured firefighters to return-to-work too soon due to stigma.

Future Directions

- Qualitative research to further explore the disability management process for firefighters to create tailored disability management guidelines for firefighters