

Institution: University of Huddersfield		
Unit of Assessment: UoA20		
Title of case study: Good Work, Good Health: providing evidence to change policy and practice to help tackle the global burden of work disability		
Period when the underpinning research was undertaken: 2003-2019		
Details of staff conducting the underpinning research from the submitting unit:		
Name(s):	Role(s) (e.g. job title):	Period(s) employed by submitting HEI:
Dr Serena Bartys	Principal Research Fellow in Work & Health	2000-4 (PhD student); 2009-present
Professor Kim Burton	Professor of Occupational Healthcare	1995-present
Period when the claimed impact occurred: 2014-2020		
Is this case study continued from a case study submitted in 2014? No		
1. Summary of the impact		
<p>Work disability due to ill-health is a leading global concern, costing the UK economy alone around £100bn per year. It is a major cause of disadvantage and inequality, placing a considerable burden on health, employment and welfare systems. Over the past two decades, the University of Huddersfield has played a leading role in tackling this burden. Research commissioned by the Department for Work & Pensions, the Health & Safety Executive, the Association for British Insurers, and Public Health England has demonstrated that, through an early, biopsychosocial approach with integrated health and employment systems, work disability is largely avoidable. Our research has influenced a shift in understanding, by policymakers and key healthcare and employment stakeholders, of how work can be health-supportive. This reconceptualization is now reflected in national and international policy and guidance relevant to all working-age people.</p>		
2. Underpinning research		
<p>Over the past two decades, research at The University of Huddersfield (UoH) has made a significant contribution to an increased understanding that much of the burden associated with work disability due to ill-health is avoidable. The research has shown that most work disability actually stems from common health problems (mild to moderate conditions which typically fluctuate over the working life), rather than from severe injury, serious disease or profound disabilities. The research has demonstrated that most people with common health problems can be helped to remain in work, or return to work as soon as possible, through early, biopsychosocial support with integrated health and employment systems. Based on this research, Burton & Bartys at UoH have attracted numerous commissions to directly inform policy and practice. An early example that directly informed policy by incorporating these concepts was an international evidence review requested by the Department for Work & Pensions in 2002 to support policy decision-making around early intervention to reduce work loss [3.1].</p> <p>In response to these findings, the researchers at UoH were commissioned by the Health & Safety Executive to conduct the largest workplace intervention study at the time, involving 7,500 employees (<i>Obstacles to recovery from musculoskeletal disorders in industry</i>). This was one of the first studies directly addressing common health problems at the workplace, testing an early intervention based on our novel, evidence-based patient educational material (<i>The Back Book</i>) [3.2]. The intervention was shown to reduce sickness absence by almost half, and was highly commended by the BUPA Foundation in their Health at Work Awards in 2005. Similar patient</p>		

educational material has since been produced (*The Neck Book, The Hip and Knee Book, The Arm Book*) to inform innovative interventions and initiatives for other work-relevant health conditions. One of these studies (*Management of work-relevant upper-limb disorders*) went on to win the BUPA Foundation Health at Work Award in 2008. This in turn formed the conceptual underpinning of a large-scale, 4-year clinical trial led by The University of Aberdeen (Burton as co-applicant), funded by Arthritis Research UK in 2011 (*The Arm Pain Trial*).

Between 2004-2006, the researchers at UoH were asked by the Department for Work & Pensions to produce a programme of linked research and evidence-based policy reports (*Concepts of rehabilitation for common health problems; Is work good for your health and wellbeing?*). The overarching recommendation from this and earlier research – that much work loss is avoidable, and that ‘good work’ can support health and recovery - has become a pivotal message underpinning successive political agendas [3.3]. This became a platform for subsequent research commissions to directly inform national occupational and clinical guidance from the Association for British Insurers in 2008 (*Vocational Rehabilitation: what works, for whom, and when?*), and the Health and Safety Executive in 2008 & 2009 (*Management of upper limb disorders and the biopsychosocial model; Developing an intervention toolbox for common health problems in the workplace*).

The recommendations in these reports went on to inform the development of educational material for the Royal College of General Practitioners to support the national roll-out of the Fit Note in 2010. There was an expectation that this training would gradually propagate through the healthcare professions to influence a cultural shift in understanding of the health-supportive aspects of work. The contribution of Burton’s work to reforming this national healthcare agenda was recognised with an OBE in 2011.

In 2013 the researchers from UoH were again asked by the Department for Work & Pensions to conduct an evidence review [3.4] to inform the delivery of the Government’s national Fit for Work service (2015-2018). This was a national occupational health assessment and advice service provided for employees who were on (or at risk of entering) long-term sickness absence, and was designed based on work conducted at UoH emphasising the importance of integrated health and employment systems for reducing work disability [3.5]. Following on from this, in 2019 Public Health England commissioned UoH to conduct an evidence review to directly inform UK government decision-making around the implementation of work and health policy in the NHS [3.6].

3. References to the research

This research has attracted significant funding from prominent national and international sources, including government bodies, research councils, charities and industry. Findings have been disseminated in a variety of publications, and recognised internationally for their significance and academic rigour.

3.1. Burton AK, Waddell G, Bartys S, Main CJ. (2003). Screening to identify people at risk of long term incapacity: a conceptual and scientific review. *Disability Medicine*, 3:72-83 www.abime.org/documents/journalv3n3.pdf [can be supplied on request]

3.2. McCluskey S (now Bartys), Burton AK. & Main, CJ. (2006). The implementation of occupational health guidelines principles for reducing absence due to musculoskeletal disorders. *Occupational Medicine*, 56, 237-242 academic.oup.com/occmed/article/56/4/237/1540915

3.3. Waddell G, Burton AK. (2006). *Is work good for your health and well-being?* TSO, London, ISBN: 0117036943 [can be provided on request]

3.4. Burton K, Kendall N, McCluskey S (now Bartys), Dibben P. (2013). *Telephonic support to facilitate return-to-work: what works, how, and when?* DWP, London. <https://www.gov.uk/government/publications/telephonic-support-to-facilitate-return-to-work-what-works-how-and-when-rr853>

3.5. Bartys S, Frederiksen P, Bendix T, Burton K. (2017). System influences on work disability due to low back pain: an international evidence synthesis. *Health Policy*, 121:903-912 [10.1016/j.healthpol.2017.05.011](https://doi.org/10.1016/j.healthpol.2017.05.011)

3.6. Bartys S, Edmondson A, Martin R, Parker C, **Burton K.** (2019). *Work Conversations in Healthcare: how, when, where, and by whom?* Public Health England, London.
www.gov.uk/government/publications/work-conversations-in-healthcare-literature-review

4. Details of the impact

Work disability is a major burden worldwide, and is now a key government target across developed nations. Research carried out at UoH has helped shape national and international policy and practice focused on overcoming this issue, and has made an impact in two main areas:

1. Informing UK & US government policy
2. Changing healthcare and employment practice around the world

The research has also informed the UK national response to COVID-19.

Informing UK & US government policy

Based on UoH research, the change in understanding of the health-supportive nature of work by policymakers has resulted in a series of major policy initiatives. A prominent example includes the UK Fit for Work Service (2015-2018). Directly informed by UoH research (3.4), government data reports that almost 10,000 employees in the UK accessed the service during its operation [5.1]. Despite high rates of satisfaction reported by service users, Fit for Work came to an end in 2018 due to systemic implementation issues. However, in 2019, the UK government announced proposals for a reformed occupational health provision with a more sustainable delivery model. These proposals have directly acknowledged the UoH evidence informing Fit for Work, and have been developed with continued expert input from Burton & Bartys [*Health is everyone's business: proposals to reduce ill health-related job loss*] (evidenced via Joint Work & Health Unit testimonial below).

UK government now firmly accepts the need for integrated health and employment systems demonstrated by UoH research. This is evidenced by the launch of a £115m cross-government department - the Joint Work & Health Unit – in 2015. UoH's long-standing contribution to this policy agenda was recognised by the Unit with a highly competitive Policy Fellowship being awarded to Bartys in 2016: "*Dr Bartys used her academic expertise to ensure all the relevant literature and evidence base, more generally, was used appropriately to underpin the Improving Lives: Work, Health and Disability Green Paper published in October 2016*" [5.2^a]. Citing UoH research, the Green Paper received around 6,000 responses from individuals and relevant stakeholder organisations across the UK during its public consultation.

As a result of this consultation, the UK government announced a strategy to reduce the disability-employment gap by 1 million people over the next 10 years. As part of this strategy, one of the government's stated objectives is better evidence sharing, and engagement with the academic community. In 2018, UoH was invited to extend their expert advisory role to help improve knowledge flows and continue to shape government policy: "*Prof. Burton has been extensively involved in the development of the Government's plans on work and health, in support of the ambition to have 1m more people with disabilities in employment by 2027. He has been an active member of the Government's Occupational Health Expert Group, brought together by Ministers in early 2018 to inform and influence thinking on the reform of occupational health, and culminating in the publication of proposals in Health is everyone's business: proposals to reduce ill health-related job loss in July 2019.*" [5.2^b] Over 500 in-depth responses to these proposals were received from a wide range of occupational health stakeholders.

Responding to the evidence needs of policymakers, Bartys & Burton developed a virtual knowledge exchange platform entitled *Good Work, Good Health: working knowledge in work & health*. The UoH platform translates and showcases academic evidence for policy and practice in order to improve its uptake and impact. It was used successfully in the most recent UK government commission (3.6): "*Huddersfield's expertise and understanding of the problem and their methodological approach to addressing the research questions stood out, given that the*

commission was not straightforward. Dr Bartys and Professor Burton were open, honest, engaging and constructively curious throughout. They were confident in their engagement with us, acting as a critical friend where necessary. They made themselves easy to reach and easy to work with, they invested suitable time clarifying the commission in the early stage to ensure both the work and the outputs would meet our needs. The work was very well received and has served to further enhance Huddersfield's reputation in the Unit." [5.2^c]

The contributions of the UoH research to the UK policy agenda have resulted in invitations to Bartys & Burton to provide similar expert advice, both nationally and internationally. In the UK, this includes NICE [5.3^a], the National Audit Office [5.3^b], and The Industrial Injuries Advisory Council [5.3^c]. In 2017, the American College of Occupational and Environmental Medicine published their position statement on the personal physician's role in helping patients stay at work/return to work, citing UoH's UK policy research [5.4]. In 2018, the US President's Fiscal Year Budget included a package of reforms to improve the Social Security Disability Insurance programme, one aspect of which is based directly on UoH research conducted with colleagues in the US [*A community-focused health and work service*]. This was incorporated in a \$100m US Department of Labor initiative [5.5^a]. "*The new Administration was open to policies to improve the labor force participation of people with disabilities. I suggested a \$100 million Department of Labor grant program to test and evaluate early interventions for newly ill and injured workers, inspired by the ideas in your paper. The recommendation was accepted by White House staff and warmly received by Department of Labor staff. Congress later funded the request and just this past September (2019) Department of Labor awarded initial grants to eight states*" [5.5^b].

Changing healthcare and employment practice around the world

The UoH research findings have been translated into several educational booklets for use in practice worldwide. One of the most prominent examples used in one of the early studies (3.2) is *The Back Book*. This practical resource to support healthcare professionals has been translated into more than 20 languages, sold several million copies, and continues to be used and requested by healthcare services, worker's compensation systems, and insurers around the world [5.6]. The international reach of *The Back Book* was most recently demonstrated through informing a new pain service funded by the New Zealand government, independently shown to substantially improve clinical outcomes for people with chronic pain: "*this approach demonstrates that it is possible for patients to recover from persistent pain, not just be taught to live with it. This is contrary to the current consensus and exactly why we need research such as yours to advance patient care. Thank you for sharing so much of this knowledge with us over the years, the state of the art would be considerably less without your scientific input*" [5.7].

Educational material arising from UoH research was also used to support national GP training as part of the Fit Note implementation. Figures released by NHS England in 2019 show the Fit Note is now part of routine clinical practice, with almost 1 million issued per year across the UK. This training has now been expanded across the healthcare professions to promote a cultural shift in understanding of the health-supportive aspects of work: "*The work at UoH has contributed significantly to the cultural shift around opening up discussions between systems (healthcare and workplace) and raising awareness of psychosocial aspects of the work-health relationship. The team at UoH has provided opportunities for many years and in multiple formats to support this growing cultural shift*" [5.8].

The Fit Note was also intended to facilitate a discussion with employers to support people with a health condition to remain in work, or return to work as soon as possible. This integrated health and employment approach, identified through UoH research (3.5), is now widely accepted and has underpinned novel, award-winning projects. A prominent example is the National Institute for Health Research funded Study of Work & Pain (SWAP), led by a world-leading research team at Keele University (Burton as a co-investigator). The results of this randomised controlled trial demonstrated a potential societal cost-saving of about £500 million (US \$6 billion) per year, gaining it the 2017 Royal College of General Practitioners Research Paper of the Year award [5.9] (Burton as co-author). This research is also an important reflection of UoH's input as

collaborators in the £5m National Centre for Musculoskeletal Health & Work, funded by the Medical Research Council and Versus Arthritis (2014-2024).

Further prestigious accolades from eminent healthcare and employment bodies have been awarded. Burton received Outstanding Individual Achievement in the Rehabilitation First Awards 2017 [5.10^a], and an Honorary Membership of EUROSPINE in 2019 [5.10^b]. In recognition of UoH's world-leading research with these key stakeholders, Innovate UK recently funded a 2-year Knowledge Transfer Partnership (KTP) between UoH (led by Bartys) and one of the world's leading reinsurance companies, Swiss Re. Launched in 2020, the project aims to develop and implement a novel, insurance-led approach to reducing work disability. In assessing the application, the potential of the project was described by Innovate UK as '*a market innovation with significant commercial, societal and well-being impacts*'.

Informing the national response to COVID-19

Tackling the global burden of work disability is now even more of a priority due to COVID-19. Clear and consistent policy and guidance is being urgently requested. In 2020, Burton was invited by the Society of Occupational Medicine to contribute to national guidance and toolkits for return to work after lockdown, underpinned by principles developed in the UoH research (<https://www.som.org.uk/return-to-work/>). Most recently, Bartys & Burton provided expert input on work and employment to the House of Lords COVID-19 Committee inquiry, *Life beyond COVID* (<https://post.parliament.uk/life-beyond-covid-19-what-are-experts-concerned-about/>). The research has placed the University of Huddersfield in a prime position to usefully support the coordinated action needed in order to ameliorate the significant societal impacts resulting from work loss due to ill-health across the world.

5. Sources to corroborate the impact

- 5.1. *Fit for Work: final report of a process evaluation*. Institute for Employment Studies on behalf of the Department for Work & Pensions, 2018. [fit-work-final-report-process-evaluation](#)
- 5.2. Joint Work & Health Unit testimonials (emails x3) - ^aLead Analyst; ^bDeputy Director; ^cStrategic Health Evidence and Analysis Team Lead
- 5.3. Expert advisory invites (emails/letters x3) – ^aNICE, ^bNational Audit Office; ^cIndustrial Injuries Advisory Council
- 5.4. Position statement - American College of Occupational and Environmental Medicine 2017 (e125, Ref 1) [ACOEM position statement 2017](#)
- 5.5. US government testimonials (emails x2) ^aChief of Staff, Director of Strategic Initiatives, Committee for a Responsible Federal Budget; ^b Deputy Associate Director, White House Office of Management & Budget.
- 5.6. Worldwide sales figures for *The Back Book* and similar patient educational material cited – email from TSO
- 5.7. New Zealand government funded service (Integrative Pain Care) testimonial - email
- 5.8. Expert adviser to UK government on Fit Note (Director, Institute of Medical Education, University of Cardiff) - email testimonial.
- 5.9. Royal College of General Practitioners Research Paper of the Year 2017 (Health Service Delivery and Public Health category) for SWAP trial – cited in British Journal of General Practice 2018, pg. 536 [BJGP 2018](#)
- 5.10. Awards (certificates x2) - Rehabilitation First Award 2017^a; EUROSPINE Award 2019^b.