

It's Not Just Physical: Cognitive Work Capacity

Chairperson:

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Tuesday, March 26th, 2024 1:30-2:20pm

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I feel confident documenting cognitive work modifications?



Cognitive Work Capabilities Form Overview

Karen Huyck, MD PhD MPH

Consider this common scenario of a significant concussion...

- Patient tells PCP they are ready to return to work after a few weeks of recovery
- PCP returns patient to full time full duty work without modifications
- Patient has flare of symptoms and is unable to do their job
- A functional interview would have identified (1) that work needed to be postponed a few weeks and (2) need for a transitional return to work plan with job modifications in place.
- A standardized method of documenting cognitive work ability would help guide the functional interview, inform job modifications, and prevent failed return to work
- Avoiding failed return to work increases the chance of future successful return to work

2024

Work Related Injuries Workshop

Cognitive Work Capabilities Form

Providers caring for people with cognitive health conditions can rate executive function impairment by category and choose appropriate job modifications to support work.

This form is designed for medical providers to document work capabilitie illnesses affecting cognitive function. To complete this form, use available interactions with the patient and information from the care team) to estim	e information (e.g., from you
Cognitive capabilities are divided into 3 categories: Cognition, Self-regul performance in each category. Choose from the listed job modifications to such as an employer, determine appropriate accommodations.	
Patient's Name: Dat	e:
Please rate patient's ability on the following scale: 1 = no limitation; 2 = modifications; 3 = needs close supervision or assistance; 4 = unable to supervision or assistance for a sasistance for a category is rated mostly with 4's, consider whether to select any job nategory because they may not promote ability to work.	perform despite close
Cognition	1 2 3 4
Remember simple instructions	0000
Remember complex instructions	0000
Understand simple instructions	0000
Understand complex instructions	0000
Carry out an individual task	0000
Carry out multiple tasks	0000
Make simple decisions	0000
Perform complex decision making	0000
Maintain attention for extended periods	0000
Tolerate distraction in the work environment	0000
Manage time to be punctual	0000
Take appropriate precautions to workplace hazards	0000
Maintain an organized workstation or environment	0000
[
Job modification(s) related to Cognition (choose all that apply): Needs written work task available to remember instructions	
Needs written work task available to remember instructions Needs to take notes to remember details of non-routine work tasks	-
Requires supervised repetition to learn work tasks New tasks should have limited steps with additional steps added on	1A::::::1
performed independently	ly after initial sequence is
Work tasks should be isolated to one task at a time	
Complex problem solving should not be required for any work task	
Complex problem solving should not be required for new work task	
practiced can involve complex problem solving	L
Needs assistance for complex problem solving	
Need to limit to one computer monitor to decrease need for multitas	sking
Reminders, such as on a cell phone, are needed to manage time and	
Needs a more isolated work area to decrease auditory and visual dis	
Wear earplugs or earmuffs to decrease auditory distraction	

Cognitive work capabilities form use

Designed for the care team to efficiently document work capabilities of patients with injuries or illnesses affecting cognitive function such as:

- Post Acute COVID Syndrome
- Traumatic Brain Injury and concussion
- Cerebrovascular Accident
- Multiple Sclerosis
- Attention deficit disorders
- Mood disorders
- Cancer and symptoms associated with cancer treatment

- Post-Traumatic Stress Disorder
- Schizophrenia
- Obsessive compulsive disorder
- Mild dementia
- Sleep disorders
- Worker burnout
- Learning disabilities

Workshop

Reasons to document cognitive work ability:

- Support ability to stay at or return to work
- Facilitate a transitional return to work plan
- Provide appropriate job modifications
- Prevent failed return to work
- Postpone return to work to increase chance of a future successful return to work
- Document lack of work capacity

Cognitive work capabilities form instructions

To complete:

- 1. Use available information to estimate work abilities
- 2. Cognitive capabilities are divided into 3 categories:

Cognition, Self-regulation, and Resilience

- 3. Rate performance in each category on a scale of 1 to 4 (no impairment to unable)
- 4. Based on performance deficits, choose from the list of job modifications to inform appropriate work accommodations

Cognitive work ability medical opinion

Available information to incorporate when estimating work abilities include:

- Interactions with the patient
- Objective findings and observations from your visits
- Diagnosis, imaging, and medical history
- Information from functional interview with patient
- Patient report of job duties, barriers to work, and needed supports
- Occupational history and job description (can use O*Net)
- Information from the care team and other providers
- Information from employer, case manager, vocational counselor, etc

Be aware of factors that can bias estimates of cognitive functions such as socioeconomic status, level of education, type of occupational, race and ethnicity, physical abilities, sex and gender, health status, age, etc.

Cognitive work ability preliminary validity testing

100% (9/9) of respondents said the form would help them provide work modifications for patients with cognitive impairment.

89% (8/9) of respondents found it easy to use and **79%** (7/9) were likely to use it in their practice.

Respondents liked that the form included job modifications in response to impairments and assessed capacities not currently captured by existing work capacity forms. Suggestions included to add a list of potential triggers in the work environment.

Add a footer 10



Return to Work with Cognitive Deficits after a Traumatic Brain Injury

Carol Dennehy RN CRRN CCM CLCP
Director of Case Management
Occupational Resource Network

Case Study

- 57 year-old electrician fell 15 feet from a ladder
- Sustained a severe traumatic brain injury
- Found to have subarachnoid and subdural hematomas and left temporal and parietal skull fractures extending into the auditory canal.
- MRI showed DIA (diffuse axonal injury)
- Required intubation and a g-tube
- Remained at acute hospital for 38 days and then transferred to rehab for 3 weeks

Case study (continued)

- Made good gains in functional mobility but had significant cognitive deficits including decreased insight, recall, short term memory, and attention
- Attended outpatient physical, occupational, and speech therapy
- Over the next 4 months made good progress, although continued with balance issues and decreased insight, recall, memory, and attention
- Required a driving evaluation before return to work
- Completed work conditioning
- Returned to work 11 months after injury

What case management strategies can you use to facilitate return to work with cognitive symptoms from traumatic brain injury?

- insight
- recall
- short term memory
- attention

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What case management strategies can you use to facilitate return to work with cognitive symptoms from traumatic brain injury?

Return to work considerations

- Discuss return to work with the employer as early as possible
- Identify any concerns from the employer
- Identify the job requirements
- Physical deficits versus cognitive deficits
- Physical demand versus cognitive demand
- Educate the employer regarding cognitive deficits as they are not visible

Return to work with cognitive deficits

- Discuss with the treating clinician(s) having the injured worker perform tasks at home to increase activity level and identify strategies to accommodate for cognitive deficits
- Work with the treatment team to determine physical and cognitive job modifications
- Encourage slow transitional approach to allow the body to reacclimate to work
- Discuss needed job modifications such as:
 - Transitional return to work due to fatigue starting with half days
 - Discuss cognitive deficits and how those translate into functional tasks
- Individuals with cognitive deficits do well with structure, repetition, and routine

Return to work is possible with cognitive deficits!



Cognitive Work Capacity: Long Covid Case

Dean Hashimoto, MD, JD

Senior Vice President of Workplace
Health, Mass General Brigham

Professor of Law, Boston College

Long Covid and Cognitive Impairment

"Cognitive Covid "

Most common: brain fog (cognitive slowing) with fatigue

 May also include other cognitive symptoms such as memory loss, concentration deficit, executive functioning deficit

• Often with sleep difficulties, anxiety, and depression

· Risk factors: hospitalization from Covid, increased age, high BMI, female gender

WHO definition:

 Developing within 3 months of an initial Covid infection, lasting at least 2 months, and cannot be explained by an alternative diagnosis.

Varying prevalence: 15-80% depending on type and timing of study; contexts;
 reliance on self-report vs. cognitive and neuropsych testing



Pathophysiology of injury is not well-understood

- Common explanation: Inflammatory cell infiltration of the cerebellum and brainstem with systemic inflammation and hypoxia;
 - Also microhemorrhages, microglial activation, mitochondrial dysfunction
- Association with depression and anxiety
- Reported impairments and symptoms are not well-correlated with cognitive testing results that are likely to reveal greater numbers of those with cognitive impairments



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Long Covid Case Study

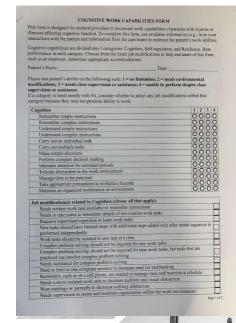
- Main impairment = cognitive slowing and fatigue
- 40 y.o. primary care physician who had substantial infection that required missing work for 6 weeks including 2 weeks of acute infection not requiring hospitalization and 4 weeks of a feeling of brain fog, lingering headaches, fatigue, difficulty sleeping, anxiety, and depression.
- RTW for 3 months duration at time when all medical providers associated with his department were working remotely. Worked 3 days per week and saw 6-8 patients per day session. He did not take his regular call.
- Now with the pandemic receding, his clinical group is returning to work on-site and needs to have him resume off-hours paging coverage. He brings a doctor's note that is consistent with the following cognitive work capabilities form:



<u>COGNITIVE WORK CAPABILITIES FORM</u>: Please rate patient's ability on the following scale: 1 = no limitation; 2 = needs environmental modifications;
 3 = needs close supervision or assistance; 4 = unable to perform despite close supervision or assistance

• Resilience:

- Work with time pressure: 2
- Manage daily work demands: 2
- Maintain regular attendance: 2
- Job modification(s) related to Resilience:
 - Working under time pressure should be limited: Limit to 6 patients per daily session
 - Rest breaks are needed. Please specify: Needs 15 minute break between patients
 - Unable to work consecutive shifts or needs alternate days off: Limited to 3 days per week
 - Please specify: Need to limit certain shifts such as day shifts, night shifts, or on-call shifts: No on-call
 - Please specify: Unable to tolerate overtime
 - Any other job modification recommendations not listed above:
 Needs to work remotely with virtual patient visits only



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Is it workers' comp?

Issues:

- If this is a WC case, is it helpful to obtain an IME?
- If this is not a WC case, would it be difficult for the employer to challenge the degree of disability and the need for further accommodations?
- What is the value of neuropsych and cognitive testing?
- How helpful is the Cognitive Work Capabilities form?
- If the employer/insurer is unable to successfully challenge the WC claim based on presence of injury, causality, or degree of disability, then what measures should the employer take to ensure that the workplace accommodations are necessary and appropriate?



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Outcome:

 Employer did not challenge his request for accommodations.

 Employee continued to work remotely on a limited schedule for 6 additional months before returning back to his regular work when his impairment and symptoms disappeared.



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References:

- F Ceban, S Ling, LMW Lui, et al. Fatigue and cognitive impairment in post-covid-19 syndrome: a systematic review and meta-analysis. Brain, Behavior, and Immunity 101(2022)93-135.
- SH Gulick, S Mandel, EA Maitz, et al. *Cognitive screening after covid-19*. May 2021 Practical Neurology 19-22.
- KW Miskowiak, JK Pedersen, DV Gunnarsson, et al. Cognitive impairments among patients in a long-covid clinic: prevalence, pattern and relation to illness severity work function and quality of life. Journal of Affective Disorders 324 (2023) 162-169.
- Z Li, Z Zhang, Z Zhang, et al. *Cognitive impairment after long con 19: current evidence and perspectives*. Frontiers in Neurology 10.3389/fneur. 2023.1239182.

Add a footer

2



Cognitive work capacity Case study: Generalized Anxiety Disorder

Steven P. Dickens, MA
Director of Research
Invest EAP Centers for Wellbeing

Anxiety Disorder

Case Study*

- Responsible for creating invoices for customers
- Process bills from vendors
- Oversee review of monthly balances across departments
- Maintain organized financial records of invoices

Jane: Billing Clerk



Work Environment

- Office shared with many others
- Fairly noisy at times
- Work hours are 9 am 5:30 pm M-F



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Anxiety

Influencing factors

Exacerbating Factors

- Single mom worried about young son home alone from 3:30 – 6:00 pm
- Excessive noise in environment
- Being around other people

Calming Factors

- Quiet
- Company of her dog



Cognitive impacts

- Difficulty maintaining sustained focus when distractions present
- Difficulty with short-term memory, especially relate to complex tasks with multiple steps



Cognitive Work Capabilities Form p. 1

Coding:

- 1: No limitation
- 2: Needs environmental modifications
- 3: Needs close supervision of assistance
- 4: Unable to perform despite close supervision or assistance

Cognition		1	2	3	4
Rememb	er simple instructions	0	0	0	
Rememb	er complex instructions	0	•	0	
Understa	and simple instructions	•			
Understa	Understand complex instructions				
Carry ou	Carry out an individual task				
Carry out multiple tasks			0		
Make sin	nple decisions	•	0	0	
Perform	complex decision making	0	0	0	
Maintair	attention for extended periods	0	•	0	0
Tolerate	distraction in the work environment	0	•	0	
Manage	time to be punctual	•	0	0	
Take app	propriate precautions to workplace hazards	•	0	0	0
	an organized workstation or environment	0	0	0	
	ation(s) related to Cognition (choose all that apply):				
TATELON CO. LANCE SERVICE STREET	ritten work task available to remember instructions				✓
Needs to take notes to remember details of non-routine work tasks					
Requires supervised repetition to learn work tasks					
New tasks should have limited steps with additional steps added only after initial sequence is					
performed independently					
Work tasks should be isolated to one task at a time			Ш		
Complex problem solving should not be required for any work tasks					
Complex problem solving should not be required for new work tasks, but tasks that are					
practiced can involve complex problem solving			브		
	ssistance for complex problem solving				
Need to limit to one computer monitor to decrease need for multitasking					
	Reminders, such as on a cell phone, are needed to manage time and maintain a schedule				
	Needs a more isolated work area to decrease auditory and visual distraction				✓
Wear earplugs or earmuffs to decrease auditory distraction					
Needs st	pervision to create and maintain organization within the work environment	nt			

Cognitive Work Capabilities Form p. 2

Self-regulation	1	2	3	4
Able to interact with the general public	0	0	0	C
Able to interact with coworkers or peers	0	0	0	C
Responsive to feedback from supervisors	0	0	0	(
Able to request assistance when needed	0	0	0	C
Complete work without interruptions from psychological symptoms	0	0	0	C
Adhere to basic hygiene and cleanliness standards	0	0	0	C
Job modification(s) related to Self-Regulation (choose all that apply):				
Working with the general public should not be an essential job function				
Direct interaction should be with a limited number of coworkers				I
Employer performance feedback should be provided in writing at scheduled inter-	vals			Г
Needs to work with a team member for a majority of the day to compensate for lin	nited			_
ability to ask for assistance			L	
Needs supervision with adhering to company hygiene/dress standards				
Resilience	1	2	3	4
Respond flexibly to changes	0	0	\circ	
Make and adjust plans independently	\odot		\circ	C
Work with time pressure	0	0	0	C
Manage daily work demands	0	0	0	C
Maintain regular attendance	0	0	0	C
Learn from adverse events.	0	0	0	C
Job modification(s) related to Resilience (choose all that apply):				
Needs check-in from a supervisor to help process adverse events				
Needs check-in from supervisor to help process change in the work routine				
Working under time pressure should be limited				
Rest breaks are needed. Please specify:				Г
Unable to work consecutive shifts or needs alternate days off			Г	
Please specify:				۲
Need to limit certain shifts such as day shifts, night shifts, or on-call shifts				Г
Please specify:				۲
Unable to tolerate overtime				L
Any other job modification recommendations not listed above:				
Det - Vista habanda mada da santa da sa	1			
Put an X in the box to mark the appropriate cognitive work capability	level.			
Can work without restrictions				1

hours per day

days per week

Modified hours required: Can work

Does not have a cognitive work capability

Requires job modifications other than limited hours of work

Cognitive work capability will be reassessed on date:

Worksite Accommodations

Suggestions?

- A. Shift change. Work 2nd shift when fewer employees in building.
- B. Paint the office walls blue, known to be a calming color.
- C. Adopt an EAP that provides free, confidential counseling to all employees



Anxiety Disorder

Worksite Accommodations

- Modified schedule: 7 am 2:30 pm
- Remote work from 3-5 pm
- Support dog
- Desk location temporarily changed
- Check-list of all procedural flows
- Company added a robust EAP to create psychologically healthy, supportive workplace
 - Strategic plan
 - Regular manager/employee training workshops
 - Supervision; supporting fellow workers; dealing with difficult people
 - Annual benchmarking assessments





Consider cognitive work modifications to support return to work

The Cognitive Work Ability Form can facilitate employment for patients with diverse cognitive components to a work-limiting health condition

DOWNLOAD COG FORM HERE



Questions?